

# eFACTS



— SEPTEMBER 6, 2001

eFACTS, a summary of current newsworthy *facts* and *effects*, is made available by the Alberta Division of the Canadian Mental Health Association to people who have a continuing interest in mental health reform in Alberta. We thought you should know:

1. The “continuation” of the Alberta Legislative session adjourned last spring will not begin until November 13. Establishing “effective community based (mental health) services” was a priority of the last two sessions, and in late July Health and Wellness Minister Gary Mar said his government envisioned “three basic requirements.” They were: “local access to timely assessment, treatment and support,” “community supports including housing,” and thirdly, support for “families, parents and friends.” He had no specifics to announce and in his last Treasury Board presentation he argued for more money to address population increases and nothing more.
2. The Premier’s recent public remarks about the government’s need to “belt-tighten” may not speak well for new money to address the Health and Wellness Minister’s mental health goals. The comments also came immediately following the government’s announcement of new benefits for MLAs. According to the Legislative newsletter *Alberta Scan*, MLA payments will increase to \$76,251, which includes a tax-free portion. Additional payments for Cabinet and committee positions etc. range from \$5,352 to \$64,092.
3. The government’s Alberta Mental Health Board (AMHB) has apparently had a quiet summer, with no new initiatives announced. The Board will meet again on September 28 and 29; however, their agenda is packed with consultation meetings with their advisory councils and the Alberta Alcohol and Drug Abuse Commission. The Alberta Alliance

on Mental Illness and Mental Health was invited to be squeezed into the session, but they declined, asking for a date in October. The Health and Wellness Minister has apparently told the Board to work more closely with the AAMIMH.

4. In June the Health and Wellness Minister extended the terms for AMHB Chair Betty Schoenhofer and two other members to September 30. It is widely rumoured these members will not be reappointed. If the rumours are correct, who the Minister will appoint as replacements seems to be a highly guarded secret.
5. The AMHB plans to rebuild the Ponoka hospital are on track and on time; however, the Department of Infrastructure has yet to receive any proposal for the redevelopment of the Alberta Hospital Edmonton.
6. The Alberta Alliance on Mental Illness and Mental Health has maintained a strong presence with government over the summer. Regular contact with the Minister, his staff, Department officials and the Standing Policy Committee (SPC) will hopefully bear fruit in the fall. The full Alliance membership meets again on September 19.
7. On September 14, the Alberta Medical Association will again consider a resolution at their "Representative Forum" meeting. Originally submitted by the Alberta Psychiatric Association, the resolution calls for the divestment of AMHB programs to the Regional Health Authorities (RHAs). The recommendation is consistent with the AAMIMH recommendation now before the Health and Wellness Minister. The resolution is being aggressively opposed by some senior AMHB physicians and the meeting could be lively. The AAMIMH has asked to participate in the debate.
8. Citizens with an interest in promoting mental health services through sitting on an RHA Board have only until September 17 to get nominations in. Although the Health and Wellness Minister previously stated that appointments to the Boards would not be announced until after the elections, in a surprise release on September 6 he announced 63 appointments made from 265 nominations. The appointments are largely the current Board leadership and other known government supporters. There was no apparent emphasis on minority groups such as Aboriginal peoples. Only four of the appointees are known to have an interest in mental health issues.

One interesting omission is Jim Dinning, former Treasurer and Chair of the Calgary Health Authority. More information at [www.health.gov.ab.ca](http://www.health.gov.ab.ca) or from CMHA, Alberta Division.

9. Researchers at Johns Hopkins University in Baltimore have found genetic material resembling viral genes in 29% of their subjects, people suffering from schizophrenia. The finding suggests that a virus may contribute to some cases of the illness. While preliminary, the finding, according to Dr. Robert Yolken, could lead to antiviral therapies for the disease.
10. In mid-June, the Canadian Centre for Justice Statistics through Statistics Canada reported that the highest level of youth aggression was on the prairies, with 53% reporting aggressive tendencies. Quebec had the lowest levels, at 32%. Apparently, negative parenting practices, physical punishment and other environmental factors contribute to the aggression. The authors note that Quebec uses less punitive measures than other provinces and is opposing the tougher new Young Offenders Act.
11. The Bristol Cancer Help Centre in London, England has announced that it has examined every issue relating to cancer over the past twenty-five years and is now looking at the “mind-body connection.” Dr. Rosy Daniel says he has become convinced that “getting into the right frame of mind is of key importance.” He is quoted as saying, “Becoming inspired and committed to life and doing things you love is what makes the shift in the body’s ability to heal itself.” Nothing new there!
12. Recent statistics from Alberta Health and Wellness show that the number of psychiatrists in Alberta has increased to 277 (plus 22 “specialists”), an increase of 8% over last year. Although the population has also grown, there is still a positive variance in the doctors per capita. Median fees before the recent schedule adjustment were \$148,493. Family physicians who also do psychotherapy earned a median of \$151,631.
13. That same statistical review shows that mental disorders remain the largest payment category, with almost 88,000 payments. The anti-depressant Paxil is the seventh leading prescribed drug.

14. The Health and Wellness Department's regular survey of public satisfaction was released September 6. The satisfaction rate overall has dropped to 62% from 74% two years ago. For those individuals with more chronic problems the rate of satisfaction was only 59%. Assumably, some people with mental illness were polled in the 4,000- person sample; however, CMHA has repeatedly asked for a specific set of questions or a separate survey of satisfaction with the mental health system. So far the Department has not agreed but another request will be made.
15. The Alberta Human Rights Commission has just released its "dissertation of closed complaint files in 2000 - 2001." The Commission apparently received 45,000 calls and, as a result, opened 645 complaint files. Mental disability complaints are the third most common category (90), following gender (253) and physical disability (252). Ninety-six percent of files are withdrawn or settled by conciliation or investigation. Only 31 files went to the Human Rights Panel for decision.
16. Health Canada has reported a risk of severe liver injury with use of the anti-depressant Serzone. People on the drug should discuss the warning with their physicians and should know that four cases were found in Canada, and last year physicians wrote 53,500 prescriptions for the drug.
17. The publicized problems at the Edmonton Remand Centre's Mental Health Unit continue to be examined by CMHA in co-operation with the Department of the Solicitor General. The issue arose as part of a complex court case and CMHA investigators are moving cautiously.
18. CMHA's submission to the government's Review of Low Income Programs was made with a coalition of disability organizations and the Premier's Council on the Status of Persons with Disabilities. For details contact CMHA, Alberta Division.
19. The controversial Health Information Act is being rolled out to the Health Authorities and the first training with affiliate organizations occurred in August. Government officials seem highly sensitized to AMA, UNA and CMHA concerns regarding privacy, and the training emphasizes that aspect intensely. Implementation will continue to be monitored and next steps for those organizations with significant

concerns about the legislation will be determined at a meeting of the partner organizations to be held on September 25.

20. The Alberta Heritage Foundation for Medical research has money for mental health research. The deadline for submission of a Letter of Intent is September 28. More information is available at [natalie.kallar@ahfmr.ab.ca](mailto:natalie.kallar@ahfmr.ab.ca) or [www.ahfmr.ab.ca](http://www.ahfmr.ab.ca) or 780-423-5227.
21. Conferences!!
  - a) The World Federation for Mental Health Conference held in July in conjunction with CMHA's National Annual meeting in Vancouver was attended by over a 1,000 people, with dozens of workshops and seminars for participants. The Association's National Annual Meeting and Awards Ceremony saw the legal advocacy award, the A. Trawick QC Award, go to Edmonton's Emery Jamison law firm, and a Distinguished Service Award to Calgary School Principal Harold McBain for his work in suicide prevention. The National Board elections saw the return of Edmontonian Bill Gaudette to the National Presidency. Also on the National Board are Dennis Anderson from Edmonton, and Bonnie Thiessen and Bob Campbell from Lethbridge.
  - b) The Pincher Creek Branch of CMHA is hosting a conference on rural mental health, to be held on November 3. More information from Michelle Spencer at (403) 627-2726 or [cmhapc@telusplanet.net](mailto:cmhapc@telusplanet.net) .
  - c) The Ontario Division is co-sponsoring a conference, *Reclaiming our Roots*, to be held October 22 to 23 in Toronto. The conference has many themes, from spirituality to forensics. More information at [www.ontario.cmha.ca](http://www.ontario.cmha.ca) .
  - d) The Victoria Branch of CMHA is sponsoring a conference on October 1 to 2 on Dialectical Behavioural Therapy, a relatively new technique used to treat people who "react abnormally to emotional situations." More information at [cmha@mentalillnessrecovery.com](mailto:cmha@mentalillnessrecovery.com) .
  - e) A forum on bipolar and affective disorders is being sponsored by the Organization for Bipolar and Affective Disorders Society in

Calgary. It will be held on September 26 at Mount Royal College. More information at [www.obad.ca](http://www.obad.ca) .

- f) The annual Alberta Schizophrenia Conference will be held in Edmonton on October 11 and 12 with a theme of *Towards an Understanding*. The conference has a varied program with the usual high profile speakers. More information on the CMHA web site at [www.cmha.ab.ca](http://www.cmha.ab.ca) or by calling Bev Hood at (780) 472-5438.
- g) The CMHA's Alberta Division Annual General Meeting and Awards Ceremony will be held in conjunction with Mental Illness Awareness Week (MIAW) and the Schizophrenia Conference. It will take place at the Coast Terrace Inn in Edmonton on October 12. This year's entertainment will be provided by the Artists and Writers Guild of Lethbridge performing *Mike's Café*, written by Michael Hansen, the winner of the Division's 2000 Nadine Stirling Memorial Award. All members and prospective members are welcome. For more information contact [dallen@cmha.ab.ca](mailto:dallen@cmha.ab.ca) .
- h) The Annual General Meeting and Volunteer Appreciation Night of CMHA's Alberta Central Region will be held on Tuesday, October 2 at the Golden Circle Resource Centre. More information or to RSVP, call (403) 342-2266.
- i) Mental Illness Awareness Week and World Mental Health Day are just around the corner! Held the week of October 7 to 13, this year CMHA will work in partnership with Canadian Psychiatric Association around the theme *Let's Unmask Mental Illness* **and** will also introduce a new campaign on "Seasonal Affective Disorders" (sadness believed to be brought on by seasonal variations in light). Watch for activities and media coverage in your own communities, or contact a Region or Branch of CMHA near you for more information. Or visit a CMHA web site and link to National. The Alberta site is [www.cmha.ab.ca](http://www.cmha.ab.ca) . Additional information is also available at the Canadian Psychiatric Association web site, [www.cpa-apc.org](http://www.cpa-apc.org) .

For more information contact the Alberta Division of the Canadian Mental Health Association.

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