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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 CMHA's National Annual General Meeting and conference were attended by more than 350 members in Ottawa, November 16 to 19. The program theme, *People, Policy and Passion*, was aimed at stimulating a renewed emphasis on political action across the nation. Membership training in government relations, a nationally-televised political panel of representatives from all government parties, private meetings with over 65 Members of Parliament and workshops covering a wide range of topics from housing to suicide prevention, highlighted the four-day event. Alberta Past President Dennis Anderson chairs the National CMHA Government Affairs working group, and it was his efforts which to a great extent led to the political revitalization, a hallmark of CMHA's earlier years. Keynote speakers included CMHA Alberta Executive Director Ron LaJeunesse. The 2003 annual meeting and conference will be held July 18 to 20 in Yellowknife, NWT.
2. Political action at the CMHA conference emphasized calling for a "National Action Plan" for mental health service delivery in Canada and a nationwide response to the "Romanow" report on health care, to be released November 28. As with the "Kirby Report," the emphasis on mental health is expected to be inadequate, although home care and "catastrophic" pharmacare are expected to be among the recommendations (see item #8 following). In an effort to provide concreteness to the national "action plan" proposal, CMHA is mounting a nationwide consultation with stakeholders named *Citizens for Mental Health*. Alberta CMHA will lead the consultation for BC, the NWT and Alberta.
3. Ms Karen McGrath of Newfoundland was elected National President of CMHA to replace Mr. Bill Gaudette of Calgary. Dr. Jean Hughes of Halifax and Ms. Kathryn Youngblut of Yellowknife will serve as Vice-Presidents, with Mr. Bruce King of Winnipeg continuing to serve as Treasurer. Alberta Directors include Past President Bill Gaudette, Dennis Anderson of Edmonton and Bob Campbell of Lethbridge.

4. National General Director Ed Pennington announced his retirement effective November of 2003. A "search committee" has been appointed to develop a succession plan. Mr. Pennington has been in the position for fifteen years and is only the fourth General Director since 1918, preceded by founder Dr. Clare Hincks, Dr. Jack Griffin and Mr. George Rohn.
5. Alberta's transition plan for mental health delivery was confidentially presented to the Health and Wellness Minister Gary Mar two weeks ago and it is expected that decisions will be announced by government this month. Meetings between government officials and CMHA, and with the AAMIMH (the Alberta Alliance on Mental Illness and Mental Health), have provided only general information about the Ministerial recommendations. The Mental Health Board's own *Transition Points* newsletter, designed to keep staff and the public informed on divestiture issues, and dated November 12, provides no clues as to the future. However, the CMHA Executive Director has several predictions:
  - a) The administration of all programs currently managed by the Alberta Mental Health Board (AMHB) will be transferred to the Regional Health Authorities (RHAs), some as early as January 2003.
  - b) There will be **no** provincial programs. Even forensic services will be transferred for administration by the RHAs.
  - c) A new central ministerial **ADVISORY** body, renamed, with a new mandate and new people, will be appointed. It will set standards, monitor services and expenditures, educate and coordinate province-wide activity on a temporary basis – perhaps for three years. Programs such as forensics, brain injury and children's services that span several regions will be coordinated through provincial "program councils."
  - d) Provincial hospitals in Edmonton and Ponoka will stay in their respective regions, while Claresholm will go to the Calgary Health Authority – a step rationalized by a reduction in the number of RHAs (see item #7 following).
  - e) AMHB funds will be transferred to the RHAs on the basis of a funding formula which considers "need," or "social indicators" like poverty and prevalence. The fiscal allocations reported by the RHAs and the dollar transfers will be monitored by the Auditor General.

**CAUTION:** these are only predictions.

6. While most mental health services are expected to be integrated within health authorities, the government is apparently considering centralizing suicide prevention initiatives through the Alberta Centre for Injury Control (ACICR) at the U of A. While CMHA has a desire to work in partnership with ACICR towards the development of a comprehensive "provincial suicide prevention strategy," services need to be inextricably linked with other health services. All Alberta MLAs and their government officials have been contacted with information detailing the rationale for the CMHA position. The material also informs people about the new mandate and "packaging" of the Calgary-based Centre for Suicide Prevention (formerly SIEC and SPTP).
7. The planned early reduction in the number of health authorities will be considered by caucus this Thursday; however, some insiders predict the Minister's plans will be derailed by opposition from rural MLAs. Health Minister Mar had hoped to implement changes before year end. The preferred plan was to reduce the number to nine, centred in Lethbridge, Medicine Hat, Calgary, Red Deer, Wainwright, Edmonton, Athabasca, Grande Prairie and Fort McMurray. For detail on the boundaries and implications for mental health services contact the Alberta Division of CMHA.
8. The Senate report on Health Care, dubbed the "Kirby Report," had only a few paragraphs on mental health although it acknowledged there was "less immediate access to health services appropriate to the needs." Kirby recognized the deficiency in the report and in a brief section on mental health stated, "because of the importance of mental health among Canadians, the Committee will hold specific hearings and table a separate report to present its findings and recommendations to the Federal Government."
9. The Federal Department of Health tracks chronic, communicable and injury-related illnesses. The National Health Surveillance Report released in October has been criticized by the Auditor General of Canada for its "gaps" relating to chronic diseases, including mental illnesses.
10. The Alberta Legislature has completed its first week in session, with an emphasis on the Kyoto Accord. This week's release of the Federal "Romanow Report" is expected to be paralleled by Alberta's own health reform announcements, which are likely to push the Kyoto discussion off of the front pages. Minister Mar is meeting with Cabinet and then the full caucus on Thursday the 28<sup>th</sup>. Announcements are sure to follow.
11. The hoped-for improvements to the level of payment received by Alberta's poor and disabled may not materialize, even next year. In spite of a strong government report and aggressive lobbying by two major coalitions (including

CMHA), it appears that the government believes finding more money for these individuals is not "sustainable." On a positive note, Minister Clint Dunford did announce an expansion of the portability of health care benefits to mothers who wish to return to work. The plan has been available to people receiving disability benefits (AISH) with apparent success. Disabled and poor people generally do want to work and it is hoped recent policy reviews by the Department of Human Resources and Employment may lead to new opportunities (CMHA is reviewing an Ontario initiative which has apparently employed hundreds of people with mental illnesses). And another meeting with Minister Dunford is planned for early December.

12. A nationwide CTV special on "electric shock therapy" has proven to be controversial due to an Ontario CMHA spokesperson expressing strong reservations about its use. In fact, Dr. Barbara Everett described it as "over-used, under-regulated, frightening and should be used as a last resort." That position is not necessarily at odds with CMHA Alberta policy, which stipulates that shock therapy should only be used with the patient's "full informed consent." Although modern ECT treatments seem to be effective, with moderate side effects, how the treatment works remains unclear. What is clear is that use is on the rise, with some estimates as high as 50% in the last five years. Many psychiatrists see it as more effective than medication because it works faster, and now recommend it as a "first choice" option. Potential patients and their families should expect and demand full disclosure of both the benefits and risks before agreeing to the procedure.
13. The Alberta Mental Health Self help Network elected a new President on November 2. Ms Carmela Hutchison of Irricana replaces Mr. Richard Scott of Medicine Hat. The Network's newsletter, *Thinking Allowed*, is now distributed to 2,500 consumers province wide, and the late October edition featured excerpts from the book *Political Asylums* by Ron LaJeunesse.
14. The just-released 2001 National Workplace Study of 31,500 Canadians found that those working in health, education and social services are the most stressed. They work the hardest and longest and feel the least appreciated.
15. Awards! Several Albertans were acknowledged for their leadership at Provincial and National awards dinners over the past month. Provincial awards were given to: Elwood and Muriel Becker of Medicine Hat (the Bettie Hewes Memorial Award); Joanne Dell of Calgary (the Professional Care Award); Lucille Lysy of Medicine Hat (the Nadine Stirling Memorial Award); the Chinook Health Authority, the Lethbridge Housing Authority and CMHA, South Region (the Special Service Award); the Royal Bank of Canada Prairie Diversity Committee (the Workplace Wellness Award); and Calgary A-Channel's *The Big Breakfast*

(the Media Award). This year also saw two special awards, the Governor-General's Golden Jubilee Commemorative Medals presented by Alberta Cabinet Minister Clint Dunford and Opposition Leader Dr. Ken Nicol to Betty Friesen of Camrose and Ron LaJeunesse of Edmonton. National awards were presented to Edmonton psychologist George Lucki for distinguished service; David Allen of Edmonton, outstanding staff member; and Ron LaJeunesse received the C.M. Hincks Award for his advocacy work. The Hincks award, considered National's most prestigious, has previously been won by two other Albertans, Dennis Anderson of Edmonton and Aleck Trawick of Calgary. Mr. Trawick also has a National legal award named in his honour and he attended the National ceremony in order to present the award personally.

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