

UPDATE FROM CACAP EXECUTIVE

Fostering community through advocacy, education and collaboration

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While the pandemic continues to take a toll on the lives of Canadians, fortunately, value has been placed on fostering a sense of community and supporting the mental health of Canadians in managing these uncertain times.

Our organization is dedicated to caring and advocating for children, youth and families, and to connecting and supporting colleagues. The CACAP Board is sensitive to challenges faced by members across the country with respect to staffing, training, and the impact of the pandemic. As we venture forward as a member driven association, we seek to engage members through enhanced advocacy efforts, education and networking through a virtual platform. In this regard, the CACAP Board and Committees have been hard at work to be responsive and relevant to the membership and to the times.

In 2020, the CACAP Board underwent a strategic planning retreat to create a Vision as *a national leader in Child and Youth Psychiatry collaboratively advancing the mental health care of children, youth and families through advocacy, education and expertise*. The result has been a proposed name change to the *Canadian Academy of Child and Youth Psychiatry (CACYP)* which the Board views as very timely. Our professional organization offers a developmental perspective needed to support youth who experience serious mental illness at a vulnerable time in their lives. Many organizations in Canada and around the world have recognized the transitional age population and have included youth in their name. The Board believes that changing the name serves to maintain our relevance as an organization, to provide a home for youth psychiatry and to facilitate collaborative education, research, clinical care, training and advocacy.

In October 2020, CACAP conducted a survey of members about the vision and proposed name change. Of the 516

members surveyed, 109 (21%) responded with 83 (77%) in favour and 26 (24%) opposed. Comments provided by 60% of respondents reflected the following themes: a duty to serve youth, reflective of best practice, inclusive, relatable, aligned with other organizations, a focus for the organization, in keeping with developmental expertise, and benefiting from collaboration with other professional groups serving youth. Concerns cited limited child and adolescent resources, defined adolescence as a distinct developmental stage and advised the need to maintain the identity and focus on child and adolescent psychiatry. Suggestions were made for additional or alternate names as well as alignment and feedback from other organizations and youth psychiatrists. A town hall was organized in November to gather information and give voice to members' views. The plan will be to summarize findings in a communique to members and organize another town hall in early 2021.

To address the many challenges effectively, collaboration, advocacy, and education are essential. CACAP continues to collaborate with national and international partner organizations including the Canadian Psychiatric Association (CPA), the Canadian Paediatric Society, the Royal College of Physicians and Surgeons of Canada, the Association of Professors of Child and Adolescent Psychiatry, the American Academy of Child and Adolescent Psychiatry, and the International Association for Child and Adolescent Psychiatry and Allied Professions (IACAPAP).

In the context of societal challenges, a position statement against racism was created and the IACAPAP Indigenous Rights bill was endorsed. CACAP members were invited to complete the CPA MAID survey. Dr. Raj Rasasingham was appointed Chair of the newly formed Advocacy committee.

Thanks to Dr. Leanna Isserlin and the Education committee with the assistance of the Communications committee,

members can find links to several open access educational resources related to child and adolescent psychiatry (CAP), as well as recordings of the CAP subspecialty national seminar series' webinars through a collaboration with CAP-COPE (Coordinators of Psychiatric Education) on the CACAP website (<https://www.cacap-acpea.org/>). The Education committee is planning virtual debates on controversial topics, special interest listservs, and hot topics in discussion boards. In addition, the committee is developing ways to support members as we transition to *Competency By Design* across the lifelong learning spectrum. Under the leadership of Dr. Roberto Sassi, former Chair of the Research and Scientific Committee, and Dr. Chris Wilkes of the conference committee, the annual conference, was held virtually, with a mix of pre-recorded and live sessions, with offerings of double the accreditation hours compared to an on-site conference and session recordings for a full year. The conference exceeded attendees' expectations and represented good value for cost. The accomplishments

of CACAP members were recognized: Drs. Patricia Hall (Excellence in Education Award), Terry Bennett (Dr. Naomi Rae Grant Award), Selene Etches (Dr. Paul Steinhauer Award), Laura Rosato (Best Poster presentation by a CACAP full member), Seena Grewal (Best Oral presentation by a CACAP full member (Dalhousie Award)) and Tea Rosic (Best presentation by a Member In Training). Under the leadership of Drs. Matt Morrisette and Blair Ritchie of the Communications Committee, work is underway to optimize methods of electronic communication and networking amongst CACAP members. CACAP's social media accounts have been activated - Twitter @CACAP_ACPEA and LinkedIn: <https://www.linkedin.com/company/cacap-acpea>.

The CACAP Board is grateful to the more than 70 members serving on CACAP committees and the countless more who have supported the organization over the years. We welcome member engagement as we foster community through advocacy, education and collaboration.

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