



UPDATE FROM CACAP EXECUTIVE

Reflections on a Term as CACAP President During the Pandemic

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As I write this, we are preparing to welcome colleagues from across Canada, the United States, and the world to Toronto for the Joint AACAP/CACAP Conference in October: a valued opportunity to gather again in person to consolidate knowledge and to build collaborations in education, research, and advocacy.

After a prolonged period of isolation, society has opened up. Children have returned to in-person school. People are traveling again. Fourth dose vaccinations are underway. Public health precautions are winding down. Young and old are adjusting to the new normal with mixed emotions of welcome relief, with aspects of social life returning, and guarded optimism, with concerns of an 8th wave and needing to manage COVID19 for a prolonged period.

The pandemic has taken a toll on us professionally and personally. Our patients and their families have experienced challenges with disproportionate impacts on less socially advantaged members of society. Colleagues have worked tirelessly, making necessary changes to their practices in response to the demand. The delivery of child and adolescent psychiatry has shifted. Virtual care and meetings have become the norm. We are now tasked with reflecting on how care should be delivered moving forward in this new normal and to consider what roles we should play in service delivery, advocacy, collaboration, and education.

As I reflect on my term as President during these times, I am truly grateful to the Board executive (Drs. Jana Davidson, Lila Amirali, Jordan Cohen), the Board, the Committee Chairs and committees, and Elizabeth Waite, General Manager, for their dedication and hard work. I have valued

connecting with members. I have experienced a strong sense of collegiality and have valued the connection despite the distance and virtual platform.

We have accomplished a lot in these last 2 years.

In the first year, we explored a name change for the Academy which facilitated a discussion with our membership about the focus for our Academy. We engaged CACAP members through survey, town halls, communiques, debate, and education. The virtual debate and discussion were informative, capturing what members value for the Academy's present and future states. Although it was decided that it was not the time for a name change, there was general agreement that transitional age youth represent an important population.

In the second year, strategic planning took place, based on CACAP's vision, identifying 4 strategic directions: advocacy, collaboration, education, and membership, along a 3-year plan.

During our strategic planning, we also had a chance to look back. Meeting with past CACAP Presidents provided an opportunity to capture the Academy's wisdom, reflect on the history of the Academy and gather feedback on the strategic plan. I am grateful to Dr. Wade Junek for his tremendous work documenting CACAP's history for the 40th anniversary which will soon be available to members.

Detailed in what follows, progress has been made along these 4 strategic directions.

With the mental health crisis top of mind, CACAP was in communication with Senator Kutcher and authored *A Call to Action in Support of Child and Youth Mental Health in*

Canada. A subsequent meeting took place earlier this year with Minister Bennett, the Federal Minister of Mental Health and Addictions, and Senator Kutcher to communicate what is needed to improve child and youth mental health. Both were invited to speak at the Joint AACAP/CACAP conference with Senator Kutcher scheduled to deliver the Lawrence A. Stone MD Plenary on *Advocating for Child and Youth Mental Health: The Canadian Perspective from the Federal Side*. The experience of meeting with government representatives has required an appreciation of federal vs provincial health mandates. It has highlighted the need to be at the table, ready and responsive, with key recommendations. It has also demonstrated that government representatives are keen for our input and as such, we have an important advocacy role to play. Of note, the Federal Minister is interested in input into national mental health standards as mental health transfer payments will be tied to these standards.

With the possibility of MAiD-SUMC (*Medical Assistance in Dying for Persons Whose Sole Underlying Medical Condition is a Mental Disorder*) being applied to mature minors, CACAP submitted a brief to the Special Joint Committee on Medical Assistance in Dying in the Spring 2022 informing the committee about important developmental, family, and social considerations specific to youth.

Given the many challenges facing members of our society, it is important that we communicate our perspectives promptly. To bolster our ability to do so, the advocacy committee was created. I am grateful to the Advocacy Committee, under Dr. Raj Rasasingham's leadership, for authoring several position statements over the last 2 years on behalf of our organization. Plans are underway to provide education on advocacy, regular publications, and a toolkit to support advocacy by members.

It has been apparent that many organizations are committed to child and youth mental health, which has highlighted an opportunity to collaborate on advocacy and education efforts. We have been building connections with partner organizations. In this regard, CACAP has endorsed position statements by other organizations including the Mental Health Commission of Canada, CPA (Canadian Psychiatric Association) and IACAPAP (International Association of Child and Adolescent Psychiatry and Allied Professions). Meetings to aid in collaborative efforts have taken place with the Child Psychiatry Professors group, Children's Health Care Canada, and Pediatric Chairs of Canada. We continue to have representation on committees within IACAPAP, CPA, RCPS (Royal College of Physicians & Surgeons of Canada), CPS (Canadian Paediatric Society), and

Choosing Wisely Canada. Furthermore, CACAP members have provided input into work spearheaded by CPS.

We have collaborated with AACAP in preparation for the Joint Meeting. In this regard I am grateful to the CACAP Research and Scientific Committee, led by Dr. Daphne Korczak, who together with the AACAP Program committee, organized an educationally and socially rich conference program. I am also appreciative of the significant work behind the scenes by Elizabeth Waite, CACAP General Manager collaborating with AACAP Director of Meetings and CME, Jill Zeigenfus Brafford and her team, and to the local arrangements committee, chaired by Drs. John Tes-hima and Mark Hanson, for creating Experience Toronto for conference attendees. Additionally, I have enjoyed collaborating with Dr. Warren Ng, AACAP President, on our joint advocacy initiatives at the conference including the AACAP / CACAP Presidential Interview *A Call to Action: Addressing the Mental Health Needs of Children and Youth*, with leaders within AACAP and CACAP (Drs. Jana Davidson and Lila Amirali) speaking to the workforce issue and strategies to address the mental health crisis; and the AACAP/CACAP Town Hall, reflecting on what we can do individually and collectively in our work with Indigenous communities. There are many opportunities for ongoing collaborative work between our organizations given our shared population and interests in advocacy, education, and scholarly work.

The Education committee, under Dr. Leanna Isserlin's then Dr. Khalid Bazaid's leadership, has provided educational videos and links for members on the CACAP website. A debate series is planned. The journal, overseen by editor in chief, Dr. John McLennan, and clinical editor, Dr. Lind Grant-Oyeye, has evolved, including early release of publications on the CACAP website, new columns (interview, ALAN (Arts & Literature And Nature) and Update from the Executive), and plans to recruit a research editor.

Dr. Matt Morrisette, Communications chair and his committee have facilitated members receiving updates through the website and social media.

Regional reps (Drs. Sabina Abidi, Taline Bedrossian, Paola Habib, Raj Rasasingham, Arianne St. Jacques, Blair Ritchie, Lina Anang, Kelly Saran) have provided important regional perspectives, including both challenges and innovations. Pressures related to increased service demands, longer wait times, and concerns about recruitment and retention have been experienced across the country underlining the importance of advocacy, collaboration, support, and mentorship. In this regard, we will be launching a workforce survey. With an eye to mentorship and recruitment, Dr. Ally Manning, MIT (Member in Training) rep, developed

a mentorship survey for members with plans for a mentorship program. The membership committee, under Dr. Jordan Cohen's leadership, has reflected on ways to recognize members' contributions, recruit members for committee work using an EDI (Equity, Diversity, and Inclusion) approach and regularly survey members to understand needs and views. A virtual Grand Rounds series is planned to support education and connection.

Considering our strategic plan, Dr. Lila Amirali and the Finance committee have been focused on the financial health of the organization, making wise investments with an eye to building the infrastructure with additional administrative and IT support. Dr. Jana Davidson has overseen governance, reviewing and developing Board policies and procedures as needed.

At the AGM (Annual General Meeting) in October 2022, we will be welcoming new executive members (Drs. Raj Rasasingham as VP and Jennifer Russel as Secretary) and board members (Dr. Jamil Jivraj MIT). I would like to recognize the contribution of outgoing executive members, Dr. Jana Davidson for her leadership and sage advice, and Dr. Jordan Cohen for his innovative ideas. I would also like to thank outgoing MIT board member Dr. Ally Manning for her advocacy. With Dr. Lila Amirali at the helm and a strong board, I am confident that the Academy is in good hands.

In closing, it has been a truly rewarding experience being involved with CACAP, serving as the Academy's President, and working alongside dedicated colleagues. I encourage members to share this experience and get involved with CACAP – the Academy will be better for it.