With summer finally upon us many Albertans, including those of us who work in the field of addictions and mental health, will look forward to taking a break from our usual research, academic and clinical duties to relax and reconnect with friends and family.

That’s a healthy thing. Everyone needs an opportunity to occasionally recharge. By disengaging periodically from the constant demands of our fast-paced 24/7 world, we create the space we all need to stay happy, healthy, connected and productive.

Nonetheless, a lot of important work will continue over the summer months throughout the Department of Psychiatry and at Alberta Health Services, Edmonton Zone.

In particular, we’re pleased to report that negotiations are moving forward on a long-proposed Academic Medicine and Health Services Program (AMHSP) for Alberta’s practicing psychiatrists.

Although the timeline for concluding a final AMHSP agreement has been extended somewhat from our original schedule, the basic framework is now in place and we expect to conclude a deal in coming months.

Over the past few weeks, Medical Affairs – the branch within AHS that oversees physician placement – has joined the discussion alongside the University of Alberta as we work to finalize an appropriate deal with Alberta Health.

This includes determining the precise details of the AMHSP remuneration package, which is the only outstanding substantive item that remains to be finalized.

That said, it’s important to stress that all those involved in the AMHSP discussions – including representatives from Alberta Health, Alberta Health Services, the Alberta Medical Association, the University of Calgary and University of Alberta – clearly understand the vital role that psychiatrists play in the province and are determined to ensure that they are remunerated fairly.

Meetings are scheduled over the next two to three months to finalize the details of the AMHSP package. We do not expect any last-minute surprises at this juncture and we look forward to launching the AMHSP soon.

As mentioned in previous issues of Connections, the final AMHSP
Alberta Hospital Edmonton News:

AHE’S ‘Ambition 2023’ Plan Calls For Major Enhancements in Addictions & Mental Health Patient Care, Including new Day Hospital

It started in the spring of 2017 with a simple challenge from Dr. Verna Yiu, President and CEO of Alberta Health Services. Her directive? Make Alberta Hospital Edmonton (AHE) more relevant and responsive to individuals and families in the Edmonton Zone who are grappling with complex addictions and mental health challenges.

“Dr. Yiu added one other thing,” recalls Dr. P.J. (Patrick) White, AHE’s Medical Director. “She said the status quo is not acceptable.”

With their marching orders in hand, White and AHE’s team of roughly 40 psychiatrists rolled up their sleeves and went to work.

“Our physicians held a retreat on the west side of the city. We looked at where we want Alberta Hospital to go and how can it can play a leading role in this Edmonton-wide Zone initiative,” says White, a former Canadian Psychiatry Association (CPA) President, and a past Chair of the University of Alberta’s Department of Psychiatry.

“Dr. Daniel Li chaired the retreat. He did a hell of a great job and that’s where many of our ideas first came about,” he explains. “They have since germinated and changed a bit. But that was really the foundation for Ambition 2023, our strategy to create a wide and comprehensive template for addiction and mental health in the Edmonton Zone.”

AHE’s physicians subsequently drafted a strategic roadmap that they shared with Zone stakeholders during the summer and fall of 2017.

Working groups were formed and their preliminary work was shared with key officials at AHS and the Department of Psychiatry over the past few months, including Dr. Verna Yiu; Mark Snaterse, AHS Executive Director for Addiction and Mental Health, Edmonton Zone; Dr. Pierre Chue, AHS Clinical Department Head for Addictions and Mental Health, Edmonton Zone; and Dr. Xin-Min Li, Chair of the U of A’s Department of Psychiatry. The feedback was extremely positive, says White.

“Our core strength at Alberta Hospital Edmonton is dealing with the chronically mentally ill, but Ambition 2023 is widening the template here, into the Zone and the broader community. This is an Edmonton-based Zone initiative, and we need everybody on board. We want other physicians to buy into the process,” he says.

“We have explored many different treatment modules with one common focus – to better serve the needs of patients and their families. I’ve been here at Alberta Hospital since 1989, and this is the most excited I have ever been about what we’re doing here.”

A proposed Day Hospital that’s expected to open its doors on the AHE site by November is the first of several tangible outcomes that will flow from Ambition 2023. Significant planning for additional services is also underway in a variety of other areas, including emotional dysregulation; early intervention with youth; PDD (People with Developmental Disabilities); concurrent disorders; neuropsychiatry, and neuromodulation.

Ambition 2023 is built around five “pillars” or key priorities, says White, including the following:

An Addiction & Mental Health Day Hospital on the AHE site:
It will offer seven-day-a-week daytime programming for more acutely ill patients, offering an alternative to inpatient hospitalization and providing group and individualized support for an average term of three weeks. The new Day Hospital will also offer new Repetitive Transcranial Magnetic Stimulation (rTMS) technology.

Neuropsychiatry & Neuropsychology:
Clinicians across the Zone are working to advance an initiative known as the Edmonton Neuro-Cognitive Disorders Enterprise (ENCoDE). Their goal is to address a major gap in diagnostic, treatment and monitoring services available to individuals with psychiatric disorders linked to cerebral pathology. In addition to neuro-cognitive testing, ENCoDE also aims to provide significant advances in therapeutic innovations.

Redefining Tertiary Care in Psychiatry:
Physicians and staff in Tertiary Care have broadened the scope of Ambition 2023 to ensure that it revitalizes their rehabilitation services. This includes realigning rehabilitation treatment, programming and clinical processes to better meet the needs of those with intellectual disabilities and/or mental health issues. The rehabilitation service will place greater emphasis on community integration and shift away from long-term care.

Young Adults:
The Edmonton Zone Addiction and Mental Health service work.
AHE’s ‘Ambition 2023’ Plan

Health program is committed to delivering a broad scope of services targeting youth and young adults. As a key part of this, Alberta Hospital offers a unique acute care unit for patients aged 16 to 26 which complements a web of community-based young adult services. Further inpatient enhancements at AHE are planned, including an age-appropriate psychiatric intensive care unit.

Targeting Treatment-Resistant Psychosis:

AHS Addiction and Mental Health and the U of A’s Department of Psychiatry are working jointly on an evidence-based holistic treatment for treatment-resistant psychosis. Although still in its early stages, this work will build on existing work in the Zone, and focus on assessing change readiness, new referral processes and criteria, and establishing appropriate scales for assessment and monitoring.

Research and teaching are also central themes of the Ambition 2023 strategy with direct linkages to the Department of Psychiatry and other academic partners. Alberta Hospital aims to enhance its teaching and learning focus by pursuing research, funding and published work opportunities.

“This work is going to continue for many years, so this is just the beginning. About 50 per cent of our medical staff here are locally trained, while the remaining 50 per cent of our medical graduates are from other jurisdictions. So we’ve had a constellation of ideas coming together from different jurisdictions around the world, including our own, and that has fermented into the Ambition 2023 plan,” says White.

“All the psychiatrists here are really invested in how effective Alberta Hospital has been, and very conscious of the difference that Alberta Hospital has made throughout the Edmonton region and the northern part of the province. Our physicians also realize we have got to be forward-thinking, innovative, and looking at new ways of doing things.”

The new Day Hospital – a first for the Edmonton Zone – has already received a funding commitment from Alberta Health.

“Dr. Daniel Li has been Chairing our Day Hospital initiative and we’re moving very quickly on that front. We’ve just received $600,000 to renovate the lower part of 12 Building (on the Alberta Hospital site) where the Day Hospital will be located. There is another sizeable amount of money coming, in the range of $2 million, to set up the program and recruit staff,” says White. “I will be in the process of recruiting three physicians to run this program and related medical leadership for it as well.”

The Day Hospital will target patients who are acutely mentally ill but not at risk. Such patients may have a major depressive disorder, a severe anxiety disorder or a psychosis, but are not suicidal or engaging in self-harm. The Day Hospital may also be an appropriate intervention for clients on the elective admission wait list as well as those requiring ECT (Electro-Convulsive Therapy) or rTMS (Repetitive Transcranial Magnetic Stimulation) on an outpatient basis.

“Inpatient care is expensive. We have a finite number of beds and there is huge demand for those beds. The vision here is that a Day Hospital will be a viable treatment alternative for a sizeable number of patients. It will also relieve the strain on our hospital emergency departments, particularly for Emergency Inpatients (EIPs), so it should provide greater satisfaction to our patients and make economic sense as well.”

Like similar facilities in Calgary and Vancouver, the Day Hospital will be staffed by a multi-disciplinary team including psychiatrists, psychologists, social workers, occupational therapists and others, with an emphasis on rapid transition within a 30-day treatment framework.

“The initial vision with Ambition 2023 was to have two Day Hospitals, one here at Alberta Hospital and the other in the city. Funding was only available for one at present, but additional funding may be available if the Day Hospital makes clinical and economic sense. So it is essential for this initial Day Hospital to make clinical and economic sense.”

Another element of Ambition 2023 calls for six beds to be allocated at Eight Building on the Alberta Hospital campus for a treatment resistant psychosis program, led by Dr. Zahid Latif, Dr. Alfonso Ceccherini-Nelli, and Dr. Karthikeyan Ganapathy.

“In addition, three of our psychiatrists have taken up the initiative in developing an emotional dysregulation program, or a DBT (Dialectical Behaviour Therapy) program, and we have already had our Hope and Wellness Day Program up and running for three years,” he notes.

“So just to reiterate Dr. Yiu’s statement to us a year ago, the status quo is not acceptable. We can’t stand still. We can’t be a barrier to change. Physicians can block change, but we can also drive change, and when physicians work together with a common purpose they can make a huge difference. That’s what we’re doing.”
Brad Necyk knows all about sickness, depression, mania, social stigma and isolation. The accomplished 33-year-old multimedia artist has grappled with these issues most of his life – starting long before he became a graduate student in the Department of Psychiatry in 2015.

“When I was a kid I was really sick. Between the ages of two and 10, I spent a lot of time in hospital. I had a disease with my large intestine so they had to remove part of it,” he says.

“The thing that helped me get through that was this really intense focus I had on making art. At all times I was doodling and drawing or whatever. I never considered it to be something I was really passionate about. It was just something I did.”

After completing high school in suburban St. Albert, Necyk earned a Bachelor of Commerce Degree at the University of Alberta and went to work for a major bank. But he quickly realized he wasn’t cut out for the world of business.

So he went back to school to pursue his real passion – art – and completed a Master of Fine Arts degree in 2013. Unfortunately, sickness had again elbowed its way into his life. This time, in the form of mental illness.

“By that point I was living with and treating bipolar disorder,” he says. “So a lot of my research and my art revolved around what it means to be ill, what it means to have a mental illness, and thinking more broadly about psychiatry as a medical discipline.”

Necyk’s focus on art as a means to explore and illuminate what it means to be sick came to the attention of University of Alberta Hospital. It appointed him as its first artist-in-residence, working specifically with transplant patients.

That in turn got the attention of Dr. Pamela Brett-MacLean, an Associate Professor in the Department of Psychiatry and Director of the Arts & Humanities in Health & Medicine (AHHM) Program in the U of A's Faculty of Medicine & Dentistry.

“I was hearing about her and she started hearing about me, so we finally met in 2015. She asked what area of medicine I was interested in and I said psychiatry. She said ‘That’s perfect, I’m in the Department of Psychiatry,’” Necyk recalls.

Necyk promptly enrolled as a PhD student in the Department's Graduate Program, where Brett-MacLean and Dr. Andrew Greenshaw, the Department's Associate Chair-Research, are his co-supervisors.

“Looking back on it, there have been all these serendipitous moments leading from one to the next. When I met Dr. Greenshaw at Research Day three or four years ago, he told me two of his daughters have MFAs, so he completely understands the role of art in medical research.”

While working as an artist/researcher on a project on Head and Neck Cancer, and completing his arts-based, research-creation PhD in Psychiatry, Necyk’s work has gained increasing acclaim, not only in Canada but internationally.

He is currently a visiting artist/researcher at the Centre for Addiction and Mental Health (CAMH) in Toronto and his work has been shown in Buenos Aires and Chicago. He presented at the 2017 SLSA (Society for Literature, Science and the Arts) Conference in Phoenix, and the 2017 AFPC (Association of Faculties of Pharmacy of Canada) Conference in Quebec.

Necyk sits on the boards of several professional bodies and is a scholar at the IHI (Integrative Health Institute) at the University of Alberta.

He also teaches senior courses in drawing and intermedia at the U of A and MacEwan University, covering photography, video, sound, 3D-modeling, interactive electronics, performance, relational works, sculpture, and installation.

Yet, despite the growing recognition he has received, some still struggle to understand the value of what he does, or how it fits within the conventional context of psychiatric research.

“Even at this year’s Research Day event, a student raised her hand and said ‘What’s your research question?’ Well, I don’t have a research question. I’m just exploring. I’m not explaining things. I’m trying to find new insights and create new spaces for ideas to form, so maybe we’ll come to some new understandings,” he says.

“Maybe somewhere down the line somebody is going to figure out something to focus on as a researcher that my work has uncovered. But I’m not going to do that kind of research. That’s not what I’m trained to do. It sounds like a weird thing to do, just spending time with people who are sick, but when you meet the right person and pay the right amount of attention to them, things emerge from that.”

Necyk recounts how one patient began reciting poetry to him, just one day after receiving a new heart transplant. Together, they...
**Graduate Student Profile**

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subsequently created a sculpture that reflected the patient's desires to escape the confines of his hospital room.

On another occasion, Necyk travelled to Iqaluit, Nunavut, to attend a conference that focused on the remote northern territory’s sky-high suicide rates.

“I came up with this idea to do an image theatre workshop where we created images with our bodies. Some really interesting things emerged from that and we made a photo series out of it together. It was a really meaningful experience,” he says.

Working with Head and Neck Cancer patients over the past three years has been especially challenging and rewarding, says Necyk, who recently participated in a successful art exhibition with his patient group in Chicago.

“The most important thing for them is being able to tell their story, so people can really feel what the experience of living with Head and Neck Cancer is like, including hearing the diagnosis, going through the treatments, the after-effects of all the surgeries, the chemotherapy, the radiation, the scarring, the loss of your voice and your tongue and your face,” he says.

“And then, people look at them like they’re monsters. They just want people to understand ‘Hey, I’m still a person. It’s just that this horrible thing happened to me but somehow I’ve endured.’ I think that is probably the most concrete thing I get out of everybody. They want people to understand their illness and what their life is like, and not to judge them poorly based on that.”

It is often said that great art arises from great pain and suffering. If that’s so, it seems to align with Necyk’s own experience.

“Last June I went manic. It was the worst manic episode of my life. I didn’t know it at the time but every time I embed myself in these illness communities I get really sick, and that’s what happened with the psychiatric patients at CAMH. But then I started writing about it and all the events of the past three or four years, and I created a short film about it,” he says.

“Then I adapted it into a play. It premieres in October at the CAMH in Toronto. So it’s part of a film festival at CAMH, but I got permission to present the play in the hospital, which will be really cool. It’s about being in an institution. It’s a fictionalized work, but it’s based on real events,” he adds.

“A lot of my work is about opening up room for dialogue. I have 15 or 18 exhibitions a year now, so it’s just insane. My focus has moved from just trying to be an artist to trying to be an advocate for social change. That is where I’ve moved my career to now. I do that through the art I make, through the communities I’m now part of, and being part of the Department of Psychiatry.”

**Focus on Child & Adolescent Mental Health:**

New Child and Adolescent Mental Health Centre Edges Closer to Construction as Royal Alex Redevelopment Plan Moves Ahead

Mark Snaterse, Christine Mummery and Dr. Alice Leung have long shared the same inspiring dream. Namely: that a first-class, purpose-built and well-staffed Child and Adolescent Mental Health (CAMH) centre will come to life as part of Phase One of the Royal Alexandra Hospital’s ambitious 16-year, $4.5 billion master redevelopment plan.

Snaterse, Alberta Health Services’ Executive Director for Addiction and Mental Health, Edmonton Zone, says getting the CAMH project up and running has been one of his top priorities since he assumed his current post nine years ago.

With the functional programming plan now complete, consultations with various stakeholders and detailed design work is slated to begin over the next few months. By 2019, construction of the new CAMH centre should be underway.

“This building is going to be quite transformational. When you are able to design a building specifically to provide the services needed by kids and their families, you’re spaces, a gym, a pool, outdoor spaces like courtyards and green space, and a family resource centre, all based on the principle of offering integrated family care. When you talk about family inclusion our current spaces and environments don’t really enable us to engage families as well as we should.”

Mummery, Alberta Health Services’ Edmonton Zone Director – Children, Youth and Families, Addiction and Mental Health Services, also recognized long ago the need for improved and expanded local mental health and addiction facilities, specifically tailored for young patients.

“We’ve been advocating for the CAMH project for the past eight years. The facilities our inpatients are currently in at the Royal Alex, the Glenrose Rehabilitation Hospital, the Yellowhead Youth Centre and Alberta Hospital Edmonton are simply not very

Continued...
Dr. Alice Leung and Christine Mummery

Royal Alex Redevelopment continued from page 5

therapeutic or up to standard,” she says.

“The new CAMH building is going to be so much better. That’s why we’re so excited about it.”

Leung, a child psychiatrist who grew up in the nearby Norwood neighbourhood and is now AHS Clinical Section Chief of Child and Adolescent Mental Health and Addictions, Edmonton Zone, echoes those views.

Now all three believe the CAMH project – which is part of a massive scheme to modernize and expand Edmonton’s busy inner city hospital – will finally usher in a new era of advanced, leading-edge care for some of the region’s most vulnerable young residents.

Publicly unveiled for the first time in 2015, the Royal Alexandra Hospital redevelopment scheme entails major renovations or the complete demolition of nine of the 20 buildings now located at the Royal Alex site, as well as the nearby Glenrose Rehabilitation Hospital and Capital Care Norwood sites.

As currently conceived, the CAMH facility would be among the first elements of the complex plan to proceed. It would consolidate all regional tertiary and specialized mental health and addiction services for children, youth and families for Alberta Health Services’ Central, Edmonton and Northern Zones, as well as northern B.C., northern Saskatchewan, and the Northwest Territories.

The 25,000-square-metre (269,000-square-foot) CAMH facility would be tailor-made and deliberately designed to reflect the specific needs of young patients coping with mental health and addictions issues.

“This building will be unique. I don’t think there is any other facility in Canada where they have youth forensics and addictions and mental health all housed in the same building. So this is an exciting opportunity for us here in Edmonton to show some vision and some leadership not just in Alberta, but nationwide,” says Leung.

The CAMH facility will include 101 inpatient beds; multiple customized inpatient and outpatient programs and clinics; 19 classrooms for the education of children and youth while they’re in treatment; a therapeutic recreation complex including a swimming pool and gymnasiums; fresh air / outdoor space; 85 underground parking stalls; and mental health therapy seven days a week, 365 days a year for those in need.

What’s more, with multiple therapeutic programs and services under one roof, and projections of future demand for services, we expect to be able to provide 65 per cent more bed days at CAMH,” says Snaterse. “That’s a combination of actually having more beds as well as having those beds operate 24 hours a day, 365 days a year. Today, many of our beds are closed on weekends or once the school year ends.”

Further, the new facility will incorporate innovative technologies and best practices that are not only therapeutic and family friendly but also academically focused, says Leung, who also serves as Division Director of Child and Adolescent Psychiatry in the Department of Psychiatry at the University of Alberta.

“It will be a great clinical environment but it will be academic as well. So it’s going to be a fantastic place for teaching, for learning, for residents, for students and interns, and a great place to really ramp up the kind of clinical research that we do.”

Outpatient services are also expected to benefit in a big way.

“Based on our analysis, we’re expecting a 400 per cent increase in more intensive day treatment spaces at the new CAMH centre, and that’s fantastic,” says Mummery. “These are kids who come in for intensive hospital-based and school-based treatment during the day, and then go home at night.”

The Government of Alberta committed $200 million in its March 2017 budget toward the cost of the new CAMH facility. Plans are well underway to launch a related public capital campaign.

“We’re currently working with our local Alberta Health Services foundations on a strategy to raise additional funds by bringing this once-in-a-lifetime opportunity to the donor community across Northern Alberta,” says Snaterse.

“The specialized tertiary programs at CAMH will serve not only the Edmonton Zone but all of Northern Alberta and the Northwest Territories, so our catchment area is huge.”
Spotlight on Indigenous Mental Health:
After Discovering Her Metis Heritage at Age 15,
Taelina Andreychuk’s Quest to Become an Indigenous Psychiatrist Began

As a youngster growing up in Williams Lake, B.C., and Spruce Grove, Alberta, Taelina Andreychuk was a typical small-town kid.

“My dad is a welder so my parents would just travel around in a trailer, wherever he would find work,” she says. “We had an acreage with lots of animals, so I was kind of a country bumpkin,” she laughs.

Andreychuk, who earned a Bachelor of Psychiatric Nursing degree from MacEwan University, is currently taking science courses at the University of Alberta in a bid to get into medical school and ultimately, become a practicing psychiatrist.

Although she has a Ukrainian surname, it wasn’t until she was a 15-year-old high school student at Spruce Grove’s St. Thomas Aquinas Catholic School that Andreychuk realized she was Metis.

“I had no idea really what it meant at first. My parents and grandparents weren’t trying to hide it, but they didn’t celebrate it either,” she says. “But I have an aunt in Athabasca who is really involved in the Metis community. She told me it was part of my background, so I should learn about it.”

That piqued Andreychuk’s curiosity. She joined a youth group at Enoch Cree Nation, west of Edmonton, and travelled with them to Australia in 2008 to participate in World Youth Day.

But the real turning point for Andreychuk happened a year or two later, when her aunt encouraged her to spend a summer at Metis Crossing, a unique Metis Cultural Centre in Smoky Lake, Alberta.

“It’s a cultural interpretive center that hosts cultural celebrations, education, social gatherings, and business development activities, specifically for Metis people. I remember interacting with the elders and making bannock on a stick. It was the first time I really connected with my culture,” she says.

Meanwhile, Andreychuk was toying with the idea of pursuing a career in healthcare. Through CAREERS: The Next Generation, a nonprofit group that helps young people explore career options through internships, she began volunteering at Spruce Grove’s WestView Health Centre.

“I remember spending time with this one elderly woman. I’d just go and talk to her for an hour a day. It was basically therapeutic conversation,” she recalls.

“Anyway, after I finished my internship, this woman and her husband asked if they could take me to dinner. They were really sweet. The gentleman even wore a top hat. It made me realize that just having a conversation can have a big impact. It was a spark that got me thinking about nursing.”

After her first year at MacEwan, Andreychuk did a summer internship at Rupertsland Institute, a nonprofit affiliate of the Metis Nation of Alberta that focuses on education, training and research.

“I’d help people do job searches, prepare resumes and cover letters, and help students apply for scholarships and bursaries. It was a really impactful experience for me,” says Andreychuk. That prompted her to apply for a Belcourt Brosseau Metis Awards scholarship, which she won.

“It was a huge moment for me. The Belcourt Brosseau Metis Award Foundation put on a wonderful celebration for the awards recipients, their families, foundation members and scholarship sponsors.”

Andreychuk’s Metis background and growing awareness of the disparities between big city healthcare services and the services available to those who live on reserves led her to seek a summer psychiatric nursing post at Maskwacis, in Central Alberta. She was the first psychiatric nursing student from MacEwan to work on a reserve.

Maskwacis is a sprawling First Nation community that includes four Cree reserves including the Ermineskin Cree, the Samson Cree, the Louis Bull First Nation and Montana First Nation. Although

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Spotlight on Indigenous Mental Health
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Maskwacis has its share of violence, illicit drugs and gangs, that’s not what bothered Andreychuk most. It was the disparity she saw in the quality of healthcare services.

“It was a culture shock. It’s like a country within a country. They didn’t even have a 911 line for emergencies,” she says.

“I remember asking someone, ‘Why don’t we have a psychiatrist here?’ I’ll never forget the response. It was: ‘You don’t know where you are.’ That was really impactful for me. Just because they live on a reserve, they don’t have psychiatrists. It was a total shock.”

Despite the challenges – or because of them – Andreychuk found the experience of working in Maskwacis immensely rewarding. “The people who work there are very motivated to help people in the community. They’re just so caring,” she says.

Nonetheless, that experience didn’t prepare Andreychuk for what came next: a two-month stint as a volunteer at a psychiatric hospital in Cusco, Peru, the historic capital of the Inca empire.

“It was really hard. Nothing was organized. People slept on concrete floors. They’d get medications donated from First World countries, but they’d just toss the pills out to anyone. Patients with schizophrenia would get diabetes medications, and people with developmental disabilities would get antidepressants,” she says.

“There was no distinction between mental illness, developmental disabilities or forensic issues. I interacted with one gentleman, who, because of command hallucinations, had murdered someone. The hospital’s method to care for this person was to lock him in a five-by-five foot concrete room and allow him to walk back and forth in the facility for 10 minutes every two weeks. This had been his treatment plan for over 10 years.”

Last fall, Andreychuk completed her studies at MacEwan. For a time she worked at Ambrose Place, a supportive housing community in Edmonton’s McCauley neighbourhood. It focuses on Indigenous people who are chronically homeless and typically struggle with psychiatric and/or physical health issues as well as substance use.

Andreychuk subsequently moved to the Edmonton Community Mental Health Clinic on 108 Street, just north of the Alberta Legislature Building, where she continues to work largely with Indigenous clients as part of a multi-discipline team that includes psychiatrists, psychologists, social workers, occupational therapists and other specialists.

“We focus on what the client needs and what’s important to them. There isn’t one specific approach for anyone who is Indigenous. We just try to be open to things and let the client lead. It’s all about helping people to cope with all kinds of different issues, whether it’s drugs or alcohol or trauma,” she says.

“Sometimes clients will bring a certain history of inter-generational trauma from the residential schools, things like that. So you just need to be open to these things and be trauma-informed, as we call it, and how they want to be healed.”

At 26, Andreychuk has already compiled an impressive catalogue of rich life experiences, and her passion for helping vulnerable Indigenous people is obvious. Perhaps that’s why she was asked to share her stories with the Psychiatry Residents at the University of Alberta, while she prepares to apply to medical school.

“I didn’t study physics or chemistry at MacEwan, so I’m currently working to build my foundation in these areas by studying at the U of A. My strength comes from my experiences and passion. That’s what I think I can bring to the table,” she says.

“When I worked in Maskwacis and they said, ‘You don’t know where you are, there are no psychiatrists here,’ that always bothered me. I would love to be that person who can come to their community and offer those services. That’s something I would love to do – to be a small part of filling the need for Indigenous psychiatrists and people with Indigenous knowledge. That’s what motivates me.”

Student Research Takes Centre Stage:
Annual Research Day Event Draws More Than 100 Participants; Dr. Jane Foster Delivers Keynote Speech on Gut-Brain Interactions

The idea that bacteria in one’s gut might somehow influence brain function or the state of one’s health first gained prominence in ancient Greece, but there has never been more interest in pursuing research on the subject than there is today.

“There’s nothing really very new about the concept that gut bacteria may influence health or disease. Hippocrates said over 2,000 years ago that all diseases begin in the gut,” Dr. Jane Foster told attendees at the University of Alberta’s 17th annual Department of Psychiatry Research Day.

The day-long event, designed to celebrate and showcase the research of the Department of Psychiatry’s Residents and Graduate Students, took place May 30th at Bernard Snell Hall in University of Alberta Hospital.

“Although he may not have been suggesting that the bacteria or other microbes that live in our gut are part of that concept, it has been a long time now that researchers have considered this gut-brain connection in a whole host of different ways,” she noted.

Foster, an Associate Professor in the Department of Psychiatry and Behavioural Neurosciences at McMaster University, was the keynote speaker at the event, which attracted more than 100 participants including Department of Psychiatry Graduate Students, Residents, Faculty, colleagues and students from other departments.

Foster’s presentation – titled Microbes and Mood: Microbiota-Host Interactions in...
Annual Research Day Event continued from page 8

Mood and Mental Health – focused on her lab’s research into how immune-brain and gut-brain interactions may contribute to neurodevelopment, behaviour, and psychiatric disorders such as anxiety and depression.

“This seems to be a hot topic with thousands of papers coming out on it, if you look at the PubMed references over last few years on just microbiota and microflora. In January of 2018 there were 1,800 papers that came out on this topic, so this is moving faster than a lot of other fields,” said Foster.

“Understanding the way that the microbiome communicates with the brain is an opportunity to improve the way we consider individual differences in patients. This area has brought together so many scientists from different disciplines that it’s now at the forefront of multidisciplinary, novel approaches. I’ve met people who have done landmark studies in microbiology or in sequencing techniques where we’re just troubleshooting how to move the field forward. It’s providing an avenue for conversation and multidisciplinary work, and that’s exciting.”

Foster, past president of the Canadian College of Neuropsychopharmacology, said several clinical trials involving prebiotics and probiotics are underway around the world.

“There is a lot of conversation happening between psychiatrists and industry. Many are smaller companies. There is no end of these nutraceutical or probiotic companies that are interested in addressing some mental health target. So there is a lot of opportunity here if we can actually put some precision to the science for novel approaches to treat people,” she said.

Foster’s research on gut-brain interactions is at the forefront of finding novel interventions in psychiatry, including the use of fecal microbiota transplants. She has published more than 80 peer-reviewed papers, presented her work at over 40 local, national, and international venues, and has been highly active in reaching out to the general public through TedTalks, webinars, public lectures and art exhibitions.

“What’s remarkable is that the microbiome (the collection of microorganisms in our body) has 200 times the genetic material that we have. From the Human Genome Project we know that we have about 23,000 to 25,000 genes, whereas the human microbiome represents millions of genes. So we’re only at the tip of the iceberg of understanding that. It’s a very complex system, and there are a lot of ways that your microbiota can communicate with your brain.”

In addition to Foster’s keynote speech, Research Day featured a lived-experience presentation in the morning by Sharon Ryder Unger, and an afternoon presentation by Dr. Allen Chan, an Assistant Professor in the Department.

A major focus of the event was a series of short presentations from Graduate Students. They included: Mohammad Alam, Chelsea Bedrejo, James Benoit, Jasmine Brown, Eric Chan Tai Kong, Catherine Cheng, Daniela Gomez, Michal Juhas, Jessica Luki, Manoj Malik, Tyler Marshall, Brad Necyk, John Wesley Paylor, Matt Reeson, Rejish Thomas and Eszter Wendlandt.

Poster presentations from trainees and collaborators were also presented throughout the day. The top presentations by research trainees were acknowledged with the following awards:

Dr. Roger C. Bland Graduate Award – Rejish Thomas
Dr. Glen Baker Award, Best Overall Poster Presentation – John Wesley Paylor
Honourable Mention for Poster Presentation – Daniela Gomez
Department of Psychiatry Best Oral Presentation Award – Rejish Thomas
Honourable Mention for Oral Presentation – Catherine Cheung
Department of Psychiatry Poster Award – Shui Jiang

“It’s an opportunity for the students to showcase their work and the evolution of their work throughout their time in the Graduate Program,” says Tara Checknita, Graduate Program Administrator.

“We do have a recipe for Research Day but like research itself it changes from year to year. We like to listen to the feedback, what the interests are of the group, and we change it up every year just to see what works and what doesn’t. There is a lot of hard work that goes into Research Day and it wouldn’t be successful without the active participation of the Graduate Student Reps, the Graduate Student Program Committee, and Dr. Esther Fujiwara, our Graduate Program Director. They pull it all together.”

Dr. Jane Foster