Canadian Federation of Mental Health Nurses
Fédération Canadienne des Infirmières et Infirmiers en Santé Mentale

Winter 2009 No. 53/54

Greetings from the president

In This Issue:

President's Message.....1
Movie review.....4
Welcome New Board Members...6
Provincial Dementia Education Day 8
Article of Interest 10
Solution Focused Nursing.....11
CFMHN National Halifax Conference Highlights.....19





Season's Greetings! Joyeuses Fêtes What a year it has been for CFMHN! Indeed, there have been many changes in the federation that bring exciting new opportunities. I am honored and pumped to be the CFMHN president, representing you, the members! Previously the New Brunswick representative, I reside with my partner and son in my home town, Moncton, NB. I am a clinical nurse specialist with the Mental Health/Addictions Program, Horizon Health Network, and work out of the Moncton City Hospital, Adult Psychiatry Unit. I look forward to being more familiar with the issues that affect the amazing work psych/MH nurses do all across the country.

Past President

As I take this new role, I'd like to take this opportunity to acknowledge and thank our past president, Christine (Chris) Davis, for her devoted, dedicated, and passionate leadership for the past 5 years; a term way past the usual expectation for the presidential role. Chris has truly led the CFMHN through its growing pangs and we would not be the Federation that we are today if not for this leadership. Examples of her legacy are making solid connections with the Collaborative Care initiative and the Mental Health Commission. Of particular importance are the working relationships Chris established with the Canadian Nurses Association and Mental Health Nursing Interest Group of Ontario. Chris is a solid teacher/mentor and advocates for clients/families with mental health concerns. Furthermore, Chris is a gentle, knowledgeable and well connected practitioner who is very effective at facilitating and motivating groups of people. You will be very missed as president, Chris!

Continued on page 2

how to reach us

CFMHN
c/o First Stage Enterprises
1185 Eglinton Avenue East,
Suite 104
Toronto, ON M3C 3C6
Tel: 416-426-7029
Fax: 416-426-7280
E-Mail:
info.mental.health@firststageinc.com

www.cfmhn.ca

Greetings from the president... Continued

Board of Directors

The CFMHN is fortunate to have strong leadership from Board of Director members who have done a lot of great work in the past several years and we also have had a 'boost' of new members injected into the board. CFMHN members can feel confident about that fact that for the first time in approximately eight years nearly the whole country has provincial representation. We are very fortunate to have the following provincial representatives new to the board this year: Marlyn Isaac (New Brunswick), Florence Budden (Newfoundland) and Laurlei Falkner-Gibson will replace Paula Tognazzini (British Columbia). Finally, the CFMHN is excited to have Millie Dietrich (Nunavat), a territory that has not had provincial representation since 2001! The CFMHN welcomes all the new members and we are glad to be working with the ever supportive continuing provincial representatives: Margaret Osbourne (Alberta), Barb Abele (Saskatechewan), Elly Spencer (Manitoba), Lisa Beames (Ontario), and Sylivie Buisson (Quebec). Although PEI's position is vacant, Gloria McInnis-Perry has generously agreed to assume the role until a successor is found. Regrettably, Ann Greene, the previous 'past president' has retired from the board after dedicating most of the past 14 years to the CFMHN. Ann has been (and still remains a CFMHN 'advisor') a wealth of knowledge and support to the CFMHN board members. Ann began as the BC provincial representative, was the secretary, newsletter editor, president, and communications director. Among Ann's gifts to the CFMHN is creating the informative and dynamic newsletters that we all cherish; a task that she will continue for next three newsletters. In addition, Ann is the force behind our website. Thank you Ann!

Finances

The CFMHN has established momentum in terms of strengthening its financial base. Thanks to the board of directors, and our past Treasurer, Margaret Osbourne for steering us in the right direction. The CFMHN is in a better position than we have been in several years. Looking ahead into 2010, we are grateful to have Elly Spencer chairing the finance committee and look forward to her financial leadership!

Halifax Conference

If you were fortunate enough to attend the CFMHN Halifax Conference, "Hope Health, Healing: From around the corner and around the world", you share my sentiments of how it was an invaluable and stimulating experience.

Continued on page2

Halifax Conference ... Continued

The high caliber speakers and academic content of the presentations, workshops and posters was impressive. This collegial knowledge exchange forum is just what the 'nurse' ordered as the back-to-back sessions quenched our thirst for evidenced based practice related to Psych/MH *nursing* practice. 'Hats off' to Jane Hughes and her dedicated team of organizers for showing us how to put on a fantastic conference!

AGM

Approximately 80 people joined in either in person (majority) or via phone for the Annual General Meeting that was held at the Halifax conference on October 22, 2009. Having the opportunity to meet 'live' in person is always gratifying. During this meeting, the by-laws were updated and questions from the floor arose regarding the Psych/MH nursing title and membership composition. The board was elected and now in a position to move forward into the new year by addressing these by-law issues.

Looking ahead to the Coming Year

In closing, I hope you have a peaceful holiday and wish you a satisfying year ahead with your friends and families and your Psych/MH practice.

I would very much like to meet or talk with as many CFMHN members as I can. Please feel free to get in touch with me to share your work, or if you have any questions.

Sincerely/Sincèrement,

Petrea Taylor

Future Planning

Many of the CFMHN board members were fortunate to have a 'Strategic Planning' meeting *in person* at the "Hope, Health, and Healing' Halifax Conference. The following were some of the plans that were discussed for the CFMHN's future.

First, the board discussed increasing CFMHN membership by reaching out to Psych/MH nurses through improving communication and answering the question, "What does a CFMHN membership give me?" Second, the board explored 'Position Planning', or ways that the CFMHN enhance its ability to provide a strong voice for Psych/MH nursing. One example is disseminating the information from the "Core Competencies in Psychiatric/Mental health Nursing for Undergraduate Nursing Education" (2008, CFMHN Education Sub-committee) in order to promote quality Psych/MH theoretical and practical content in secondary education institutions. Thirdly, planning on how to maintain the financial momentum that has been created this past year is important in order to secure future opportunities that reflect the mission of CFMHN.

Movie Reviews: Adam

Thursday, July 30, 2009 8:35PM By Liana Aghajanian



Though ***Adam*** will probably fly under the radar this summer, overshadowed by the likes of more publicized films such as *500 Days of Summer* and *Away We Go*, this quirky romantic comedy is one that is worth seeking out, with its tackling of a disorder that affects as many as three out of 1,000 people, reports a 2005 study in the Journal of Clinical Psychiatry and evolution of Hugh Dancy, whose time in *Confessions of a Shopholic* almost completely fades away after his performance as Adam.
Check out our review below…

The Plot:
With all its heartbreak, awkward moments and miscommunication, love is simply put, hard. Throw Asperger Syndrome, a high-functioning form of autism that is characterized by an inability to read what other people are thinking and feeling in the mix, and things get elevated to an entirely new level, and that's exactly what happens when Adam, a shy, socially sheltered, yet extremely bright and enthusiastic man meets his new neighbor Beth (Rose Byrne) a young, aspiring children's book author who moves in next door.
Though Adam, with his personality quirks and odd behavior that Beth can't seem to figure out is world away from the men she's known before, chemistry between the two begins brewing. Adam somehow charms her with his fascination of a family of raccoons in Central Park and makes a virtual solar system in his apartment for her, while Beth begins to teach Adam the ways of the world.
Though whether the relationship survives through the course of the film remains to be seen, the result is a humorous and unconventional relationship that breaks the mold of clichéd and cookie cutter romantic comedies.

The Good:

Spotlight on Asperger Syndrome – Adam puts a disorder on the map that not only many may not know about, but at a convenient time, as Asperger Syndrome sufferer Gary McKinnon is facing extradition to the U.S on computer hacking charges. Asperger Syndrome, which is on the autism spectrum, has seen a rise in diagnosis in recent years, although very few films have addressed the disorder, excluding *Mozart and the Whale*, starring Josh Hartnett, which had a limited release.

- **Hugh Dancy** – Though it might be premature to say Dancy's performance as *Adam* is award worthy, especially coming after such an airy film as *Confessions of a Shopaholic,* his versatility shines when he portrays all the characteristics of Asperger's in relation to Adam and those around him. His mannerisms and dialogue delivery draw you in to the point where you feel Adam's pain and share his laughter – this is one of the many mark's of great acting, and Dancy accomplishes it this round.
- **Plot line** – This is one fine romantic comedy that does not by any means fall under the curse of its genre – it's original, funny and doesn't rely on gimmicks, crass humor or a rehashing of the tired and tested plot lines of its predecessors. From Adam trying to clean Beth's windows in a NASA space suit, to Beth's introduction of Adam to her parents, where he subsequently rattles off the entire history of the Cherry Lane Theatre in NYC from memory, Adam will make you laugh, smirk and exercise your strength to control heavier emotions. It's the type of romantic comedy you can appreciate, without it leaving a bad aftertaste in your mouth.

Continued on page 5

Movie Reviews: ADAM……..Continued

The Bad:

- **Peter Gallagher** – Listen, I like Peter Gallagher, I truly do, especially when he flashes those Groucho Marx eyebrows at me, but in all honesty I'm a bit sick of him playing the never ending supporting role of the suave dad/business man with tricks up his sleeve, although he plays it well. Gallagher's portrayal as Beth's patriarch dad, while believable, just reminds me in his previous similar roles (*The O.C, How to Deal*) and takes the focus away from the story.

Script: Slight tweaking required – Though the script is well written and not particularly overwhelming (pauses and subtle body language is always better than having the characters unrealistically speak at every turn) a few minor adjustments should have been made to smooth out the kinks, such as both Adam and Beth repeating statements as questions.

Overall:
Adam is a breath of fresh air not in its typically unoriginal genre. Its focus on a disorder that many suffer from, coupled with an amazing performance by Hugh Dancy and Rose Byrne is film making you can appreciate and savor, long after you've stepped out the theater and thrown away your popcorn.

Rating: 9/10
Opens July 29 with limited release. Directed and written by Max Mayer; Producers, Miranda De Pencier, Leslie Urdang, Dean Vanech; Music, Christopher Lennertz; Cinematography, Seamus Tierney

For those of you who would like to know more, here is a website all about mental health movies and their reviews, submitted by Sherette.

http://www.psychflix.com/welcome.html



Season's Greetings

To the Membership

From

The Board of Directors

Welcome New Board Members

Lorelei Faulkner-Gibson, RN, BSN, CPMHN(c), MSN(C)

Lorelei is the Clinical Nurse Educator for the Mental Health Program at British Columbia's Children's Hospital. Lorelei's responsibilities are multifaceted such as the development of professional education services for the mental health staff; coordinating ongoing education; facilitating education sessions and team development. She also provides mental health education to the paediatric medical nurses within the facility. Lorelei works closely with her hospital and community partners to ensure up to date information is available to professionals and families. Lorelei has been working in Child & Youth Mental Health for the past 22 years. Lorelei has worked on the tertiary Adolescent Inpatient Assessment Unit and was the Nurse Clinician/Program Coordinator for the Provincial Attention Deficit Hyperactivity Disorder Program Lorelei is one of CHADD Vancouver's Professional Advisors and has been active on various committees for the College of Registered Nurses of British Columbia and the Canadian Nurses Association of Canada. Lorelei is actively pursuing her Masters Degree in Advanced Practice Nursing Leadership.

Florence Buddens, RN, BSN, CPMHN(c), MSN(C)

I have been a Psychiatric nurse for 21 years having received my degree from Memorial University in 1988. I received my CNA Certification in 2006. Currently I teach nursing at the Centre for Nursing Studies in St. John's NL. I am very involved as a volunteer in my community as President of the schizophrenia Society of NL and President Elect of the schizophrenia society of Canada where I chaired their public policy and advocacy committee from 2004 until 2009. I received the Michael Smith Award in 2008 from the Schizophrenia Society of Canada and the March award in 2002 from the Schizophrenia Society of NL. I am a member of various mental health advisory committees in St.John's and an active member of the Psychiatric Special Interest Group for Nurses in NL.

Welcome New Board Members

Marilyn Isaac, RN, BSN, CPMHN(c), MSN(C)



I was born in Scotland and immigrated to Canada with my family when I was 9 years old. I am married with two children who are grown and gone. I became a nurse later in life and have worked on the Acute Inpatient Psychiatric Unit at the Saint John Regional Hospital for nineteen years, the last eleven years as Resource Nurse. I love front line nursing and derive a great deal of satisfaction from seeing my patients get well. I developed a particular interest in Early Psychosis Intervention and researched and proposed a program for our region of NB which I hope some day to implement. I am an avid reader and love nothing better than to get my teeth into a subject to research. I look forward to getting to know mental health nurses from NB and across the country. We have so much knowledge that needs to be shared.

Millie Dietrich, RN, BSN, CPMHN(c), MSN(C)

Millie worked in First nation Communities in Northern Manitoba as an out-post nurse for 15 years, then pursued a post graduate in Mental Health Nursing. Millie is currently working in Nunevut providing mental health services in Kugaaruk, an Inuit population of 800.

Provincial Dementia Education Day

One of the indicators for the Primary Health Care Quality Accreditation Team which I joined in February 2009 was to improve education in the mental health division. My position as Clinical Educator for acute care psychiatry resulted in part from this indicator. So to continue this improvement indicator in my role as educator, an educational subcommittee was formed with myself as chair. Several representatives, including myself, Donna Birch and Alison Carr from the Quality Accreditation Team got together as the educational subcommittee and decided that there should be representation from eastern Prince Edward Island (PEI). The committee would identify what are the educational needs in acute care mental health system. Theresa Lewis, Fran Galczynski, Karen Dunn and Elizabeth Taylor all Registered Nurses were asked to be adhoc members of the committee. As each representative spoke about the needs identified in each of his/her respective areas, it was easy to see that all service areas were being affected when caring for people living with dementia. There was discussion on the numbers of people in each of the service areas who are being seen and treated for some dementia related illnesses. The growing number of challenges facing staff in each of the service areas was also discussed. The committee felt that some of these challenges could be alleviated with increased knowledge and tools such as better communication, care planning and team effort. These were the topics identified by all committee members and seen as a good place to focus our educational plan. The committee discussed possible strategies to reach the most participants and agreed to have educational sessions presented in all three counties. The team also felt that there were many different disciplines involved in the care of individuals affected by dementia and that it was important to get the same messages out to all team members in each of the care settings.

The next step was to decide who were the experts on dementia care, and from my experience on Unit 5 Hillsborough Hospital I knew several key people. These include Dr. Gloria McInnis-Perry., R.N., Dr. Shabbir Amanullah, and Dr Tim Stulz. The team also thought it would be important to hear from a caregiver who is affected by dementia. In addition, the Alzheimer's Society was considered a necessary resource but its presence is not always apparent in the acute, community and continuing care health centers. The topics to be discussed at each of the education days were identified as:

What is dementia and how does it really affect an individual? By Dr Tim Stultz

How to really communicate with and care for the individuals affected by dementia?
By Dr Gloria McInnis Perry

When a loved one is affected by dementia, what do their families really need from health care providers?
By Family Caregiver

How can health care providers really assist individuals/families affected by dementia? By Alzheimer's Society Representative

What does the treatment plan for individuals affected by Dementia really include?
By Dr Shabbir Amanullah

Continued on page 9

The team also felt that it was important to provide not only the education but the incentive for caregivers to attend such a day. A discussion on ways to ensure participation from all team members within the service areas concluded that the session would be better if people did not have to pay and were provided with healthy nutrition breaks as well as having an opportunity to leave their place of work to ensure a more conducive learning environment. In order to do this, the committee would have to lobby for funding to the administration departments of the service areas represented. A proposal of the costs for this education day was sent out and presented to key stakeholders who agreed to fund the education days independently in each county. The service providers represented in Prince County agreed to fund the education day in Prince County as did Queens and Kings Areas.

From that point in April we each had one task- to ask the above resources if they would participate with the education days on three separate occasions. The committee thought that later in the fall would be the most appropriate time to have such education day and chose the month of November 2009. The next thing to do was to ensure that the most appropriate dates were set for each of the presenting individuals to be available to do three sessions. November 5th, 12th and 26th were decided upon once the presenters confirmed their willingness and availability to participate.

The rest of the story, as they say, is history as we booked the education days for the dates mentioned above at strategically located venues in each of the three counties. The interest from the care providers within the provincial department of health has been quite impressive and included overwhelming interest from the private health sector as well.

It is now mid November and we have had two of the education days with overwhelming success with approximately 160 people in attendance. We have 100+ participants registered for the final session on November 26th, 2009 in Summerside, Prince County, PEI. Feedback from the participants thus far has been good with many suggestions for further education on dealing with an individual who is affected by dementia.

Sincerely Submitted,

Karen MacLaren, R.N., B.Sc.N

LAKERIDGE HEALTH

REGISTERED NURSES (x3)
MENTAL HEALTH PROGRAM
REGULAR PART TIME
Days/Evenings/Nights; 8/12 hour shifts
ONA-090000887; ONA-090000888; ONA-090000889

DUTIES AND RESPONSIBILITIES:

To use nursing process in providing patient care in a primary nursing environment. To participate as a member of the Health Care Team and the Nursing Team. As an individual practitioner, to maintain competence and professionalism relevant to current practice. To maintain nursing records.

QUALIFICATIONS:

- Registration with the College of Nurses of Ontario (in good standing);
- current BCLS;
- demonstrated commitment to maintaining Reflective Practice Standards as outlined by the CNO;
- Canadian Mental Health Nursing Psychiatric Nursing Certificate is preferred;
- proven to have experience in an acute Mental Health setting;
- demonstrated excellent knowledge of, and experience in group theories and dynamics;
- proven experience with working with a multidisciplinary team;
- proven completion of Prevention and Management of Aggressive Behaviour Program;
- proven ability to recognize and diffuse escalating or violent patients;
- ability to conduct Mental Health Assessment with excellent interviewing and communication skills;
- demonstrated knowledge of Community Mental Health Resources;
- demonstrated understanding of and commitment to Lakeridge Health's comprehensive safety programs and practices including staff, patient and environmental safety and participation in regular in-service education in this area; and
- BScN Degree is an asset.

SALARY: $28.50 - $41.20 per hour

CONDITIONS OF EMPLOYMENT:

The terms and conditions of employment are in accordance with the Collective Agreement between the Hospital and the Ontario Nurses Association.

If you are qualified for the above position, please submit your resume to

Denise Ricketts,
Human Resources Department
Lakeridge Health Corporation
1 Hospital Court
Oshawa, ON L1G 2B9
Fax: (905) 721-4755
Email: dricketts@lakeridgehealth.on.ca

The Role of Non-Violent Crisis Intervention in an Undergraduate Nursing Curriculum

The Crisis Prevention Institute in Wisconsin has been offering non-violent crisis intervention for nearly 30 years. It provides best practices in behaviour management based on the founding philosophy of providing care, welfare, safety, and security for everyone involved in a crisis moment. It is recognized as the international standard for crisis prevention and intervention training.
I have been an instructor for Nonviolent Crisis Intervention since 1991 and a few years ago the nursing program at University of Prince Edward Island identified that the nursing students would benefit from receiving this training. I initially began with offering the program to fourth year students and the feedback from the students indicated that they felt it would be most beneficial to have it earlier in the nursing program. Last year,

I began offering the program to the third year students. The evaluations from the students repeatedly comment on improved confidence in identifying, assessing and intervening in a crisis. They have had to apply non-violent physical crisis intervention successfully to acting out persons. This instruction is a part of their mental health nursing component and is useful in all areas of nursing. The students are also introduced to related theory and skills essential to understand how to care for persons in crisis, along with caring for themselves.

The program offers instruction in crisis development model, verbal escalation continuum, non-violent physical techniques and in re-establishing therapeutic rapport following a crisis.

Respectfully submitted

Maria Ward, R.N., CPMHN(c)

Into the Light: Transforming Mental Health in Canada

The Mental health commission of Canada, Vancouver Coastal Health and Simon Fraser University presented Into the Light, a conference on mental health in Canada (November 29-December 1) at the Fairmont Hotel in Vancouver. The conference consisted of five themes, with a half day deicated to each theme. Each half day included three plenary speakers followed by a number of breakout sessions. The program included strustured opportunities for delegates to meet with speakers, to network with each other, and to interact with mental health comission members.

The five conference themes were:

1. Homelessness and Mental Health
2. Mental Health Strategy for Canada
3. Provincial Initatives in Mental Health Reform
4. mental Health and Addiction
5. Stigma and Discrimination

The conference focused on how to achieve the broad goals set out in the Mental Health framework document, *Toward Well-Being and Recovery,* and explored the best and promising practices throughout Canada.

The Commission is currently working on five key initiatives:
1. A mental health strategy
2. An anti-stigma initiative
3. Homelessness research demonstration projects
4. A knowledge exchange centre
5. The Partners for Mental Helath Program

Please access the Mental Health Commission of Canada website at"

https://www.mentalhealthcommission.ca for more information

Paula Tognazzini

Articles of interest submitted by Sherette Currie and colleagues in Nova Scotia:

NURSING THEORY AND CONCEPT DEVELOPMENT OR ANALYSIS

Doing practice differently: solution-focused nursing

Margaret McAllister BA MEd EdD RN RPN
Senior Lecturer, School of Nursing, Griffith University, Queensland, Australia

Submitted for publication 4 April 2002
Accepted for publication 29 November 2002
McALLISTER M. (2003) Journal of Advanced Nursing 41(6), 528–535

Doing practice differently: solution-focused nursing

Background: Critical thinking and reasoning take many forms; however, a problem-orientation remains the favoured approach in health care.
Purpose: This paper considers the effects of a problem-orientation and argues that a solution-orientation fits nursing's interests more closely and represents an exciting way forward in both education and practice.
Discussion: Whilst a problem-focus is criticized by some, it remains largely unchallenged as the guiding light for nursing practice. A major reason is that the problem focused approach has strong cultural roots. It is deeply embedded in our thinking, and has become taken-for-granted and not often recognized or debated. Whilst problem-solving has an important place in helping to diagnose disorder and overcome difficulties, nursing needs to move beyond its borders because the role also concerns problem-free issues such as health and well-being. Creativity, imagination and focusing on strengths not problems are also important cognitive processes.
Conclusion: A problem-orientated approach in nursing has had a constraining rather than enabling influence. By refocusing on a solution-focused approach, we could show how we are different from medicine, and how we aim to do nursing differently through using skills such as engagement, resilience-building, community development, primary health care and health education.
Keywords: critical thinking, education, nursing practice, problem-solving,

And .....

"Canadian families Caring for members with mental illness: A vicious cycle."
The link would be "Journal of Family Nursing,2005,11(2),140-161
DOI:10/1177/1074840705275464

CFMHN National Conference Highlights …. Halifax 2009

Greetings from Beautiful Nova Scotia. It is really hard to believe that our national conference has come and gone. What a fantastic time we had hosting this spectacular event. We are very proud of the results. It was a great opportunity to catch up with old friends and to make some new ones. Some as far away as Australia! We look forward to getting together again at the next National conference in 2011.

I must start by sending my deepest congratulations and thanks to the Nova Scotia Conference Planning Committee members. Jane Hughes (Chair), Charlene Day (also head of hospitality), Cathie Thibeault, Heather Gilfoy, Melanie Kelly and Ann Greene. And to the Social and Hospitality members: Christine Wood, Dorothy Jay, Sandra Beumer, Heidi Wolfe, Charlene Casey-Gomes, Kim Hiscock, Barb Flaherty and Helen Anderson-Sutton. Plus to Sandra Hennigar for taking on the role of coordinating all the volunteers who also helped to make this National conference run smoothly! And To my fellow Board members, past president Chris Davis and again Ann who participated and provided the group with support and encouragement throughout the four years of planning. Along with the superb skills of Doug Rosser and Sue Munroe of First Stage Inc, who kept everyone on track. It has been a true pleasure and an honour to get the chance to work with all of you.

This years theme as you know was, Hope, Health and Healing: Mental Heath Nursing Around the Corner and Around The World. I think the conference truly captured the heart of this theme. Our conference started on a great note (literally) we were ushered in by the beautiful sounds of bagpipes, played by a local piper. We then had the pleasure of listening to the keynote address given by the Honourable Michael Kirby, Chair of the Mental Health Commission of Canada. He spoke eloquently about mental health issues and about the creation of the Commission, and how it is time to bring Mental Health out of the shadows forever! I was struck by one comment that he made about how they were impressed by the speech that our past president Nancy Panagabko had given on behalf of the CFMHN, in which she emphasized the needs of our mental health system and the areas we felt needed and had to be changed. He said that they had listened and were making the needed changes, and had been quoting her many times! This impressed me how truly connected and powerful a voice we can have. We have been heard and we can make a difference! I felt inspired and this message did give me hope that things really can change. The remainder of day one was spent listening to many knowledgeable and passionate people who spoke on varying themes from how to work creatively to promote mental health to how to strengthen connections and form partnerships. Others spoke about social, political and cultural perspectives of mental health. The most difficult part of day one (and two) was choosing which session to attend. Fortunately , all participants have handed in their overheads, and they are now posted on the CFMHN website on the conference page. (please check them out they are great). Finally we ended day one after our round table discussions. Then it was off to Pier 21!



The Honourable Michal Kirby, Chair of the Mental Health Commission of Canada

Pier 21 was a great success! Many enjoyed touring the museum and seeing the exhibits. (Pier 21 after all is on it's way to becoming Canada's National immigration museum. It honours the stories of the 1.5 million immigrants, war brides, displaced people, evacuee children and Canadian Service Personnel.) Others relaxed and met up with old friends and made some new ones.

CFMHN National Conference Highlights .... Halifax 2009

Continued from page 14



Pier 21, Halifax Harbour

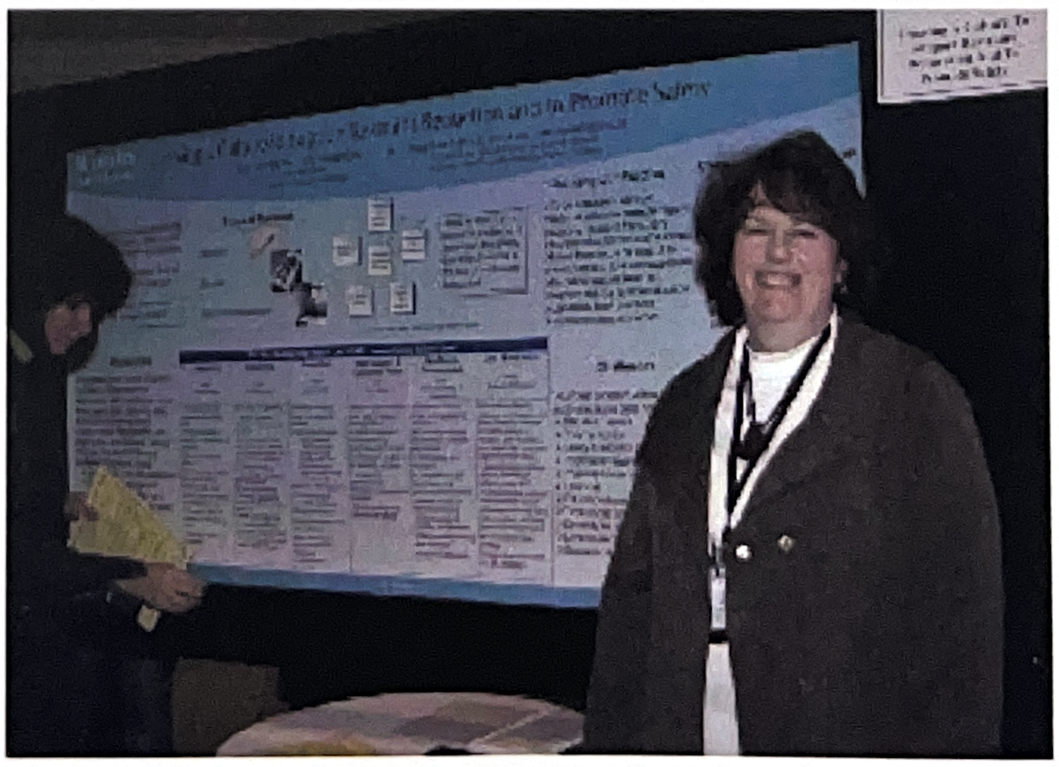
Then it was time for the Ceilidh (pronounced Kay-Lee). What a success that was. It was filled with great food and even greater music. I hope that everyone enjoyed our down east hospitality!



Enjoying the Ceilidh!

Day two started with our conference address from Dr Cheryl Forchuk,RN who spoke on Promoting Hope, Health and Healing through Partnerships and Alliances. She spoke about being mentored by Hildegard Peplau, and how it changed her life. She said that it is now our turn to be mentors to others. We must teach and inspire the next generation of nurses. After this keynote it was off to view the poster presentations.

How wonderful they were. Thank you to all for submitting them. The remainder of the day was spent with more fantastic presentations on more themes: Crafting Innovative Mental health Interventions and Programs, and Social, Cultural and Political Perspectives in Mental Health Practice.



Continued on page 16

CFMHN National Conference Highlights .... Halifax 2009

Continued from page 15

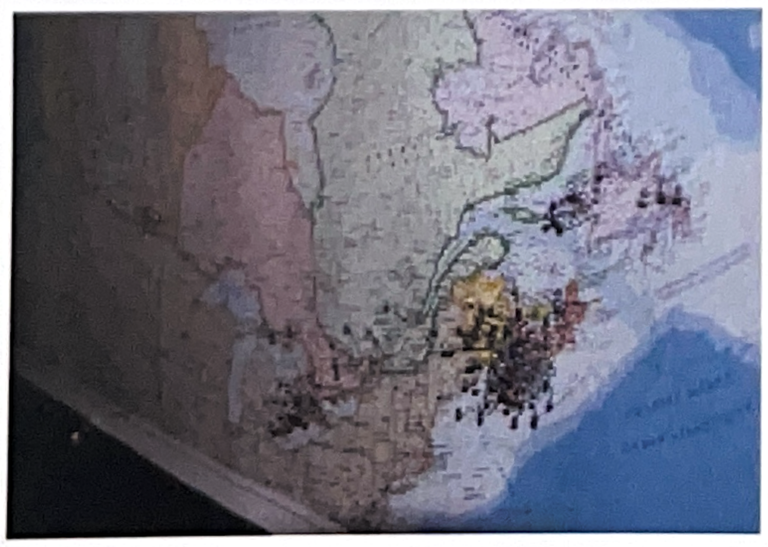
We also held our AGM. Thank you to all that attended. Finally it was off to the closing ceremonies. Cathie Thibeault gave a beautiful closing speech, and showed a very moving video that was created and inspired by the staff and patients of the East Coast Forensic Hospital that was entitled Share the struggle. (there is a link to the video on the news and information page of the website www.cfmhn.ca) There were many of us that needed Kleenex after this moving presentation.



On Friday many people chose to attend one of two optional workshops. The first was on Mindfulness as a path for healing and Health, offered by Mary Campbell who graciously stepped in at the last moment when Phil Barker and Poppy Buchanan - Barker had to cancel due to unfortunate circumstances. Thank You Kindly Mary! The second was on PTSD in a community setting and Frontline Mental Health Nursing: caring for Canadian Forces Members in Kandahar by Lieutenant commander Rose Collins RN and Lieutenant commander Dr Rakesh Jetly. We have heard great things about the workshops. Thank you so much to all.

Once again "Thank You" to everyone who participated to make this conference such a success. I am very proud of you all. It was a truly humbling and exhilarating conference. I am so motivated and hopeful about the future of mental Health Nursing and I am so proud to call myself a Mental Health Nurse!





Respectfully submitted,

Sherette Currie

Nova Scotia Provincial Representative, CFMHN.