

▶ AHEAD BY A CENTURY

THE SHAPE OF
THINGS TO COME

▶ CALL FOR ABSTRACTS

Submit by April 20, 2018

▶ MentalHealthForAll

CONFERENCE 2018

▶ FAIRMONT HOTEL, MONTRÉAL, QUÉBEC

October 22 – 24, 2018

conference.cmha.ca



Canadian Mental
Health Association
Mental health for all



years of
community

► INTRODUCTION

You are invited to submit abstracts for the Canadian Mental Health Association's third annual Mental Health for All Conference, October 22-24, 2018 in Montreal. This year's theme is Ahead by a century: the shape of things to come. We have reached a watershed moment: the community mental health movement in Canada, as embodied by CMHA, is a century old. We can look at how far we have come, but now is also the time to look ahead and innovate for the future.

In the early days of the last century, CMHA founder Dr. Clarence Hincks and his supporters were talking about reducing stigma and about more humane care for people suffering from mental illness. He was ahead of his time, but if we are to think our vision of mental health in Canada into being, we have further to go. Looking back will help us leap forward.

A century later, we're not done talking about reducing stigma and increasing access to quality care. But we can also say that so much has changed. Community mental health has transformed mental health in Canada. CMHA is proud to have played a vital leadership role in community mental health over the past century, pushing for an approach that centres on the lives of people with mental health problems, and not on the institutions and systems designed to help them.

Looking ahead means looking upstream: upstream to mental health promotion, to preventing mental illness. Our current system is based on responding to crisis, and to meeting the acute needs of people with severe mental illness. We know there is so much more that can be done, and done earlier. We have learned that access to high quality services that are timely, person-centered, and culturally responsive are key.

It's time to envision the future of mental health in Canada. To invest in a future where schools are places that foster resilience in our children, where campuses are places where risk factors for mental illness are reduced, where workplaces are psychologically safe spaces, and communities are diverse and thriving.

This year's conference builds on last year's whole-of-country focus and issues a call to action for all of us. We want schools, campuses, workplaces, people with lived experience of struggle and recovery, care providers and health care facilities, municipalities, and all communities to think outside the box toward a population-based mental health approach for the next century.

You will see in our Call for Abstracts that we encourage innovation and creativity throughout the conference, including in the very formats of your presentations. So, let's share, create and innovate. Together, let's catapult mental health into the next century.

► CONFERENCE STREAMS

Public Health's Role in Mental Health Promotion and Mental Illness Prevention

Taking a public health approach to mental health means that we need to invest, system wide, in the services and the social determinants of health that promote mental wellness throughout all the life stages, rather than taking a reactive approach that addresses mental illness only once it has become acute. It also means treating mental illness as seriously as physical illness, requiring the same organizational, administrative, and professional response typically found in medical care. This theme invites submissions that examine effective approaches to health promotion and the prevention and management of mental illness, paying special attention to the need for public health actors from different sectors to form a "specialist workforce," an intersectoral collaboration among different levels of government, other sectors (education, housing, etc.), political actors, community actors, citizens, and the health, mental health and social care sectors. Some examples

of topics that could be addressed in this stream include creating healthy public policies, establishing supportive environments, parity for mental health, strengthening community action, reinforcing personal skills, reorienting health services, developing tools for participation and empowerment, and strategies for intersectoral collaboration.

Embracing Diversity – Serving Diverse Populations

Inequalities based on race, income, gender, sexuality, disability, and citizenship overlap and intersect to produce barriers in housing, education, employment, health – the social determinants of health – which also impact mental health and access to mental health services. This stream explores how the mental health sector can better address the needs and leverage the strengths and opportunities of diverse groups, including LGBTQ2S, children and youth, communities of colour, women, seniors, persons with disabilities, and refugees and newcomers to ensure that our mental health services are inclusive,

diverse, respectful, culturally sensitive and responsive to a range of needs. Submissions are welcome that showcase the work of successful programs, best practices, and that point to gaps and opportunities for creating diverse and inclusive mental health services.

Working with Indigenous Peoples to Support Mental Health

Faced with a legacy of colonialism and systemic racism, many Indigenous peoples in Canada experience inequalities and discrimination in their access to the social determinants of health, and contend with loss and personal and intergenerational trauma, which produce significant health outcome disparities. While accessing mental health services is generally challenging, it is also particularly difficult for communities in more remote areas in the north and on reserve. This stream explores how the mental health sector can build respectful relationships based in reconciliation among indigenous and non-indigenous Canadians and support indigenous-led practices and community services to better promote the wellbeing and improve the health outcomes for Indigenous peoples. Some examples of topics that could be addressed include mental wellness/resilience practices and programs, barriers to accessing services, community engagement, pathways to reconciliation, trauma-informed practice, policy, partnerships, and innovations in Indigenous mental health, suicide prevention, and reforms in the justice system and housing policy.

Mentally Healthy Schools and Campuses

Childhood and young adulthood are critical stages for fostering healthy emotional development and for establishing a firm foundation for mental health and resilience. Schools and post-secondary institutions, in particular, are on the front lines in supporting young people as they navigate life transitions, and can help establish connections among parents, educators, health professionals, and community organizations to promote child and youth wellness. Some example of topics that could be addressed in this section include school-based programs and interventions, digital approaches to mental health services, early screening and intervention, strategies for working with marginalized youth, navigating the transition from high school to post-secondary education, suicide prevention, resiliency, and peer mentoring.

The Science of Mental Health Promotion and Mental Illness Prevention

Social determinants are only one aspect of mental health; genetics and brain structure and function are also critical determinants of mental health and well being. Because the onset of many mental illnesses occurs during childhood and young adulthood, early identification of the biological factors that

affect mental health increase the likelihood that young people will transition into adulthood with the supports and competencies to manage their well being. This stream invites submissions from researchers, physicians, and clinicians that explore the role of scientific research on the brain, genetics, and other aspects of physiological development in mental health promotion and population health for both youth and adults. Some examples of areas of scientific research that could be addressed include molecular science, neurobiological pathways and mental illness, genetics, novel therapies, early intervention in psychiatric disorders, the interrelation between social determinants of health and brain functioning, the impact of psychoactive drugs on the developing brain, and physical disease and mental health.

Substance Use Disorders and Mental Health

By the time the majority of Canadians access services for problematic substance use, more intensive and urgent forms of treatment are often needed. Addressing substance use early, or even before its onset, requires a coordinated effort from government, the private sector, and community services to ensure that people are supported in their communities with the necessities of life and access to health care and mental health services, which promote mental wellness. This stream explores how we can prevent and manage substance use disorders by promoting mental wellness and access to quality services. Some examples of topics that could be addressed include community and multisectoral partnerships, parity for addictions treatment and mental health services, access to treatment services, de-stigmatizing mental illness and substance use disorder, peer support services, harm reduction, engaging with marginalized groups, and access to affordable housing.

Mental Health in the Workplace

A healthy workplace is key to helping people achieve their potential and meaningfully contribute to their community. Workplaces are sites that can actively support a healthy culture and mental wellness, but they can also be places that foster psychological distress or perpetuate the stigma of mental illness. This stream explores the need, opportunities, and evidence for better pathways for promoting mental wellness in the workplace. Some example of topics that could be addressed include innovative approaches to supporting the mental health needs of employees, anti-stigma campaigns, mental health benefits and programs, partnerships with community mental health agencies, accommodating mental illness at work, and the role of unions in fostering wellness.

▶ INSTRUCTIONS FOR ABSTRACT SUBMISSION

[Online submission link](#) | Fax: 705-456-9786 | Email: conference@cmha.ca

All submissions will be evaluated using the following criteria:

- ▶ Relevance to the conference theme
- ▶ Clarity and coherence of the submission
- ▶ Relevance and utility to participants
- ▶ Demonstrate that the submission will encourage interaction among conference participants
- ▶ It is encouraged presenters should include a lived experience component or perspective where relevant.

The Presenter may submit multiple abstracts for the conference. One submission for each presentation. Your submission should be 150 words or less.

Format:

Conference sessions will be offered in a variety of formats:

Panel discussions (60-90 minutes)

Panels should include a minimum of two and a maximum of four presenters addressing a common issue or topic from different perspectives followed by an interactive discussion. Each panel must also provide a moderator.

Individual presentations (30-60-90 minutes)

Solution Lab - Each solution lab is an oral presentation. Your presentation should have a coherent structure and a clearly stated purpose. It should provide descriptive information, including necessary contextual detail, and report on research findings, evaluation results, lessons learned and best or promising practices

A Paper Presentation (20-minute presentation plus 10 minutes for questions) will address innovative programming, completed research that has been

demonstrated through evaluation to have an impact on clinical practice, system design or policy development related to collaborative mental health.

Storyboard – Opportunity to tell your story of a project or an experience that included a life-changing event that changed your attitudes, clinical approach, or interactions towards particular individuals.

Innovation stations

Innovation stations are posters. Material is mounted on a poster board. We will schedule a time for you to be available at your station to give attendees an overview of your project and answer questions. This year poster presentations will have a separate room and specific time slot so all delegates will have a chance to view posters. A poster presentation award will be granted at the end of the conference.

▶ ACCEPTANCE AS A PRESENTER:

Please note: **Presenters must be paid registrants of the conference. Honoraria and travel reimbursement are not available.**

- ▶ Presenters will be asked to submit an electronic version of their presentation prior to the conference.
- ▶ Electronic copies of the presentations will be made available to conference delegates following the conference.
- ▶ Presenters are responsible for providing written material to conference participants if applicable.
- ▶ Presenters will be provided with a designated time to present by the conference committee.

▶ DEADLINES

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| Call for abstracts opens: | February 7 th , 2018 |
| Abstract Submission Deadline: | April 20 th , 2018 |
| Results Notification: | May 4 th , 2018 |

