



**18th Canadian Collaborative  
Mental Health Care Conference (2017)**

*Connecting People in Need with Care*

June 2 and 3, 2017 | Delta City Centre, Ottawa, Ontario

*Designing, Developing, and Leading an Active Multidisciplinary  
Association for University Students in Mental Healthcare  
Eleanor McGroarty, M.A. & Erinn Brown, M.A.*

# PRESENTER DISCLOSURE

- **Presenters:** Eleanor McGroarty & Erinn Brown
- **Relationships with commercial interests:**
  - **Grants/Research Support:** N/A
  - **Speakers Bureau/Honoraria:** N/A
  - **Consulting Fees:** N/A
  - **Other:** N/A



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# LEARNING OBJECTIVES

- 1) Form and run an interdisciplinary mental healthcare association for university students;
- 2) Use key insights gained in the development of CMH to inform interdisciplinary conversations and collaboration among mental healthcare professionals and students;
- 3) Identify potential contributions of interdisciplinary groups, such as CMH, to universities and the community at large.



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LESSONS LEARNED FROM YEAR ONE OF  
THE MCGILL STUDENT ASSOCIATION FOR  
COLLABORATIVE MENTAL HEALTHCARE (CMH)

## WHY CMH?

- Silos
- Lack of communication
- Lack of interdisciplinary spaces



Need for collaboration

## DEVELOPING CMH

- The McGill Student Association for Collaborative Mental Healthcare
  - Founded summer 2016
  - Recruited across different departments and programs at McGill
  - 30 students from over 20 different undergraduate & graduate programs

# DEPARTMENTS REPRESENTED

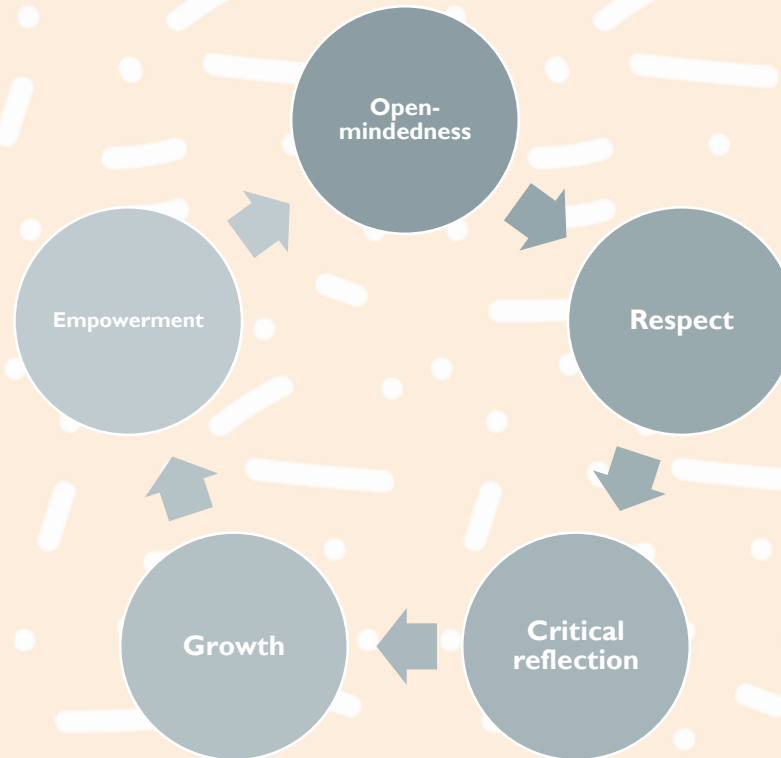
anthropology  
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social work  
occupational  
therapy  
school  
psychology  
family  
nursing

## ESTABLISHING CMH

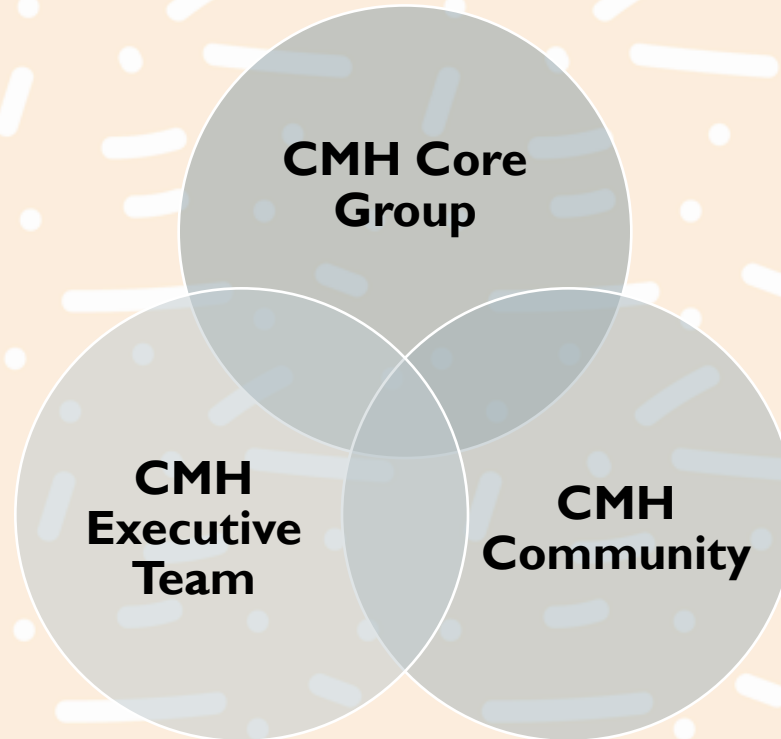
- Creating a “home” for CMH
- Core group cohesion
  - Facilitated team-building
- Developed CMH community
  - Networked across campus and larger Montreal community
  - Developed communication platforms



# CMH PHILOSOPHIES



# CMH STRUCTURE



## CMH CORE GROUP

- Peer-to-peer education
- Journal club
- Interdisciplinary case studies
- Guest talks & workshops:
  - Mental Health in University Settings
  - Healthcare Design
  - Drama Therapy
  - Suicide Crisis Intervention

# CMH CORE GROUP



# CMH CORE GROUP



## CORE MEMBER EXPERIENCES

- *"Being part of CMH this year has shown me that mental health is a relevant issue across numerous disciplines, and that adopting an integrated approach towards solving challenges related to mental illness is important and effective! I found it helpful and eye opening to learn about the methods used by students, across disciplines, to address the mental health issues they have encountered personally, or within their fields of study and work. Engaging in challenging and stimulating conversations about mental health was both fun and informative."*

## CORE MEMBER EXPERIENCES

- *"CMH has reinvigorated my optimism about the future of mental health care. To experience people coming together to share ideas, concerns, and anecdotes every two weeks during their night off, despite their already stressful schedules, gives me hope that people DO care and are working towards change and improvement. I love the idea that we are investing in a better future, even if it's just in a small way."*

# CMH COMMUNITY CONTRIBUTIONS

- SEDE Community Engagement Day
  - Interdisciplinary Case Study
- SSMU Mental Health Awareness Week
  - Who's Who in Mental Health - Interdisciplinary Panel
- CMH Speed Networking - Meet Mental Healthcare Grad & Med Students

- Policy recommendations for FRESQue Summit
- CMH Workshop Series:
  - Considering Sex and Porn in Mental Healthcare Settings
  - Cultural Considerations in Mental Healthcare
- Representatives at The McGill Association of Students in Healthcare





# CONFERENCE

MARCH 25, 2017

9:30 AM - 4 PM | THOMSON HOUSE  
3650 MCTAVISH, MCGILL UNIVERSITY

**A dynamic one-day conference featuring workshops, a panel discussion, networking opportunities, and keynote presentations on the topic of collaborative mental healthcare!**

**Facebook event:** <https://goo.gl/pvonAU>

**FREE registration:** <https://goo.gl/jy34gY>

*Everyone welcome! Free food!*

Proudly hosted by the McGill Student Association for Collaborative Mental Healthcare.

Thank you to our sponsors: the McGill Alumni Association, McGill POTUS, the Mary H. Brown Fund, EGSS, and PGSS.



## CONFERENCE AGENDA

9:00-9:30  
REGISTRATION  
FOYER - 2ND FLOOR

9:30-10:00  
OPENING REMARKS  
BALLROOM - 2ND FLOOR

10:00 - 11:00  
KEYNOTE ADDRESS I  
LYNNE MCVEY & NAJIA HACHIMI-IDRISSI  
BALLROOM - 2ND FLOOR

11:00-12:30  
WORKSHOPS

I - DR. NORMAN HOFFMAN  
BALLROOM - 2ND FLOOR

II - KEVIN BOIRE & MEGANN AYOTTE  
ROOM 404 - 3RD FLOOR

III - JANIQUE JOHNSON-LAFLEUR & ANNIE JAIMES  
ROOM 406 - 3RD FLOOR

12:30-1:15  
LUNCH (PROVIDED)  
BALLROOM - 2ND FLOOR

1:15-2:45  
PANEL DISCUSSION  
BALLROOM - 2ND FLOOR

2:45-3:30  
KEYNOTE ADDRESS II  
DR. SRIVIDYA IYER  
BALLROOM - 2ND FLOOR

3:30-4:00  
CLOSING REMARKS  
BALLROOM - 2ND FLOOR



INSIGHTS AND APPLICATIONS

## ISSUES & BARRIERS

- Departmentalization in educational institutions
- Lack of communication / cross-pollination
- Siloed knowledge bases
- Divide between researchers and clinicians/practitioners

- Inter-professional divisions
  - Mental healthcare professionals often work in single-occupation environments
  - External referrals
- Continued division between research and practice

# LESSONS LEARNED

*The benefits of  
collaboration*



*Gaining fresh  
perspectives*

- **Breaking down silos**
  - Establishing common language
  - Creating non-hierarchical, shared communication space
  - Identifying similarities and overlaps between disciplines
  - Establishing long-term interprofessional relationships
  - Gain additional perspectives and critically examine our own fields

## CORE MEMBER EXPERIENCES

- *"Being exposed to such a diverse group of immensely thoughtful and caring individuals has both inspired me and encouraged me to consider different viewpoints in thinking about mental illness. When evaluating a case study or a finding in a research paper, I no longer do so from the perspective of just a neuroscientist, but I have an understanding of what a nurse, occupational therapist, psychologist or anthropologist would think or do about the scenario. CMH has opened my eyes and ears to understanding mental healthcare."*

# LESSONS LEARNED

*Establishing a student  
group*



*Community, cohesion &  
purpose*

- Patience and persistence
- Fostering sense of belonging and safety
- Ongoing development of group norms
- Various platforms for communication, feedback, and resource sharing
- Impact of physical space
- Desire & need for leadership
- Streamlined methods for transparency

## CORE MEMBER EXPERIENCES

- *"CMH has given me the opportunity to meet a variety of professionals over non-judgmental and casual dialogue. Hierarchies of power have often been a source of anxiety for me during my undergrad, but the space made by the CMH members has felt very safe. CMH has helped changed my perspective on rigid boundaries between disciplines and enabled a comfortable professional and inter-disciplinary territory."*



## LESSONS LEARNED

*The benefits of  
collaboration*



*Reimagining mental  
healthcare service  
delivery*

- Interdisciplinary teams
- Model for mental healthcare service that incorporates:
  - Professionals from multiple disciplines
  - Interdisciplinary case management
  - In-house collaboration
  - Holistic person-centred care

## CHALLENGES TO BE ADDRESSED

- Administrative and organizational barriers to the development of collaborative care practices
- Optimization measures that discourage co-intervention and limit the possibility of collaboration
- Lack of consensus about case management models
- Failure to address language and cultural variation
- Challenges in interpreting and

(Blignault et al., 2008; Pontbriand, Nadeau, Rousseau & Johnson-Lafleur, 2015; Raney, 2015; Richards et al., 2006; Sunderji et al., 2015)

## CMH CONTRIBUTIONS

- Accessible and streamlined educational and informational sources for both “service users” and aspiring mental healthcare workers
- Community and political advocacy for more collaborative and holistic mental healthcare and healthcare research
- Platform for interdisciplinary relationships and sustainable professional networks

## NEXT STEPS FOR CMH

- Expand our community
- Further develop our networks
- Create more spaces for interdisciplinary dialogue
- Examine hierarchies and communication barriers
- Advocate for more collaborative and effective care

## LOOKING TOWARD THE FUTURE

- *"Being part of CMH has given me hope that the next generation of mental health practitioners will be a unified, interdisciplinary, and respectful cohort that will genuinely value working in teams."*



QUESTIONS & COMMENTS?

THANK YOU

## REFERENCES

- Blignault, I., Ponzio, V., Rong, Y., & Eisenbruch, M. (2008). A qualitative study of barriers to mental health services utilisation among migrants from mainland China in South-East Sydney. *International Journal of Social Psychiatry*, 54(2), 180-190
- Pontbriand, A., Nadeau, L., Rousseau, C., & Johnson-Lafleur, J. (2015, June). *Profiles of collaborative practices in youth mental health (ymh) team newly implemented in primary care*. Presented at the Canadian Collaborative Mental Healthcare Conference, Calgary, AB.
- Raney, Lori. (2015, June). *Why collaborative care matters*. Presented at the Canadian Collaborative Mental Healthcare Conference, Calgary, AB.
- Richards, D. A., Lankshear, A. J., Fletcher, J., Rogers, A., Barkham, M., Bower, P., ... & Lovell, K. (2006). Developing a UK protocol for collaborative care: A qualitative study. *General Hospital Psychiatry*, 28(4), 296-305.

