A LETTER TO MY YOUNGER COLLEAGUES

Over the years, I hope I’ve learned a few things to pass along!

Judith G Hall OC MD

It is a challenge to distill 70 years of experience, but I like challenges, so here are seven thoughts:

1. Listen. Listen carefully to parents, to children, to younger colleagues and to the questions of students. Listen because people often say a lot in between the words. Listen because the words don’t always mean what they say. Listen because you can’t learn when you are talking. Listen with all five senses so that you are immersed in the experience and can remember the essence afterwards.

2. Know what you know and what you do not know. As a medical student, I remember the Dean telling us that 80% of what we would be learning in medical school would be obsolete in 10 years. Somewhere, I heard that a great pundit once said, “it is the right formulation of the question that leads to new knowledge”. Thus, it is very important to be clear about which things are true and which are partial truths – and one must readjust and modify when new ideas and information come along.

3. Be present. Recognize the individuality and the uniqueness that presents itself to you everyday. As a geneticist, I have come to appreciate that every individual – genetically speaking – is totally unique (including monozygotic twins – thousands of different somatic mutations occur in each as they develop); thus, you can only draw generalizations from previous experiences, from your own experience and from what the textbooks tell you. The role of the creative paediatrician is to look for the best alternatives for each unique person, in a unique family, with a unique history, and always present several options for them to choose from.

4. It is easy to say that you should balance your life, but it is very difficult to do. The longer that one is around, the more you appreciate how important family is, friends are and children are. I often say to a family with a ‘special child’, “Take stock each year. You may have done a terrific job during the past year, but there are always things to consider, and to work on in the coming year’. These things may include their marriage, their normal child, the change of a teacher or a school. Each of us has the same questions: How is my life balancing out? Which things have I neglected? Which things have I enjoyed? Of which things can I be proud? What do I need to work on more in the coming year? Take time – on your birthday, at New Year’s or as the academic year begins in the autumn after Labour Day – to reflect on balance and on what has transpired in the past year so that you can readjust your priorities during the coming year.

5. We all have multiple mentors for different aspects of our lives. The art of medicine is similar to an apprenticeship in which you learn by observing, by trying out and by accumulating experiences. When we see that someone has done a great job in a certain dimension of their life, we naturally want to try to emulate it. However, everyone is human, and other parts of their life may need some ‘dusting off’. No one is perfect and everyone has parts of their life that shine. So, have many mentors for the different aspects of your unique self. And, of course, things change over time so it is necessary to keep readjusting priorities and mentors – ‘take stock at least once a year’.

6. In the olden days, sabbaticals were invented by very wise men (they probably were men because women had a different role in those days). Sabbaticals reflect the realities of life that approximately every seven years, things become routine or habit, and we get lazy – or maybe it is just that we become uninspired by what used to be exciting. Therefore, we need a way to find a new challenge, a new focus. In this ‘modern’ life, it is often difficult to take a sabbatical, to take time for reflection, to take time to develop new interests and to learn something new. Consequently, it is even more important for each of us to really ‘take stock’ every seven years. In other words, even if we can’t take a sabbatical, everyone and every couple can take a weekend or a week away for reflection and realignment.

7. Don’t put yourself onto any irrevocable paths if you can help it. Whether it is in an argument with your partner, by stopping your violin practice or by narrowing or limiting the focus of your practice, keep your options open. So much in life and medicine changes over time. So much in life changes with aging. So, although you may not be able to keep up with the details, just keep your options open and maintain a broad perspective. The lovely thing about aging is that you tend to see the ‘big picture’ as long as you keep your eyes open, have a sense of humour, and continue to be able to feel humility and awe.

Department of Pediatrics and Medical Genetics, University of British Columbia; Department of Pediatrics, BC Children’s Hospital, Vancouver, British Columbia

Correspondence: Dr Judith G Hall, Department of Medical Genetics, BC Children’s Hospital, 4500 Oak Street, Room C234, Vancouver, British Columbia V6H 3N1. Telephone 604-875-2850, e-mail jhall@cw.bc.ca

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BIographyAL NOTE: JUDITh G HALL
Dr Judith G Hall is a clinical geneticist and paediatrician. She trained in the United States at Wellesley College (Wellesley, Massachusetts), the University of Washington School of Medicine (Seattle, Washington) and Johns Hopkins Hospital (Baltimore, Maryland). She is presently Professor Emerita of Pediatrics and Medical Genetics at the University of British Columbia based at Children’s & Women’s Health Centre of British Columbia in Vancouver. She was Chair of Pediatrics at the University of British Columbia from 1990 to 2000. In paediatrics, she became involved in paediatric education, health care delivery for children, child advocacy issues, gender issues, international paediatric health and paediatric physician resource planning.

Her research interests are in the areas of human congenital anomalies, mechanisms of disease, the natural history of genetic disorders, arthrogryposis and monozygotic twins. She has described many new syndromes and the natural history of many disorders. She has published more than 300 original articles, 145 chapters and sections of conference proceedings, and seven books.

She has been Vice President of the Society for Pediatric Research, and President of the Western Society for Pediatric Research, the American Society of Human Genetics and the American Pediatric Society. She has been on the Boards of the Gairdner Foundation, the Medical Research Council of Canada, the International Federation of Human Genetics, both the American and Canadian Children’s Miracle Networks, the Vancouver Foundation, the International Pediatric Association, and Genome Canada. She has been one of the Science and Technology Advisors for the government of Canada, chaired the Science Advisory Board of Health Canada and is on the Science Advisory Board of the Council of Canadian Academies. She is a founding member of the Canadian Academy of Health Sciences and is responsible for its first assessment.

She has received many awards including a lifetime membership in the Canadian Paediatric Society and the Alan Ross Award from the Canadian Paediatric Society. She was made an Officer of the Order of Canada in 1998.

COMMeNTARY

Evergreen: A child and youth mental health framework for Canada

Stan Kutcher MD FRCP1, Alan McLuckie MSW2

Approximately 15% of Canadian youth are affected by mental disorders requiring treatment; however, only approximately 20% access specialty mental health care services (1). Nationally, child and youth mental health policies and plans are largely absent, and ones that are available do not meet benchmarks established by the WHO (2). In response, the Child and Youth Advisory Committee of the Mental Health Commission of Canada supported the development of a child and youth mental health framework for Canada, named the Evergreen Framework.

Evergreen is designed to act as a resource for provincial and territorial governments and institutions, and to assist them in the creation, implementation and review of mental health policies, plans, programs and services. Evergreen is not prescriptive. Rather, it provides an opportunity for policy makers, planners and providers to select among a variety of strategic directions depending on local conditions, local needs and fiscal realities.

Evergreen’s creation included several novel features: it may be the first national-level health framework created almost entirely using online technologies; it was co-written by national and international professionals working collaboratively with young people, parents and individuals with lived experience of mental health issues; and its creation was informed using qualitative research tools and methods. Online technologies were deemed effective and cost effective for national public consultations, committee communications and document creation.

Evergreen has six values underpinning specific strategic directions in the areas of promotion, prevention, intervention/ongoing care and research/evaluation. The document can be accessed online at www.teenmentalhealth.org/index.php/initiatives/evergreen or www.mentalhealthcommission.ca/English/Pages/ChildandYouth.aspx. A national distribution strategy is currently being created by the Mental Health Commission of Canada in collaboration with its Child and Youth Advisory Committee.

References

1Adolescent Mental Health Group, IWK Health Centre; 2Adolescent Mental Health Group, IWK-Maritime Psychiatry, Department of Psychiatry, Dalhousie University, Halifax, Nova Scotia
Correspondence: Mr Alan McLuckie, Adolescent Mental Health Group, IWK-Maritime Psychiatry, 5850 University Avenue, PO Box 9700, Halifax, Nova Scotia B3K 6R8. Telephone 902-470-6884, e-mail alan.mcluckie@iwk.nshealth.ca
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