our highest potential, to honor our values, and be true to the virtues we believe in. As professionals in the mental health field, we are entrusted to promote well-being in our patients and their families. We are also keenly aware of the impact that our own presence, demeanor, attitudes, and capacity for empathy has on each and every one of our leaders, co-workers, supervisees, mentors, and mentees.

A place to start is our mission statement. We are all too familiar with the mission and the vision of different organizations, committees, and other entities. But we seldom stop to think about our own mission and vision. What do we stand for? How do we picture the future we want to live in? Once we have that, the decisions about where to focus our energy and our efforts come much easier, because when we have a clear idea of what we want, we can orient our actions and habits towards those ideals instead of working for the sake of work. We begin to see the realization of that mission in our personal lives as well as in our professional lives.

Stephen Covey (2004) in Seven Habits of Highly Effective People speaks about “beginning with the end in mind.” Having a mission allows us to set goals to strive for. We are then more likely to engage with other people in ways that are creative and provide a sense of community and the social capital. Jutengren et al. (2020) refer to. On that journey, we begin to engage with the world around us in a purposeful and determined way that becomes fulfilling, that motivates us to give more of ourselves, that is inspiring to ourselves and to others.

Diversity and equity

In my personal experience, joining the Strengthening Inclusion, Diversity, and Equity (SIDE) committee at Bradley Hospital a year and a half ago has opened the doors to greater meaning and well-being in the workplace. I have had the pleasure to collaborate with a number of different colleagues, stepping out of my comfort zone and dedicating time to a cause greater than myself. As a result, I have embarked on a journey of self-discovery and the discovery of others, becoming a mentor, a mentee, a better teacher, a better learner, a better psychiatrist, and a better colleague.

We all live very busy lives, and it can be hard to see how we can fit one more thing in our hectic schedules. Important things and big things are hard to fit in the small space we usually leave when our lives are already full.

Covey (2004) uses the analogy of fitting your “big rocks” first. He gives an example of having to fit several big rocks in a container full of gravel. Try as you may, it is impossible to do. However, if you have the same container and you first place the big rocks and then pour in the gravel, even if not all the small pebbles fit, the big rocks will all be in and most of the small rocks will fit around them. The big rocks are the important things, those things that are crucial to our mission. The small rocks are those things that we busy ourselves with, some even urgent but non-important things that we are always chasing after and still leave us feeling tired and unaccomplished. To be able to fit the big rocks, we must first determine what is important, what is truly valuable, and what our higher purpose is; and then put those things first. Everything else will still be part of our lives and even if there are some things we end up neglecting, we probably won’t end up missing them because we have made a point of prioritizing the things that matter most.

Corporations, health care companies, and educational institutions have a responsibility towards their employees and the community at large. Looking out for their employees’ well-being benefits not only them but the institutions and the patients they serve. Employees also have a responsibility for themselves, their co-workers, the company they work for, and the patients they serve. When we take on that responsibility to work intentionally and with vision for the things we believe in, we become agents of change in our small environments, we expand our social connections, and we are more engaged. As a result, we experience greater job satisfaction and sense of well-being and meaning in our lives.

For further reading:
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• Sinsky C, Shanafelt T, Murphy ML, et al. Creating the Organizational Foundation for Joy in Medicine”: Organizational changes lead to physician satisfaction. AMA Ed Hub. https://edhub.ama-assn.org/steps-forward/module/2702510
• Covey S. Seven Habits for Highly Effective People. NY: Simon and Schuster, 2011.
• Hardy D. Living your Best Year Ever. Success Books, 2001.

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Substance use disorders

Drug use by young people did not go up or down during pandemic

By Alison Knopf

Alcohol use declined and use of nicotine and misuse of prescriptions increased among 10–14-year-olds during the pandemic, according to a study published last week. Overall, the rate of drug use among these young people remained stable during the pandemic based on repeated surveys of more than 7,800 people ages 10 to 14 conducted between Sep. 2019 and Aug. 2020.

The young people most likely to use substances were those who experienced pandemic-related severe stress, depression or anxiety, or whose families experienced material hardship during the pandemic, according to the study in the Journal of Adolescent Health. The study was funded by the National Institute on Drug Abuse (NIDA) and nine other institutes, centers, and offices that are part of the

Continued on next page...
Depression

Lurasidone found effective for children with bipolar depression

By Alison Knopf

Long-term treatment with lurasidone is generally safe and well-tolerated by adolescents with bipolar depression, according to a new study.

Childhood onset of bipolar disorder is associated with a more chronic and severe course, and up to two-thirds of individuals with it did have this early onset. Typically, long-term pharmacotherapy is required, but choosing which medications to prescribe requires crucial safety and tolerability considerations. There are significantly higher rates of obesity, dyslipidemia, insulin resistance, and metabolic syndrome in adolescents with bipolar disorder, which has been associated with a reduction in life expectancy of 10–15 years.

Lurasidone is approved for the treatment of schizophrenia and bipolar depression in adults. The antidepressant mechanism of action is not well-understood, the researchers write.

The safety, tolerability, and effectiveness of antipsychotic agents for the treatment of bipolar depression in youth has been studied, and a previously reported trial found that “lurasidone demonstrated significant efficacy in treating children and adolescents with an acute episode of bipolar depression and was found to be safe and generally well tolerated in a dose range of 20–80 mg/d,” the researchers noted.

Methods

The study was conducted to evaluate the long-term safety and effectiveness of lurasidone for bipolar depression in children and adolescents. Participants ages 10–17 who had completed 6 weeks of double-blind treatment with either lurasidone or placebo were enrolled in a 2-year, open-label study of lurasidone (20–80 mg/d).

The study was conducted from Nov. 2013 to Oct. 2018 at 62 centers in 11 countries (Bulgaria, Columbia, France, Hungary, Korea, Mexico, Philippines, Poland, Russia, Ukraine, and the United States).

The Brown University Child and Adolescent Behavior Letter October 2021