Dr. Dan goes to camp

It was 1956 when Dan Offord saw the Christie Lake Camp for the first time. It would not be the last.

Forty-five years later, the well-known child psychiatrist still spends most of his summers as director at the camp, which was founded near Perth, Ont., in 1922 to cater to poor and disadvantaged boys. Today, almost 400 boys and girls aged from 9 to 14 arrive every summer to learn outdoor skills and, along the way, to build their self-esteem.

“We see all the problems that go along with being economically disadvantaged,” says the man known as “Dr. Dan” to hundreds of campers. “They have a higher proportion of behavioural and emotional problems. They cover up their soft feelings, such as sadness and feeling homesick, with harder feelings, such as anger and antagonism.”

The camp activities complement his clinical work and research, he adds. “One has helped the other. What we know in child psychiatry, we apply at the camp. What I see clinically at the camp, I can apply to my research.”

Offord, head of the Division of Child Psychiatry at McMaster University, is founding director of the Canadian Centre for Studies of Children at Risk, which investigates children’s mental health issues and trains researchers.

The Queen’s University graduate, who was named to the Order of Canada last fall, also maintains a clinical practice in Hamilton. Before coming to McMaster in 1978, he held academic positions in Florida and Pennsylvania and at the University of Ottawa.

Offord was principal investigator in the 1983 Ontario Child Health Study, which determined that 20% of Ontario children showed signs of mental-health disorders. He was also coinvestigator in the 1987 follow-up study that examined the influence of early health determinants on adult health, life quality and social functioning.

Dr. Ellen Lipman, an associate professor of psychiatry at McMaster, says Offord is a role model and mentor to many. “He’s had a positive impact on a number of people who have become researchers in the area of children’s mental health. He’s very good at inspiring people to take on challenges.”

Although Offord has worked in many cities in Canada and the US, he faithfully returns to Christie Lake each summer. Much of his life centres around the camp. His children and wife Sondra spent their summers there, and after Sondra was killed in an accident, Offord credits the camp with helping him work through his grief. It also proved pivotal in helping him meet his second wife, Margaret. “Her daughter was one of our counselors,” he explains.

The camp seems to engender loyalty. “It’s terrific,” says Offord. “Often kids will get off the bus and say, ‘My Dad wants me to remember him to you.’ When they start saying, ‘My grandfather wants me to remember him to you,’ I’ll know it’s time to quit.”

Yet Offord says he can’t imagine retiring from the camp. “I feel vital up there. There’s a lot to be said for doing something above and beyond your regular work. There’s a tremendous payoff — for me personally, for my work, for my family.” — Janis Has, Ottawa

Real data filling developing world’s information void

Statistical models are finally being replaced with actual health and demographic data in 16 countries across Africa and Asia. This means that donors and nonindustrialized countries will have more accurate information for calculating the burden of disease and developing more effective health policies.

The data, drawn from continuous household monitoring of deaths, births and migrations at key field sites where data collection used to be sporadic, was published by Canada’s International Development Research Centre (IDRC). “The study will provide an important resource for scientists studying current survival patterns in Africa, especially in the face of a rising tide of HIV,” says Dr. Don de Savigny of the IDRC’s Tanzania Essential Health Interventions Project.

The study, Population Health in Developing Countries, is the first in a series produced by the international network INDEPTH (International Network for the Continuous Demographic Evaluation of Populations and their Health in Developing Countries). Established in 1998, INDEPTH formed a network among 17 field stations that provided continuous monitoring of health and demographic information. There are now 29 sites in 16 countries; donor groups include the Rockefeller Foundation, World Health Organization and IDRC.

Publication of the study is ideally timed, given the recent release of a report by the Commission on Macroeconomics and Health, headed by Harvard economist Jeffrey Sachs (see CMAJ 2002;166[3]:361). It called for an investment of US$66 billion a year by 2015 to improve the health, and ultimately the economies, of the world’s underdeveloped countries. The IDRC says data in the INDEPTH series can help plan the most effective and equitable use of such money.

“The need to establish reliable information to support health policies and programs has never been greater,” says Dr. Fred Binka, chair of the committee that conducted the study. — Barbara Sibbald, CMAJ