Thank You To...

- o Our exemplary speakers
- o Dr. Tim O'Shea (Symposium Faculty Advisor)
- o Dr. Rob Whyte (Assistant Dean, UGME, McMaster)
- o Cathy Oudshoorn (Program Manager, UGME, McMaster)
- Professor Emeritus Dr. Vic Neufeld
- o Dr. Andrea Hunter
- Patsy Lee and Zion Lee (Co-Presidents, McMaster Medicine & Health Society)
- Melanie Bechard (VP Government Affairs, Canadian Federation of Medical Students)
- o James Kent, Tracy Manes, Lea Matulovic
- Our classmates & colleagues: Andrew Bresnahan, Graham Chamberlain, Chris Charles, Raelene Foisy, Arlo Green, Gabrielle Inglis, Hussam Kaka, Kinshuk Kumar, Stephanie Kwolek, Sasha Langille-Rowe, Emily Milko, Justin Neves, Humaira Saeed, Ryan Quinn, Shohinee Sarma, Tommy Stuleanu, Molly Whalen-Browne, Paula Willis

Funding

- o McMaster Medical Student Council (MMSC)
- Michael G. DeGroote School of Medicine
- Government Affairs & Advocacy Committee, Canadian Federation of Medical Students





INAUGURAL MCMASTER MEDICINE

HEALTH ADVOCACY Symposium

Saturday, September 27, 2014

Welcome

We are delighted to welcome you to the inaugural McMaster Health Advocacy Symposium!

We are honoured to present this inspiring group of speakers, all accomplished and passionate health advocates in their own right. We are also thrilled to have a talented and diverse group of participating students and young professionals in healthcare, global health, public health, and the social and biological sciences. Please take this opportunity to meet each other, share ideas, and work toward future collaborations!

The primary aim of this symposium is to stimulate dialogue between those who will be working in health care, policy, and research and towards greater equity and health outcomes for all. We also hope to support medical students and residents in their development as 'health advocates', one of the core CanMEDS competencies for future physicians.

We hope today's symposium will be an opportunity to explore some of the skills needed for effective advocacy, ideas around why and how to advocate responsibly, various shapes and forms of health-related advocacy, and the myriad possible roles of health professionals (as care providers, administrators, researchers, policy makers, etc.) in working to enable and restore health.

Most of all, we hope that the challenges and successes of our outstanding panel of health advocates will inspire you to envision your future roles as health advocates, for individual patients and beyond at the community, institutional, societal, and global levels.

We look forward to meeting and speaking with you!

Erika Donald & Tea Rosic Co-Chairs, McMaster Health Advocacy Symposium McMaster University medical students (Class of 2016)

Hon. Dr. Carolyn Bennett

From Physician to Politician

11:35 am – 12:15 pm in HSC 1A6



Hon. Carolyn Bennett, MD, MP

A self-described "accidental tourist" in politics, The Hon. Dr. Carolyn Bennett helped lead the charge in the fight to save Women's College Hospital without really knowing that was 'politics'. Carolyn was first elected to the House of Commons in the 1997 general election representing St. Paul's (Ontario).

As a member of Paul Martin's cabinet, Carolyn served as the first ever Minister of State for Public Health. During her tenure

she established the Public Health Agency of Canada as well as the Public Health Network, which provides a framework for provinces and territories to work collaboratively with the federal government on matters related to the health of Canadians. She was also appointed Canada's first Chief Public Health Officer. While in opposition, Carolyn served as Health Critic and critic for Democratic Renewal. She is currently Liberal critic for Aboriginal Affairs and Chair of Liberal Women's Caucus. Prior to her election, Dr. Bennett was a family physician and President of the Medical Staff Association of Women's College Hospital. Dr. Bennett is author of Kill or Cure? How Canadians Can Remake their Health Care System, published in 2000.

Dr. Vic Neufeld

ROUNDTABLE MODERATOR

Roundtable Discussion: Health Advocacy (with all presenters) 2:35 – 3:15 pm in HSC 1A1



Vic Neufeld, MD, FRCPC

Dr. Vic Neufeld is a physician, educator, and international consultant based in Hamilton. Over a period of more than 25 years, he held various academic leadership positions at McMaster University, the last of which was Director, Centre for International Health. He is a Professor Emeritus in McMaster's Faculty of Health Sciences. Prof. Neufeld has served as consultant and advisor to many international agencies, organizations and institutions. Currently he is a Special Advisor to the Canadian Coalition for Global Health Research

[www.ccghr.ca; email: vrneufeld@gmail.com]. His interests include: 1) Capacity development for health system reform, with a special interest in strengthening national health research systems and leadership development; and 2) Promoting a stronger role for Canada in health research in low and middle-income countries.

Director of Housing and Innovation at the Wellesley Institute. He has been elected to the global board of the Habitat International Coalition, the national board of the Canadian Alliance to End Homelessness, and the board of Mary Lambert Swale Non-Profit Homes. He has done extensive research and policy work on housing, homelessness, health, equity, poverty, food security and human rights at the local, national and international levels.

Dr. Ritika Goel

WORKSHOP

Poverty & Health: Tools for Better Primary Care

11:35 am - 12:15 pm and 1:00 - 1:40 pm in HSC 1A4

Abstract:

Income is the most important determinant of our patients' health. Yet, as healthcare providers, we are rarely taught how to discuss this issue or intervene effectively. Through the creation of a Poverty Tool for Primary Care, we teach healthcare providers how to screen for poverty, adjust risk, and intervene by understanding the income security system to ensure our patients are accessing the benefits for which they are eligible. In this workshop, we will learn to use the Poverty Tool and explore ways in which health providers and students can be engaged in campaigns to address the root causes of the social determinants of health, including poverty.



Ritika Goel, MD, FCFP, MPH

Ritika Goel is a family physician and activist in Toronto. Her clinical work is based in Toronto's inner city with people experiencing homelessness with the Inner City Health Associates. She serves as the Lead Physician at the Inner City Family Health Team and is a volunteer physician at the Scarborough Community Volunteer Clinic for the Uninsured.

Ritika has been involved in activism in various social justice causes since medical school and believes this is a fundamental

way for healthcare providers to improve the health of our patients. This includes working on issues of poverty and homelessness, support for a publicly funded notfor-profit healthcare system, access to healthcare for the uninsured, and advocating for progressive immigration policies. She is or has been involved in organizations such as Health for All, Canadian Doctors for Medicare, Medical Reform Group, Students for Medicare, and is the current chair of the Ontario College of Family Physicians' Poverty and Health Committee. Ritika is a regular media contributor to Huffington Post Canada, Healthy Debate, her own blog, and on Twitter.

Schedule

9:00 – 9:40 am:	Registration & Coffee
9:40 – 10:00 am:	Welcome Address
10:00 – 10:40 am:	Dr. Philip Berger (Keynote Address #1)
10:40 – 11:20 am:	Dr. Anna Banerji (Keynote Address #2)
11:20 – 11:35 am:	Refreshment Break
11:35 – 12:15pm:	Workshop Session #1
12:15 – 1:00 pm:	Lunch Break
1:00 – 1:40 pm:	Workshop Session #2
1:40 – 2:20 pm:	Dr. Joshua Tepper (Keynote Address #3)
2:20 – 2:35 pm:	Refreshment Break
2:35 – 3:15 pm:	Roundtable Discussion moderated by Prof.
	Emeritus Dr. Vic Neufeld
3:15 – 3:30 pm:	Closing Address

Sponsors

- McMaster Medical Students' Council (MMSC)
- Michael G. DeGroote School of Medicine
- o Government Affairs & Advocacy Committee, CFMS

Program

Dr. Philip Berger

KEYNOTE ADDRESS #1

Advocacy in Health Care: Documents & Demonstrations 10:00 – 10:40 am in HSC 1A1

Abstract:

Advocacy is a topic in vogue at medical faculties across Canada. It is being incorporated into curricula and, in some cases, students are being evaluated using elements of the CanMEDS Health Advocate role. At the heart of any advocacy, whether with or on behalf of individual patients or intervening system wide, is the requirement to take action.

Opportunities for advocacy arise naturally from the doctor-patient interaction and can be discerned simply by taking a sweeping history. Health professionals must then gaze beyond the individual patient to identify the external conditions producing illness and impeding healthy living, be they economic, social, legal, or political. It is in the terrain of the external conditions that doctors can engage and act as advocates.

In the doctor-patient relationship, doctors as advocates should do all they can to promote patient self- determination and autonomy, an effort requiring a genuine forfeiture of power on the part of the clinician. In taking action, doctors can join with patients in political interventions that improve the health of both individual and other patients similarly affected by external circumstances. An example would be helping patients secure all social welfare benefits available to them.

Doctors should join with non-health related groups whose actions can benefit the health status of patients, for example anti-poverty organizations, coalitions for adequate housing, or environmental activists. In doing so, doctors must be diligent to avoid the trap of medical paternalism, that is speaking on behalf of others who can speak for themselves.

Advocacy sometimes involves holding institutions, such as the university, hospital and government, accountable to their mission and values statements. It frequently means confronting the raw power of the state both in legislative committee rooms and on the streets. And note - revolutions have never waited for randomized controlled clinical trials.

Julie has performed at medical schools, conferences, and theatres throughout North America and the UK, using participatory techniques with patients and professionals to formulate strategies for change and innovation in healthcare. As medical curriculum developer for the Gateways to Cancer Screening Project, she has transformed real patient stories into staff training. Julie holds a Master's in Critical Disability Studies from York University.



Linda Muraca, RN, BA, MN

Linda Muraca is a Nurse Clinician in the Marvelle Koffler Breast Centre at Mount Sinai Hospital in Toronto. She co-developed and delivers Taking Charge, a program for women after a diagnosis of breast cancer focusing on healthy lifestyle choices that may reduce the risk of recurrence and will improve overall health. Linda has been co-investigator and manager of several communitybased research grants.

Michael Shapcott

WORKSHOP

Health, Housing & Homelessness

11:35 am – 12:15 pm and 1:00 – 1:40 pm in HSC 1A3

Abstract:

A good home is one of the most important determinants of health – research proves it and common sense confirms it. Homelessness and housing insecurity are directly linked to poor health and premature death. What are the links between housing, homelessness and health? What are successful housing practices and policies that help promote good health?

This workshop starts with a review of the housing, health, and homelessness connections, and includes a survey of the national and sub-national housing policy environment. It concludes by looking at health-promoting housing policies and practices, and at the key components for a national (and sub-national) comprehensive housing plan.



Michael Shapcott

Michael Shapcott is recognized as one of Canada's leading community-based housing experts. For more than 30 years, he has been engaged in a variety of housing and homelessness initiatives, starting as a community organizer with homeless adults in downtown Toronto's east end in the 1980s. He has served as Coordinator of the Community University Research Partnerships Unit at the University of Toronto's Centre for Urban and Community Studies and as

Fran Odette, Julie Devaney & Linda Muraca WORKSHOP

Becoming a Strong Advocate for Patients with Disabilities and Chronic Illnesses

11:35 am – 12:15 pm and 1:00 – 1:40 pm in HSC 1A1

Abstract:

This interactive workshop will support students in collaborating with patients who have disabilities and chronic illnesses. The facilitators will provide composites of real patient stories for practice and discussion. Using traumainformed research, students will deepen their understanding of patient experiences and develop skills to improve communication in future clinical interactions.



Fran Odette, MSW

Fran Odette has been working in the violence against women movement for 20 years. Until 2012, she was Program Manager of the Women with Disabilities and Deaf Women's Programs at Springtide Resources.

Fran comes to this work from her own lived experience and is committed to advocating that people with disabilities lead lives of self-determination and agency. She works closely with

healthcare providers and managers to ensure that programming and service delivery for people with disabilities reflects a human rights perspective, working from a place of respect and dignity. Fran has coordinated projects on sexuality and disability and was recently lead coordinator on a national cancer-screening project for people with disabilities through the Institute on Research and Development on Inclusion and Society. She is a contributing author to Sexual Assault in Canada (2012), and coauthored The Ultimate Guide to Sex and Disability (2003). She is part-time faculty at Ryerson University and George Brown College.



Julie Devaney, MA

Julie Devaney is a patient-expert based in Toronto. She is the author and performer of the critically acclaimed show, educational workshop series, and book, My Leaky Body (2012), and co-editor of MESS: The Hospital Anthology (2014). Devaney was named a Women's Health Hero by Best Health Magazine in 2011 and has been profiled by CBC Radio's White Coat, Black Art and The Current, Chatelaine, and the Toronto Star. Her writing has appeared in The Globe and Mail, Toronto

Life, Huffington Post, and several anthologies and peer-reviewed journals.



Philip Berger, MD, O.Ont

Dr. Philip Berger is Medical Director of the Inner City Health Program at St. Michael's Hospital, Toronto and an Associate Professor in the Department of Family and Community Medicine at the University of Toronto. Dr. Berger was Chief of St. Michael's Department of Family and Community Medicine from 1997 to 2013.

Dr. Berger received his medical degree from the University of Manitoba in 1974. During his early years in practice, Dr. Berger was the physician for many refugees who had been tortured. In 1982, he was a founding member of the Canadian Centre for Victims of Torture.

Dr. Berger has been involved in the treatment of people with HIV/AIDS since the epidemic began. In December 2004, he began a 7½-month assignment as Team Leader of the Ontario Hospital Association's AIDS initiative (OHAfrica Project) at the Tšepong (Place of Hope) Clinic in Leribe, Lesotho. He was a member of the OHAfrica Board of Directors and also has been a member of the Ontario Advisory Committee on HIV/AIDS since 2004. He was appointed an Honourary Fellow of the Royal College of Physicians and Surgeons of Canada in 2006, to the Order of Ontario in 2010, and as Fellow in the Canadian Academy of Health Sciences in 2013.

Dr. Anna Banerji

KEYNOTE ADDRESS #2

In Search of Equity:

The tip of the iceberg for respiratory infections in the Inuit 10:40 – 11:20 am in HSC 1A1

Abstract:

Dr. Anna Banerji first travelled up to Baffin Island, a place that captivated her, in 1995. During her first visit, she noticed that Inuit infants often became very sick with lower respiratory tract infections (LRTI). Out of curiosity, she began to study this, resulting in a publication that documented the highest rates of LRTI in the world among Inuit infants in Canada. She found that many of their risk factors were based on poor determinants of health such as overcrowding, exposure to cigarette smoke, and decreased access to healthcare.

In 2002, an antibody against respiratory syncytial virus (RSV), the commonest virus resulting in LRTI hospital admissions, was licensed in Canada. Due to its

great expense, the antibody was restricted to infants considered at high risk for RSV, which did not include Inuit infants. Subsequently, Dr. Banerji published a paper demonstrating that prevention of LRTI due to RSV in rural Inuit infants was less costly than treatment. This led to changes to the Canadian Paediatric Society guidelines, allowing Inuit infants to become eligible for the antibody. However, despite growing evidence, this policy continues to be ignored.

It has become clear that there is a double standard in evidence, research, and implementation of policies for Indigenous and non-Indigenous populations; this example is only the tip of the iceberg. Dr. Banerji believes there is systematic neglect on multiple levels for Indigenous populations, and that the time for change has come. It is important to use a human rights framework to strive for equity in health, and it is the responsibility of Indigenous and non-Indigenous populations to work together towards this goal.



Anna Banerji, MD, MPH, FRCPC, DTM&H, O.Ont

Dr. Anna Banerji, the new Director of Global and Indigenous Health at Continuing Professional Development, Faculty of Medicine, University of Toronto, is a pediatric infectious, tropical disease specialist and global health specialist. She has trained in Toronto, Ottawa, Montreal, and Harvard University, where she completed her MPH in International Health. In 2007, she created the Immigrant Health & Infectious Disease Clinic for immigrant and refugee children. In 2009, she created the Canadian Refugee Health

Conference, which evolved with their American counterparts to become the North American Refugee Health Conference in 2012. Currently, she is creating the inaugural Indigenous Health Conference: Challenging Health Inequities.

She has been studying lower respiratory tract infections (LRTI) for the past 19 years. Her publications on LRTI among Inuit children have resulted in changes to the Canadian Paediatric Society guidelines for respiratory syncytial virus prevention. Dr. Banerji has travelled extensively around the world including work in Haiti after the earthquake. She uses a human rights framework for her work, research, and teaching, and is often an advocate for vulnerable populations. Dr. Banerji has won several awards, including the "promising graduate" for Harvard School of Public Health in 2003, the U of T Educational Excellence for Community Care Award in 2008, and the Canadian Public Health Association Certificate of Merit in 2010. In January 2012, she was inducted into the Order of Ontario.

Dr. Joshua Tepper

KEYNOTE ADDRESS #3

Leadership in Health

1:40 - 2:20 pm in HSC 1A1

Abstract:

Change and improvement in health care are not possible without skilled leaders, yet the competencies necessary for effective leadership and the context around the leader continue to evolve. With lessons from twitter, personal life experience, and the literature, we will explore topics such as 'leader as advocate', 'surviving as leader', 'leader as follower' and 'leading in today's health system'.



Joshua Tepper, MD, FCFP, MPH, MBA

Dr. Tepper is a family physician and the President and Chief Executive Officer of Health Quality Ontario (HQO). An arm's length agency of the provincial government, HQO works in partnership with Ontario's health care system to support a better experience of care, better health outcomes for Ontarians, and better value for money.

Prior to HQO, Dr. Tepper was the inaugural Vice President of Education at Sunnybrook Health Sciences Centre, responsible for educational strategy and programming for learners,

physicians and staff, patients and their families, and the community. Previously, Dr. Tepper served as the first Assistant Deputy Minister (ADM) in the Health Human Resources Division of the Ministry of Health and Long-Term Care, leading the HealthForceOntario health human resources strategy to ensure that Ontarians have access to the right number and mix of qualified health care providers, now and in the future. He was also a senior medical officer for Health Canada, an adjunct scientist at the Institute for Clinical Evaluative Sciences (ICES), and a research consultant for the Canadian Institute of Health Information (CIHI), receiving several provincial and national for his leadership.

Dr. Tepper has remained in active practice serving marginalized populations and taking on clinical leadership roles. He has served as the Medical Director for the Inner City Health Associates and President of the Inner City Family Health Team. He was also previously the Vice-President of the Society of Rural PhysiciansDr. Tepper holds a degree in Public Policy from Duke University, a Masters of Public Health from Harvard, and recently completed his executive MBA at the Richard Ivey School of Business.