



















TABLE OF CONTENTS

ON THE COVER:

Cardiovascular Health Initiative, Cardiology), Sheena Fortuna (Registered Nurse, Wound Care Clinic), Christine Monague (Administrative Assistant, Centre for Wise Practices in Indigenous Health)

Second row: Dr. Rulan Parekh (Vice President, Academics),
Ruby Dhatt (co-chair, neWCHapter Young Professionals Committee),
Sabina Vohra-Miller (Donor)

Top row, L-R: Miriam Fong (Registered Kinesiologist, Women's

Third row: Dr. Aisha Lofters (Scientist, Women's College Hospital Research Institute, Family Physician, Chair in Implementation Science, Peter Gilgan Centre for Women's Cancers), Dr. Yonah Krakowsky (Urologist and Sexual Medicine Specialist, Department of Surgery)

Leadership message: We Are Leading the Healthcare Revolution	3
WE ARE BUILDING EQUITABLE ACCESS Building Toward a Future of Reconciliation	
WE ARE EVOLVING HEALTH SYSTEMS Creating Partnerships for a Health System That Works for You	
WE ARE PROVIDING EXCEPTIONAL CARE Transforming Care for Survivors of Childhood Trauma	15
WE ARE INNOVATION AND RESEARCH Another World-First: Launching the Women's Age Lab	
WE ARE EXTRAORDINARY PEOPLE More Diversity, Better Care	



SCAN THIS QR CODE

To learn more about Women's College Hospital's response to the COVID-19 pandemic



Women's College Hospital | Women's College Hospital Foundation 76 Grenville Street | Toronto, Ontario | M5S 1B2 | 416.323.6400



wchf.ca

LEADERSHIP MESSAGE

For over 100 years, Women's College Hospital has faced adversity head on. Driven by passion and unwavering commitment, not only does Women's persevere, but we emerge stronger than ever.

Our recovery from the COVID-19 pandemic is no different.

The pandemic shone a light on what we have long known: there are inequalities in our healthcare system and significant barriers for many. This makes the work we do at Women's even more critical as we harness all we have learned from the past two years and accelerate momentum towards a more equitable and healthier world.

In the pages of this magazine, we highlight how our recent successes build on our strategic priorities and ensure we are well poised to build back better. Our commitment to virtual care nearly a decade ago has become essential in bridging gaps and creating a seamless patient journey. Partnerships with our donors and across the healthcare system are helping to reach deep into communities and connect with those who may be challenged in accessing care. Our drive to innovate is reimagining decades old practices and making an impact across the entire healthcare system and the people we care for.

People are the heart, soul and engine behind Women's and are what set us apart. We are fortunate to have staff, physicians, researchers, donors, learners and volunteers who consistently push themselves to new heights of excellence in the quest for the exceptional care. Our collective response to the pandemic was nothing short of remarkable and we invite you to read about our hospital's achievements in our recently published report, *Remarkable: the response to the COVID-19 pandemic.*

As we look ahead, we are prepared for what the future may hold and we know our community of donors, patients, allies and advocates share our vision and are right here beside us, supporting all that we do. We are ready to continue our leadership role and make healthcare better for our patients, our community, our province and our country.

We are innovation. We are exceptional care. We are equity. We are Women's.



Heather McPherson
President & CEO
Women's College Hospital



Jennifer Bernard
President & CEO
Women's College Hospital Foundation



JoAnne Doyle

Board Chair

Women's College Hospital



Debbie SimpsonBoard Chair
Women's College Hospital Foundation

2 I WE ARE WOMEN'S 2021 WE ARE WOMEN'S 2021 I 3

BUILDING TOWARD A FUTURE OF The Centre for Wise Practices In Indigenous Health Team. The Centre for Wise Practices In Indigenous Health Team. from L-R: Christine Monague, Tammy MacLean, Entily Simmonds, Selena Mills, Nadia McLaren, Dr. Lisa Richardson

his past year has seen the Centre for Wise Practices in Indigenous Health at Women's College Hospital steadily building – building partnerships with Indigenous communities and organizations across the province, building capacity and a multi-disciplinary team and even building a new dedicated space for healing, education and ceremony. In short, they have been building toward a future of reconciliation in healthcare.

First Nations, Métis and Inuit communities face some of the greatest ongoing inequities in healthcare. A large part of this is due to a long history of deeply rooted systemic racism that continues to this day. Guided by four strategic priorities – culturally inclusive policy and system transformation; anti-racism and cultural safety training and education; governance and leadership transformation; and Indigenous client care and outcomes – the Centre aims to change this.

Ensuring Indigenous peoples have an equitable healthcare experience can often be reflected in the physical space – from including Indigenous art to providing a place to smudge. In November 2020, the Centre partnered with the Temerty Faculty of

Medicine at the University of Toronto to open the Gathering Place at Women's College Hospital. The space provides a dedicated area for Indigenous learners, staff, faculty, community members and partners from across organizations to safely access traditional medicines, exercise Indigenous ceremonial practice rights and to engage with Elders, Knowledge Keepers, Traditional Practitioners and Educators.

Providing a space designed to care for the mind, body and spirit is a big signal to the community that they are being considered and that their traditions, values and practices are seen to be equally important.

The Gathering Place also serves as a dedicated space for the Centre's growing team. New team members include a Manager of Indigenous Education, a Senior Administrator and Knowledge Carrier, a Research Manager co-leading a National Digital Health Evaluation project, a Project Manager and Indigenous Communications Specialist, a Knowledge Keeper and Healer, and a post-doctoral fellow leading an environmental scan of the Indigenous anti-racism impact at Women's. Through this multi-disciplinary team, the Centre was able to launch its first Indigenous Summer Mentorship Program (gr. 9-10)

partnership with Office of Health Professions
Student Affairs and the Office of Indigenous Health
(both U of T). The Centre is now poised to continue
building upon the strong partnerships already
established within the community, engaging with
Indigenous leaders and broadening its scope in
new and existing areas of focus, from Indigenous
environmental health to influencing policy and
practice in healthcare and research with the ongoing
support from donors including RBC Foundation,
Holdbest Foundation, the Slaight Family Foundation,
the Barry and Laurie Green Family Charitable Trust
and the Karen Green Charitable Trust.

Beyond the walls of the hospital, the Centre is also developing a first of its kind virtual resource hub that hosts trauma-informed, culturally sensitive health information and tools for Indigenous communities from trusted Indigenous sources. With the support of a \$200,000 donation from the TELUS Friendly Future Foundation to Women's College Hospital Foundation, the virtual hub will directly support healthcare practitioners, hospital staff, learners, students, patients, partners and as many as 10,000 community members through direct partnerships and at least 50,000 indirectly.

The virtual space will also promote healing through joyful art, literature infused practices and knowledge sharing. The hub will serve as a beacon for Indigenous learners, practitioners and community members as well as a valuable resource that is crucial to reconciliatory transformation within our health system for all current and future healthcare providers.



Art by Lisa Boivin installed at Women's College Hospital and included in the new virtual gallery

These are just a few of the many innovative ways that the Centre for Wise Practices in Indigenous Health is guiding the implementation of strategic approaches to reconciliation in healthcare and education both at Women's College Hospital and beyond.

EQUITABLE CANCER CARE FOR BLACK WOMEN IN CANADA

New resource hub makes breast cancer information accessible for Black women in Canada

OVID-19 has lifted the veil on existing inequities within our society, particularly for Black women affected by breast cancer. The Peter Gilgan Centre for Women's Cancers at Women's College Hospital, in partnership with the Canadian Cancer Society, is working to change this by applying an equity-oriented approach to cancer prevention and care that can be spread and scaled across Canada.

"The Centre's motto is giving *every woman* every chance to access the highest standard of cancer care no matter where she lives in Canada. To bring these words to life, we must apply an equity lens to everything we do," says Elaine Goulbourne, administrative director at The Centre. "This includes ensuring that women who are marginalized — whether due to race, income or other factors — are able to access cancer screening and high-quality cancer care. As we continue moving The Centre's mission forward, equity will always remain a central priority."

Leveraging an equity, diversity and inclusion lens is critical in removing systemic barriers for marginalized groups within our healthcare system and society at large. While Black Canadians make up the third largest minority group in our country, little attention is given to Black women and breast cancer in the Canadian context.

Historically, Black women are less likely to undergo genetic testing when there is a family history of breast cancer and are less likely to undergo breast reconstruction surgery after mastectomy. This population is largely missing from educational supports for breast cancer screening, prevention and treatment, and most supports and initiatives are not tailored to address the unique experiences that Black women face along their cancer journey.

To address the needs of this specific group, the team recently launched an online resource hub with Black women, for Black women. Led by Dr. Aisha Lofters,

We hope this hub can empower Black women across the country.



SCAN THIS QR CODE

to access Every Breast Counts - a resource hub for Black women in Canada who want to learn more about breast cancer.

chair of implementation science at The Centre, this project has the potential to bridge the knowledge and awareness gap around options for breast cancer screening, diagnosis, treatment and survivorship, while highlighting important areas for further research and action in the Canadian context. The team is working with four co-creators and The Olive Branch of Hope to ensure that the final product is guided by those with lived experience. By creating a one-stop-shop for accurate, evidence-based

"THE CENTRE'S MOTTO IS GIVING EVERY WOMAN EVERY CHANCE TO ACCESS THE HIGHEST STANDARD OF CANCER CARE NO MATTER WHERE SHE LIVES IN CANADA. TO BRING THESE WORDS TO LIFE, WE MUST APPLY AN EQUITY LENS TO EVERYTHING WE DO."

Elaine Goulbourne

Administrative director, Peter Gilgan Centre for Women's Cancers at Women's College Hospital in partnership with the Canadian Cancer Society

a resource specific to Black women who have too often been left out of previous breast cancer initiatives in Canada. We hope this hub can empower Black women across the country."

This hub is made possible by funding from CanIMPACT, and from our donors – including monthly, legacy and individual giving – which gives the hospital the foundation it needs.

and community-relevant cancer information, The Centre will reach a diverse community of historically overlooked and underserved Black patients affected by breast cancer.

"We are launching this hub because we recognize how extremely important it is for women to feel seen when going through the breast cancer journey," says Dr. Lofters. "We wanted to create

CREATING PARTNERSHIPS FOR A HEALTH SYSTEM THAT WORKS FOR YOU

or decades, the healthcare system has been pushed to its limits. Exacerbated by the pandemic, this system-wide strain often impacts those already facing barriers to care. If we are to ensure that no patient gets left behind, we must build back a better healthcare system that meets the needs of all.

Creating a better system requires a team approach. Teamwork is the premise behind the creation of the Mid-West Toronto Ontario Health (MWT-OHT) team. Launched in November 2020, this new model brings Women's College Hospital together with four other downtown hospitals and over 40 community organizations to better connect patients and providers in their community and create a more seamless healthcare experience. The MWT-OHT was instrumental in the COVID-19 response for the downtown Toronto's west-end for both testing as well as vaccinations. This partnership will continue well beyond the pandemic as a community-oriented healthcare approach becomes more embedded into the everyday work and makes healthcare more accessible.

Creating an equitable health system includes serving communities that are hard to reach. Women's is working with partners and donors to combat these systemic issues, leveraging expertise and scaling up programs typically only accessible in urban cores, to

support Ontarians at large. Programs based out of Women's, like META:PHI and TAPMI, are designed to do just that.

From Timmins to Sarnia, the META:PHI program (Mentoring, Education, and Clinical Tools for Addiction: Partners in Health Integration) is helping individuals who struggle with their substance use. The network supports clinicians across Ontario in delivering high-quality care to patients with substance use disorders across a variety of care settings. In order to improve the current healthcare system, it facilitates the creation of integrated care pathways for addiction between emergency departments, withdrawal management services, rapid access addiction medicine (RAAM) clinics and primary care.

"Individuals seeking help for their substance use may have many touchpoints in the healthcare system. By educating clinicians across multiple care settings on how to best support and then direct patients on to the appropriate next step, META:PHI builds system capacity," shared Kate Hardy, network director of META:PHI. "Having a province-wide program ensures that we're maximizing this model of care for all Ontarians."

Accessing care for other chronic conditions, like pain, has also been traditionally difficult to do. It is estimated that 1 in 5 Canadians experience chronic pain and there is an opportunity to improve the coordination of patient care.

The treatment and management of pain is complex, requiring a wide range of programs and services to help those in pain function. TAPMI (Toronto Academic Pain Medicine Institute), based at Women's, is made up of five major pain centres in Toronto who are working together to share care, so that patients have access to an interdisciplinary team of chiropractors, doctors, nurses, occupational therapists, pharmacists, physiotherapists, psychologists and social workers.

"Having a province-wide program ensures that we're maximizing this model of care for all Ontarians."

Kate Hardy

Network director of META:PHI

"By centralizing care and triaging patient referrals to the most appropriate pain programs and services, we can best meet a patient's care needs," says Dr. Tania Di Renna, medical director of TAPMI. "Time is of the essence for those managing chronic pain, so system solutions like TAPMI ensure timely access to care and support primary care providers with the ongoing care of these patients."

Both of the programs facilitate coordination of care for an individual and overcome some of the traditional silos that exist between healthcare organizations.

Programs like these drive health system change. Supporting the greatest number of patients in the most efficient model possible frees up system capacity and supports individuals in Ontario towards a better future.

This momentum is fueled by support from across the province. Thanks to the LCBO and its province-wide equity campaign, over \$4.9M was raised to support the hospital's regional and provincial priority needs, including programs like RAAM and META:PHI.

8 I WE ARE WOMEN'S 2021 WE ARE WOMEN'S 2021 I 9

PUTTING VIRTUAL CARE TO THE TEST

Launching Canada's first digital health evaluation network

n Canada, COVID-19 opened the floodgates for virtual care. The reception has been generally positive and today most patients and providers agree that the future of healthcare should include some degree of virtual care.

"Virtual care represents a new approach for healthcare and has the potential to reduce wait times, lower health system costs and improve the care experience," explained Dr. Onil Bhattacharyya, family physician and scientific director of the Centre for Digital Health Evaluation (CDHE) at Women's College Hospital.

"While there have been benefits beyond social distancing, there is limited evidence on the impact of virtual care in areas like quality and equity. The only way to realize the promise of virtual care is to undertake comprehensive, clinically relevant

evaluations. However, there is no common digital health evaluation strategy across Canada," Bhattacharyya added.

Recognizing this gap, the Canadian Network for Digital Health Evaluation (CNDHE) was launched in March 2021. The CNDHE is supported with Health Canada funding as well as the generous support of numerous long-standing Women's College Hospital Foundation donors like Louise Fast, who made a \$1M gift to accelerate virtual care at Women's College Hospital.

The CNDHE is led by the Centre for Digital Health Evaluation (CDHE) located at Women's College Hospital, in collaboration with leading pan-Canadian Health Organizations – CADTH, Canada Health Infoway and Canadian Institute for Health Information (CIHI) – as well as the Centre for Wise Practices in Indigenous Health at Women's College Hospital.

Evaluations, led by multi-disciplinary teams of researchers, clinicians, engineers and others, study and test digital health technologies and virtual

models of care. During this process, teams can pivot and adjust the technology or the model of care to achieve better outcomes. Over the next two years, the CNDHE will develop a strategy for digital health evaluation across Canada and build the infrastructure necessary to evaluate the substantial federal and provincial investments made in digital health during COVID-19.

Developing a pan-Canadian digital evaluation framework is an ambitious and timely step forward. "Women's College Hospital has established a leading role in the development of resilient digital health systems and the CNDHE has become a collaborative network for driving this change," said Dr. Ibukun Abejirinde a scientist with the Centre for Digital Health Evaluation. "We anticipate that the evaluation framework and the overall strategy will be a living tool that can be adapted and tested in different Canadian contexts."

"We have already made significant headway following the launch of the Network," said Ena Ujic, manager for the Centre for Digital Health Evaluation. "Fifteen provincial and territorial leads have been selected and we are currently recruiting other members from a variety of stakeholder groups, including policy experts, Indigenous organizations, patient networks and academics."

A framework is under development, which will act as a guide for research teams across the country as they implement their own digital health evaluations. The CDHE has also undertaken two pan-Canadian evaluations, assessing both billing codes and virtual primary care. Additionally, the CNDHE plans to develop a toolkit, provide training sessions and produce academic publications.

"A key area of focus is to create capacity within local teams so that they can conduct evaluations that

leverage the standardized evaluation framework the CNDHE develops, while also tailoring it to meet their specific local needs. A collaborative approach will allow Network members to identify opportunities for evaluation and enable shared learning across provincial and territorial lines," Dr. Bhattacharyya said. We have an opportunity to modernize and enhance healthcare across Canada through the use of virtual care. The CNDHE is providing the foundation and setting the strategy for digital health evaluations across the country to improve access, patient experience and equity for all patients.

"Virtual care represents a new approach for healthcare and has the potential to reduce wait times, lower health system costs and improve the care experience."

Dr. Onil Bhattacharyya

Family physician and scientific director of the Centre for Digital Health Evaluation at Women's College Hospital



TRANSFORMING CARE FOR SURVIVORS OF CHILDHOOD TRAUMA

"The Trauma Therapy Program has given me my life back. It's allowed me to live my life authentically and take care of myself. And it's let me know that I'm not alone."

CharlynGrateful Trauma Therapy Program patient



harlyn seemed to have the perfect life: a beautiful home, a marriage and three healthy children. But behind the scenes, she was struggling with addiction issues and mental health concerns.

She just didn't know why. "I was a mess, but I just thought that was my life," says Charlyn.

Two years ago, Charlyn decided it was time to seek help at an addiction treatment facility. She was shocked to learn that her challenges as an adult were a direct consequence of her history of childhood trauma – experiences that had led to the development of post-traumatic stress disorder (PTSD), which was impacting her ability to process her feelings and navigate day-to-day situations.

"I didn't know anything about PTSD, but I realized it made sense," she says now. "My parents abandoned me as a child, and I regularly experienced abuse at the hands of people who were supposed to be caring for me." Charlyn was referred to Women's College Hospital's Trauma Therapy Program (TTP) – one of the only therapy programs

in Canada specifically designed for survivors of childhood trauma – and her whole world changed.

Addressing a major gap in care for survivors of childhood trauma

The Trauma Therapy Program was developed by Women's College Hospital in 2005 in response to a lack of trauma-informed therapy programs across the healthcare system.

"Although studies show that nearly two-thirds of Canadians experienced some form of abuse in childhood, there was – and continues to be – an enormous gap in mental health services specifically designed for people living with childhood trauma," says Dr. Dana Ross, a psychiatrist in the Trauma Therapy Program at Women's College Hospital.

Trauma has wide-ranging impacts, affecting everything from how our brains process information to how we engage with people around us to how comfortable – or not – we feel in our own skin.

"It's crucial that people who have experienced childhood abuse – who are overwhelmingly women and people from marginalized communities – are able to receive care from health providers who understand the effects of trauma and are trained to accommodate the unique and often intersecting vulnerabilities they face," says Dr. Ross.

The Trauma Therapy Program offers group psychotherapy that recognizes the unique social and cultural experiences of women and marginalized communities. At the start of the COVID-19 pandemic, the program pivoted to an online format to ensure patients could continue to receive uninterrupted care. As the organization continues to roll out its world-leading Women's Virtual strategy, the virtual care model and new innovative digital tools will be deployed to help break down barriers to health services.

A gift for the future of trauma-informed care

In early 2021, the Trauma Therapy Program received

a major boost when The Slaight Family Foundation announced a transformational \$1 million gift in support of the program. Women's was among 19 Canadian organizations offering innovative mental health services that collectively received \$30 million from the Slaight Family Foundation.

The Slaight family's extraordinary gift will directly support the Trauma Therapy Program's implementation of community-based trauma therapy groups – both in-person and virtually – in six sites throughout Ontario. It will also enable the growth of trauma-informed mental health initiatives through the hospital's Centre for Wise Practices in Indigenous Health.

Ultimately, the family's investment will enable the program to continue transforming the landscape of trauma-informed mental healthcare in Canada – helping more survivors like Charlyn access its lifechanging benefits.

"TTP has given me my life back," says Charlyn. "It's allowed me to live my life authentically and take care of myself. And it's let me know that I'm not alone."

THE VIRTUAL REVOLUTION

"Ultimately, virtual care is not just about digitizing in-person care or replacing in-person care"

Laura Pus

Director of Women's Virtual, Women's College Hospital



he healthcare system is at a turning point. Do we go back to the way things were before the pandemic? Or do we harness all we have learned and revolutionize care? Women's College Hospital has chosen to revolutionize.

"The pandemic has forced every hospital and healthcare provider in Canada to dramatically expand their virtual care capabilities," said Laura Pus, director of Women's Virtual at Women's College Hospital (WCH). "This is an important step towards a more modernized health system, but we believe we can push further."

Launched in 2019, the Women's Virtual program at WCH recognized the value and potential of virtual care and began investing in the technological infrastructure, processes and resources to support a more modern and accessible system.

Little did they realize how quickly this foresight would pay off. When the pandemic shifted how care was provided, Women's was ready to scale up virtual options. Beyond a switch to phone or video appointments, Women's Virtual focused on both access and integration while striving to create a

more seamless patient journey. Efforts were further augmented thanks to a boost of \$1M from the TD Ready Challenge and additional support from Scotiabank and other Women's College Hospital Foundation donors.

"Virtual care is not just about digitizing or replacing in-person care. It's about reshaping the entire care journey, so that virtual is infused into each person's experience from beginning to end," Pus added. "When we leverage virtual models of care and digital health tools, and rethink and retool how we provide care, the clinician, patient and health system benefit."

The pandemic has also unearthed broader population level public health data revealing the need to better address underlying sources of inequity.

"Not everyone has access to internet or a smartphone. Not all patients can take time off work for their virtual appointments or have access to a private space for their appointment. For virtual care to enhance healthcare, we need to consider the impacts on health equity," Pus explained. "For some patients, virtual visits may mean they don't have to

take time off work to see their provider, for others virtual care may never be an option."

Teams across Women's are working to further equitable access to virtual care services. In the Department of Psychiatry, the Reproductive Life Stages program is working to better understand the patients the program serves using the Ontario Marginalization Index. The Index covers four distinct areas of marginalization which can impact a patient's health and wellbeing, including residential instability, material deprivation, age-based dependency and ethno-racial concentration.

"Patient postal codes help us gain a better understanding from an equity perspective," said Dr. Lori Wasserman, clinical lead of the Reproductive Life Stages Program. "It can indicate that they live in a low-income area or that they need to travel significant lengths to access our in-person services. As we incorporate more patient specific data and partner with other organizations, we will be able to better tailor healthcare services to our patient community's needs," Wasserman shared.

An example of this is the General Psychiatry Program at Women's which is currently leading work with the YMCA's Elm Centre and their affordable housing program in Toronto. Each week, a WCH psychiatrist connects virtually with case managers and community engagement workers at the YMCA to provide guidance on complex clients and lead seminars for mental health topics.

"We are also working with Inner City Health Associates (ICHA), who have been providing housing services throughout the pandemic to those who are housing insecure," said Dr. Deanna Bruno, lead of the General Psychiatry Program. "A WCH psychiatrist provides weekly virtual services to ICHA's clients and collaborates with the onsite nurse practitioner. While we are in the early stages of this work, the opportunities are significant."

As we take stock of the pandemic experience and its learnings, we remain committed as an organization towards furthering the depth and scope of our Women's Virtual program.

EMPOWERING SOUTH ASIAN WOMEN TO LIVE BETTER WITH BETTER WOMEN

n July, 15 women gathered on Zoom to mark a major milestone: their graduation as the first cohort of South Asian Peer Health Coaches with BETTER Women.

Together, the new graduates – doctors, nurses, lawyers, accountants – enjoyed a chai celebration as they reflected on their training and shared their excitement about what's next: helping women live better, healthier lives.

The virtual ceremony represented a major step for BETTER Women, an innovative new program designed by the Peter Gilgan Centre for Women's Cancers at Women's College Hospital and the Canadian Cancer Society to help women reduce their risk of cancer and chronic health conditions.

Currently a pilot, BETTER Women will connect specially trained volunteer Peer Health Coaches, with women between the ages of 40 and 65. Each pair will work together for six months, with the coaches providing weekly support and encouragement as patients work toward a series of lifestyle goals – called a "prevention prescription" – designed to improve overall health at a stage of life when they're at greater risk of developing serious health concerns.

"The BETTER Women model is exciting because it leverages evidence that volunteer Peer Health Coaches can play a significant role in helping women adhere to these 'prevention prescriptions'," says Dr. Ruth Heisey, chief of family and community medicine at Women's College Hospital. "Studies show that women respond particularly well to this personalized, community-based approach."

Patients will be recruited from three family health teams across the Greater Toronto Region. Each of the teams – Women's College Hospital's Family Practice Health Centre in downtown Toronto, Barrie and Community Family Health Team in Barrie and Summerville Family Health Team in Peel Region – has been selected to assess the impact of the BETTER Women model on different populations.

The new cohort of South Asian Peer Health Coaches will soon be matched with women from Summerville Family Health Team, where the majority of patients represent diverse South Asian backgrounds.

"South Asian identifying women, particularly immigrants, are at heightened risk of health issues like breast cancer, heart disease and diabetes," says Shebina Amlani, a senior specialist at the Canadian Cancer Society who is focused on engaging South Asian communities and co-facilitates the South Asian Community Advisory Committee for BETTER



Volunteer Peer Health Coaches with the BETTER Women
program mark their graduation with a chai ceremony.

Women. "Their increased risk is a result of many factors, including systemic barriers that prevent them from regularly accessing culturally safe healthcare services that may overlook the unique health needs of women."

Amlani says the training completed by the South Asian Peer Health Coaches included guidance on helping women and their families overcome complex, and often sensitive, obstacles related to accessing culturally safe healthcare services.

"In many South Asian households, in order to access the woman, you must first go through her spouse – or her mother-in-law, in the case of multi-generational households," says Amlani. "Our volunteers work with the families they will be serving with compassion and understanding as they focus on helping women access the support they need."

With Peer Health Coaches recruited and trained for all three family health teams, matching will soon begin.

Heisey believes that BETTER Women, which is being funded by the Public Health Agency of Canada, the Peter Gilgan Foundation and the Canadian Cancer Society, as well as numerous other generous donors, could hold the potential to transform the health and well-being of women across Canada.

"Because this pilot is exploring the impact of BETTER Women on broad demographics, we will be well positioned to roll it out to diverse communities across Canada," Amlani says. "We look forward to sharing this model with other healthcare institutions so it can be replicated nationwide and beyond."

For more information about BETTER
Women and how you can get involved,
visit cancer.ca/betterwomen

ANOTHER WORLD-FIRST: LAUNCHING THE WOMEN'S **AGE LAB**

omen's College Hospital is now home to the world's first research and advocacy centre devoted to improving the lives of older women. Lead by Dr. Paula Rochon, senior scientist at Women's College Research Institute, the Women's Age Lab will put older women front and centre to help address health equity.

"In Canada, women 60% of people over 65," she says. "Yet when it comes to their emotional and physical health, they're dramatically underrepresented in conversations and research about health and social services."

With women tending to live longer than men, they are more likely to act as caregivers for family members, live alone and live in long-term care. They are also at greater risk of experiencing multiple chronic health conditions, being prescribed inappropriate medications and reporting feelings of loneliness and isolation.

The lab intends to transform health and social care for older women by putting existing research into action, forming new research collaborations across multiple disciplines and driving advocacy and awareness through communications. The lab is focused on four key areas: the intersection of gender and ageism, optimizing drug therapies, issues related to congregate care settings and the impact of

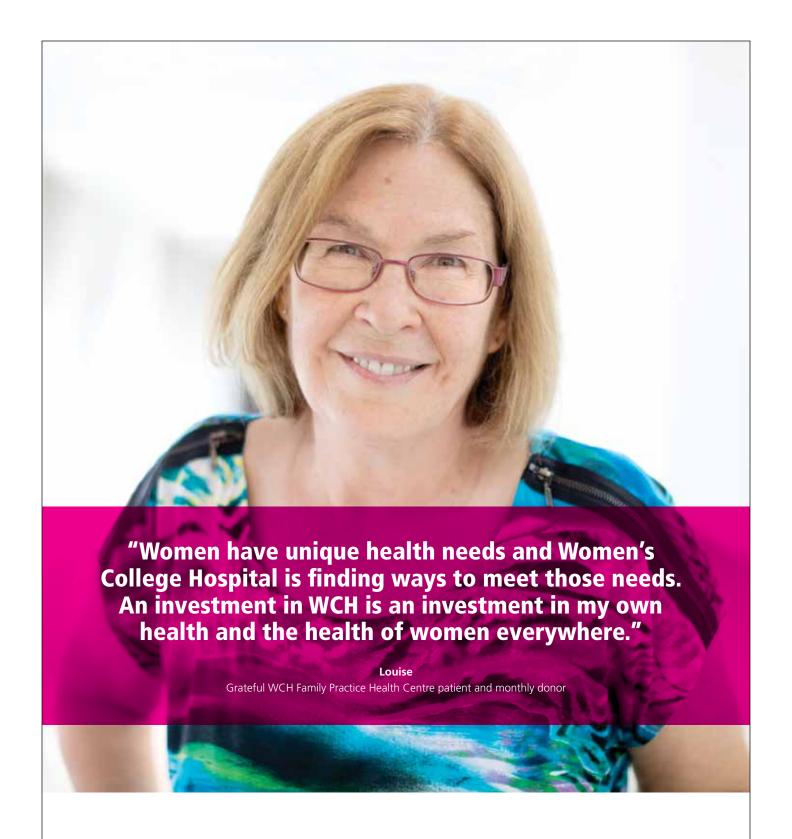


WCH Association of Volunteers..

loneliness on older women. Working with community organizations, health system leaders and international researchers from disciplines like sociology and political science, the lab will change the way women experience life and health as they age.

Recognizing the need for this research, the lab recently received a funding boost from Women's College Health Research (WCHR) – an independent charity formed by a group of donors to support the work of Women's College Hospital, and the hospital's largest donor.

"Women's has always been there to address important issues and advocate for those who need it," says Jocelyn Palm, a WCHR board member and a long-time member of the hospital's Association of Volunteers. "The need to support older women came into even sharper focus during the pandemic, and we're happy to support this area and invest in the work of the Women's Age Lab."



Join the movement to revolutionize healthcare.

Visit wchf.ca to donate today.



INNOVATING THE FUTURE OF SURGERY

"Right now, we can help patients access surgeries sooner, recover faster and get back to their lives"

Dr. David Urbach

Head of the department of surgery and the interim vice-president and lead medical executive of Women's College Hospital

omen's College Hospital is the hospital to keep people out of hospital. Guided by the mantra of right care, in the right place, at the right time, teams across the organization are rethinking models of care to not only produce better outcomes, but also help alleviate some of the pressures on the healthcare system such as access and wait times. For the department of surgery, this has meant leveraging research to accelerate virtual care and rethinking care pathways.

"Prior to COVID-19, our department was already a strong proponent of virtual care. We have since accelerated this capability and redesigned the preand post-operative experience, producing greater efficiencies and reducing wait times at a critical juncture for our patients," said Dr. David Urbach, the head of the Department of Surgery and the interim vice-president and lead medical executive of Women's College Hospital.

Today, many Women's surgical patients only enter the hospital on the day of their surgery. All preadmission processes are entirely virtual, and progress has been made on creating a self-scheduling portal,



A surgical team performs the first same-day bilateral knee replacement at Women's College Hospital.

producing a more efficient administrative process. Online education materials have been developed, and as patients recover at home following surgery, they are monitored virtually.

To support the adoption of virtual, the Women's Virtual Care Lab was launched this past spring.

Based at Women's and led by Dr. Urbach and

Dr. Simone Vigod, head of the Department of Psychiatry and senior scientist, the lab produces and tests digital health tools and virtual models of care in a real-world environment, maximizing their potential to benefit the health of Canadians, and communities globally.

"The work conducted and tested in the lab will enable our surgical team to accelerate virtual care and produce disruptive change within an ambulatory setting, allowing us to better address common and often ingrained health system issues," Urbach said.

Funded by the Canadian Foundation for Innovation, this unique "living laboratory" is the first to be implemented at a Canadian academic health sciences centre. The lab is focused on the mental health of vulnerable populations, surgery, healthy aging and the coordination of primary and specialty care. It includes a "research command centre" for research staff and trainees, a "sim lab" for simulations and training, and a "live lab" where tools and models of care will be integrated into the electronic health record system for testing.

Progress is also being made to dismantle decadesold practices and address system-wide challenges.

In collaboration with three other hospitals – Unity Health, Sinai Health System and University Health Network – Women's has established a centralized referral model for anorectal surgery. Instead of referrals to individual physicians, patients are entered into a single common queue and referrals are reviewed and triaged based on acuity and priority. Individuals are then assigned to the next available surgeon from the multi-hospital team.

This single-front door approach is not only more effective, it's more equitable.

"It is not unusual to see two similar patients in need of the same operation in the same city experience radically different wait times simply because of who they were referred to," said Urbach. "We can address this issue through improved cooperation and by using a single-entry model."

MORE DIVERSITY. BETTER CARE.

CLOSING GAPS IN TRANS HEALTHCARE

Meet Marudan Sivagurunathan, PhD.

As the inaugural Postdoctoral Fellow in Transgender Health and Emily Stowe Society recipient, Dr. Sivagurunathan is focused on Transition-Related Surgeries particularly interested in healthcare access and outcomes for sexual and gender minority populations.



Learn more about Dr. Sivaguranathan's research online.



Creating opportunities for the next generation of health researchers

diversity of perspectives leads to better understanding and better care. Yet, in Canada, women continue to be underrepresented at all levels of the health sciences field. In fact, only 28% of Canada's scientists are women, and women from diverse communities are barely represented.

The Emily Stowe Society, a revolutionary new scholarship and awards program at Women's College Hospital, is helping to close this gap. Launched in 2020 with generous donor support - including a \$1M pledge from KPMG - the Emily Stowe Society is helping to engage, retain and advance individuals from underrepresented communities across all stages of their research careers.

This year, funding from the Emily Stowe Society supported its inaugural cohort of students to participate in the Summer Student Research Program at Women's College Research Institute.

We sat down with three of this year's recipients to learn more about their research and how they hope to contribute to the future of health sciences in Canada.



ALEXA FINE Third-year medical student, Queen's University.

Since starting medical school, Alexa has developed a great interest in women's health. In the Summer Student Research Program at Women's College Research Institute (WCRI), she worked closely with her supervisor, Dr. Iliana Lega, staff endocrinologist and WCRI scientist, to investigate premature ovarian insufficiency – a condition that occurs when a person's ovaries stop functioning properly before age 40. Similar to menopause, individuals with this condition face health issues that must be managed, including bone mineral density concerns, and an increased risk of osteoporosis and fractures.

Alexa's research involved a literature review investigating which estrogen-based hormone therapy treatments are optimal for preserving bone mineral density. Alexa found that few studies specifically investigated which hormone therapy treatment options worked best. Of the 1,227 studies reviewed, only five directly compared different types of hormone therapies to one another – a gap that highlights the need for additional research.



ASHWINIE SIVAKUMAR Third-year Doctor of Pharmacy student, University of Toronto.

In the Summer Student Research Program at Women's College Research Institute (WCRI), Ashwinie worked closely with her supervisor, Mina Tadrous, adjunct scientist with WCRI, to investigate two key areas: drug spending over the past 20 years, and trends in complaints and disciplinary cases against pharmacists in Ontario.

Though thousands of medications are prescribed annually across Canada, the top 25 make up a large majority of drug spending. Ashwinie's work found that there has been a significant shift in spending, due in large part to new therapies for cancer and inflammatory conditions like arthritis.

To investigate complaints against pharmacists, Ashwinie used data from the Ontario College of Pharmacists to understand whether variables related to the pharmacist's identity impacted the kinds of complaints they received. She found that there is little to no data available about how marginalized communities are treated in pharmacy – an important gap that requires further research.



HANNAH COYLE-ASBIL

First-year PhD student in biomechanics, University of Guelph.

Hannah's research interests centre around movement behaviours – like sleep and physical activity – and tracking those behaviours in various populations. Using wearable technology, Hannah is exploring how to better understand the relationship between movement and health outcomes.

In the Summer Student Research Program at Women's College Research Institute (WCRI), she worked closely with her supervisor, Dr. Mandeep Singh, anesthesiologist and sleep medicine specialist at Women's College Hospital, to explore projects related to sleep health, and how it can be appropriately tracked in patients.

One project was the TRANQUIL (TRANSlating Sleep Health Into QUaLity of Recovery) study, led by Dr. Singh. Patients receive an actigraphy device - essentially a medical-grade Fitbit – to track different aspects of their sleep pre- and post-surgery. Hannah's role involved analyzing the actigraphy data to inform the study. The study aims to evaluate and optimize sleep health of patients in a perioperative setting, with the hope of improving quality of recovery and health outcomes post-surgery.

BREAKING THROUGH BARRIERS — TO BREAK DOWN BARRIERS



or five years, Sabina Vohra-Miller got by on just three hours of sleep.

As a newcomer to Canada and an undergraduate student at the University of Toronto, Vohra-Miller – who was raised by Indian parents in a low-income neighbourhood in Dubai – balanced three jobs and a full course load in pursuit of her dream: to build a career in the sciences.

"In that period, I experienced homelessness and food insecurity," she says. "I couldn't afford the cost of transportation, so I would walk an hour to and from campus every single day."

Despite her struggles, what kept her going financially, and what kept her dreams firmly in sight, were the paid research opportunities made available to her.

"It was only because of those positions that I was able to graduate with my master's degree and launch a career in biotech as a scientific advisor," she says.

That's why, when she first learned about Women's College Hospital Foundation's Emily Stowe Society – a community of donors breaking down barriers to careers in the health sciences for marginalized women – she knew she needed to join the movement.

In 2020, just months after Vohra-Miller and her husband, Craig, established the Vohra Miller Foundation, the couple made a gift of \$75,000 to the Society. Their contribution is helping to fund paid research positions and other career-track opportunities in the health sciences for women from racialized and equity-seeking communities.

"The Emily Stowe Society supports women just like me," says Vohra-Miller, who is now a celebrated science communicator focused on combatting misinformation about vaccines and other public health recommendations. "I could immediately see my own experiences reflected in the mission of the Society, which is helping to make sure that marginalized young women won't have to choose between paying their tuition and pursuing their goals."

The impact of the Foundation's investment will be profound. Just 28 per cent of Canada's scientists are women, and racialized women are barely represented in the science community. Vohra-Miller is determined to be part of the systemic change that is required to increase representation.

"For me, having those research opportunities made me who I am today," she says. "It just shows that potential is everywhere, and we need to provide the resources and break down systemic barriers that racialized women face in order to realize and amplify their potential."

In addition to the Emily Stowe Society, the Vohra Miller Foundation also made a \$75,000 donation to the Crossroads Clinic at Women's College Hospital, the first and only hospital-based refugee health clinic in Toronto.

"Refugees often arrive in Canada with significant health challenges yet face incredible barriers to healthcare, which I experienced myself as a new immigrant with limited resources," says Vohra-Miller. "Witnessing the tireless work Crossroads staff are doing every day to help vulnerable newcomers has inspired me deeply."

"Witnessing the tireless work Crossroads staff are doing every day to help vulnerable newcomers has inspired me deeply."

Sabina Vohra-Miller Emily Stowe Society supporter

Vohra-Miller, who is one of the newest members of Women's College Hospital Foundation's 100Women group – a community of women philanthropists dedicated to building a healthier, more equitable healthcare system for everyone – believes the hospital is playing a central role in creating sustainable change for the health of Canada's most vulnerable populations.

"When Craig and I launched the Vohra Miller Foundation, we wanted to support initiatives that have a very meaningful, very intentional way of addressing systemic issues in society," she says. "Women's College Hospital is doing exactly that."

WE ARE EXTRAORDINARY PEOPLE THANK YOU

Thank you to our board members for their support, expertise and enduring commitment to creating a healthier, more equitable world for everyone.

Women's College Hospital Board of Directors

2021/22

JoAnne Doyle, Chair

Susan Monteith, Co-Vice Chair

Donna Walwyn, Co-Vice Chair

Paula Allen

Dr. Tuhina Biswas (ex officio)

Bonnie Bloomberg

Tammy Brown (past chair)

Lindsay Campbell (ex officio)

John Capobianco

David Court

Wendy Cukier

Rupinder Dhillon

Michael Foulkes

Ani Hotoyan-Joly

Arleen Huggins

Michelle Khalili

Dr. Kyle Kirkham (ex officio)

Heather McPherson (ex officio)

Jennifer Price (ex officio)

Dr. Lisa Robinson (ex officio)

Maya Roy

Debbie Simpson (ex officio)

Leslie Woo

Dr. Talia Zenlea (ex officio)

Women's College Hospital Foundation Board of Directors

2021/22

Debbie Simpson, Chair

Ron McEachern, Vice Chair

Jennifer Bernard (ex officio)

Linda L. Bertoldi

Valerie Chort

Carol Cowan-Levine (ex officio)

Wendy Daniels

V. Ann Davis

JoAnne Doyle (ex officio)

Elizabeth L.W. Fanjoy

Ozench F. Ibrahim

Anne McGuire (ex officio)

Heather McPherson (ex officio)

Paul Melville-Gray

Silvia Montefiore

Jennifer Ocampo-King

Eden M. Oliver (past chair)

Jennifer Reynolds

Maria Theofilaktidis

Katherine Tweedie

Dr. David Urbach (ex officio)

Kara Wood

Robert Yeung

Samra Zafar



You can make a difference.

Support Women's College Hospital today and join the movement to revolutionize healthcare.



Visit wchf.ca to donate today.



CLOSING THE RESEARCH GAP

In Canada today, only
28% of scientists are
women. At Women's College
Hospital, we're working to
change that. The Emily Stowe
Society—named after
Canada's first woman
doctor and the founder of
Women's College Hospital—
is a community of courageous
supporters dedicated to
engaging, retaining and
advancing the next generation
of women scientists.

SUPPORT WOMEN IN HEALTH SCIENCE RESEARCH.

Visit wchf.ca to donate today.

