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Echo News - December 2012

Happy Holidays!

We are proud to share with you Echo's December newsletter! In this edition, you will find Reports and Echo Advances from our valuable projects.

Echo wishes all our readers a safe and Happy Holidays and joyful New Year!

Stay tuned for the final newsletter releasing Echo's Legacy document "Sharing the Legacy ~ Supporting Future Action" in January 2013!

Improving Equity in Access to Community-based Primary Health Care

Although **Community Health Centres** (CHCs) and Aboriginal Health Access Centres (AHACs) serve more than half a million people, there are still many Ontarians who do not have access to community-based primary care. In 2010, with funding from Echo, the **Association of Ontario Health Centres** (AOHC), which represents CHCs and AHACs, began mapping health needs to guide the expansion of access to primary health care services. The research team adopted a Population Needs-based Approach to calculating the gaps between population needs for CHC/AHAC primary care and existing access to services. This study demonstrates the success of CHCs and AHACs in serving their priority populations of low income and marginalized Ontarians. However, this study uncovered many service gaps and inequities across geographic regions of Ontario that could be addressed by targeted expansion. A Population Needs-based Allocation approach is necessary for targeting resources to address equity gaps and related barriers to health care faced by marginalized populations.

Read this important **report** and **Echo Advance**.

Designing a Smoking Cessation Program for

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RECENTLY UPDATED TOPICS

- Local mental health groups partner to help new moms
- Smoking ups risk of sudden death in women: report
- Breast cancer risks on the job a 'neglected area'
- Alcohol affects health of men, women differently
- Violence against women still not a thing of the past

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Pregnant and Postpartum women in Thunder Bay

In October 2012, **Thunder Bay Regional Health Sciences Centre** and Echo: Improving Women's Health in Ontario co-hosted a one-day event in which women of childbearing years (who smoke or have recently quit smoking) came together in order to: 1) Discuss and reflect on best practices for quitting or reducing smoking for pregnant or recently pregnant women; and 2) Build consensus on the design of a new quit smoking program in Thunder Bay that draws on best practices and women's knowledge of their community.

Sixteen women participated in the Thunder Bay event. Most women were in their mid-twenties with half of the participants being Aboriginal and the other half being Caucasian women. They brought their knowledge of the difficulties women who smoke and want to quit face in Thunder Bay to a discussion of the pros and cons of the recommended best practices.

Thunder Bay Regional Health Sciences is committed to developing and implementing the program designed by women leaders called "Lending a Hand to Our Future".

Click **here** to learn more about "Lending a Hand to Our Future"

Postpartum Depression - Moving Towards Standards (Articulation of Standards)

The perinatal period, from conception through to twelve-months postpartum, is an intense period of physical and psychological changes for women. It is during this time, pregnant women are vulnerable to both new and pre-existing mood disorders (PMDs). Studies show that between 25-40% of women suffer from mild depression in the first week following childbirth, while between 10-15% will "suffer a depressive disorder and one or two of every thousand women will present with psychosis during the infant's first year"**[1]**. Yet, despite their high prevalence and associated long-term consequences, PMDs remain largely undiagnosed and under-treated. Despite the severity of consequences and the effectiveness of timely interventions, Ontario currently lacks a coordinated system of care that fully meets the needs of these women, their babies and families in dealing with PMDs.

In the fall of 2011, Echo received the endorsement of the **Provincial Council**

for Maternal and Child Health's Maternal-Newborn Advisory Committee to proceed with the task of developing provincial guidelines for postpartum depression. Echo convened an inter-professional Core Committee which determined that the greatest gap in knowledge is information about the system of services to address mental health concerns for pregnant women and new mothers, and the outlining of minimum specifications that all regions of the province should deliver.

Read the full report **"The organization of perinatal mental health services in Ontario"**

Riecher-Rössler, A.R., A., *Diagnostic Classification of Perinatal Mood Disorders*, in *Perinatal Stress, Mood and Anxiety Disorders: From Bench to Bedside*, A.S. Riecher-Rössler, M., Editor 2005, Karger: Basel. p. 6-27.

Mavis says Farewell to Echo

Q: Tell us a bit about your background.

A: I have a doctorate in Politics and over ten years of experience as a policy researcher. My career interests have been divided between health and environmental (sustainable energy) policy projects. The link between the two is my interest in complex and 'risky' technologies, how citizens voice their concerns, how policy makers survey evidence and expertise, how agendas are set, and finally how decisions are made. I've studied these questions on a range of topics including assisted human reproduction, gene therapy, xenotransplantation, biofuels, drug regulation, and genetically engineered crops. I was fortunate to spend several years in the UK where I benefited from being immersed in the European network of researchers exploring the challenging interactions between science, policy and society. When I returned to Canada I worked with a medical anthropologist at Dalhousie University, where I held a CIHR postdoctoral fellowship to study the drug regulatory context at Health Canada. More recently I was involved in a seven-country comparative project funded by the European Commission on participatory technology assessment for xenotransplantation; I was excited to get to travel to Brussels this summer to present our findings to the Commission. I am also currently a co-investigator on a CIHR-funded multi-year project studying the role of standards in health research, monitoring and delivery. Although I have worked with quantitative and mixed methods, my real forte is qualitative research –interviewing techniques, focus group facilitation, participant observation & ethnography – which is particularly fascinating when you're communicating with experts in highly-specialized, technical areas. In short, I have a lot of experience asking intelligent people nosy questions, and searching for nuances and patterns in what they tell me.

Q: What made you want to work at Echo?

A: I will always love the excitement of the research process: designing research questions, developing funding proposals, publishing papers and presenting findings at conferences. The only drawback to academic research is that sometimes (certainly not in all cases!) it's difficult to see the social impact of your work. When the position came up at Echo I was intrigued by the possibility to work in areas I am passionate about – women's health and

health equity – in a way that would allow me to be involved in community-based projects where we could actually track the impact of our initiatives. Plus, I still got to be involved in policy analysis, writing, and public speaking – three of my favourite activities, as perverse as that may sound. It really seemed like a perfect opportunity at the time.

Q: What did you do at Echo and what were some of your greatest achievements?

A: Although all of Echo's work is both rewarding and challenging, I'd venture to say that my portfolio – Mental Health and Addictions – had unique struggles in itself. In part, I found it difficult to deal with content on the sheer relentlessness of violence, depression, and anxiety related to women's gender roles and inequities; it can really get to you. It is hard to remain discouraged however when there are constant reminders of the women and health practitioners out there who together continue to fight tirelessly against something this pervasive and systemic. Two projects – the organization of an inter-professional education event on women's mental health (March 2012), and leading our expert committee to produce recommendations for province-wide services for perinatal mental health (to be released December 2012) – are my proudest moments, looking back.

Q: What have you enjoyed the most during your time at Echo?

A: Like my colleagues who moved on before me, I have to say that the knowledge I have gained, from our brilliant staff and wonderful partner organizations, is extraordinary. That is what I will miss the most about working at Echo. To quote an old movie, "The best goodbyes are short: Adieu."

Making Connections

In October's issue, we featured an article titled "Connecting vulnerable women to critical services" describing an innovative new curriculum, ***Making Connections: When Domestic Violence, Mental Health, and Substance Use Problem Co-Occur*** by Robin Mason and Dr. Brenda Toner.

"The curriculum is designed to help front-line workers, who are disconnected within the broader health and social service system, to communicate with each other," Mason explains.

The evidence-based curriculum was enhanced by input gathered from 300 front-line workers from across Ontario, as well as women with lived experience.

Making Connections is multi-modal, accessible to all learning levels and styles. There is a text manual, a series of online modules, four dramatic scenarios in video format, and a one-day, face-to face, cross-sectoral workshop.

Echo is now sharing with you the four dramatic scenarios in video format. Click the links to watch the videos now!

https://vimeo.com/46118120
https://vimeo.com/46113967
https://vimeo.com/45728104

https://vimeo.com/45723859

Interesting Resources/Latest News:

Cervical cancer screens may offer little value before age 25 – CBC News

Ontario's first birth centre to open in Toronto next summer – Toronto Star

Home care for seniors falls largely on friends, family - CBC

Observances:

January: Alzheimer Awareness Month

3rd week of January: National Non-Smoking Week

February: Heart and Stroke Month

1st week of February: Eating Disorder Awareness Week

Events:

Feb 6, 2013
Best Start Conference
Venue: Hilton Suites Toronto/Markham Hotel
Organizer: Health Nexus
Read more

Feb 12, 2013
How Health Care Organizations are Using Technology to Enhance Patient Care
Venue: Radisson Admiral Hotel Toronto - Harbourfront
Organizer: Ontario Hospital Association
Read more

Feb 28 - Mar 1, 2013
Canadian Domestic Violence Conference 3
Venue: Delta Chelsea Hotel
Organizer: Bridges and Hincks-Dellcrest Centre - Gail Appel Institute
Read more

May 3 - 5, 2013
Menopause Redefined: Building on the Evidence
Venue: Fairmont Chateau Laurier Hotel, Ottawa
Organizer: Sigma Canadian Menopause Society
Read more

June 9 - 12, 2013
Moving Public Health Forward: Evidence, Policy, Practice (CPHA 2013 Annual Conference)
Venue: Ottawa Convention Centre
Organizer: Canadian Public Health Association
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Site last updated: December 21, 2012