



WOMEN'S HEALTH AND MENTAL WELLBEING SPEAKERS SERIES

Fall 2009- Winter/Spring 2010
Organizer: Dr. Nazilla Khanlou
OWHC Chair in Women's Mental Health Research
Faculty of Health, York University

SUMMARY OF PRESENTATIONS

Date Name, affiliation of presenter, and title of presentation	Summary of presentation
<p>October 28, 2009</p> <p>Dr. Michaela Hynie Department of Psychology, York University Associate Director, York Institute for Health Research</p> <p>Social support and stress for newcomer women: The moderating effect of culture and environment</p>	<p>In this presentation, Professor Hynie described two studies in which the effects of culture on expectations and responses to stress were studied. Post-migration stresses for newcomers can be material (such as housing and employment) and social (such as discrimination and loss of status). Some of these stresses can be mitigated to an extent, when support or even perceived support creates a stress buffering effect. However, Dr. Hynie's research indicates that there are cultural differences in how support is sought and accepted, leading to a need to create culturally sensitive and appropriate ways of delivering services for newcomers.</p>
<p>November 18, 2009</p> <p>Dr. Jan Angus Lawrence S. Bloomberg Faculty of Nursing, University of Toronto & CIHR New Investigator</p> <p>Navigating the health care system: Three qualitative studies of women's access</p>	<p>Professor Angus presented summaries of three qualitative studies that focused on women's access to cancer care and screening: women's agency in obtaining care for symptoms of breast cancer; a participatory study of issues in access to cancer screening for women with mobility difficulties; and a pilot study examining barriers to screening and primary care in women with invasive cancer of the cervix. Using a realist lens and drawing on critical social theory, Dr. Angus and co-investigators examined the interplay between individual agency and social structures to illuminate women's experiences with accessing health care. In each of the studies there was an examination of systemic barriers to accessing care, as well as individual social circumstances of gender, mobility, and socio-economic status.</p>

<p>January 27, 2010</p> <p>Dr. Farah Ahmad Dalla Lana School of Public Health, University of Toronto & Associate Scientist, Centre for Research on Inner City Health, St. Michael's Hospital</p> <p>Potential of interactive computer-assisted screening for identification and management of compromised mental health among women visiting family practice</p>	<p>Professor Ahmad presented the results from her randomized trial study on Computer-Assisted Screening for Intimate Partner Violence and Control. Given that intimate partner violence and control (IPVC) is prevalent and can pose a health risk to women, the purpose of this project was to assess whether computer-assisted screening prior to the visit could improve detection of women at risk for IPVC in a family practice setting. The participants were adult women in a current or recent relationship. The intervention, generated from the patient administered computer questionnaire, included a printout on individualized multi-risk 1) Assessment Report for the physician (which was attached to the medical chart before the physician visit), and 2) Information Sheet for the patient with contact number of community-based agencies. Computer screening was found to have effectively detected IPVC and compromised mental health in this family medicine practice and it was also overall found to be acceptable to patients.</p>
<p>April 7, 2010</p> <p>Dr. Beryl Pilkington Associate Professor, Associate Director, Research and Graduate Education, School of Nursing, Faculty of Health, York University</p> <p>Health care career mentoring of marginalized female youth in the Jane-Finch community</p>	<p>Professor Pilkington presented on students in communities like Jane-Finch, with a high concentration of ethnically diverse and new Canadians, who may experience social exclusion and restricted opportunities related to poverty, racism, and immigration/settlement patterns. Moreover, families are less likely to include a university graduate. Hence, these students may need encouragement and support to pursue postsecondary education. In a 2-year pilot project, a group of nursing faculty participated in a nursing-led mentoring program with students at Westview Centennial Secondary School. The project was extended for 3 years via a community-university partnership called "Inclusive Mosaic: Mentoring for Nursing and Healthcare," with funding from the Ministry of Citizenship and Immigration Canada. Students from grades 5, 8, and 9-11 are being targeted. The program is aimed at increasing participants' self-confidence, self-efficacy, and access to post-secondary education leading to a career in nursing or healthcare. Pilot project findings and lessons learned from the first year of the expanded project were presented, showing very good results from this pilot study.</p>

May 5, 2010

Dr. Joan Samuels-Dennis

Lecturer and Clinical Course
Coordinator
School of Nursing, York
University

**Cumulative trauma and
post-traumatic stress
symptoms among income-
assisted single mothers**

Professor Samuels-Dennis presented the results of her doctoral research, in which she looked at the factors that account for the development and persistence of PTSD among single mothers. She highlighted various gaps in knowledge, which she addressed in her study. These included exploring trauma and PTSD among single mothers; accounting for the cumulative effect of violent and non-violent traumatic experiences; the effects of neighbourhood; and studies testing the theoretical model of the process through which PTSD develops and persists. Using an intersectional framework she considered such factors as the neighbourhood/community context, gender based trauma, social strain, agency and the availability and accessibility of social resources.

Her study sample consisted of 247 randomly selected single mothers receiving social assistance, who completed surveys. Using structural equation modeling and an Intersectionality analysis she presented the following key messages: cumulative trauma is the central factor contributing to mother's symptom levels; social strain is important to the trauma-PTSD process for both women belonging to priority and non-priority neighbourhoods; and more research is needed to disentangle why the mediators in the model are so drastically different across group with a larger sample.