

Summer 2020 Practicum Abstracts – MPH Health Promotion Students

A. A.

Sinai Health System - National Institute on Ageing

My practicum placement was with the National Institute on Ageing (NIA), under the supervision of Dr. Samir K. Sinha. My position entailed working on the development of the NIA Long-Term Care COVID-19 Tracker and Shingles Vaccination White Paper. With the former, I was responsible for collecting data on the number of cases and deaths within long term care and retirement homes in various provinces. This information was used to create an interactive map to show viewers the current national COVID-19 situation within these facilities (<https://lrc-covid19-tracker.ca/>). My main project however, revolved around writing a white paper on shingles vaccination in Canada. This required me to complete extensive literature reviews on various topics including; background on shingles (herpes zoster), vulnerable populations, burden in Canada, shingles vaccines, national recommendations, policies, trends, and barriers toward uptake. I used this information to develop evidence-based recommendations to advocate for changes in the health care system. This project also required me to find ways to summarize and organize information in a readable manner, as the report is targeted for viewers not in the public health field (ex. government officials). A draft has currently been submitted and will be reviewed prior to it being published by the organization.

A. B.

Dalla Lana School of Public Health – Centre for Global Health

Global gender inequities remain in global health academic publishing, where men predominate the prestigious first and last authorship. Even when women dominate these authorship positions, their articles received fewer citations than their male counterparts. Female scientists from Sub-Saharan African experience intersecting challenges of lack of authorship due to geographical location, and barriers to publishing and recognition due to gender. While scientific health journals are increasingly introducing policies which aim to promote gender and geographical equity, it is unclear whether these policies result in structural change in publishing and authorship for female African scientists. The equity in collaborative health research project aims to examine the extent to which female African scientists in the health sciences are published, in first and last authorship positions and their institutional and country affiliation. Additionally, I supported the Women in Global Health Leadership Fellowship project through a stakeholder scan and analysis, evaluation, and programming. I further supported communication efforts in global health through writing articles such as the human rights and COVID-19 webinar and the sustainable development goals podcast. Finally, I participated in biweekly staff meetings and assist in other programs and projects of the Centre for Global Health.

L. B.

University of Toronto – Dalla Lana School of Public Health

The University of Toronto recently completed a summative program evaluation for the International Development Research Centre's (IDRC) Food, Environment and Health Program. This is a research for development funding program that supports policy and practice relevant innovations that target food-related non-communicable diseases and infectious diseases in low- and middle- income countries. In collaboration with the IDRC and UofT evaluation team members, a variety of knowledge translation outputs were developed for this practicum to further the dissemination of the program evaluation findings. These outputs included two technical briefs related to evaluation findings on gender and equity considerations within the program, an adapted commentary on the program's role in building the field of food systems research and an article on the complexities of the evaluation process and findings. These outputs will be published within peer-reviewed, open access journals and used internally within the IDRC. A dissemination timeline was also developed to guide the application process for several academic conferences where the evaluation results will be shared. This practicum experience strengthened several of my health promotion competencies, including the application of theories, qualitative research and evaluation skills, knowledge translation skills, and working in collaboration with stakeholders across multiple disciplines.

B. C.

BC Mental Health and Substance Use Services – Inter-professional Practice and Patient Experience

British Columbia Mental Health and Substance Use Services (BCMHSUS) provides mental health services, education, and health promotion initiatives to people with mental health and substance use issues across the province of BC. As a Project Coordinator in the Patient and Community Engagement portfolio, I performed a variety of work to support patient and family engagement under the newly created Patient Engagement Framework. Engaging patients and families as active participants and co-designers of their own care is an important component of patient-centred care that improves healthcare quality, health outcomes, and overall experiences of care.

To work towards this goal, I developed a trauma-informed policy and procedure for BCMHSUS on patient and family engagement to serve as a guideline for giving patients and families a voice in the design and delivery of their mental health care. I also drafted two patient engagement playbooks called *Managing Conflict and Respecting Emotions* and *Engaging Mandated and Incarcerated Patients*, which focus on barriers and solutions to engaging patients in vulnerable circumstances. Moreover, I worked with provincial stakeholders to write the annual report for the BC Partners, which is a collaborative partnership between BCMHSUS and 7 provincial organizations with different mental health and substance use specialties (e.g. BC Schizophrenia Society, The Mood Disorders Association of BC, Canadian Institute for Substance Use Research, etc.). I also performed a literature review of the evidence supporting family engagement in patient- and family-centred care, and I made infographics and other visual designs to translate research and knowledge in visually appealing ways. Overall, my practicum helped me contribute towards strengthening mental health services by valuing patients' knowledge, skills, and lived experience in service design and working on a variety of initiatives to promote mental health in the province.

C. C.

Fred Victor – Health Promotions Program

Fred Victor is an organization that supports those experiencing poverty and homelessness in Toronto. As a practicum student in the Health Promotions department at Fred Victor, I gained experience in working directly with the community and got to be a part of health promotion and advocacy work at multiple levels. Throughout the practicum, I worked on several projects. One project that I worked on was developing a resilience toolkit for Fred Victor staff. COVID-19 has led to higher levels of stress, and this stress is also present in the workplace. This prompted Fred Victor to develop tools to better support their staff. I helped design a toolkit that instructs managers on how to promote resilience in their supervision sessions and team meetings. This toolkit provided information on what resilience is, as well as practical actions that managers can take to promote resilience in staff. Additionally, I worked to support the development of online peer support groups. Typically, Fred Victor runs weekly in-person peer support groups for vulnerable community members. However, due to COVID-19, these groups had to move to an online format, and I helped facilitate this transition. As a part of this project, I developed a guide for facilitating online group programming. This guide included information on the different platforms that can be used to run online programming, the privacy features of these platforms, how to create a safety agreement, and best practices for facilitating the group. I then conducted outreach to community members to ask for their input on the format and content of the groups. Overall, my practicum experience at Fred Victor was excellent. I was able to build on my health promotion skills and apply knowledge that I obtained in course work in a real-world setting.

O. T. C.

Dalla Lana School of Public Health – Investigative Journalism Project

I completed a 16-week practicum at the Dalla Lana School of Public Health under the supervision of Robert Cribb, an investigative journalist at the Toronto Star and lecturer at Ryerson University and the University of Toronto. In my role as a student researcher, I investigated policies and programs aimed at ameliorating youth mental health challenges as part of an international journalism project involving student journalists, researchers, and academics. I explored a variety of themes, including: (1) integrated, 'hub' counselling models; (2) university and college counselling models; (3) third-party counselling services; (4) service delivery models for mental health promotion in elementary and high schools; and (5) the impact of climate change, political division, and economic downturn on mental health and wellbeing. I prepared research summaries for each academic article, report, and media article I collected and wrote an academic literature review, synthesizing my findings. In addition to this work, I also reviewed and provided feedback on some of the early journalistic story drafts being prepared by a team of student journalists. This experience provided me with an opportunity to build my research, critical analysis, and academic writing skills and gain a deeper knowledge and understanding of the youth mental health crisis and the best practices and innovative strategies being adopted to address it. Overall, my practicum was an incredible learning experience and I genuinely feel as though I contributed to a project that will have a significant impact on youth mental health and well-being.

K. C.

Durham Region Health Department – Health Policy and Equity Team

The Durham Region Health Department is one of Ontario's Public Health Units and operates within the regional governance structure of the Regional Municipality of Durham. This summer I completed my practicum placement on the Health Policy and Equity Team. The current role of the team is to provide policy expertise, advise, and support to meet Regional and Provincial requirements and to develop policy and health equity initiatives. I had two separate projects this summer that supported this objective. The first was to assess the need and feasibility for a pet-friendly shelter in the Durham Region and outline the key health and policy considerations. I conducted a literature review, environmental scan, key informant interviews, and designed and analyzed a survey of community members. This work involved multisectoral collaboration with colleagues in the Social Services department and collaborating with community partners to facilitate the survey. I shared highlights of my research results at a large Regional stakeholder committee and collected feedback on the survey design. The results were compiled in a written report that will be used by the Health and Social Services Department to inform resource allocation, program planning, and shelter policies. The second project I completed was a literature review and environmental scan to understand the key components of a health equity plan for public health units. I connected with staff members from other public health units to discuss their existing health equity plans. The Durham Region Health Department is interested in developing its own strategic plan for health equity, and my report will mark the beginning of that process. Overall, the placement provided me the opportunity to strengthen a number of relevant health promotion skills. The projects fostered understanding of public health through the lenses of a specific program to address homelessness and a broader organizational level health equity initiative.

L. C.

University of Connecticut – Institute for Collaboration on Health, Intervention and Policy

My practicum placement was with Dr. Lisa Butler, a researcher affiliated with the Institute for Collaboration on Health, Intervention and Policy at the University of Connecticut. The main project I was involved with was DISCO-KIDS, a randomized control trial in Uganda that evaluated the effectiveness of an innovative cognitive behavioural intervention designed to support developmentally-appropriate disclosure to HIV-infected children by their caregiver. My core task was to code semi-structured interviews with 300 HIV-infected children and 300 caregivers at various time points across the study. I also had the opportunity to engage in a variety of other activities, including supporting the writing of a manuscript and working collaboratively with other practicum students on a knowledge translation/public engagement project. A number of professional development/networking opportunities with a diverse array of global health professionals were also arranged for practicum students during the placement period. My work with Dr. Butler greatly improved my qualitative analysis skills and provided exposure to a range of innovative mixed methods global health projects. She is a fantastic mentor with extremely interesting projects, deep subject expertise and a strong appreciation for and support of practicum students.

L. C.

Institute for Work and Health, Crohn's and Colitis Canada

My practicum placement was hosted jointly by the Institute for Work & Health (IWH) and Crohn's and Colitis Canada (CCC). The two organizations were engaged in a research partnership as part of a five-year project titled Accommodating and Communicating about Episodic Disabilities (ACED). The objective of ACED was to develop evidence-based toolkits, resources, and training programs to help individuals with chronic, episodic disabilities sustain employment. Specifically, I worked closely with CCC to examine the workplace experiences of individuals with Crohn's disease and ulcerative colitis, the two most prevalent forms of inflammatory bowel disease (IBD). The ultimate goal of this work was to reduce barriers to employment and help patients remain active members of the workforce. During my practicum, I led a scoping review that focused on the workplace experiences of people with Crohn's and colitis in relation to challenges, supports, and accommodations. This involved formulating a research question, developing search terms, identifying relevant academic and grey literature, creating a data extraction form, extracting relevant data, and summarizing results for the review. To gather qualitative insights, I created an interview guide and conducted semi-structured stakeholder engagement conversations with people who had lived experiences working with Crohn's or colitis. I also leveraged my knowledge from both the literature and conversations to provide recommendations for the project's Job Demands and Accommodation Planning Tool (JDAPT), a curated list of workplace accommodations categorized by specific job demands. Finally, I will be sharing my findings with CCC staff through a Lunch and Learn presentation in the fall.

C. D.

Registered Nurses' Association of Ontario

The purpose of the practicum position at the Registered Nurses' Association of Ontario (RNAO) was to refine the current guiding criteria and validation process for developing quality indicators. Quality indicators are used to collect data for quality improvement purposes which in turn help validate the implementation of evidence-based recommendations developed by RNAO. These recommendations are updated every five years and help to enhance effective nursing care and patient safety in various health settings. The objectives of this practicum were to conduct an environmental scan of guiding criteria used by 16 leading health and research organizations to develop quality indicators, to conduct a literature review of published articles on guiding criteria for indicator development and validation, present the results to the evaluation team and complete a write up of the methodology, results and recommendations of the project. The environmental scan was conducted independently in which the results were consulted with co-workers to finalize the core guiding criteria. The literature review was completed using a methodological process. A core search strategy was outlined which was later revised using the University of Toronto librarian. Once finalized through consultation with coworkers, the search strategy was then appropriately implemented using five academic databases of which two were selected (MEDLINE and CINAHL Plus) for the final literature review. The articles were screened and extracted using the Covidence online software. The results were then outlined using an excel spreadsheet which was then synthesized in the technical report. Results from both the environmental

scan and the literature review were presented to the evaluation team and used to further revise and refine the current guiding criteria and validation process used by RNAO.

M. E. D.

Public Health Agency of Canada – Intersectoral Partnerships and Initiatives, Social Determinants of Health

The Public Health Agency of Canada (PHAC) is an agency under the Government of Canada that caters to the public health, infectious disease and control, emergency preparedness aspect of the nation. The mandate of the Public Health Agency of Canada is to "empower Canadians" in improving their overall health through the prevention of disease and injuries, the promotion of good physical and mental health and finally providing evidence-based data and information for decision making.

Within the Public Health Agency of Canada is a department known as Grants and Contributions (G & Cs). In this department are diverse initiatives and programs that address a need or gap within the Canadian population. One of the initiatives is the Mental Health of Black Canadians initiative. The Mental Health of Black Canadians initiative is an initiative that was established in 2018, when a funding of \$30 million was provided over the span of 5 years for community-based projects and research/evidence. In this initiative, 16 projects were focused on and split into 2 broad projects which are implementation and incubation projects. This is to address the mental health need gaps of Black Canadians.

This initiative aims to cater for Black-focused programs that provide services and resources to serve the mental health of Black Canadians.

For this initiative, my role was to serve as a Junior Policy Analyst, where I lead in the reviewing of federal policies that address systemic racism, discrimination, and how these policies are implemented to address issues related to racism, discrimination and oppression. In addition to the reviewing of policies, one of my primary accomplishments entailed engaging in bi-weekly media scans, utilizing an equity lens. This activity was done to ensure that amid COVID-19, the federal government was targeting equity related issues.

Overall, PHAC exceeded my expectations as it aligned with building my health promotion competencies in Partnerships, collaboration, advocacy, Policy and program planning, implementation and evaluation, communication, Leadership as well as Assessment and analysis, and further enhanced my skills in teamwork, report writing, program monitoring and program planning.

H. E.

4YouandMe - Research

I completed my practicum with 4YouandMe, a non-profit created to aid individuals who may be interested in sharing health-related data using smartphones and other wearable devices so that they can better understand and navigate health conditions. The Stress and Recovery Study used the Oura ring and smartphones to track and understand the multidimensional components of stress and recovery off-shift in frontline healthcare workers during the current COVID-19 pandemic. My role in this study was actively working as a clinical research coordinator (CRC)/ digital participant engagement expert (DPEE). This role consisted of calling participants and asking them about their overall study experience, details regarding their various stress triggers, their home and work environments, and use of their Oura ring. I was responsible for maintaining contact with about 70 participants and creating contact logs after each phone call. The purpose of these phone calls is to provide support and encourage participant adherence to the study tasks. The qualitative data collected from these phone calls will be used to better understand stress in frontline healthcare workers. In addition to this primary role, I also completed an emerging COVID-19 hotspot map that was used in the recruitment process of the study. Using the Tableau software, I outlined regions in the United States that may become hotspots for COVID cases and may subsequently translate to a higher stressed group of healthcare workers in those areas. Additionally, I contributed to developing adherence tracking frameworks and other study materials used by team members.

T. F. H.

Dalla Lana School of Public Health – Centre for Global Health

I completed my second practicum at the Centre for Global Health (CGH) at the Dalla Lana School of Public Health (DLSPH). The CGH is the knowledge hub of global health educational activities at DLSPH, and my practicum consisted of the support and contribution to these activities. Specifically, I supported projects such as the development of a Global Diplomacy course, and podcast on the Sustainable Development Goals. Additionally, I wrote articles published on the CGH's website regarding global mental health and a profile on a DLSPH alumna. Lastly I led a research project with a fellow practicum student, which will be completed in the fall.

R. F.

Public Health Agency of Canada – Health Equity Integration Team

I worked with the Health Equity Integration Team (HEIT) to improve the application of Sex- and Gender-Based Analysis + (SGBA+, an analytical tool to ensure consideration of diversity and intersectionality) at PHAC. This involved revising a guide that provides an overview of SGBA+, associated concepts, a checklist, and a case study. To make this guide as user-friendly and relevant as possible, I conducted interviews with key informants throughout the agency to gather feedback and identify gaps. I was able to present about the findings of this project at a divisional student showcase. I also worked on projects relating to COVID-19, such as collecting high-level evidence about key health inequalities for priority populations, such as people with disabilities and older adults. I helped to create a toolkit for applicants to the Mental Health of Black Canadians fund, which included writing a guide to help proposal reviewers examine their unconscious bias. This project promoted transparency between the government and external stakeholders, and supported health equity aims by addressing anti-Black racism at the federal level. Throughout my projects, I developed my knowledge translation skills, by involving stakeholders, creating graphics and models, and communicating information in a clear and coherent manner. Although my practicum was entirely remote, I was part of a dynamic team, and felt connected and supported throughout the summer. HEIT does excellent social justice work at the federal level and it was an honour to work with them.

J. S. F. B.

Dalla Lana School of Public Health

Past public health emergencies have been associated with negative impacts on population sexual health. As the COVID-19 pandemic rapidly evolves, unprecedented shifts in patterns of sexual behaviour and/or the availability of sexual health services may jeopardize sexual health, particularly for marginalized groups. We performed a scoping review and gender-based analysis plus (GBA+) to understand how emerging evidence has accounted for the impacts of COVID-19 on sexual behaviour, sexual health, and the accessibility of sexual health service. We developed a search strategy for use in three databases (MEDLINE, PsycInfo, and Scopus). We also hand-searched reference lists and relevant journals for additional sources. Following primary and secondary screening, we included 103 articles, most of which (n=87) were academic commentaries. We integrated empirical data and academic commentaries in a concept map to formulate evidence-based and equity-oriented recommendations for future research, policy, and practice in the area of sexual health during COVID-19. Concept mapping revealed eleven interconnected sexual health considerations for COVID-19 pandemic interventions: Sexual Activity, Condom Use, Consensual Sex/Sexual Violence, Sexually-transmitted Infections (STIs), COVID-19 as an STI, Sexual and Reproductive Health System Concerns, STI Prevention, STI Testing, STI Treatment, HIV (Prevention, Testing, and Treatment), and Telemedicine Concerns. This review provides a roadmap for urgently needed empirical research to inform sound responses to sexual health inequities during COVID-19.

S. H.

University of Connecticut - Institute for Collaboration on Health, Intervention and Policy

The practicum fulfilled three Health Promotion competencies 1) Knowledge and Skills, 2) Situational/Needs Assessment, and 7) Partnerships and Collaboration. I adapted my knowledge of social and behavioural interventions, methods, theories, and political, social, and cultural contexts towards research related to COVID-19 and social determinants of health. I used my skills as a qualitative researcher to produce an interview guide about exploring the effects of COVID-19 with social and economic changes in Western Kenya. I collaborated with a student in the Epidemiology stream to submit a proposal for a COVID-19 Student Engagement Award, which was accepted. This microgrant provided a chance to work across sectors and globally to create a digital media campaign to highlight four individuals being impacted by COVID-19 in Botswana. I also collaborated with another researcher from the University of California, San Francisco, to support a presentation to policymakers and scientists about food insecurity in domestic and international settings. I participated in proposal preparation through writing and conducting literature searches, specifically on proposals related to vaccine hesitancy, clinical decision making, implementation science, and the impact of COVID-19 on indigenous and rural populations. I participated in a collaborative PowerPoint to describe the RE-AIM methodology and intervention framework in the context of public health and synthesizing my findings on COVID-19 and development around the world, impact on food insecurity, rural, and Indigenous populations, which would culminate in a report.

C. H.

Daily Bread Food Bank – Research and Advocacy

My practicum placement was with the Research and Advocacy department at Daily Bread Food Bank, working on multiple projects concerning food security and poverty reduction in Toronto. One major project was conducting primary research on the experiences of food bank clients in Toronto during COVID-19. Data on number of visits was collected from an online client intake database, while further quantitative and qualitative data was collected by phone survey (n=221). My role included supporting survey recruitment, interviewing participants, conducting qualitative analysis, and drafting part of the final report. Key findings included a tripled rate of new clients accessing food banks during the pandemic, increased severity of food insecurity, high rates of job loss and rent arrears, and worsened mental health and health inequities. Another project was producing a literature review on housing policy from a food bank perspective, intended to inform future advocacy directions for Daily Bread. In the review I identified key policies which have contributed to the current housing crisis in Toronto, summarized evidence linking housing unaffordability and food insecurity, reviewed potential policy tools to improve housing affordability in Toronto, and recommended areas in which Daily Bread may advocate for the housing needs of people living in food insecurity. Finally, I also produced written content for a future redesign of the Research and Advocacy section of the Daily Bread website, and wrote monthly blog posts for the website commenting on current topics relevant to policy and food insecurity. Through these practicum activities, I learned a great deal about policy and other systems-level determinants of food insecurity, poverty, and public health, and strengthened health promotion

competencies in areas of application of theory and research, research and evaluation, health communication, policy development and advocacy, and building organizational capacity.

R. J.

Public Health Agency of Canada – Health Equity Integration Team

For my first placement, I worked at the Public Health Agency of Canada (PHAC) in the Health Equity Integration Team. This team aimed to strengthen the capacity of the agency in applying Sex and Gender-Based Analysis Plus (SGBA+), as well as promoting health equity through applications of the social determinants of health. The general duties of this role were to collect data on COVID-19 and SGBA+, revise a training video, write SGBA+ case studies, create a conceptual model on SGBA+ and health equity, and work on two main tasks. The first task was to revolutionize an existing training document to increase internal capacity in SGBA+, involving re-writing, design, and interviews across four branches within the agency. This project was done with another student from DLSPH. The second task was for me to create a toolkit for applicants applying to the Mental Health of Black Canadians fund offered by PHAC. The toolkit trained Black Canadian communities in integrating GBA+ in their funding applications, as well as integrating GBA+ throughout their project proposal. The document had a dual purpose, as it served as a tool for project reviewers from the agency as well. The main issues it addressed were that: 1) applicants had difficulty completing the GBA+ section on the application for funding and 2) project reviewers had difficulty assessing the GBA+ integration in the application for funding. The toolkit is set to release in Fall 2020 to increase external as well as internal capacity. PHAC has granted me the opportunity to continue working with them until December in order to conduct an evaluation of the toolkits' utility to applicants and reviewers, as well as to create a guide for all Grants and Contributions (Funding Streams).

S. A. K.

University of Connecticut - Institute for Collaboration on Health, Intervention and Policy

The University of Connecticut's Institute for Collaboration on Health, Intervention, and Policy (InCHIP) is an interdisciplinary research institute that works towards the creation and dissemination of knowledge and theoretical frameworks primarily through collaborative partnerships in the areas of health behavior. InCHIP investigators, such as Dr. Lisa Butler, have expertise and research interest in child and adolescent HIV prevention, care and treatment. Her epidemiologic research in clinic and community settings in sub-Saharan Africa have provided me with the appropriate opportunity to work on qualitative coding and research that is based in Uganda and Kenya. I was able to be a part of a global team that has been developing community-based strategies surrounding child health. Alongside the maintenance of qualitative studies, I was able to begin preparing for a potential proposal that looks to improve child development (i.e. mental, physical and learning outcomes), particularly by incorporating the use of play with caregivers in the context of low-resource, high HIV-prevalence settings. I will continue to work on this literature review well into my academic year in hopes for a publication. Overall, this was a wonderful learning experience where I was able to enhance my writing and coding skills.

F. N.

BC Mental Health and Substance Use Services – Inter-professional Practice and Patient Experience

I had the opportunity to complete my first practicum working remotely as a Practicum Student at BC Mental Health and Substance Use Services (BCMHSUS). I worked on a variety of projects including program evaluation for the Burnaby Centre for Mental Health and Addictions' (BCMHA) new admissions process for which I helped develop the logic model, decide upon indicators, outputs, and outcomes, as well as analyzed and interpreted the data, and presented the results at a final meeting with BCMHA leaders. I was also involved in the evaluation for the Forensic Psychiatric Hospital (FPH), for which I reported on the outputs for the draft evaluation report. In addition, I was involved in developing a working draft for a BCMHSUS-wide gender affirming care policy. I completed an informal literature review, reviewed current organizational gender affirming care policies at different sites, and drafted a policy document based on current best practices. I also aided with the development of a patient experiences survey, for which I collected, and organized relevant survey questions from other similar surveys and helped sort through to decide which questions to include and how to edit them so they are most relevant for BCMHSUS sites. I worked closely with the evaluation specialist and director of strategic initiatives for both the program evaluation projects, with the patient needs director for the development of the survey, and the policy specialist for the development of the gender affirming care policy.

A. O.

York University – Centre for Refugee Studies

A. O. completed her practicum with the Centre for Refugee Studies (CRS), York University, under the supervision of Dr. Michaela Hynie. A.'s main interest is around promoting ethical practices when working with peer researchers on longitudinal community-based research (CBR) with refugees. For the first half of her practicum, she worked on various COVID-19 related activities. She worked in collaboration with a team of prominent researchers in the field of newcomers' resettlement on writing rapid response research proposals to study the impact of COVID-19 on newcomer communities. She assisted in developing research questionnaires informed by similar COVID-19 surveys that have been taking place nationally across Canada. She researched different platforms for conducting on-line interviews such as WhatsApp, Skype, WebEx and Zoom examining their benefits and limitations in terms of their practicality, appropriateness, acceptability and ethical challenges. She also developed data collection training manual for peer researchers on how to conduct on-line interviews and obtain oral consent on-line. A. also worked on gathering reliable and relevant health and community resources available in multiple language for research participants. For the remaining time at her practicum, A. worked on knowledge translation (KT) activities including developing a fact sheet based on reflections provided by peer researchers while working on longitudinal mixed-method community-based research study looking at the integration and long-term health outcomes of Syrian refugees resettled in Canada (SyRIA.lth). The fact sheet outlined the ethical challenges peer researchers experienced, and strategies implemented by the project team to support them. The purpose of this fact sheet was to act as a resource for those who are working with peer researchers. Finally, she conducted a knowledge scan on the current state of

knowledge around ethics of working with peer researchers, who are involved in longitudinal community-based research (CBR) with refugee populations.

V. K. P.

Hospice Palliative Care Ontario – Communities of Practice

The Compassionate Community Development and Knowledge Translation Project Coordinator position at Hospice Palliative Care Ontario (HPCO) provided me with exposure to provincial level health care systems planning and coordination, experience communicating with stakeholders across a variety of sectors and the ability to advance HPCO's Compassionate Communities Provincial Strategy. During my practicum placement I completed a provincial environmental scan report which will serve as a public document that outlines the emergence of Compassionate Community (CC) engagement across Ontario and contribute to the development of a comprehensive resource library. In doing so, I restructured an interview template, conducted key-informant interviews with early Compassionate Community adopters across Ontario and analyzed qualitative data through both thematic and comparative analysis. This practicum placement also gave me the opportunity to further develop my knowledge translation skills as I created several infographics and an interactive map that will be shared publicly on the HPCO website as well as several PowerPoint presentations which were shared with HPCO's staff and the Compassionate Communities Community of Practice (CC CoP) project members. Furthermore, I engaged in a focus group for HPCO and SpeakUp Ontario's Advance Care Planning (ACP) Public Awareness Campaigns, contributed to the National Compassionate Community Evaluation Framework, attended meetings surrounding HPCO's Communications Strategy, and conducted preliminary research on Age-Friendly and Dementia-Friendly initiatives to gauge their involvement in future developments of the provincial environmental scan. Overall, my practicum experience at HPCO contributed to my development of multiple health promoter competencies and will be very valuable for my future academic and professional endeavours.

M. P.

University of Connecticut - Institute for Collaboration on Health, Intervention and Policy

Perinatal and postpartum depression are major health problems worldwide that contribute to adverse maternal health outcomes and poor developmental outcomes in children. These outcomes become heightened in Low to Middle Income Countries where resources and access to care are limited. In Sub-Saharan Africa, mobile health (mHealth) tools have been increasingly used for promotion of maternal-child health. For my practicum, I worked under a professor from the University of Connecticut who focuses and conducts her research within Sub-Saharan Africa. The research study that I took part in is called Monana ke Isago ("Youth are the Future"), a Bill and Melinda Gates Foundation funded project in Botswana, focused on pregnant and parenting adolescents and their infants. This project is aimed at developing a multi-component intervention program, designed with and for adolescent mothers aged 15 to 19 years of age, with the purpose of promoting maternal health and infant growth and development. Part of this project involves the use of mobile health tools to provide support via text message to participants. As the project was put on hold due to the ongoing pandemic, my role was to refine aspects of the project, including the creation of key messages to be sent via text message, development of culturally appropriate nutritional recipes, provision of my input on an intervention manual and other materials, and capacity building contributions. The work that I did will be directly applied to the study, which is planned to resume this autumn.

M. J. R.

IWK Health Centre – Mental Health and Addictions Health Promotion

I completed a 16-week practicum with the IWK Health mental health and addictions health promotion (IWK MHA-HP) team. IWK Health is the primary centre for child and maternal health in Atlantic Canada. IWK MHA-HP is interested in preventive strategies that address root causes of mental health and addictions for children and families in Nova Scotia. One priority action area for the team is housing. Improving housing conditions for children and youth in Nova Scotia has lasting population health benefits and helps prevent negative mental health and addictions outcomes later in life. For my practicum project, I led the housing portfolio with the goal of producing several key deliverables. I prepared a jurisdictional scan that identifies housing policies that are protective for mental health at the federal, provincial and municipal levels. This scan laid the groundwork for advocacy to make housing more accessible, affordable and conducive to mental health and wellbeing. This resulted in an advocacy plan for the team, including draft letters to decision-makers and an official response to an upcoming municipal plan. Throughout the placement, I met with stakeholders to consult on the development of these internal documents. Stakeholders included policymakers, city planners, health promoters, public health professionals in healthy built environment, housing policy researchers and service providers for populations experiencing or at risk of homelessness in Nova Scotia. These meetings helped to bring housing policies to life and identify remaining gaps. My co-supervisor is a health communications specialist; we were able to collaborate to present the findings from the jurisdictional scan in an infographic for municipal decision-makers. I led the knowledge translation piece to share these products with collaborators and support new and existing relationships between IWK MHA-HP and local housing stakeholders. I also updated the team's housing action guide to include special topics such as short-term

rentals, pandemics, and extreme weather. Beyond the housing portfolio, I participated in day to day activities of the office, such as attending provincial priority action team meetings in Tobacco, Alcohol, Cannabis and Health Equity, meeting with collaborators (Atlantic Centre for Injury Prevention, NSHA colleagues), contributing to a government-led project on populations disproportionately impacted by COVID-19, and attending team training sessions (e.g., Pride Health).

G. S.

Sinai Health System - Psychiatry

Background: Depression and anxiety during the perinatal period pose numerous challenges for pregnant and postpartum women, including negative health outcomes for both the mother and her child.

Although Psychological Treatments (PT) are effective in treating perinatal depression and anxiety, only 1 in 5 women have access to such care. Frequently cited barriers to PTs include a shortage of specialists (e.g. psychiatrists) and accessibility issues (cost and transportation).

The Study: The SUMMIT Trial aims to determine how to optimize existing resources to make PT, namely Behavioral Activation (BA), widely accessible for its target population, consisting of pregnant and postpartum women with symptoms of depression and anxiety. The objectives of this international clinical trial include: 1) testing whether non-specialists (nurses) can deliver BA as effectively as specialists; 2) testing whether telemedicine is as effective as in-person treatment; and 3) examining facilitators and barriers related to BA delivery.

The Practicum: As a practicum student at The SUMMIT Trial, I completed a 16-week placement under the supervision of Dr. Daisy Singla. Due to the COVID-19 pandemic, the study halted its in-person BA sessions and completely shifted to telemedicine. To ensure BA remains widely accessible, the study strives to resume in-person treatment in the near future. Guided by Patient-Centred Research, I co-lead a component of the qualitative study that aimed to gain the perspectives of key stakeholders (patient advocates, clinicians, researchers) on the potential barriers and facilitators to resuming in-person BA sessions for its target population in a COVID-19 context. To obtain data, I co-facilitated an hour long Focus Group Discussion (FGD) with N=10 stakeholders. Subsequently, I coded the FGD transcript using NVIVO software and conducted content analysis to quantify endorsed themes. As I finish my practicum, the results of the FGD will be further analyzed to inform the decision to resume in-person BA sessions.

A. S.

Dalla Lana School of Public Health – Centre for Global Health

My practicum placement was completed with the Dalla Lana School of Public Health Centre for Global Health which is an interdisciplinary knowledge hub that catalyzes excellence in global health research, education and service, and prepares future public health system leaders to make a global societal impact in the future. Through this practicum, I worked with a team of researchers to explore the impact that the COVID-19 pandemic was having on displaced populations and other migrants around the world. My responsibilities were to review gray and published literature and conduct an environmental scan prior to developing a mind map summarizing the main dimensions of impact COVID-19 was having on the population of interest. Once saturation was reached and major themes were identified as a team, I contributed to the preparation of a manuscript for peer-reviewed publication. Through this process, I learnt how to employ tools and approaches for online collaboration and management of bibliographic resources through software programs like Zotero and Evernote. I had the opportunity to gain familiarity with the research funding landscape and acquired fundamental grantsmanship skills as I assisted in the creation of a research plan and the development of a grant proposal to be submitted in the fall of 2020. Additionally, I had the chance to contribute in the production of online educational resources for a session that was included in the 'Public Health Perspectives on COVID-19' summer reading course offered at the Dalla Lana School of Public Health.

D. S.

Elevate NWO

My practicum was with Elevate NWO which is a support-service agency in Thunder Bay, ON that provides supports to people who are living with HIV/AIDS, hepatitis C, as well as those who require harm reduction supports. This practicum lent itself to building qualitative research analysis skills through participation on two Indigenous-focused, community-based research projects. The first being "Completing the Circle of Care Project" that explores Indigenous women's access to health services, their cultural needs, and their understandings of health and wellbeing. The second being an "Indigenous Women's Stress Study (IWSS)" that explores the stress experienced by Indigenous women who are living with, or at risk of HIV infection.

Due to Covid-19, delays in conducting interviews and/or focus groups for the Circle of Care Study resulted, therefore transcribing audio recordings from these interviews will take place if conducted prior to the completion of the practicum placement. Baseline writing for the introduction and methods section for the corresponding manuscript was done and has undergone a couple of revisions to date. Preliminary quantitative data was acquired from the screening questions and initial questionnaire and descriptive statistics was conducted to summarize participants characteristics, their health conditions, their mainstream health services use and Indigenous health practices.

Thematic analysis was done for the IWSS project and was conducted interviews and focus groups transcripts. A total of three focus groups and seven interviews were coded. Co-authorship on two papers for each of the projects outlined will likely result by the completion of this practicum. In addition,

there may be opportunities to present findings at conferences or workshops if safety during travel improves.

M. S.

Dalla Lana School of Public Health – South Asian Health Research Hub

I completed my practicum with the South Asian Health Research Hub at the Dalla Lana School of Public Health led by Dr. Ananya Banerjee. I supported two research studies exploring type 2 diabetes within South Asian immigrant communities in Toronto funded by the Social Science & Humanities Research Council (SSHRC). Primarily I supported the Sri Lanka Migration and Diabetes Study (SLMDS). The purpose of this study was to understand how social factors such as migration might contribute to the high rate of type 2 diabetes among Tamil migrants from Sri Lanka living in the Greater Toronto Area. This population was found to have a higher rate of type 2 diabetes compared to other Canadians. In Ontario, Tamil migrants from Sri Lanka were found to have the highest rate of type 2 diabetes compared to other South Asian migrants from India, Pakistan and Bangladesh. The SLMDS study is a qualitative study that uses a community-based participatory approach and an intersectional framework to understand the experiences of migration and diabetes. As part of my practicum, I developed health education diabetes tip sheets for the Tamil community in the Greater Toronto Area along with another practicum student and my supervisor. The tip sheets provide an introduction to diabetes, the management of diabetes and the factors that impact diabetes care. These tip sheets will be distributed to the Tamil community in the Greater Toronto Area.

O. T.

Hospice Palliative Care Ontario – Communities of Practice

I completed my first practicum with Hospice Palliative Care Ontario (HPCO) where I worked alongside one of my peers from Dalla Lana School of Public Health. As a Compassionate Community Development and Knowledge Translation Project Coordinator, I worked within the Communities of Practice division on a variety of projects. One of the main projects was conducting a provincial environmental scan of current Compassionate Community (CC) work being done across Ontario. Prior to conducting secondary interviews, my peer Victoria and I developed a progress report summarizing data from the primary CC interviews completed by previous students and further manipulated the data to create graphs to visually represent these findings. In doing so, I had the opportunity to present these findings at two meetings to highlight the importance of further data collection and the implications of CCs in Ontario. In terms of second CC interviews, my peer and I were also responsible for engaging new communities. As such, we were in charge of communicating and collaborating with diverse communities to ensure appropriate quantitative and qualitative data collection, analysis, synthesis, and knowledge translation of research findings (e.g., reports). Beyond the environmental scan, I also engaged in the development of the National CC Evaluation Framework, which is a collaborative effort between HPCO, BC Centre for Palliative Care, and Pallium Canada. Moreover, my peer and I developed a one-page document summarizing ways to share information during COVID-19 for communities and contributed to research on Age-Friendly/Dementia-Friendly initiatives by aligning CCs via the Ontario Age-Friendly Communities

interactive map by Domain. As a result, I contributed to enhancing the aforementioned map, while simultaneously creating a CC map for HPCO. Overall, my placement has provided me with experience at the provincial macro-systems level and enabled me to apply, acquire, and enhance various health promotion core competencies.

M. V. R.

International Union for Health Promotion and Education – Global Health Promotion

The student engaged in a practicum opportunity with the International Union for Health Promotion and Education (IUHPE-UIPES), an international, independent agency comprised of individuals and organizations committed to improving health and well-being through education, community action and the development of healthy public policy. The student supported a range of projects associated with Global Health Promotion (GHP), the organization's official, scientific publication. GHP is a multilingual journal that publishes authoritative peer-reviewed articles and practical information for a global audience of professionals interested in health promotion and education.

The student worked with the Editor in Chief and Managing Editors of GHP to support two main projects, including (1) the improvement of the journal's strategy to prepare and disseminate high-quality evidence to inform health promotion programs, policies and practices; and (2) the editorial process of a special Call for Papers on Health Promotion Perspectives on COVID-19. Products completed included the analysis of regional readership, reach, publications, reviewers, guidelines, and communications. The student prepared recommendations to improve existing strategies and facilitate the editorial process. Additionally, the student prepared a special pool of reviewers, organized articles thematically, helped to plan a future communication strategy and structure of Online First collections, and acted as a reviewer of a paper (mentored and supervised by a senior reviewer) as related to the Call for Papers on COVID-19. Lastly, the student supported the internal activities of the IUHPE, as needed, participated in team meetings and collaborated with other team members on their tasks.

Through this practicum opportunity, the student gained meaningful experience in health promotion communications, the scientific editorial process, scientific writing and analytical skills, and stakeholder communications within an international NGO setting

S. W.

Ontario HIV Treatment Network – Systems and Policy Initiatives / Collective Impact / Testing and Clinical Initiatives

The Ontario HIV Treatment Network (OHTN) is a non-profit network which collaborates with health clinics, AIDS service and community organizations, and policy leaders in order to improve the health and lives of people living with and at risk of HIV. The practicum student joined the OHTN as a member of the Collective Impact team, with a focus on examining the barriers and facilitators to Pre-Exposure Prophylaxis (PrEP) uptake in Ontario. PrEP is a once-daily pill which is highly effective in preventing HIV infections for HIV-negative people, however usage remains relatively low in Ontario. In this role the practicum student liaised with the Knowledge Synthesis team at OHTN to collect, analyse, and synthesize recent scientific literature on Pre and Post-exposure prophylaxis (PEP) in order to create a comprehensive annotated bibliography on PrEP research. Key findings were drawn from the research to identify potential next steps to increase PrEP use for priority populations in Ontario. Findings from the annotated bibliography have been presented to OHTN staff, and have been used to assist in the development of two PrEP study proposals.

The practicum student also worked with the Testing and Clinical Initiatives team at the OHTN, to aid in the implementation and evaluation of two HIV-testing projects: the GetaTest pharmacy-based HIV-testing study, and the GetaKit HIV self-testing pilot program. The practicum student drafted and provided feedback on communication materials; analysed survey data and drafted project reports for stakeholders; communicated with stakeholders and team members; and provided perspectives on the HIV-care continuum, particular on PrEP initiation and usage. In their work the practicum student collaborated with organizations in both Toronto and Ottawa, including Public Health Ottawa (PHO), the Black Coalition for AIDS Prevention (Black CAP), Asian Community AIDS Services (ACAS), and the Ontario Aboriginal HIV/AIDS Strategy (OAHAS).

M. W.

Action Against Hunger Canada – Gender Unit

Action Against Hunger Canada is one of six NGO headquarters located internationally with specialized focus on ending hunger in low-and middle-income countries, and providing food security programming in North America. The Canadian headquarters uniquely provides evidenced-based technical support and evaluation for headquarters focused on implementing interventions and programming to mitigate hunger. For my practicum I worked in the Gender Unit to support ongoing policy development needed to update the organization's cross-network gender policy. Gender inequalities have direct causal links with malnutrition; yet, in March 2020 the Global Nutrition Report showed that global efforts to mitigate hunger by addressing gender inequalities are behind on most targets. To better capture and learn how to address underlying inequalities and drivers of malnutrition, my practicum placement was created to research the associations and non-associations between gender, gender-based violence, and malnutrition. This practicum placement had three objectives: 1) to provide a literature review looking at associations and non-associations between gender, gender-based violence, and malnutrition; 2) to provide a database comprised of peer-reviewed and grey literature to be used by both the Gender Unit

and Canadian headquarters; and 3) to support new policy development during cross-headquarters discussions, research, and reporting. During this placement I have had the opportunity to work online with individuals in five continents, looking at gender equality in a variety of cultural contexts. The opportunity to engage in international and cross-cultural collaborative work has been the highlight of my practicum. It has provided the opportunity for hands-on learning to not only sharpen my reflexive praxis as a student of public health, but to sharpen my understanding of the policy process at the organizational level, and the importance of context when working in research and programming on gender equality and gender-based violence.

J. A. Y.

StFX University – National Collaborating Centre for Determinants of Health

The National Collaborating Centre for Determinants of Health (NCCDH) is a knowledge translation centre that develops knowledge and resources to address health inequities and the social determinants of health. As a practicum student at the NCCDH, I was involved in many projects. Firstly, I helped develop and deliver a webinar on police violence and anti-Black racism called "Actionable ways to address anti-Black racism and police violence through public health practice". This was a topic that was very timely, as we had begun developing the webinar during the Black Lives Matters protests that were occurring worldwide. It allowed for discussions to take place around the role of public health in addressing anti-Black racism in law enforcement. Secondly, I was involved in writing a literature review. This review built on the webinar, looking at anti-Black and anti-Indigenous racism in policing and how it leads to police violence against Black and Indigenous communities. This paper is currently in review, with plans of publishing it for its use in the wider public health community. Thirdly, I was involved in a working group that was established to create a data accountability and governance framework for Black communities. The need to develop this framework arose when it was announced that Ontario and Canada as a whole were planning to collect and use race-based data. This was to also ensure that Black people in Canada were not negatively impacted by the collection of this data, as when used incorrectly, can cause negative health outcomes in Black Canadians. Finally, I was tasked with completing a variety of resource library entries. This process involves identifying important resources and extracting the information most relevant to public health and health equity work. This entry allows the reader to determine whether the resource contains information valuable to their work without having to skim through the entire document. My experiences at the NCCDH have been immensely valuable as I have been able to improve skills in knowledge translation and as a public health researcher, while working towards the goal of achieving health equity.