

Newfoundland & Labrador Centre for

**APPLIED
HEALTH
RESEARCH**

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YEARS

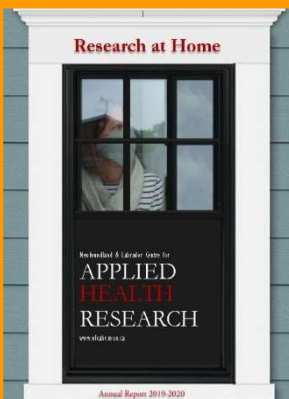
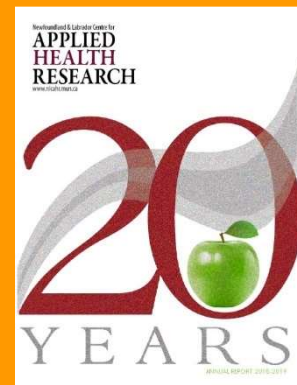
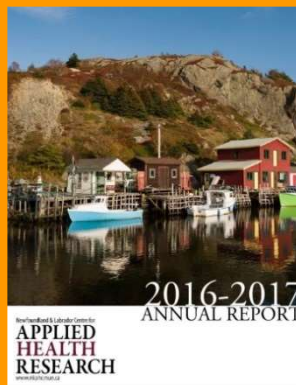
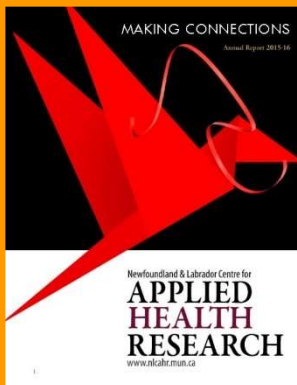
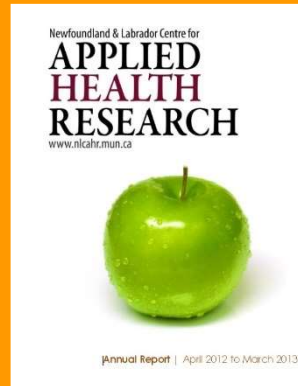
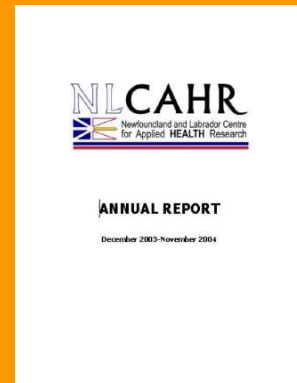
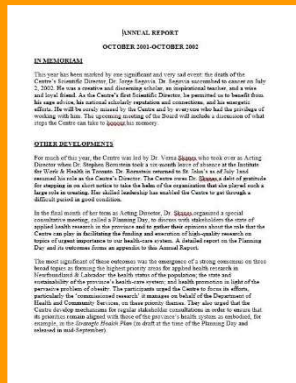
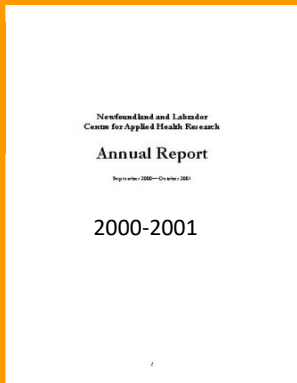
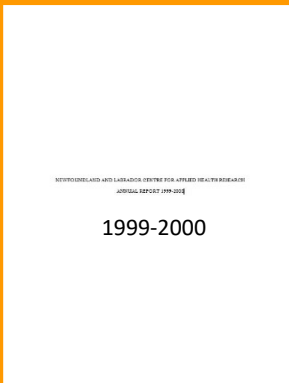
Annual Report 2023-2024



Alone, we can do so little.
Together, we can do so much.

- Helen Keller





Greetings from the Chair

This year, the Newfoundland and Labrador Centre for Applied Health Research (NLCAHR) celebrates a milestone — 25 years of research and engagement to improve health and healthcare in Newfoundland and Labrador. This annual report pays tribute to the Centre's many achievements since it was established in 1999: support for evidence-informed decisions, building capacity for applied health research, and forging a sustainable model for collaboration and partnerships.

Researchers in the Centre's flagship Contextualized Health Research Synthesis Program (CHRSP) continued this year to provide evidence that addressed important questions posed by health system leaders. Working closely with NL Health Services and the provincial government, the CHRSP team supported decision makers who are leading the historic transformation of health and healthcare delivery in Newfoundland and Labrador. CHRSP took a new approach to decision support this year, developing a rolling model of topic submissions. Its novel *Rapid Decision Support* approach, developed in consultation with health system partners, was designed to meet evolving needs in a rapidly-changing healthcare context. This year, CHRSP published an impressive sixteen *Rapid Decision* reports on topics ranging from the optimal skills mix for family care teams to clearing surgical backlogs, from virtual urgent care to health system navigation. In addition to these responsive reports, in the fall of 2023, CHRSP published an expedited *Evidence in Context* report on ways to prevent infections associated with substance use, a key concern arising from the opioid crisis. With funding from Canada's Support for Patient Oriented Research (SPOR) Evidence Alliance, CHRSP is now initiating two new studies— a patient-led project on Family Care Teams and research on behalf of the Department of Health and Community Services that will look at improving efficiency in healthcare. In addition, NLCAHR researchers have just completed a project funded by the Transition House Association of Newfoundland and Labrador on data collection and frameworks for provincial shelters and transition houses for abused women and their children. The team is also supporting an Atlantic Canadian CIHR-funded study on the quality of work life in Long-Term Care settings.

The Centre's dynamic program for public engagement, the Research and Knowledge Exchanges, have once again provided a welcome forum for a growing number of university researchers, healthcare workers, decision makers, community groups, and members of the public to exchange research, practice, and experiential knowledge on a wide range of health topics. The groups have discussed research findings and community programs, talked frankly about healthcare practice and policy, and highlighted the expertise derived from lived and living experience, all with a view to improving lives, creating research and collaboration opportunities, developing innovative community programs, and promoting health and research literacy in this province. This year saw the initiation of two new exchanges: one devoted to Health Human Resources and another on the Learning Health and Social System— key provincial priorities.

While it is very gratifying to look back on the Centre's many achievements this year and over its 25-year history, it is also heartening to look to the future as NLCAHR continues to strive for excellence in research and engagement. On behalf of the Board, I thank the many valuable partners who have contributed to NLCAHR's success: health system, government, and community workers, patients, caregivers, students, and academic colleagues. I applaud your collective efforts, together with the dedicated work of the director and staff, as you commit your many talents to the transformation of health and healthcare in Newfoundland and Labrador and inform this important work with the best available health evidence.



Dolores McKeen, MD, FRCPC, MSc, CCPE
 Dean, Faculty of Medicine, Memorial University
 Chair, NLCAHR Board of Directors



Greetings from the Director

As we mark NLCAHR's twenty-fifth anniversary, I feel privileged to be part of a valuable organization that has been supporting health and healthcare in Newfoundland and Labrador for a quarter century. The Centre's work has always been a collective effort: engaging with health system and community partners; developing the potential of its dedicated staff; building lasting relationships with colleagues at Memorial University and other universities; and harnessing the talent of many promising graduate students. This work continues to evolve, and the Centre's growth and change have been steadily sustained and supported by government and the university since 1999.

This has been another very busy year for researchers in our Contextualized Health Research Synthesis Program (CHRSP) who have harnessed the best we have to offer for the improvement of healthcare on behalf of a health system in transition. CHRSP continues to adapt its decision support approach in response to our partners' changing needs: strengthening ties with healthcare leaders from across the province, launching a rolling topic selection process, developing its relationship with the NL SUPPORT Public Patient Advisory Council, collaborating with partners and experts here and in other provinces, and generating sixteen studies that we hope will have a meaningful impact on healthcare in the province. As you will read in the pages of this report, CHRSP published sixteen *Rapid Decision Support* publications this year—reports that were produced in response to urgent needs for evidence. Feedback on the new approach has been overwhelmingly positive with partners consistently reporting appreciation for the timeliness, thoroughness, and responsiveness of these studies. In addition, this year's annual report highlights the *Evidence in Context* publication we released in September to look at effective ways to prevent HIV, Hepatitis-C and other blood-borne infections among people who inject substances. The team also recently completed research on data collection frameworks, commissioned by the Transition House Association of NL. Our researchers are now working on two new research projects funded by the Support for Patient Oriented Research (SPOR) Evidence Alliance, of which NLCAHR is a proud member. Finally, we are poised to begin writing the progress reports for a CIHR-funded study on the quality of work life in Long-Term Care.

Embodying our steadfast commitment to community-university engagement, our Research and Knowledge Exchanges have fostered communities of interest among people who share concerns and perspectives but who might otherwise not have had an opportunity to connect—a crucial catalyst for research capacity-building, collaboration, and the promotion of health literacy in Newfoundland and Labrador. The Exchanges have engaged with more than 1,800 participants this year, attracting more high-profile presenters and once again showcasing the outstanding research taking place here at Memorial while also highlighting the important work of our many community and health system partners. Two new groups— Health Human Resources, and the Learning Health and Social System— were successfully launched this year in response to health system priorities.

NLCAHR has also continued to honour its ongoing commitment to Memorial University's Aging Research Centre (ARC-NL), located at the Grenfell Campus, by helping to manage its funding program and providing crucial administrative support.

Since taking on the role of Director in 2021, I have been fortunate to work with our many partners to build on the Centre's successes and continuously improve an organization that contributes so much to our province's health system. I thank the staff and the NLCAHR Board for your continued dedication to this valuable work. For this special anniversary report, I hope you will agree that we have plenty to celebrate when it comes to the Centre's history and lots more to look forward to in the years to come.



Rick Audas, BBA, MBA, MA, Ph.D.
Professor, Faculty of Medicine, Memorial University
Director, NLCAHR





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About Us





“The Department of Health and Community Services has worked closely with the Newfoundland and Labrador Centre for Applied Health Research for the past 25 years.

NLCAHR’s responsive work provides key research that government uses to inform decision-making and strategic planning.

We are proud to partner with NLCAHR and wish them all success with the next 25 years.”

The Honourable Tom Osbourne,
former Minister of Health and
Community Services,
Government NL
June 2024



The Newfoundland and Labrador Centre for Applied Health Research (NLCAHR) collaborates with partners in government, healthcare, and community to produce research, to engage the public, to build capacity, and to mobilize knowledge in support of evidence-informed decision-

making. The Centre’s Contextualized Health Research Synthesis Program (CHRSP) is a partnership with the healthcare system that identifies, prioritizes, and co-produces timely and relevant health evidence, attuned to local capacities. CHRSP has informed decisions about practices, programs, and policies in Newfoundland and Labrador. The Centre’s Research and Knowledge Exchanges provide a forum where members gather to exchange research knowledge and the knowledge of lived and living experience to build collaborations, improve practice and create programs in a variety of health-related areas. NLCAHR also brokers connections among university and community partners to develop new research, to seek funding, and to support community- led projects. Established as a research centre at Memorial University in 1999, NLCAHR is funded by the Department of Health and Community Services with support from the Faculty of Medicine.

NLCAHR’s vision is to improve the health of individuals and communities through applied health research, education, and public engagement, and to foster a culture of respect for the diversity of perspectives and expertise that community partners bring to research and policy making.

NLCAHR’s mission is to contribute to the effectiveness of the health and community services system of Newfoundland and Labrador and to the physical, social, and psychological health and well-being of the province’s population by supporting the development and use of applied health research.

Through inclusive community engagement, NLCAHR has the following principal goals:

- to build capacity and organizational resources for quality applied health research in the province;
- to increase the amount and impact of quality applied health research undertaken on priority themes; and
- to help increase the effective and efficient use of research evidence in the province.

The Director manages NLCAHR and reports to a Board of Directors that guides the Centre’s strategic decisions. We thank the Chair and members of our Board of Directors for 2023-2024: Interim Chair, Dr. Brenda Wilson, Associate Dean, Population Health and Applied Health Sciences, Faculty of Medicine; Chair, Dr. Dolores McKeen, Dean, Faculty of Medicine. We thank our outgoing Chair, Dr. Margaret Steele for her dedicated service to the Centre. We also thank NLCAHR Board members Andrea McKenna, Deputy Minister of Health and Community Services, Government NL, Alan Doody, Deputy Minister of Children, Seniors, and Social Development, Government NL, and David Diamond, CEO of NL Health Services (retired July 2024). Dr. Rick Audas, Director, serves on the Board ex officio.

Our People



Dr. Rick Audas
NLCAHR Director



Rochelle Baker
Manager, Communications,
Partnerships,
Research & Knowledge
Exchange



Julia Li
CHRSP Research Officer



Sarah Mackey
CHRSP Research Officer
and Patient Engagement
Coordinator



Pablo Navarro
Senior CHRSP Research
Officer



Tyrone White
Manager, IT, Finance,
Awards and Administration

Our Graduate Students

The Centre supervised a practicum placement this year for **Ronan Martel** who was completing his Master's of Public Health (MPH) degree at Memorial University in the summer of 2023. Ronan's community-based MPH Practicum Research Project was entitled: "*Building a Continuum of Care for Healthy Aging in the City of St. John's: How can we improve food security for older adults?*" Ronan presented this project as a work in progress to the Research and Knowledge Exchange (RKE) on Aging in 2023 and will present the final report in September 2024.

The Centre was also fortunate to work with graduate students under the Graduate Student Work Experience Program (GradSWEP) this year:

- **Varleen Kaur**, who is pursuing her M.Sc. in the Department of Biochemistry, supported the development of a new methods manual for CHRSP.
- **Taylor Anthony**, an M.Sc. student in Experimental Psychology, developed a series of online resources for NLCAHR, focused on the Social Determinants of Health.

In addition, we were delighted to welcome back to the Centre **Kazeem Adefemi**, a Ph.D. Candidate in the Division of Population Health and Applied Health Sciences, Faculty of Medicine at Memorial. Kazeem has worked with us in past years and returned this year to support the CHRSP team on a variety of research projects.

Staffing Changes in 2023-2024

Farewell

The Centre bid farewell this year to Colin Walsh, CHRSP Research Officer, who is pursuing a new career with the Department of Health and Community Services.

We thank Colin for his many years of service to NLCAHR and wish him the very best in future!

Welcome

In 2024, NLCAHR welcomed Julia Li as our newest CHRSP Research Officer. Julia holds a B.A. (Honours) in Bioethics and Health Studies from the University of Toronto and a Master's of Public Health from Memorial University.

Welcome aboard, Julia!



Celebrating 25 Years





Timeline of Events

1999-2024



- 1999 to 2003
 - NLCAHR opens in September of 1999 under the leadership of Dr. Stephen Bornstein
 - Collaborates with the SafetyNet Centre for Occupational Health & Safety
 - Launches the NLCAHR Applied Health Research Awards
 - Works with the provincial health system on directed research contracts
- 2004 to 2006
 - Hosts stakeholder forum for strategic planning/new decision support approaches
 - Develops the Contextualized Health Research Synthesis Program (CHRSP)
 - Health technology assessments with Canadian Agency for Drugs and Technology in Health
 - Launches Research Affinity Groups: Rural Health, Aging, and Women’s Health
- 2007 to 2008
 - Publishes first CHRSP *Evidence in Context* report, “Options for Rural Dialysis in NL”
 - Hosts provincial Knowledge Translation Forum
 - Launches and administers funding under new NL Healthy Aging Research Program
 - Hosts visiting lecturers on genomics, occupational health & safety, and rural health
- 2009 to 2010
 - Establishes “CHRSP Champions” to connect research with senior health system leadership
 - Receives \$125,000 from CIHR to produce new CHRSP studies
 - Hosts Trudeau Foundation Forum on Healthcare Reform
- 2011 to 2012
 - Research Affinity Group on Aging starts plans for a provincial Aging Research Centre
 - Hosts CIHR Café Scientifique on shared decision-making: “Who Decides and How?”
 - Co-hosts provincial conference on Building Healthy Communities
 - Launches *Rapid Evidence Reports* and produces first rapid studies
- 2013 to 2016
 - Hosts CIHR *Best Brains Exchange* on healthy aging in the community
 - Administers *Enhancing Healthcare* awards to improve patient care in NL
 - Hosts Health Forum 2015: Provincial Candidates’ Debate
 - Distributes over \$470,000 in research funding
- 2017 to 2019
 - Launches *Snapshot Reports* and produces first jurisdictional scans
 - Establishes the CHRSP Patient & Caregiver Advisory Council
 - Receives \$100,000 CIHR Bridge Funding for cross-Canada CHRSP collaboration
 - Celebrates opening of Aging Research Centre-NL (ARC-NL) in 2018
 - CHRSP featured in a peer-reviewed article in *Systematic Reviews*
 - 20 years: 19 Research Exchange Groups, 38 studies, distributed + \$3.8 million in awards
- 2020 to 2022
 - Produces *COVID-19 Quick Response Reports/ e-bulletins* for health system in NL/ Canada
 - Hosts 20 Research & Knowledge Exchanges with over 1,200 participants
 - Dr. Stephen Bornstein retires after + 20 years. Dr. Rick Audas assumes leadership role
 - Centre moves to new offices in the Health Sciences Centre
 - Works with health and community partners on support for system transformation
- 2023 to 2024
 - Health System consultations produce new CHRSP products and methods
 - First *NLCAHR Experts’ Exchange* on Health System Integration
 - Establish new pathway for patient/caregiver advice: NL SUPPORT/ Research Exchanges
 - 25 years: 24 Research & Knowledge Exchanges, 150 research publications, including 61 CHRSP studies, 55 COVID-19 e-bulletins and 34 pandemic response reports.

2024 and beyond....

- ✓ More teaching and learning opportunities to connect students with NLCAHR
- ✓ More funded research: SPOR Evidence Alliance and CIHR-funded projects
- ✓ Research & Knowledge Exchanges: connecting to CHRSP research/ provincial priorities
- ✓ Brokering partnerships for research, engagement, and community programming
- ✓ Strengthening connections with ARC-NL and Memorial's Office of Public Engagement

A Proud Legacy: Research and Community Connections

To celebrate our 25th anniversary year, we asked our partners to tell us about their experiences with NLCAHR. We thank the many contributors who have kindly shared their stories and congratulatory messages in the pages that follow, and we extend our gratitude to all our partners for their valuable support of our Centre!



One drop makes a ripple

My story begins in Deer Lake where I grew up and began my path towards becoming a physiotherapist. My passion was always about the brain and how training could trigger new neural networks to learn and restore lost functions. This led me to doctoral training in neuroplasticity in the Faculty of Medicine at Memorial University. As a graduate student in 2003, I was at a disadvantage – I was an older student with no scholarships or previous history in science. In 2006, NLCAHR awarded me my first grant: \$17,700 to test an innovative therapy to improve arm and hand

recovery in stroke. Through mentorship provided by the Centre’s Director, Dr. Stephen Bornstein, four years later, I was successful in obtaining a Healthy Aging Research Program post-doctoral fellowship through NLCAHR to study how lifestyle protected the brain in persons with multiple sclerosis. National and international competition to obtain funding for research is extremely challenging with only about 20% of applications being successful. Our province, being at a distance from larger centers, is especially disadvantaged.

How did the one drop of NLCAHR funding impact recovery research here in our province?

I was able to leverage NLCAHR mentorship and funding to obtain small grants from charities which led to success in federal grant competitions. This led me to a faculty position at Memorial and designation as a Canada Research Chair in Rehabilitation, Neuroplasticity, and Brain Recovery. The support from NLCAHR and from Dr. Bornstein were the seeds that have since grown into a powerful program of research that impacts the lives of people in our province every day: stimulating recovery after stroke and the restoration of abilities among people with multiple sclerosis. The ripple of that early support allowed me to build the largest clinical research laboratory in the province at the Miller Centre. We have helped nearly 300 people with stroke and multiple sclerosis. I have obtained over \$6 million in funding; infusing those funds into our province to support students, staff, the purchase of equipment, and ultimately helping patients and their families. I have trained 110 of the next generation of health professionals and scientists who have each gone on to make their own contributions in science and health in Newfoundland and Labrador, across Canada, and beyond.

These are the ripples generated from a drop of support.

- Michelle Ploughman, BSc.PT, MSc., Ph.D.
Canada Research Chair (Tier II); Rehabilitation, Neuroplasticity and Brain Recovery
Professor, Bio Medical Sciences, Faculty of Medicine, Memorial University



Research on critical health issues in this province

Since joining Memorial University, my research has benefitted from the support of the Newfoundland and Labrador Centre for Applied Health Research. Over the years, I have been privileged to receive six research grants from NLCAHR, either as a principal investigator or co-investigator, from 2012 to 2016. These grants enabled me to explore critical health issues, such as colorectal cancer prevention, dietary assessment in elderly populations, and palliative care needs. The financial and intellectual support I received from NLCAHR has been crucial in advancing these research projects, which have had a significant impact on local health practices and policies.

Furthermore, NLCAHR's dedication to nurturing the next generation of researchers is commendable. Four students under my supervision have received scholarships or student research awards from NLCAHR, providing them with the resources and opportunities to pursue their research interests and contribute to the field of health sciences. This support has not only enriched their academic experiences, but also fostered a culture of research excellence and collaboration.

Real-world impact

One notable example of NLCAHR's impact is the validation of the Food-Frequency Questionnaire (FFQ) by our team, which included Dr. Barbara Roebouthan. Our paper, *"Assessing the validity of a self-administered food-frequency questionnaire (FFQ) in the adult population of Newfoundland and Labrador, Canada,"* published in the *Nutrition Journal*, has been cited over one hundred times. The FFQ has become a widely-used tool in nutritional epidemiology, demonstrating the far-reaching influence of research that was facilitated by NLCAHR's support.

My association with NLCAHR has resulted in twelve peer-reviewed publications, numerous conference presentations, and several impactful reports. These contributions have helped disseminate valuable research findings to the broader community, promoting health literacy and informed decision-making.

As NLCAHR celebrates its 25th anniversary, I reflect on the profound impact this organization has had on my research and professional growth. NLCAHR's commitment to connecting researchers, healthcare professionals, and community members has created a dynamic forum for knowledge exchange and collaboration. Their efforts have significantly enhanced the health and well-being of the people of Newfoundland and Labrador.

Looking ahead, I am confident that NLCAHR will continue to lead the way in health research and public engagement, building on its legacy of excellence and fostering innovative solutions to complex health challenges. I am grateful for the support and opportunities provided by NLCAHR and look forward to continuing our partnership in the years to come. Congratulations to NLCAHR on this remarkable milestone and thank you for your unwavering dedication to improving health and healthcare in our province.

- Peizhong Peter Wang, MD, MPH, Ph.D.
Professor of Epidemiology
Division of Population Health and Applied Health Sciences, Faculty of Medicine, Memorial University



"NL Health Services has benefited immensely from the innovative and collaborative work of the Newfoundland and Labrador Centre for Applied Health Research. Their evidence-based research helps guide many of our policies and practices, ensuring our strategies are grounded in the best available evidence. NLCAHR's work has not only helped enhance the quality of healthcare we are able to provide in our province but has also positively impacted the lives of countless individuals in Newfoundland and Labrador. We celebrate this milestone and look forward to our continued partnership."

**Ron Johnson, Vice President, Research and Chief Operating Officer
Eastern Urban Zone, NL Health Services**



"Aside from their excellent work in knowledge synthesis, NLCAHR has really become a catalyst for knowledge mobilization and connection in the context of health research and policy in Newfoundland and Labrador. Though I have only been working at Memorial since 2016, throughout these years, NLCAHR's Research and Knowledge Exchanges have given me a forum to learn and share about topics relevant to my career and interests. These meetings have been excellent places to seek feedback from people with a diversity of perspectives and to meet others working on, or concerned about, areas of interest to me. Every time I present to one of these groups, I leave with meaningful considerations

and actionable suggestions that have helped me move my work forward, especially in times where I didn't know what my next steps should be! NLCAHR is often the first place I recommend to anyone who asks where they should start when they are trying to learn more about a topic and/or who the stakeholders/knowledge users are that they should be engaging with ("email Rochelle" I always say!). Everyone that I've had the pleasure of working with at NLCAHR has been so receptive to, and genuinely helpful with, anything that I've reached out to them about, and I think that energy is what makes them such a successful connector and resource. I am eternally grateful for their help in spreading my messages over the years and look forward to continuing to collaborate with staff from NLCAHR in the future."

**Chelsey McPhee, Training and Capacity Development / Engagement Lead,
NL SUPPORT/Quality of Care NL**



"NLCAHR is a founding partner of the Aging Research Centre-Newfoundland and Labrador (ARC-NL), and we are delighted to continue this important partnership in support of aging research in the province. NLCAHR's Research and Knowledge Exchange on Aging has grown into a vibrant and engaged group and is a valuable platform to share research and ideas on topics around aging. Stephen, Rick, Rochelle, and Tyrone, thank you for your work with ARC-NL, and congratulations on 25 years of success!"

**Karen Doody, Ph.D. Assistant Professor of Environmental Science (Grenfell Campus),
Memorial University, Director of the Aging Research Centre- Newfoundland & Labrador**

"In my work with the NLCAHR, I've had the honor of addressing both mental health issues in Newfoundland and Labrador as well as 2SLGBTQIA+ issues that are being seen in our communities. In the sessions where I've been asked to present, the feedback was always great, the welcoming nature of the groups was fantastic. I look forward to working with the NLCAHR again in the future."

**Quinn Jesso - Mental Health Promotion Coordinator, Community Mental Health Initiative
Chair of Corner Brook & Bay of Islands PRIDE Committee**



"I have worked with NLCAHR in various capacities since near its beginning. It is great to have seen first-hand many of the Centre's contributions to people's health in our province. Congratulations to everyone who has been involved and best of luck on the next 25 years."

Roger Chafe, Professor of Health Services Research and Evaluation MA, PhD (Memorial), Division of Population Health and Applied Health Sciences, Memorial University; Postdoctoral Fellow (U of Toronto / Cancer Care Ontario)



"We are grateful to our partners at the Newfoundland and Labrador Centre for Applied Health Research. Their engaging, responsive, and dedicated support in gathering evidence for NL Health Services has been crucial during this time of transformation for our organization. They have been a valued partner in supporting the development of a pathway for a Learning Health and Social System, exemplifying true collaboration and capacity-building. Congratulations to NLCAHR on their 25th anniversary!"

**Kelli O'Brien, Vice President – Quality and Learning Health Systems
NL Health Services**



"NLCAHR provides an invaluable service to our province by breaking down the communication barriers across our many organizations and across our vast landscape. Every project I ever completed at the Centre had at least one instance of groups learning about each other's projects for the first time, all because of being connected through NLCAHR!"

Colin Walsh, former CHRSP Research Officer



"NLCAHR has played a significant role in my journey through my doctoral degree and early researcher career. NLCAHR continues to provide opportunities for professional exchange and knowledge translation. Their legacy has been developing scholars in healthcare and connections with the community. I personally am forever grateful."

**Roberta DiDonato, Ph.D., Adjunct Professor,
Faculty of Medicine, Memorial University**



"NLCAHR has enabled me to meet colleagues doing research and teaching in disciplines and areas adjacent to the ones in which I teach and research. I have valued the inspiration, education, and sharing of resources that this has enabled."

**TA Loeffler, Professor,
School of Human Kinetics and Recreation, Memorial University**

“The NL Centre for Applied Health Research is a great forum to link students, academics, and all members of the community to work together to foster research through community development. I have been a member of the Research and Knowledge Exchange on Aging since 2010 when I was a Ph.D. student. The connections I have made through the Exchange to continue my research with community organizations have been very valuable.”

Sue Ann Mandville Anstey, Ph.D., RN., GNC (c)
Faculty Member, Centre for Nursing Studies



“I have attended presentations about Autistic adults, art, storytelling, and technology. The Research & Knowledge Exchange on Autism is essential for getting to know other researchers and discussing findings in some emergent areas involving technology development and empowering support tools for Autistic individuals.”

Javier Rojas, Ph.D. Candidate, Interdisciplinary Ph.D. Program
School of Graduate Studies, Memorial University



“NLCAHR facilitates connections between groups who are usually siloed: academics, practitioners, decision-makers, end-users. Their sessions enable conversations that are much needed but often ignored due to other priorities.”

Taylor Stocks, Ph.D. Candidate,
Faculty of Education, Memorial University



“Over the years, we have come to value the connection we have with your Centre. NLCAHR has provided learning moments by giving us the opportunity to hear about research, especially in the areas of addictions, mental health and criminal justice issues. Keep up the good work!”

Dan McGettigan, Founder and Director of Turnings, a volunteer community organization offering Circles of Support and Accountability for ex-offenders



“As an Autistic disabled person in a system not built to hear voices like mine, by means of an invitation from a colleague at the NLHS Mental Health and Addictions Department, I now have a space in the Research and Knowledge Exchange Program. Through this program, I can finally feel heard and valued as an equitable contributor and stakeholder to the diverse and engaging conversations held at NLCAHR that are no doubt some of the best think-tank and action-producing initiatives that you may not have heard of!”

Angie Follett (a.k.a Au Addison Cochrane), Autism and Disability Consultant (Community-based) and Patient and Family Experience Advisor, NLHS Urban Zone



“The Research & Knowledge Exchange Program is one of the few places where the academy with its facility for accelerating research and knowledge, especially around social issues, engages with the profound research and knowledge outside itself in a respectful intersection of sharing and forward movement. My feedback can be summed up as ‘thank-you’.”

Lois Brown, Multidisciplinary Artist



“NLCAHR contributes to research and public engagement in Newfoundland and Labrador, acting as a central hub for scholars, practitioners, activists, and the public interested in gender, health, and sexuality. It facilitates learning, consciousness-raising, and fosters collaboration on innovative research that informs practice.”

**Dr. Sulaimon Giwa, Interim Dean and Associate Professor
School of Social Work, Memorial University**



“Quadrangle NL sees NLCAHR as a leader in supporting and contributing to the importance of community-led research.”

**Charlie Murphy, former Executive Director and co-founder
Quadrangle NL**



“The Arts and Health Research and Knowledge Exchange has been a platform for keeping me up to date on research happening in Newfoundland and Labrador as well as educating me on challenges and successes in our healthcare system.”

**Annette Manning
Artist working in creative processes that promote wellbeing**



“NLCAHR provides a place to connect and be part of discussions. It is informative.”

**Sherrie Komiak, Associate Professor,
Faculty of Business Administration, Memorial University**



“Good things happen when plants are cared for, and roots are encouraged to expand and connect with rich soil. Such is the metaphor for the Phoenix Garden Project, Meditation Garden, and Honeybee Initiative inside the walls of Her Majesty's Penitentiary in St. John's. None of the growth in our program could have happened without the connections and collaborations with community partners provided through the Newfoundland and Labrador Centre for Applied Health Research. Rochelle Baker, Manager of Communications and Partnerships for NLCAHR, has been the essential and positive thread that has kept the Phoenix Garden Project buzzing and blooming for three years. And this program really is about relationships and connections! A favourite quotation from one of the inside gardeners at HMP happened on a recent Monday afternoon when he said, *"The thing I like most about this program is the chance to learn more about gardening. We also know that when you guys come inside the prison each week, the community cares and knows about Phoenix. That means a lot."*

Jan Buley, B.A., B.Ed., M.A/M.Ed., Ph.D.

Associate Professor of Education, Memorial University, on behalf of the Phoenix Garden Project



“The Research and Knowledge Exchange program has been such an invaluable way to bring like-minded people together to share and collaborate. I am a member of several Exchanges, and over the years, I have learned from others, shared my research with the groups, and made connections with other researchers. Hats off to NLCAHR for supporting applied health research in this province and managing over 20 Exchanges!”

**Dr. Lisa Bishop, Pharmacist and Professor,
School of Pharmacy, Memorial University**



“Congratulations to NLCAHR on turning 25! The Research and Knowledge Exchange groups have allowed me to meet so many wonderful people with similar interests.”

**Phil A. Murphy, Manager of Clinical Epidemiology,
Children's and Women's Health Program,
NL Health Services**

“The NL Centre for Applied Health Research has been critical to collaborative practice and inter-professional facilitation, intersecting social context with health practice. It links practitioners, faculties, divisions, policymakers and/or individuals to find innovative relationships toward better health. The NLCAHR has established a practical forum for health practitioners and dedicated researchers to venture out of clinical and academic silos to discover new approaches and relationships that will improve health professional practices and policy. The Research and Knowledge Exchange on Oral Health is one perfect example of NLCAHR-facilitated support in this province, hosting various exchanges, and underpinning the integrity of oral health in health practice and its rightful place in primary healthcare. Thank-you NLCAHR!”

Cindy Holden, RDH, MPH

Community Researcher and Convener of the Research and Knowledge Exchange on Oral Health



Research

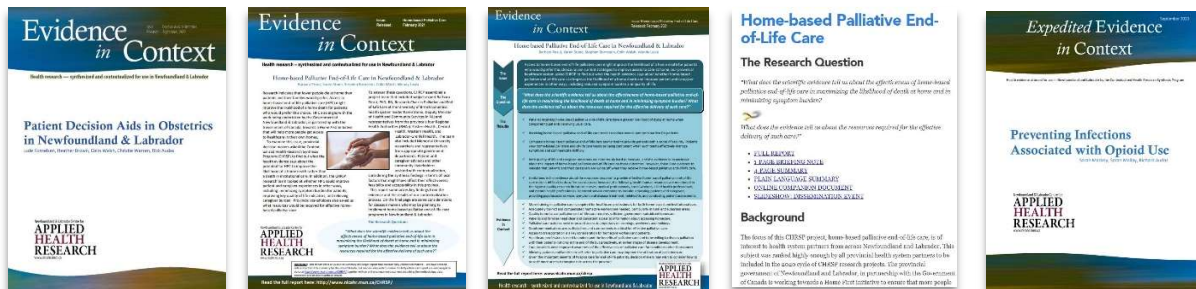


The Contextualized Health Research Synthesis Program (CHRSP)

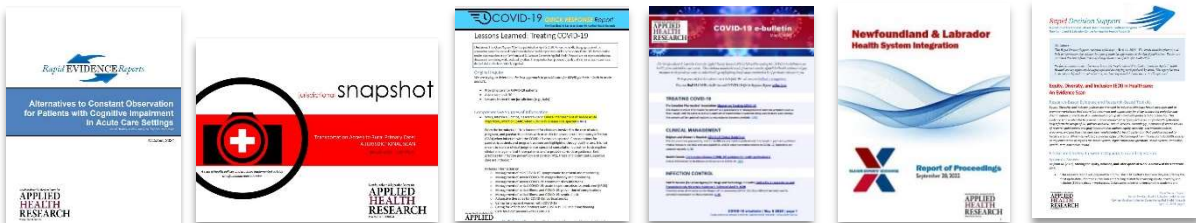
CHRSP is a collaboration among applied health researchers at NLCAHR, leaders and front-line staff in our provincial health and community systems, and patient/caregiver advisers. Using an innovative knowledge translation approach, CHRSP supports decisions on priority issues that our partners identify. CHRSP researchers work closely with these partners on a variety of decision support approaches. To include crucial patient and community voices in its research, CHRSP also aligns its work with the NLCAHR Research & Knowledge Exchanges and consults with the NL SUPPORT Public Patient Advisory Committee.

A History of Adaptation

CHRSP is committed to providing flexible, timely access to evidence for its partners— evidence presented in formats that are designed to be accessible and effective. By synthesizing and summarizing the evidence on selected topics, CHRSP researchers ensure that decision makers have the information they need to inform pending practice and policy changes and innovations. The report covers below illustrate the growth and adaptation of CHRSP research approaches since 2008, an evolution that responds to our partners' needs.



Evidence in Context: The original CHRSP product, introduced in 2008, synthesizes high-level evidence and contextualizes that evidence for use in this province. These reports have evolved over the years to include flexible formats. L-R: A fully contextualized evidence synthesis, a four-page summary, a one-page briefing note, a plain language summary, and an expedited report based on the findings from a single meta-analysis.



Other CHRSP Products: CHRSP innovations resulted from listening to our partners when they told us: they needed more timely evidence; they needed to address a global pandemic; and, most recently, they need decision support for health system transformation. L-R: *Rapid Evidence Reports*, established in 2012, provide quick turnaround time, *Snapshot Reports*, introduced in 2017, highlight interventions from other jurisdictions, *COVID-19 Quick Response* and *COVID-19 e-bulletins* supported the pandemic response (2020-22); *NLCAHR Experts' Exchanges* and *Rapid Decision Support* (2023 to present day) are new approaches to support transition planning.

Support for a System in Transition

CHRSP researchers have directed their energies again this year to the health system transformation underway in NL healthcare, including support for the establishment of the new provincial health authority— NL Health Services, and the many decisions being undertaken to implement Health Accord NL's ten-year plan for healthcare transformation across Newfoundland and Labrador.

CHRSP- Health System Consultation

Again, this year, the CHRSP team worked with its partners to co-create responsive decision support for transition planning. This year saw a shift towards a timelier response to health system needs *as they arise*, rather than the traditional annual topic selection approach that CHRSP has taken in past years. CHRSP *Rapid Decision Support* was the research method of choice for our partners this year. To date, CHRSP has produced 16 evidence summaries or jurisdictional scans on matters of pressing importance, in consultation with our health system partners. The CHRSP team recognizes that in a period of transition, decision support requirements will evolve and change. As key partners in this new approach, our health system and government partners are working with CHRSP every day to identify key research themes; to prioritize research projects; and to weave CHRSP decision support directly into strategic planning. In addition to the health system leaders listed below, we thank the many CHRSP contributors from across the province working in a variety of roles and on the front lines in healthcare and community services. We are very grateful to the following people who worked with us this year on topic submission and prioritization:

CHRSP Partners at the Department of Health and Community Services (DHCS):



- Donna Roche, Director of Policy and Planning, CHRSP Champion for DHCS
- John McGrath, Deputy Minister, DHCS
- Megan Hayes, ADM of Health Professional Recruitment & Retention
- Carla Whittle, Director of Health Professional Recruitment & Retention
- Jeannine Herritt, ADM of Regional Services
- Andrew Wells, Manager of Health Workforce Planning
- Deena Waddleton, Director of Seniors' Healthcare

CHRSP Partners at NL Health Services (NLHS):



- Keith Parsons, Provincial Director of Planning and Policy, CHRSP Champion for NLHS
- Dave Diamond, CEO up to June 30, 2024
- Karen Stone, CEO (Interim) effective July 1, 2024
- Kenneth W. Baird, VP Transformation- Transition
- Cassie Chisholm, VP Transformation- Primary Healthcare
- Darla King, VP Transformation-Wellbeing
- Kelli O'Brien, VP Transformation- Quality and Learning Health Systems
- Liam Kelly, Provincial Director of Research and Innovation
- Ron R. Johnson, VP Research and COO, Eastern Urban Zone
- Debbie Walsh, VP COO, Eastern Rural Zone
- Joanne Pelley, VP COO, Central Zone
- Teara Freake, VP COO, Western Zone
- Antionette Cabot, VP COO, Labrador-Grenfell Zone until Sept 2023
- Sandy Penney, VP COO, Labrador-Grenfell Zone effective Sept 2023

CHRSP Partners at the Department of Children, Seniors, and Social Development (DCSSD):



- Henry Kielley, Director, Seniors, Aging, Disability Policy, CHRSP Champion for DCSSD
- Alan Doody, Deputy Minister, DCSSD
- Renee Ryan, Director, Social and Economic Well-Being Director
- Aisling Gogan, Assistant Deputy Minister Executive Branch

Health System Feedback on Rapid Decision Support

Because *Rapid Decision Support* is a new CHRSP product, we wanted to make sure it is useful for our partners. We asked the Executive Team at NLHS to tell us whether they found this novel approach and report format to be helpful. Their response has been overwhelmingly positive! Here are some examples of feedback we've received:

“The CHRSP Rapid Decision Support on ambulatory arthroplasty was definitely useful. Our planning team reviewed the published scientific guidance on safety of ambulatory arthroplasty, and it was exactly what we were looking for. Also, the format is great— “Goldilocks”— not too much, not too little. Just enough! What you provided is perfect and I think we are in good shape for the moment on this issue. I cannot thank you enough! Now that I know how great this process is, I will be back! Very much appreciate this work!”

“Your Rapid Decision Support was definitely helpful. It provided some good information and references and contributed to planning within NL Health Services. We shared the report broadly and it helped to stimulate discussions and conversations about next steps. The report was circulated amongst Steering Committee members and, now that we are starting to discuss next steps to move towards implementation of the Well-Being Networks, there will be opportunities for us to partner with CHRSP again.”

“Some great information here on Family Care Teams. I have had a look through and have heard back from my colleagues about the reports. The concern or driver to look into appointment length is related to access and efficiency, so exploring types of effective scheduling should align with this issue— your scan covers this question very well.”

CHRSP Products

Consultations with our partners revealed that the 18-month timeframe required to produce our traditional CHRSP *Evidence in Context* reports may be too resource-intensive and time-consuming to meet their evolving needs for decision support in a period of transition. From 2023 to 2026, CHRSP is instead committed to expedited health evidence, decision support and guidance, including:

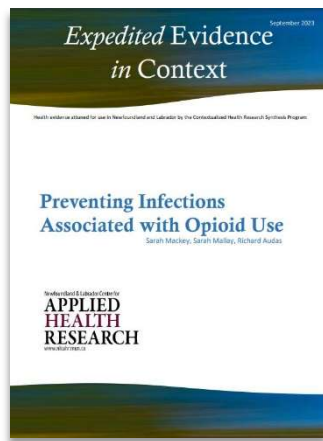
- *Rapid Decision Support*- summaries of relevant evidence and/or jurisdictional scans with links to publications to inform planning teams
- *Rapid Evidence Reports*- lengthier knowledge syntheses guided by expert consultants and including evidence, critical appraisal, key findings, and contextual considerations
- *NLCAHR Experts’ Exchanges*- one-day, in-camera meetings where leading experts answer questions and advise planning teams
- *Snapshot Reports*- detailed jurisdictional scans of practices, programs, or policies used elsewhere that might be adapted for use in Newfoundland and Labrador
- Focus Groups with Patients/Caregivers/ Research Exchange Groups to support contextualization and gain patient and caregiver perspectives on proposed changes to care delivery.

Completed CHRSP Studies 2023-2024

This year, CHRSP researchers completed the following *Rapid Decision Support* publications in response to direct inquiries from our partners at NL Health Services:

- [Environmental Sustainability Evidence Scan 2024](#)
- [Environmental Sustainability Jurisdictional Scan 2024](#)
- [Equity Diversity and Inclusion in Healthcare 2024](#)
- [Equity Diversity and Inclusion Frameworks 2024](#)
- [Virtual Urgent Care 2024](#)
- [Airway Management in Rural Settings 2024](#)
- [Point of Care Testing in Rural and Remote Settings 2023](#)
- [Health System Navigation Evidence Scan 2023](#)
- [Health System Navigation Jurisdictional Scan 2023](#)
- [Improving OR Performance: Joint Surgery Backlog 2023](#)
- [Optimal Skills Mix for Family Care Teams 2023](#)
- [Various Policies to Support Family Care Teams 2023](#)
- [Family Care Team Scheduling 2023](#)
- [Outpatient Pathways for Joint Arthroplasty 2023](#)
- [Patient Selection for Joint Arthroplasty 2023](#)
- [Wellness Networks 2023](#)

CHRSP researchers also completed the following projects this year:



Preventing Infections Associated with Opioid Use, An Expedited Evidence in Context Report (September 2023). [Link to Report](#)

Authors: Sarah Mackey, Sarah Mallay, Richard Audas

About the report: This research project identified and contextualized evidence for interventions that will prevent infections associated with opioid use among people who inject opioids or other substances in Newfoundland and Labrador. In the initial search for evidence on this topic, CHRSP researchers located a knowledge synthesis that replicated the CHRSP approach to evidence gathering (i.e., a systematic review of systematic reviews, sometimes referred to as an “umbrella review”). This report summarized evidence from this umbrella review, placing that evidence in context for decision makers in Newfoundland and Labrador.

Interventions under study:

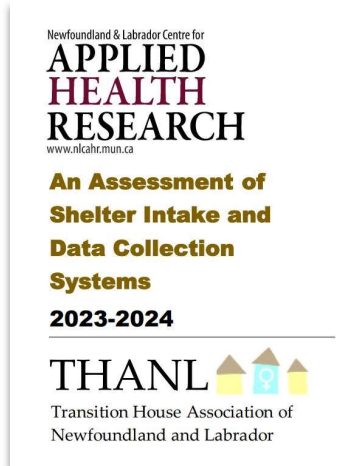
- **Opioid Agonist Therapy (OAT)** is a treatment for substance use disorder aimed at preventing withdrawal symptoms and reducing cravings for opioids. OAT involves taking opioid agonist medications such as methadone (Methadose) or buprenorphine (Suboxone). It may also include other prescriptions for pain management and works best when combined with counselling.
- **Needle and Syringe Distribution Programs (NSDP)** provide new needles and injection equipment for people who inject drugs to reduce the risks of acquiring and/or transmitting blood-borne infections.

Evidence Summary:

The authors of the evidence synthesis found:

- sufficient evidence for the effectiveness of Opioid Agonist Therapy to prevent human immunodeficiency virus (HIV).
- sufficient evidence for the effectiveness of Opioid Agonist Therapy combined with needle and syringe distribution programs to prevent hepatitis C virus (HCV).
- tentative evidence for the effectiveness of Opioid Agonist Therapy to prevent HCV.
- tentative evidence for the effectiveness of Needle and Syringe Distribution Programs to prevent HIV.
- a lack of evidence regarding interventions to prevent infections other than HCV and HIV (e.g., such as skin infections [soft tissue abscesses, cellulitis], bone infections [osteomyelitis], or fungal infections in persons who inject opioids).
- a lack of evidence regarding interventions that target users of pharmaceutical opioids in legal and mixed opioid contexts (e.g., individuals with chronic pain conditions/populations with multiple comorbidities)

The Newfoundland and Labrador Context: With this evidence in hand, our CHRSP researchers conducted focus groups with members of the Research and Knowledge Exchange on Harm Reduction. In addition, they spoke with key informants to uncover contextual factors that might affect the feasibility, acceptability, and equity of interventions under study, when applied here in Newfoundland and Labrador. The final report summarizes contextual considerations for decision makers on pages 10 and 11 [here](#).



An Assessment of Shelter Intake and Data Collection Systems (2024)

A research project commissioned by the Transition House Association of Newfoundland and Labrador (THANL)

About the Study: The Transition House Association of Newfoundland and Labrador (THANL) is a voluntary, non-profit community-based organization whose mandate is to strengthen and support the network of provincially funded shelters and services for women – with or without children – affected by relationship violence. In 2023-2024, THANL entered into a partnership agreement with NLCAHR to carry out an assessment of shelter intake and data collection systems with the intention of updating its systems to a national standard, developing training materials to facilitate the transition, as well as summarizing perceived barriers and facilitators to change.

Project Parameters: The research team for this project included a supervisor from NLCAHR, a Registered Social Worker, and two research assistants supervised at NLCAHR. The project commenced in April 2023 with an ethics review. The team then carried out all necessary background work, collected data about Transition House admission criteria, processes, information collected, etc. and conducted a detailed analysis to develop a framework of THANL data-collection procedures. The project included the development of recommendations for future training procedures and outlining other attitudes and needs regarding the idea of implementing a standardized data collection framework. The team also developed an analysis of perceived barriers and facilitators to change and undertook an iterative dissemination and feedback process between the research team and stakeholders at THANL.

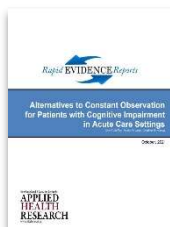
Work in Progress

CHRSR researchers are currently working on the following projects:



Current Rapid Decision Support topics

- Optimizing Physician Engagement in Healthcare
- Assessing Stepped Care
- Reducing Administrative Burden for Physicians



Current Rapid Evidence Reports/ Knowledge Syntheses

- Acceptance and Commitment Therapy for Chronic Pain Management
- Patient-initiated knowledge synthesis: “Patient Perspectives on Primary Care Teams” which has received \$40,000 in funding from the SPOR Evidence Alliance
- Knowledge synthesis for the Department of Health and Community Services with a focus on health system efficiencies, supported by \$25,000 in funding from the SPOR Evidence Alliance



CIHR-Funded Research: Long-Term Care Study

NLCAHR is supporting and supervising research on a project funded by the Canadian Institutes of Health Research (CIHR) entitled, “An Underrepresented, Undervalued

Workforce: Understanding and Supporting Quality of Work Life in Long-Term Care.” This study is being carried out from April 2023 to March 2027 with researchers seeking to understand how the conditions of work in Long-Term Care (LTC) affect the conditions of care of the residents. Researchers will assess how work environments may have an impact on the quality of work life of staff in LTC and ultimately, on resident quality of care outcomes. This study includes sites from across Atlantic Canada with Dr. Rick Audas, NLCAHR Director, leading a research team in this province. The project received a \$2.1 million CIHR Project Grant. The Principal Investigator is Dr. Janice Keefe, Mount Saint Vincent University, in partnership with Co-Principal Investigators Dr. Rick Audas, Memorial University/NLCAHR Director, Dr. Carole Estabrooks, University of Alberta, Dr. Gail Tomblin Murphy, Nova Scotia Health, and Dr. Rose McCloskey, University of New Brunswick. Other team members include academic and researcher partners from Dalhousie University, Memorial University, University of New Brunswick, University of Calgary, Nova Scotia Health, Nova Scotia Ministry of Health and other policy and practice stakeholders. [Link to Project Website](#)

CHRSP Publications: 2008 to 2024

[Link to all CHRSP publications](#)

Rapid Decision Support (introduced 2023)

Environmental Sustainability- 2 studies (2024)
 Equity Diversity and Inclusion in Healthcare (2024)
 Equity Diversity and Inclusion Frameworks (2024)
 Virtual Urgent Care (2024)
 Airway Management in Rural Settings (2024)
 Point of Care Testing (2023)
 Health System Navigation Evidence Scan (2023)
 Health System Navigation Jurisdictional Scan (2023)
 Operating Room Performance - Joint Surgery (2023)
 Optimal Skills Mix for Family Care Teams (2023)
 Various Policies to Support Family Care Teams (2023)
 Family Care Team Scheduling (2023)
 Outpatient Pathways for Joint Arthroplasty (2023)
 Patient Selection for Joint Arthroplasty (2023)
 Wellness Networks (2023)

Evidence in Context (introduced 2008)

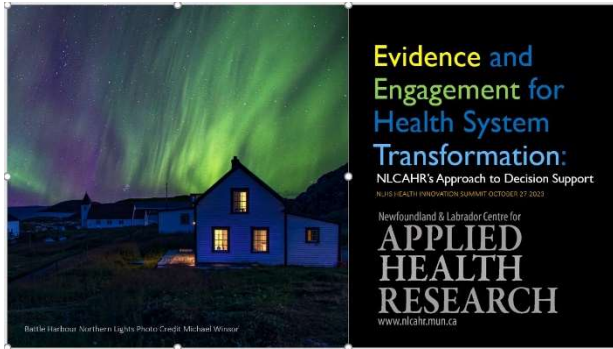
Preventing Infections / Opioid Use (2023)
 Patient Decision Aids in Obstetrics (2022)
 Home-based Palliative End-of-Life Care (2021)
 Evidence Update: Hyperbaric Oxygen Therapy (2019)
 Evidence Update: Resident Agitation in LTC (2018)
 Exercise Interventions for Long-Term Care (2017)
 Reducing Acute Care Length of Stay (2017)
 Prevention and Screening for Type 2 Diabetes (2016)
 Optimizing Independence: Dementia Care (2015)
 Troponin Point-of-Care Testing (2014)
 Managing Resident Agitation in LTC (2014)
 Fall Prevention for Seniors (2014)
 Community-Based Service Models for Seniors (2013)
 Telehealth for Specialist Consultations (2013)
 Updated Evidence on Rural Dialysis Services (2013)
 Age-Friendly Acute Care (2012)
 Hyperbaric Oxygen Therapy/ Wound Healing (2012)

Chronic Disease Management (2012)
 Youth Residential Treatment (2010)
 Reuse of Single-Use Medical Devices (2010)
 Childhood Overweight and Obesity (2009)
 PET-CT in Newfoundland and Labrador (2009)
 Dialysis Services: Rural and Remote NL (2008)
Rapid Evidence Reports (introduced 2012)
 Alternatives to Constant Observation (2021)
 Supported Employment (2021)
 Deprescribing Medications (2020)
 Rural Obstetrics (2019)
 Preschool Screening (2018)
 Chronic Disease and Palliative Care (2018)
 Mental Health Units in Acute-Care Facilities (2017)
 Digital Surveys /Collecting Patient Feedback (2016)
 Reducing Wait Times for Outpatient Services (2016)
 Health Promotion: Healthy Dietary Habits (2015)
 Ambulatory Care for Chronic Heart Failure (2013)
 Influenza Vaccination for Healthcare Workers (2013)
 Mobile Mental Health Crisis Interventions (2012)
 Safe Patient Handling Programs in NL (2012)
Snapshot Reports (introduced 2017)
 Transportation Access to Rural Primary Care (2023)
 Service Models to Support Families (2022)
 Capacity Assessments for Health Decisions (2022)
 Virtual Family Support Services (2021)
 Community-Based Rapid Access Clinics: COPD (2020)
 Indigenous Telepsychiatry (2020)
 Remote Patient Monitoring (2018)
 Home Dialysis (2018)
 Rural Psychiatry Services (2018)
 Health Risk Assessments for Children (2017)

[COVID-19 Quick Response](#) (55 COVID-19 e-bulletins and 24 COVID-19 Quick Response Publications)

Presentations, Collaborative Meetings, and Learning Opportunities

This year CHRSP researchers collaborated with our partners, participated in learning opportunities, and consulted widely to improve our responsiveness to decision support in this province.



Health Innovation Summit | The NLCAHR team presented at the Newfoundland and Labrador Health Services' Health Innovation Summit on October 27 as well as attending several Summit presentations and panel discussions at the Health Innovation Acceleration Centre in St. John's. Organized under the theme 'Reimagining Patient-Centred Care through Innovation and Research,' the Summit invited academic researchers, innovation partners, government officials, and industry experts to discuss research and innovation and their positive impacts

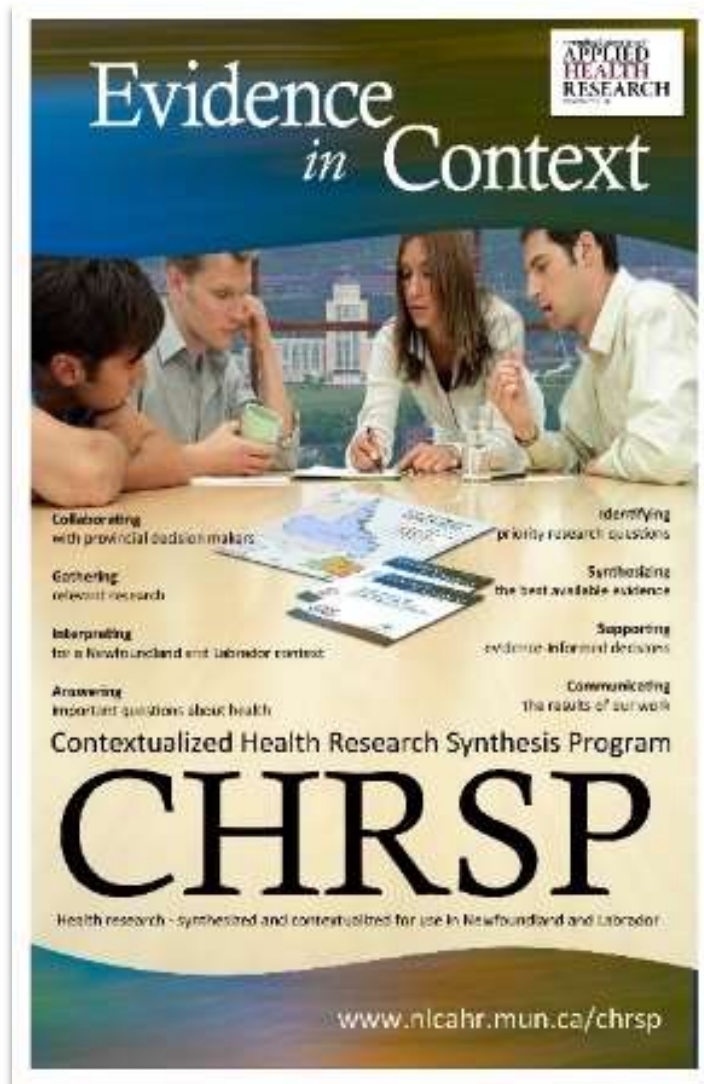
on health and healthcare. The NLCAHR team presented our work on evidence and engagement to support health system transformation. Dr. Rick Audas introduced NLCAHR and served as a panelist discussing health research and its impact, Pablo Navarro spoke about the CHRSP approach to decision support, and Rochelle Baker introduced participants to the Research and Knowledge Exchange Program.

2023- 2024 Meetings and collaboration

The CHRSP team also organized collaborative meetings and participated in learning opportunities to improve our understanding of key issues:

- Met with the Regional Director of Research and Innovation at NLHS to discuss collaborative processes and research alignment
- Met with the NLHS Clinical Research Scientist & Manager, Applied Health Research, to discuss decision support and research alignment
- Met with the Directors of provincial Strategic Health Networks to discuss decision support for their planning
- Met with leaders from the Department of Health & Community Services to discuss decision support and to begin the process of topic identification and prioritization
- Met with leaders from the Department of Children, Seniors, and Social Development to discuss decision support approaches through CHRSP
- Met with the NLHS Research and Innovation Team and with Library & Information Services staff to share information about services, to understand mutual Knowledge Translation approaches, to learn about managing and prioritizing requests, and to develop complementary research approaches
- CHRSP developed and introduced a new concept for collaboration and leaders at NLHS responded with critical input to co-develop a formalized collaborative process, including the appointment of Keith Parsons, Provincial Director of Planning and Policy, as the CHRSP Champion for NLHS
- Met regularly with Keith Parsons, NLHS CHRSP Champion, to discuss the CHRSP collaborative process for topic requests, including project prioritization and communication, and the development of a new topic submission form
- Met with the NLHS Provincial Well-Being Committee and Well-Being Network Planning team to discuss decision support for provincial Well-Being Networks

- Met with several health system leaders to discuss and review ongoing *Rapid Decision Support*
- Met with the Learning Health and Social System (LHSS) leadership group at NLHS to discuss decision support, and to increase Knowledge Translation on LHSS approaches, including through engagement with the Research and Knowledge Exchange on LHSS. Discussed potential for an NLCAHR Expert's Exchange on LHSS governance, and potential topics for *Rapid Decision Support*.
- Attended a presentation and discussion with Braden Manns, Associate Chief Medical Officer for the Strategic Clinical Networks of Alberta and Professor at U Calgary about LHSS and discussed the design and implementation of the LHSS in NL, based on his experience in AB
- Attended two Learning Health and Social Systems Nano Courses with Dr. John Lavis, facilitated by the Ontario SPOR SUPPORT Unit and McMaster Health Forum. NLCAHR staff attended the Ontario session and then facilitated a course for NL, working with Quality of Care NL, leadership at NLHS and Dr. Lavis's group. Dr. Lavis is a leader in Learning Health and Social Systems (LHSS) in Canada
- Met on several occasions with the NL-SUPPORT Patient Adviser Partner who proposed the project and will now work with CHRSP to explore Patient Perspectives on Family Care Teams with funding from the SPOR Evidence Alliance
- Held several meetings with representatives of the Department of Health & Community Services to ascertain departmental priorities and organize a new SPOR-EA funded knowledge synthesis on the de-implementation of Low-Value Care in hospitals
- Met with DHCS representatives to discuss a potential CHRSP project on Stepped Care
- Sarah Mackey, CHRSP Research Officer and Patient Engagement Coordinator, attended several meetings of the NL-SUPPORT Public Patient Advisory Committee to outline patient engagement approaches for CHRSP
- The NLCAHR director and staff met with the NLHS Executive Team to update on progress with reports, collaboration, engagement, and current research





Engagement





The NLCAHR Research and Knowledge Exchange

This year, our core public engagement program, formerly known as the Research Exchange Groups, was re-branded as the NLCAHR Research and Knowledge Exchange out of respect for the many participants in these groups and who share knowledge and expertise about health-related topics from a variety of perspectives including lived and living experience and professional practice knowledge- expertise that may include, but is not always limited to, research knowledge. The Exchanges continued this year to engage broadly and to forge strong connections among community, academic, and healthcare system partners, and to build research

capacity in an open knowledge exchange. The program has been growing year upon year since it was launched in 2008. Its combined total membership now exceeds 1,800 participants. The Exchanges welcomed academic researchers and students, health professionals, decision-makers, community group members, patients, and caregivers who shared their common interests in a variety of applied health research topics.

This year saw the sunset of two former groups: Military Families' and Veteran's Health, and Healthy Relationships. At the same time, NLCAHR introduced two new Exchanges whose focus aligned with priorities identified by our health and community services partners: Health Human Resources and the Learning Health and Social System. In September of 2024, we will launch two additional groups, one of which will focus on Climate Change and Health, and the other on Critical Disability Studies, demonstrating the program's ability to evolve with changes in how we look at health and well-being.

Event highlights this year included launching the March of Dimes Canada After-Stroke Program in NL; two performances by actor/writer Andy Jones of his powerful play, "Don't Give Up on Me, Dad," a presentation by Afghanistan's former Minister of Health, Dr. Wahid Majrooh, and global health research from around the world. We enjoyed myriad opportunities to share the voices of lived experience, professional practice, and health research with our many participants.

**2023-2024
Research & Knowledge Exchanges**

1. Attention Deficit and Hyperactivity Disorder (ADHD)
2. Aging
3. Autism
4. The Arts & Health
5. Chronic Disease
6. Cost & Value in Healthcare
7. Eating Disorders, Disordered Eating & Body Image
8. Gender, Sexuality, and Health
9. Global Health
10. Harm Reduction & Critical Drug Studies
11. Health Human Resources
12. Horticultural Therapy
13. Human-Animal Interaction & Wellness
14. Indigenous Health
15. Mental Health
16. Midwifery & Maternal Health
17. Oral Health
18. Palliative and End-of-Life Care
19. Rural Health
20. Service Learning and Community Engagement

**New Groups commencing in Fall-Winter 2024:
Climate Change and Health
Critical Disability Studies**

Highlights: Research and Knowledge Exchange in 2023-2024

Following are some of the highlights from the many diverse and engaging presentations hosted by the NLCAHR Research and Knowledge Exchanges this year. We thank the presenters who shared their knowledge and expertise with our groups, and we are, as always, grateful to our group conveners for their work in organizing our events and to all the enthusiastic participants who engaged with us again this year in many lively conversations about research and practice in another successful year for this dynamic program.



Global Health Policy, Research, and Advocacy with Dr. Wahid Majrooh, Former Minister of Health of Afghanistan | Dr. Majrooh is a future-facing healthcare and policy leader with more than 15 years' experience in global health, international relations, strategic communications, management, and leadership of healthcare service delivery to under-served populations. Dr. Majrooh spoke to our Research and Knowledge Exchange on Global Health about his career, his research, and his advocacy in global health. The Centre thanks Dr. Maisam Najafizada, Interim Assistant Dean, Social Accountability, and Assistant Professor of Public & Population Health of Memorial University' Faculty of Medicine, for arranging this special presentation. Dr. Wahid Majrooh is an Academic Fellow with the Geneva

Humanitarian Studies Center where he is at work on research articles presenting an insider's description of what health system resiliency means in the field. With his network of Afghan and international public health experts, he has recently established Afghanistan Center for Health and Peace Studies in Geneva, Switzerland. Dr. Majrooh is a Medical Doctor and holds two Master's Degrees in Global Health Policy and Political Science. His journey in healthcare includes working as a university lecturer, strategic manager, leader in global health, and advocate for health system strengthening, international relations, diplomacy, strategic communications and health service delivery to under-served communities, including emergency and crisis management. He currently sits on the WHO's Executive Board, having previously served as its first Vice Chair and alternate Board Member at the vaccine alliance, GAVI. He is the former/last Minister of Health of Afghanistan, having served as Deputy Minister for Healthcare Service Delivery, Senior International Relations Advisor and Technical Advisor to the Health Minister. He has worked in senior positions with national and international institutions including the Afghan Government, U.S Embassy, USAID, UNDP, EU, and the World Bank.



Social Prescribing through SeniorsNL & NL Health Services | Dr. Suzanne Brake, the former Seniors' Advocate for NL, together with Heidi O'Brien and Kathy Stock, two Link Workers at SeniorsNL spoke to the NLCAHR Research and Knowledge Exchanges about a new Social Prescribing Initiative that is being researched and launched through SeniorsNL in collaboration with Newfoundland and Labrador Health Services (NLHS). "Social Prescribing" is a term used for formalizing connections that link people with community services and activities to improve health and mitigate social isolation. Dr. Brake's team is working to develop, implement, evaluate, and integrate social prescribing into the healthcare system. In this new initiative,

patients aged 50+ who are attached to a Family Care Team will have access to Link Workers via referral or self-referral. A Link Worker will connect with referred individuals to address their non-clinical social needs, and to help introduce them to appropriate community programs and services, working with them to help overcome roadblocks to success. At the completion of this three-year Social Prescribing pilot project, the goal is to have successfully integrated Social Prescribing into the healthcare system of Newfoundland and Labrador.



Social Circus at Autism Society of NL (ASNL) | Social Circus is an innovative social intervention that uses circus arts to foster the personal and social development of vulnerable individuals, including Autistic youth. The success of this approach is built on respect for a strengths-based, individualized instruction approach that values the importance of community collaboration and strong partnerships. The purpose of social circus programs is to offer people a place to explore creative expression in ways that work for them, absent of the barriers that typically present themselves as the result of societal conventions and social norms. The Physical Art Troupe (PhArT), launched through the Autism Society of Newfoundland, is an extension of

the Social Circus program, developed through Ignite Circus. Danielle Knustgraichen leads the program. She is a hula hooping, fire-eating, clown with a passion for making the world a better place through love and laughter. She spoke about her work with youth at ASNL, creating safe spaces where courage and creativity are encouraged. Her projects focus on social integration of traditionally excluded populations through collaborations with educators, social workers, and healthcare professionals, in the areas of psychology, occupational therapy, and therapeutic recreation.

Update from the Aging Research Centre-NL (ARC-NL) | Dr. Karen Doody, Director of ARC-NL, together with Strategic Pillar Leads Dr. Kelly Vodden, Dr. Dawn Pittman, Dr. Sukhinder Cheema, and Dr. Kelly Warren, provided an overview of activities, funded research, strategic pillars, and research collaborative potential at ARC-NL which continues to build opportunities for research funding and collaboration on priority issues related to healthy aging in our province.



March of Dimes Canada: Bringing Health, Hope, and Humanity to Stroke Survivors and their Families in Newfoundland and Labrador | The March of Dimes Canada (MoDC) After Stroke Program is a personalized stroke recovery

program that helps survivors and their caregivers navigate the path forward after a stroke. The program fills the gaps for those affected by stroke, providing a seamless transition from hospital to home and beyond. Dedicated coordinators and trained volunteers work directly with stroke survivors and their families to provide personalized stroke recovery plans to support changing needs; practical advice to help with daily living challenges; emotional support and reassurance; access to tools, resources, and programs in the community; and, importantly, connections to other stroke survivors to help navigate the journey ahead. This year, the Department of Health and Community Services announced funding for March of Dimes Canada to expand its After Stroke services to Newfoundland and Labrador, its first foray into this province. The funding is aligned with the Provincial Government's efforts to support health promotion and wellness and with Health Accord NL calls to improve services for stroke, cancer, and cardiac disease. NLCAHR partnered with MoDC to organize the launch of this new service, co-hosting an event that included the Honorable Tom Osbourne, former Minister of Health, Len Baker, CEO of MoDC, Rebecca Bourbonnais, Regional Director of Community Support Services at MoDC, Haylee Nauss, After-Stroke Coordinator at MoDC, Renee Cashin, Regional Stroke Program Manager at NLHS, Cassie Chisholm, VP Primary Healthcare at NLHS, and Dr. Michelle Ploughman, Canada Research Chair in Rehabilitation, Neuroplasticity and Brain Recovery, together with special guests who shared their lived experience of life after stroke and spoke about the impact MoDC's program on their recovery. Following the program launch, MoDC provided a program overview and facilitated discussion for several of the NLCAHR Research and Knowledge Exchanges.

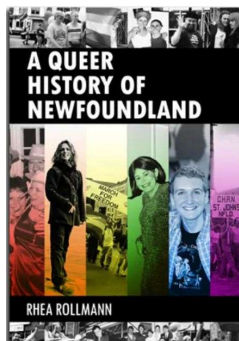
Health Human Resources in NL: Provincial Retention and Recruitment Approaches | The initial planning meeting for this new Research and Knowledge Exchange in Fall 2023 identified several key focus issues for the group, chief of which was the retention and recruitment of health professionals in this province. To open a dialogue on this key issue, NLCAHR organized a Provincial Panel on Health Human Resources Policies for Recruitment and Retention. The panelists were: Heather Hanrahan, Special Adviser, Health Transformation, Executive Council of the Cabinet Secretariat, Government NL, Dr. Megan Hayes, ADM Recruitment and Retention, Executive Branch, Department of Health and Community Services, Carla Whittle, Director of Health Professional Recruitment and Retention, Executive Branch, Department of Health and Community Services, Andrew Wells, Senior Manager of Health Workforce Planning, Department of Health and Community Services, Debbie Molloy, Vice President of Human Resources, NL Health Services, and Collette Smith, Senior Director responsible for recruitment at NL Health Services. These system leaders provided informative overviews of healthcare workforce retention and recruitment policies in Newfoundland and Labrador, providing links to information and resources for participants. Participants included representatives from a range of health professions who joined from across the province.



Dignity Therapy: Alleviating Emotional and Physical Distress at End of Life

Amanda Devlin, MSW, RSW, is a compassionate and culturally sensitive professional with over 15 years' experience in social work. Drawing on specialized training, lived experience, and expertise, she provides comprehensive and effective therapeutic care in a variety of settings. Ms. Devlin spoke with several Research and Knowledge Exchanges about her work using Dignity Therapy and its role in supporting palliative care patients. This presentation provided an opportunity to learn about how Dignity Therapy can alleviate both emotional and physical distress during end-of-life. Dignity Therapy is an intensive, individualized intervention designed to engender a sense of

meaning and purpose for patients with terminal illnesses, thereby reducing distress in this patient population. At its core, the intervention offers patients an opportunity to speak about issues that matter to them most and about those aspects of their lives for which they wish to be remembered.



A Queer History of Newfoundland | Author Rhea Rollmann spoke with the Research

and Knowledge Exchange on Gender, Sexuality and Health about her new book on the history of queer activism in this province. Through decades of repression, both intentional and unintentional, the powerful story of 20th century queer community-building and activism in Newfoundland has remained largely ignored, until now. Through extensive interviews, archival work, and investigative reporting, Rhea Rollman has illuminated that history in *A Queer History of Newfoundland* published by Engen Books and long listed for 2023 BMO Winterset Award. Organized queer activism dates to at least 1974 in this province, but queer presence and community stretches back much farther. Rhea Rollmann spent years scouring archives, newspapers, and court

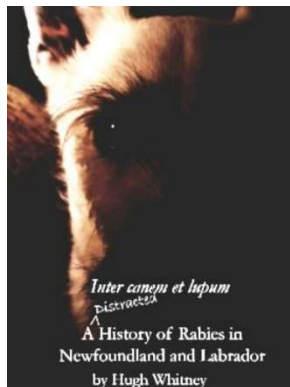
records to chronicle important stories from the past. She drew on archival work as well as more than 120 interviews with activists and community members to document the history behind the history of the province. The book focuses on the fight for human rights protections, AIDS activism, the growth of the city's vibrant queer bar scene, lesbian struggles for space in the feminist movement, trans struggles for recognition and healthcare, and more. The research and writing of the book were supported with funding from the City of St. John's, ArtsNL, and the Canada Council of the Arts. The presentation to the NLCAHR Research and Knowledge Exchange was supported by Memorial's Office of Public Engagement.



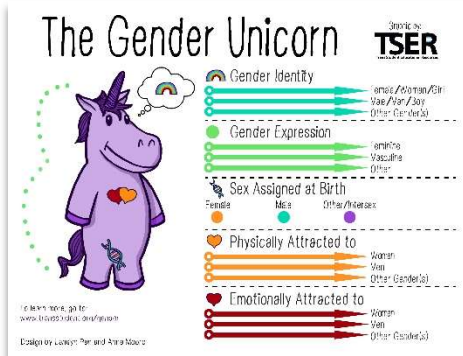
The Childless Voices Choir: Mitigating Isolation, Silence, and Shame through Music | When Laura Curtis was completing her doctoral studies in Music Education at Western University, her participatory action research project explored whether, and in what ways, women who are involuntarily childless (also commonly known as being childless not by choice) experienced a sense of community and developed self-empowerment through singing in the Childless Voices Choir. In this special presentation, Dr. Curtis outlined her Ph.D. research and showcased the work of this powerful choir and song-writing collaborative. The talk culminated in the viewing of the video for "Calm After the Storm," co-written by Helen Louise Jones and the women of the Childless Voices Choir and recorded in 2023 as part of Dr. Curtis's research project. Dr. Curtis has received numerous awards and recognition for her scholarship including the McMaster University Summer Research Award for her research on the effects of fertility treatments on the female voice. She has also been awarded the Ontario Graduate Scholarship (five years), the Canada Graduate Scholarship-Masters, the Canada Graduate Scholarship–Doctoral and, most recently, the Michael Smith Foreign Study Supplement for her ongoing research on the impact of choral singing on childless women.



Older Adults in the Emergency Department | Older adults go to the emergency department (ED) more frequently than their younger counterparts. They also experience longer lengths of stay and more misdiagnoses and adverse events. Dr. Kayla Furlong, an Emergency Physician working in Carbonear, NL, presented her research in geriatric emergency medicine. Dr. Furlong discussed her research investigating older adults' experiences in the emergency department, her work on 'community emergency' patients in the ED, and results from a recent systematic review on re-visit rates of patients with dementia to the ED. Dr. Furlong also talked about new work now underway to improve older adult care in the ED and her involvement and advocacy at the national level.



A (Distracted) History of Rabies in Newfoundland and Labrador | Rabies diagnosis in animals became available in this province shortly after Confederation with Canada, with the first confirmed case in 1954. But could rabies have occurred in the province before this? Examining colonial records, newspaper articles, and other information sources, Dr. Hugh Whitney took a scientific, historical and cultural perspective on a disease that has been known, and often misunderstood by people, for thousands of years. Many of our cultural memories of rabies reside in words and expressions that persist to this day, although their link to rabies has largely been forgotten. These include the words "virus" and "curtail," but also the expression "hair of the dog." The disease also provides vivid imagery for well-known Gothic classics such as *Dracula* and *The Hound of the Baskervilles*. In his 30 years as this province's Chief Veterinary Officer, Dr. Whitney's work included rabies management in animals, including diagnosis, public education, vaccination of pets, research, and twice (1988 and 2012) in the eradication of this disease from the island of Newfoundland. Also having a master's degree in history from Memorial, he is naturally interested in the history of this disease both in this province and elsewhere. Dr. Whitney shared findings from his new book with the Research and Knowledge Exchange on Human-Animal Interaction and Wellness.



Sexuality and Gender Acceptance | Quinn Jesso is the Mental Health Promotion Coordinator at the Community Mental Health Initiative (CMHI), a non-profit community-based organization located in Corner Brook that offers information, support, resources and training on topics including mental health, suicide awareness and housing support in the Corner Brook, Bay of Islands and Deer Lake areas. CMHI works with all individuals including those who have complex needs and provide a range of supportive services. Importantly, Quinn’s work through other venues centers on advocacy and support to increase understanding of the 2SLGBTQIA+ community. As a proud member of the queer

community, she shared her knowledge about terms and language, gender dysphoria, the need to improve sexuality and gender acceptance in educational contexts, gender identity, gender expression, sex assigned at birth, physical attraction and emotional attraction. Her presentation was grounded in evidence, in lived experience, and in her strong connections with the 2SLGBTQIA+ community in Newfoundland and Labrador.



Bridging the Silos- Autistic Menopause Study | Recent research has indicated that menopause may be an especially tumultuous time for Autistic people. A research team from Canada and the UK is investigating the confluence of Autism and Menopause in their SSHRC-funded “Bridging the Silos”

project. Menopause can add to co-existing conditions experienced by many Autistic adults, such as depression and sleep difficulties, which can send those who experience it spiraling. Bridging the Silos asks, “How do Autistic individuals experience menopause? How can they better access information about menopause? How can Autistic communities engage more meaningfully to guide future research?” Presented by Dr. Miranda Brady, Associate Professor at Carleton University, Christine A. Jenkins, Independent Autistic Researcher, Dr. Rachel Moseley, Principal Academic in Psychology at Bournemouth University, and Margaret Janse van Rensburg, a Ph.D. Candidate (Social Work) at Carleton University, this engaging presentation revealed some of the unique challenges facing Autistic individuals during menopause.



Trauma-Disrupting Care: Moving Beyond Trauma-Informed Care in Obstetrics
 Lisa Middleton, BHSc, MSW, RM, RSW, is a Ph.D. Candidate in Social Work at Carleton University who has worked as a practicing social worker in the Ottawa community for the past 16 years and a practicing Registered Midwife since 2015. Primarily working in the areas of sexual and reproductive health, she has worked at numerous organizations at the community and national levels. Working as a trauma therapist in sexual assault led her to become a midwife to help facilitate a safe passage for people to give birth. Lisa Middleton often works with people who carry post-traumatic stress symptoms from previous births. People’s apprehension

towards the end of the prenatal period brings up issues of fear and grief. The goal of her research is to create interventions that can lessen these trauma responses for future births. Her main areas of academic interest are in perinatal mental health for both the birthing person and the family unit. More specifically, she is interested in promoting the healing of birth trauma for the birthing person. The focus of her Ph.D. research is postpartum post-traumatic stress from childbirth.

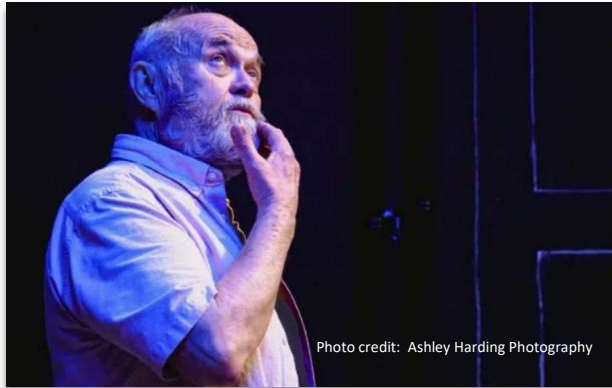


Photo credit: Ashley Harding Photography

"Don't Give Up on Me, Dad," with Andy Jones

NLCAHR hosted two special events this year with the Research and Knowledge Exchanges on Arts and Health and on Mental Health, with funding support from Memorial's Office of Public Engagement. Actor and writer Andy Jones performed excerpts from his one-person play, "Don't Give Up on Me, Dad" for audiences at the Faculty of Medicine and the Centre for Nursing Studies at Memorial. The play tells his personal story about the insight, courage, and unique humour of his son Louis as he battled with

the mental and emotional anguish that led to his suicide. The play is a heartfelt and sometimes humorous analysis of Louis' long journey through the healthcare system. In this work, Mr. Jones lends his voice to the rising cry for compassion, care, and a quantum leap in funding for research into mental illness. Healthcare professionals, health professional students, and researchers from a range of disciplines, as well as members of the community, most especially those whose work and lived experience supports people and families seeking mental healthcare, were all in attendance for this moving performance. After the play, the audience had a chance to speak with Mr. Jones and his partner Mary-Lynn Bernard about how we might collectively draw from lived experience to improve the lives of people struggling with their mental health – whether through more and better research, more accessible care, more support for families and caregivers, or by challenging stigma and building better pathways to compassion in our communities. This launch of a unique educational opportunity resulted in similar performances and discussions in other venues including at a local high school and for health professional staff at NL Health Services.



Experiences of Planned Unassisted Birth | Dr. Danielle MacDonald RN, Ph.D., is an Assistant Professor, Faculty of Health Sciences, School of Nursing, Queen's University. At this presentation, she discussed findings from her recent systematic review that sought to identify, appraise, and synthesize qualitative evidence on the experiences of women in high-resource countries, with the aim of answering the following research question: "What are the experiences of women who have planned unassisted home births?" Dr. MacDonald's research is focused on understanding global birth and birthing care experiences. She is specifically interested in midwifery and nursing

experiences, the experiences of birthing people and their families, and collaboration.

Making Connections, Exchanging Knowledge and Identifying Opportunities and Gaps for Research and Practice to Promote Positive Body Image and Prevent/Treat Eating Disorders in NL

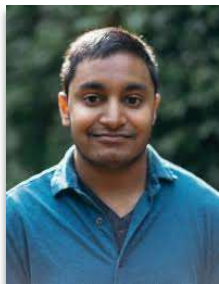
| The Research and Knowledge Exchange on Eating Disorders, Disordered Eating, and Body Image (EDDEBI) hosted a series of meetings this year, first of which provided insights about the practice, program, policy and research landscape in NL related to eating disorders and body image. Seventeen representatives from healthcare, health promotion, community supports, policy making, and research, all discussed their work. Then in November of 2023, the group re-convened to strengthen connections and to build momentum for research and practice by identifying opportunities and gaps in practice, policy, and research in Newfoundland and Labrador, identifying and exploring topics or themes where collaborative research might happen, or where community partnerships might be needed to support an improved understanding about EDDEBI practice, to

connect social and health supports and community/health services, and to develop evidence-informed policy-making on EDDEBI-related topics in the future.



Bricolage: The Art of Home Remedies in Newfoundland and Labrador | Visual artist Lindsay Alcock spent 2022-2023 researching folk remedies and the healing properties of plants, exploring many of Newfoundland and Labrador’s traditional plant-based remedies (and not only plants—sometimes spider webs and codfish were employed as folk remedies!). Her research involved an exploration of the literature at the Folklore & Language Archive at Memorial University with a strong focus on the work of Dr. John Crellin, a retired professor from Memorial University’s Faculty of Medicine, who has written extensively about folk

remedies. Ms. Alcock also did considerable foraging around the province to locate the sample materials that she then used to experiment with new ways of creating artists’ pigments, drawing colour and texture from stones and trees, from flora and fauna— a project that culminated in an exhibition of paintings entitled *Bricolage: The Art of Home Remedies in Newfoundland and Labrador* at the Queen Elizabeth II Library’s Second Space Gallery. *Bricolage* is the artist’s inspiring tribute to the many traditional folk remedies that were once prevalent in the province-- paintings created out of the very materials they depict — from cod skin to dandelions to birch bark. For this talk, the artist took our Research and Knowledge Exchange groups on a virtual tour of the exhibit, explaining folk cures, describing how pigments were created, and how folk remedies were once used before modern medical treatment was widely available in our province.



Resources for NL Educators through the National Eating Disorder Information Centre (NEDIC)

| The Research and Knowledge Exchange on Eating Disorders, Disordered Eating and Body Image (EDDEBI) held a series of meetings in 2023 to identify areas where improved knowledge on these issues might be required in NL. Participants agreed that access to evidence-based resources is a top priority in this province. Members noted the need for educational opportunities and resources for people working in the K-12 education system and for families of people with eating disorders, disordered eating, and body image issues. The National Eating Disorder Information Centre (NEDIC) provides resources and support to anyone in Canada affected by an

eating disorder. NEDIC’s work extends from a life-saving helpline to prevention-based outreach and education programming and beyond. The Exchange invited Ary Maharaj, M.Ed. RP (Qualifying), NEDIC’s Outreach & Education Coordinator, to outline the resources available through NEDIC that can help educators, families, and young people gain a better understanding about eating disorders and their prevention. Importantly, following from Mr. Maharaj’s talk, NLCAHR organized a meeting with key decision makers from the NL Department of Education and from NL Schools who met with NEDIC and Eating Disorder Foundation of NL (EDFNL) representatives to facilitate information sharing, connecting much-needed resources with NL educators and families in our province seeking support in issues related to eating disorders and positive body image, and supporting provincial policies and initiatives in this important area.



Kinship, Lineage Resources, and Intimate Partner Violence in Ghana | Dr. Eric Tenkorang, Professor of Sociology, cross-appointed to the Division of Population Health and Applied Health Sciences at Memorial University, spoke to us from Ghana in a presentation to the RKE on Global Health. Dr. Tenkorang presented his research on lineage and resources to explore the relationship between lineage, resources, and intimate partner violence (IPV) in Ghana. In describing one's lineage, Ghanaian custom views children as members of either their mother's (matrilineal) or their father's (patrilineal)

extended family, but not both. Dr. Tenkorang's research hypothesized that having access to resources would reduce instances of IPV overall and that women with strong matrilineal ties/access to maternal lineage and resources would have reduced vulnerability to IPV when compared to patrilineal women. To examine these hypotheses, Dr. Tenkorang's team collected data from 1,700 Ghanaian women residing in three ecological zones. The study found that part of matrilineal women's reduced IPV risk was explained through access to maternal resources. While it was found that patrilineal women experienced higher levels of IPV overall, this situation was reversed when these women had access to resources from paternal family members. The findings of this study suggest that as resources are fundamental to reducing IPV, lineage can also serve as a conduit for resource exchange and wealth transfer. Dr. Tenkorang is a Harry Frank Guggenheim Distinguished Scholar and a Member of the Royal Society of Canada (The College of New Scholars, Artists and Scientists). He has served as a member of the Institute Advisory Board for Gender and Health of the Canadian Institute of Health Research. He is currently a member of the National Taskforce for Women's Economic Justice of the Canadian Centre for Women's Economic Empowerment, dedicated to dealing with economic abuse among Canadian women. He has broad research interests in population health, especially in limited-resource settings, including investigating the sexual and reproductive health of marginalized populations in sub-Saharan Africa. His most recent research has explored links between gender-based violence and health outcomes.



The Intersection of Neurodiversity and Employment | Andrew Dixon is an Interdisciplinary Ph.D. Student (Anthropology, Bioethics, Sociology, and Social Work) at the School of Graduate Studies at Memorial University. Andrew spoke about his Ph.D. research project on the intersection of neurodiversity and employment which he is currently conducting under the supervision of Dr. Robin Whitaker (Sociology/Anthropology) and Dr. Laura Pacheco (Social Work). The study aims to examine the lived experience of neurodiversity in employees and managers. The research consists of ethnographic field work in a variety of locations across the province, including at the Autism Society of Newfoundland and Labrador.

Strategic Health Networks and the Learning Health and Social System | Drawing on examples from the province of Alberta, Dr. Robert Wilson and Dr. Brendan Barrett discussed the goals and structures of Strategic Health Networks and looked at potential ways to integrate operations, innovation, research and evaluation under a Strategic Health Network model that will promote a Learning Health and Social System in Newfoundland and Labrador. Dr. Brendan Barrett is a Professor of Medicine (Nephrology) at Memorial University, the Chief Scientific Officer at NL SUPPORT, and the Clinical Lead of Quality of Care NL. Dr. Robert Wilson is an Associate Researcher in the Faculty of Medicine at Memorial University, the Manager of Quality of Care NL, and the Scientific Lead at NL SUPPORT.



The Changing Meaning of Global Health | Medical Anthropologist Dr. Jill Allison, former Global Health Coordinator at Memorial University, hosted a discussion with the Research and Knowledge Exchange on Global Health about the changing meaning of global health, based on her long relationship with health and healthcare in Nepal. Dr. Allison drew on examples of how our attitudes and perspectives have changed from paternalistic and neo-colonial (or frankly colonial) attitudes and ways of working to quasi-humanitarian paternalism, and now (hopefully), towards de-colonizing and partnership-based relationships.



A Focus on Perinatal Mental Health in Newfoundland and Labrador

Dr. Archana Vidyasankar is a Perinatal Psychiatrist practicing in Newfoundland and Labrador. She is a Clinical Assistant Professor in both Psychiatry and Obstetrics and Gynecology in the Faculty of Medicine, Memorial University with a passion to help connect our community and promote healthcare in Perinatal Mental Health. Dr. Vidyasankar helped establish the Perinatal Mental Health Alliance of Newfoundland and Labrador, of which she is Chair. This year, Dr.

Vidyasankar has convened a perinatal mental health sub-group at NLCAHR, including members of the RKEs on Mental Health and on Midwifery and Maternal Health, to discuss building capacity for perinatal mental health research in this province. This group aims to develop research teams and to promote increased practice/policy capacity that will promote perinatal mental health and help inform the work of the Provincial Task Force on Perinatal Mental Health and of the Perinatal Mental Health Alliance of Newfoundland and Labrador.



EQUIP: Ensuring Quality in Psychological Support | Rozane El Masri, B.Sc., MPH, Research Manager at the Janeway Pediatric Research Unit, was involved in the EQUIP project in Lebanon. She spoke with the Research and Knowledge Exchanges on Mental Health and on Global Health about this joint WHO/UNICEF project that aims to improve the competence of helpers and the consistency and quality of training and service delivery in mental healthcare. The EQUIP platform provides freely available competency assessment tools and e-learning courses to support governments, training institutions, and non-governmental organizations, both in humanitarian and development settings, to train and supervise their workforces to deliver effective psychological support to adults and children. EQUIP is based on consensus-building, including key stakeholders who worked

together to develop its evidence-informed competency-based training materials and guidance, as well as the competency assessment tools. These resources have been tested in Ethiopia, Jordan, Kenya, Lebanon, Nepal, Peru, Uganda and Zambia, with results demonstrating training improvements in groups that used the EQUIP platform. For example, the use of EQUIP in Lebanon with children and adolescents led to an increased mastery of core helping skills compared to standard training approaches. Through this presentation, NLCAHR helped to facilitate connections to this online platform for community agencies in Newfoundland and Labrador who provide psychological support to their clients.



My Journey as an Advocate: The Global Mental Health Peer Network and Other Mental Health Advocacy Initiatives | Glenn Roil spoke to the Research and Knowledge Exchanges on Mental Health and on Harm Reduction about his personal journey with mental health and about the many positive outcomes of his work as a global mental health and basic income advocate for over 30 years. Mr. Roil is the Co-Lead of the Americas Region with the Global Mental Health Peer Network. He served on the Government of NL Towards Recovery Action Planning Committee and on the Legislative Stakeholders Committee reviewing the Mental Health Care and Treatment Act. Formerly, Mr. Roil was the NL representative of the Canadian Mental Health Association, the National Council of Persons with Lived Experience, a member of the Community Sector Council of NL, Vibrant Communities St. John’s, the Citizen Voice Network, and one of the public figures of Government of NL’s anti-stigma campaign called “Understanding Changes Everything”. He has trained with the Canadian Mental Health Association and the Mental Health Commission of Canada and received the 2021 NL Human Rights Award as a Champion for Mental Health from the Government of NL’s Human Rights Commission. Mr. Roil was the 2022 recipient of the Lionel Aldridge Champions Award from the National Alliance of Mental Illness in the United States, the only Canadian to ever receive this honour. His mental health story and advocacy story has been profiled by John Hopkins University in *the Narrative Inquiry* and *Voices* publications. Mr. Roil is a Referral Partner and National Ambassador with Stigma Zero, an international workplace mental health company. He was appointed by Premier Andrew Fury and former Minister of Health and Community Services, Tom Osbourne, to the Mental Health Care and Treatment Board for NL and, most recently Mr. Roil, with partners Pam Parady and Sarah Furlong, co-founded the Mental Health Foundation of Canada which aims to forward policies towards a proactive, preventative approach to mental wellness and the social determinants of health, including: healthcare, education, social services, housing, as well as economic and food security.



Breastfeeding Advocacy in Diverse Care Settings and Health Promotion for Vulnerable and Marginalized Populations

Dr. Shela Hirani is a neonatal and child health nursing professional, academic, researcher, volunteer, and an International Board-Certified Lactation Consultant. She holds a Ph.D. in Nursing from the University of Alberta and is the recipient of some of Canada's most prestigious scholarship awards, including the Vanier Canada Graduate Scholarship Award, Honorary Izaak Walton Killam Memorial Scholarship Award, and Dorothy J. Killam Memorial Graduate Prize. She is also the recipient of several other national, international, and university-based awards based on her outstanding academic performance, leadership potential, and research output. She is actively involved in curriculum

development, teaching graduate and undergraduate courses, and the execution of community-based research work. In this presentation, Dr. Hirani outlined her professional goal to make a difference in the lives of underprivileged children and marginalized women through her research, leadership, and community service. Her program of research relates to breastfeeding advocacy in diverse care settings and health promotion for vulnerable and marginalized populations, specifically women and young children, affected by disaster and displacement.

What is a Learning Cycle? Real World Examples of the Learning Health System | Dr. Brendan Barrett and Dr. Robert Wilson presented a series of Real-World Examples of Learning Cycles in a Learning Health and Social System to demonstrate the kinds of partnerships, improvement processes, research and evaluation and implementation/upscaling processes that can create a health system in which internal data and experience are systematically integrated with external evidence, and that knowledge is put into practice. As a result of this approach, patients can receive higher quality, safer, more efficient care, and health care delivery organizations can become better places to work.



Using the Prevention Mother-to-Child Transmission Program to Prevent HIV Transmission in Rwanda | The health of women and children is strongly interlinked. Across the globe, HIV/AIDS is the cause of death of millions of children under five years of age. Without preventive interventions, 20% to 45% of HIV+ mothers will transmit the virus to their children. This presentation focused on research that looked at the experiences of mothers using the Prevention Mother-to- Child Transmission (PMTCT) program to prevent HIV transmission in Rwanda. Each of the HIV+ women’s stories and experiences represented different pathways and intersections that determined their vulnerability. Dr. Joyce Kamanzi was a Lillian Meighen Wright Postdoctoral Fellow in Maternal-Child Health at York University, and she completed her doctoral studies at the Faculty of Nursing, University of Alberta, Canada. As a nurse, she previously worked as a Quality Manager in Rwanda. She shared her

doctoral research from Rwanda, speaking with the RKE on Global Health about her work focused on the experiences of mothers using the PMTCT Program to prevent HIV transmission.



Leadership and Well-Being at Work | Leaders can behave in ways that may help or hinder their employees’ sense of well-being. Past research has focused on specific leadership behaviours such as constructive, transformational leadership or its opposite— destructive, abusive supervision and how such leadership influences employee stress levels, burnout, and psychological well-being. Recent research has now turned the focus onto the leaders themselves, asking questions such as: ‘Does leadership well-being impact a person’s leadership style?’ and ‘Are certain leadership styles more stressful for leaders to engage in than others?’. In this presentation, Dr. Kara Arnold of Memorial University’s Faculty of Business Administration spoke with the new Research and

Knowledge Exchange on Health Human Resources about research that addresses how leadership behaviour is related to employee and leader well-being and provided evidence-based implications for organizations and their leaders. Dr. Kara Arnold is Professor of Organizational Behaviour and Human Resource Management at Memorial University’s Faculty of Business Administration. During her tenure at the Faculty of Business, she has served as Associate Dean of Research, Director of the Ph.D. and MSc Programs, and Area Group Coordinator. Dr. Arnold’s research interests focus on leadership, employee well-being, and equity in organizations. Her teaching and consulting focus on bringing evidence-based research findings to individuals and organizations, enabling them to create positive change in the workplace.



The Role of Plants and Gardens in Human Wellness: How Can They Improve Older Adult Health and Geriatric Care? | Joel Flagler is a Professor of Horticultural Therapy and Agricultural Extension Agent working with the Rutgers Cooperative Extension of Bergen County in Hackensack, New Jersey. While Mr. Flagler’s primary professional focus is on people-plant relationships, horticultural therapy, and ornamental horticulture, his work also encompasses agricultural viability, support for farmers/growers, support and educational programs for the ornamental garden industry, greenhouse, landscape, nursery, turf managers, arborists, garden centers, exterminators, and health officers. A Registered Horticultural Therapist, Mr. Flagler has served two terms on the Board of Directors of the American Horticultural Therapy Association. He holds a master’s degree in forestry science from Yale University, a Bachelor of Science in Horticulture from Rutgers University Cook College, and a Certificate in Horticultural Therapy from the New York Botanical Garden, Bronx, NY.

Mr. Flagler's talk to the Exchanges on Horticultural Therapy, Aging, and on Mental Health outlined his work investigating people-plant relationships and developing/delivering specialized horticulture programming for a wide range of populations, often partnering with mental health practitioners. The session took a close look at the role of gardens in the wellness of older adults and the role of horticultural therapies in geriatric care, which has direct implications for persons with disabilities from all age groups.



The University of the Arctic (UArctic): Working Collaboratively to Create Better Lives and Environments for All Northerners | Sheila Downer, Strategic Northern Liaison at Harris Centre’s COASTS (Cold Ocean Arctic Science Technology & Society) and Vice President of Northern Community Engagement at UArctic, spoke with several of NLCAHR’s Exchanges about how UArctic is working towards its mission to develop knowledge that will address local and global challenges of relevance to Arctic peoples and societies by providing unique educational, research, and innovation opportunities through collaboration within a powerful network of member institutions. Memorial University is a member of the University of the Arctic (UArctic), an association of universities, colleges, research institutes, and other organizations concerned with education and research in and about the North. UArctic builds and strengthens collective resources and infrastructures that enable member institutions to better serve their constituents and their regions. Through cooperation

in education, research, and outreach, UArctic enhances human capacity in the North, promotes viable communities and sustainable economies, and forges global partnerships. Created through the Arctic Council, UArctic is committed to upholding its principles of sustainable development as well as the United Nations Sustainable Development Goals. UArctic is constituted as an international association based in Finland. Memorial University and UArctic are actively encouraging partnerships between Northern Canadian, and international UArctic members for collaborative research and education initiatives available through the Research and Engagement Fund.



Update from Pallium Canada: Indigenous Informed Training Modules in Palliative Care

In January of 2022, NLCAHR hosted a consultation with Indigenous scholar Dr. Cynthia Wesley-Esquimaux and Mr. Jonathan Faulkner about research that would lead to the creation of learning modules for Palliative Care Training that would be

inclusive of cultural safety, cultural intelligence and cultural humility for the use and benefit of palliative care professionals working with Indigenous peoples across Canada. The team, aware that the sharing of Indigenous knowledge and traditional practices is a sensitive and personal decision for every individual, launched the initiative here in NL by opening a dialogue in NL communities. They also sought guidance and suggestions from members of the NLCAHR Research and Knowledge Exchanges on Indigenous Health and on Palliative/End-of-Life Care which include people who are working in or directing palliative care in this province. The team then began the process of engaging with communities directly through online and in-person discussions. In December of 2023, NLCAHR hosted a follow-up meeting in which Dr. Wesley-Esquimaux and Mr. Faulkner shared the outcomes of their in-person visits with communities in Newfoundland and Labrador and discussed the results of interviews conducted online. They noted that this work requires the building of trust and engagement, which takes time and patience, and reported that they were ultimately able to gain confidence and support for the project among people living in Indigenous communities. The researchers noted that nurses were exceptional supporters of the learning process. Dr. Cynthia Wesley-Esquimaux is a faculty member at the Banff Centre for the Arts and Creativity. She was Vice Provost Indigenous Initiatives at Lakehead University for three years and was appointed as the first Indigenous Chair for Truth and Reconciliation for Lakehead University in 2016. She is a member and resident of the Chippewas of Georgina Island First Nation and has dedicated her life to building bridges of understanding. Jonathan Faulkner is the Vice President of Operations for Pallium Canada, a national, non-profit organization focused on building professional and community capacity to help improve the quality and accessibility of palliative care in Canada. Following from this presentation, NLCAHR helped to broker connections for the evaluation of the new learning modules by members of the Research and Knowledge Exchanges on Indigenous Health and on Palliative/End-of-Life Care.



Defining the Learning Health and Social System and Building Health Literacy | In

this session, the Research and Knowledge Exchange on the Learning Health and Social System (LHSS) gained a more grounded understanding and accessed resources about key principles for the LHSS. The group also discussed health literacy in NL and the ways we might improve it. Limited health literacy affects health status, outcomes, healthcare use, and costs. Our healthcare system relies on

the assumption that patients understand complex written and spoken information and that patients can navigate a complex medical system. If they do not understand health information, or if the information is poorly communicated, patients cannot take the necessary actions to improve their health. The group agreed that initiatives to improve patient health literacy and enhance healthcare provider communication skills could be the subject of learning cycles in the in NL health and community context.



Ensuring the Safety and Quality of Maternity Care in Low-Resource Settings

Dr. Jude Kornelsen and Dr. Kathrin Stoll of University of British Columbia used the framework of the Rural Birth Index to consider the safety and efficacy of rural models of maternity care including for those without local access to Caesarean Section and those with surgical access supported by Family Physicians with Enhanced Surgical Skills. The presenters explored primary and existing published data that considers population health outcomes and health system enablers that support optimal care, with a focus on facilitating rural midwifery models of care. Dr. Jude Kornelsen is an Associate Professor in the Department of Family Practice (UBC), co-Director of the Centre for Rural Health Research and an Honorary Professor, Sydney Medical School. Dr. Kathrin Stoll has degrees in psychology and sociology, and an interdisciplinary doctorate in midwifery/nursing/epidemiology from the University of British Columbia.



An Analysis of the Mode of Delivery, Risk Factors, and Subgroups with High Caesarean Birth Rates Using the Robson Classification System | Caesarean Section (CS) rates are

increasing worldwide, and the WHO recommends using the Robson Classification System to evaluate and monitor these rates. For this presentation to the Exchanges on Midwifery and Maternal Health and on Global Health, Visiting Professor Dr. Gülpiya Uygur, Division of Population Health and Applied Health Sciences, Faculty of Medicine, Memorial University, presented findings of her research on Caesarean Section (CS)

births in Northern Cyprus. This study was the first of its kind to use the Robson Classification System (RCS) and revealed high CS rates in specific subgroups of the obstetric population. The research found substandard data quality in the largest state hospital in Cyprus, revealing the need for improvements in clinical practice. This research laid the foundation for further nationwide studies using the RCS and could be a catalyst for comparative research in Newfoundland and Labrador and in other Canadian jurisdictions. Dr. Gülpiya Uygur holds degrees in Medicine and Public Health and is an Associate Professor in the Faculty of Medicine at Near East University.



Root in Nature: Building a Supportive Horticultural Therapy/ Therapeutic Horticulture Community | In this presentation to the RKE on Horticultural Therapy, Alexis Ashworth and

Katie McGillvray outlined their work through Root in Nature™ which strengthens human health by connecting people with plants and nature through therapeutic horticulture, while serving as a training hub and professional growth platform for practitioners in the field. The program offers in-person therapeutic horticulture services in Ottawa and virtual therapy world-wide, along with a growing suite of online courses and a robust international practitioner network called GrowTH: Grow Therapeutic Horticulture.



Re-Storying Autism in Education | Re-Storying Autism is a multimedia story-making project that brings together Autistic people, family members, educators, practitioners, and artists to rethink education in ways that embrace the difference of Autism. Autistic students often experience misunderstanding, stigma and violence at school. The creative research facilitated through Re-Storying explores new practices to (re)value difference and to centre disability justice in educational practice. Dr. Patty Douglas, Chair of Student Success and Wellness and Associate Professor of Disability Studies in the Faculty of Education at Queen’s University, is the Director and Principal Investigator of Re-Storying Autism, a program that has received a Social Sciences and Humanities Research Council of Canada Insight Grant. She presented her research on this innovative approach to members of the RKE on Autism.



The Integration of Mental Health in Perinatal Mental Healthcare at Carbonear General Hospital | Tonya Somerton, BN, RN, MTM, Division Manager, and Kelly Regular, RN, of the Children's and Women's Health Division at Carbonear General Hospital, presented to the Exchanges on Midwifery and Maternal Health, the sub-group on Perinatal Mental Health, and the Exchange on Mental Health about an innovative program which has been developed by the team at Carbonear General Hospital to support assessments of perinatal mental health for pregnant people throughout the perinatal year. This project was then shared with the leaders of the RKE on the Learning Health and Social System to promote more research and evaluation of the approach within a potential learning cycle.



The Qaujigiartiit Health Research Centre | The Research and Knowledge Exchange on Indigenous Health welcomed a presentation this year by Dr. Gwen Healey Akearok about the Qaujigiartiit Health Research Centre, an independent, non-profit community research institute that was founded in 2006 by Nunavummiut, for Nunavummiut, to answer the health questions of their communities. Established by Dr. Akearok and the late Andrew Tagak Sr., the Centre initially grew out of a climate of research taking place in Nunavut communities that did not focus on the topics of priority interest to Nunavummiut. The Centre focuses its research on the priority issues of its communities in a way that harnesses strengths and builds on knowledge. Qaujigiartiit has grown from a small volunteer operation to a fully staffed office in Iqaluit with 7 full-time researchers and 10-15 part-time and freelance staff at any given time.



CIRRIS:

Carbonear Institute for Rural Reach and Innovation by the Sea

Building Rural Health Research Capacity: Introducing CIRRIS- the Carbonear Institute for Rural Reach and Innovation by the Sea | Health research disproportionately focuses on issues faced in urban areas, with limited high-quality research examining the needs of rural populations. However, rural residents experience unique healthcare challenges compared to those in urban areas, often having poorer health outcomes and reduced access to healthcare services. This talk to the RKE on Rural Health introduced the Carbonear Institute for Rural Reach and Innovation by the Sea (CIRRIS), a community-based non-profit organization dedicated to supporting rural health research and fostering community well-being in the Conception Bay North region of Newfoundland and Labrador. Founded in 2017 by Dr. Christopher Patey and Paul Norman, colleagues in the Emergency Department at the Carbonear General Hospital, CIRRIS aims to act as a rural research hub that offers funding and mentorship to produce high-quality rural health research and programs that improve community well-being. This presentation included an overview of completed and ongoing projects related to emergency medicine, fisheries, 3D printing, animal therapy, and long-term care, as well as Dr. Christina Young’s postdoctoral project aimed at evaluating the centre’s progress and

seeking opportunities for expansion and collaboration with other researchers and organizations. Dr. Christina Young is a Postdoctoral Fellow at the Centre for Rural Health Studies, Faculty of Medicine, Memorial University of Newfoundland, and a Mitacs Intern at CIRRIS. Dr. Christopher Patey is a rural physician practicing family and emergency medicine in Conception Bay North and an Assistant Professor of Family Medicine at Memorial University. He is also the Physician Director of CIRRIS and a co-founder of SurgeCon Innovations Inc. Mr. Paul Norman is a registered nurse working in emergency services at the Carbonear General Hospital. He is also the Nursing Director of CIRRIS and a co-founder of SurgeCon Innovations Inc.

Other Engagement Activities

Again, this year, the Centre’s director and staff connected and engaged with numerous organizations at the local, provincial, and national levels.



Aging Research Centre - Newfoundland & Labrador (ARC-NL) The Centre’s Director, Dr. Rick Audas, serves on the Core Leadership Team of ARC-NL - a provincial research centre devoted to studies on aging. ARC-NL was established in 2018 by a working group of NLCAHR’s Research and Knowledge Exchange on Aging. NLCAHR also provides ARC-NL with ongoing administrative support. Today, with funding from Memorial University and the province’s Department of Children, Seniors, and Social Development, ARC-NL is situated at Grenfell

Campus with its satellite office at NLCAHR. This research centre fosters collaboration between the Grenfell and St. John’s campuses to create a provincial network of researchers studying late life issues, prioritizing knowledge mobilization, and promoting engagement with older adults. NLCAHR staff helped support ARC-NL this year in several ways: Rochelle Baker, Manager, Communication, Partnerships and Research Exchange Groups, helped communicate ARC-NL activities, to broker opportunities for research and collaboration, and connected ARC-NL with members of the RKE on Aging, facilitating a presentation by the Strategic Pillar Leads. Tyrone White, Manager Finance, Administration and IT, provided crucial administrative and communications support, website management, and administered the ARC-NL Awards Program.



Quadrangle Research Project: Advisory Committee Rochelle Baker served on an advisory committee and provided guidance on plain language, structure, and editing to help support a community research project by Quadrangle NL that explores 2SLGBTQIA+ access to Healthcare in NL. Quadrangle NL is the only solely mandated province-wide 2SLGBTQIA+ charity of the province of Newfoundland and Labrador, offering several hybrid-style

programs that reach across the province and into remote and rural regions. Their research project involved a province-wide survey and evaluation to help better understand 2SLGBTQIA+ healthcare in Newfoundland and Labrador and includes perspectives of 2SLGBTQIA+ individuals, healthcare students (BScN and MD), and healthcare providers in this province (RN, NP, and MD).



NL SUPPORT Public Patient Advisory Committee

Sarah Mackey, CHRSP Patient Engagement Coordinator participated and presented again this year at meetings of the NL SUPPORT Public Patient Advisory Committee to talk about patient engagement and the CHRSP approach to research, collaborating with the team at NL-SUPPORT.



Phoenix Garden: Supporting Health at Her Majesty’s Penitentiary

Rochelle Baker volunteered again this year for the Phoenix Garden Program which provides arts-based education and supports for incarcerated individuals at Her Majesty’s Penitentiary in St. John’s- the brainchild of a group from the RKE on Horticultural Therapy. She also served on a committee that includes mental health professionals and educators who are working in consultation with the provincial Minister of Justice on the development of user-friendly accessible resources to support people on entry into provincial corrections facilities.



The Building Healthy Communities Collaborative (BHCC),

The BHCC is co-chaired by Pablo Navarro, Senior CHRSP Research Officer, and includes representatives from the provincial government, the health system, and Memorial University, as well as planners and community representatives. The BHCC received funding from the Department of Health and Community Services to develop an online platform that will support communities in creating and maintaining healthy built environments at the local level. The BHCC contracted with Level Up Consulting to build the platform and hosted them on an extensive field trip to Newfoundland and Labrador. In 2023-2024, the project is on-going.

Newfoundland and Labrador Provincial Harm Reduction Committee

Pablo Navarro serves on the Provincial Harm Reduction Committee, a group whose purpose is to oversee the province’s Take Home Naloxone Program, work with the AIDS Committee of Newfoundland and Labrador’s Safe Works Access Program, and to inform and advocate for on-going harm reduction approaches in Newfoundland and Labrador.

NL SUPPORT/Quality of Care NL Learning Health and Social System Committee



Sarah Mackey, CHRSP Patient Engagement Coordinator, serves on the NL SUPPORT/Quality of Care NL Learning Health and Social System Committee. The NL SUPPORT/Quality of Care NL governance structure reflects the Canadian Institute of Health Research’s Strategy for Patient-Oriented Research defined core components

for SUPPORT Units; Data Platforms and Services, Learning Health System, Capacity Development, and Patient Engagement. Within the NL SUPPORT Unit, a committee has been set up to lead each of the core component areas. These Core Component Committees meet at least quarterly and are responsible for determining the direction and focus of work in each area, managing day-to-day operations, taking remedial actions where necessary and providing updates to the Executive Committee. The Learning Health and Social System Committee is responsible for developing and delivering annual priorities to encourage and support the emergence of learning health and social systems (LHSS) in the province.



Transition House Association of Newfoundland and Labrador (THANL) Research Project

NLCAHR partnered with the Transition House Association of Newfoundland and Labrador (THANL) to carry out research on the data frameworks of violence against women (VAW) shelters in the province,

including practices for data collection, analysis, and use. The study will: document and analyze current practices; assess the needs of VAW shelters, including data capture and management, training, and change management practices; uncover potential solutions for harmonizing data frameworks; and provide an evaluation framework and logic model. Research partnership leads are Pablo Navarro, Senior Research Officer, NLCAHR, Dan Meades, Provincial Coordinator of THANL, and Dana Warren, Subject Matter Expert, Precipice Counselling and Consulting.

Faculty of Medicine Strategic Planning: Wellness and Wellbeing Committee

Pablo Navarro served as a staff representative on the Faculty of Medicine’s Wellness and Wellbeing Committee which aims to build awareness about activities and strategies that will support the wellness and wellbeing of faculty, staff, and learners within the Faculty of Medicine.



National Collaborating Centre
for Environmental Health
Centre de collaboration nationale
en santé environnementale

The National Collaborating Centre for Environmental Health: Healthy Built Environment Forum Champions

The National Collaborating Centre for Environmental Health developed an online discussion forum to enhance networking and to foster linkages among Healthy Built Environment (HBE) practitioners, policymakers, and researchers. Research evidence has established HBE as a critical influence on human physical, mental and social health. As a result, public health agencies and educational institutions across Canada have incorporated HBE into their mandates and curricula as part of their efforts to improve population health outcomes. Pablo Navarro was invited to participate and is one of two members from Newfoundland and Labrador to serve on this forum.



CASCADES Summer Institute on Climate Change and Health

The Summer Institute on Sustainable Health Systems was created to fill this gap and provide health services and policy trainees with the opportunity to increase awareness of sustainable health systems and current action in Canada. The Third Annual Summer Institute on Sustainable Health Systems was held from June 10th to 13th, 2024 and brought together 126 health services and policy trainees enrolled in relevant programs across 29 Canadian universities at 12 in-person and one virtual hub. As they did for the inaugural program back in 2023, the Centre's Director, together with Pablo Navarro, Senior CHRSP Research Officer, worked throughout the spring of 2024 to develop plans for the second CASCADES Summer Institute on Climate Change and Health at Memorial University. CASCADES is led by the University of Toronto Centre for Sustainable Health Systems, in partnership with the Healthy Populations Institute at Dalhousie University, the Planetary Healthcare Lab at the University of British Columbia, and the Canadian Coalition for Green Health Care to support Canada's healthcare community to transition towards an environmentally sustainable (net zero carbon emission) and resilient health system. Memorial University is one of eleven hubs across Canada bringing together graduate students, medical students, practitioners, and experts to examine the challenges posed by climate change and to think about ways the health system can change to reduce its environmental impact.



Statistics Canada Research Data Centre, Memorial University

Dr. Rick Audas is the Academic Director of the Statistics Canada Research Data Centre, Memorial University. The Research Data Centre houses a wide variety of Statistics Canada data sets, which can be made available to researchers, free of charge, with approved projects and is part of the Canadian Research Data Centres Network (CRDCN)

Master's of Applied Health Services Research (MAHSR) Program

Dr. Rick Audas, NLCAHR Director, is the Memorial University Academic Lead for the Master's of Applied Health Services Research (MAHSR) program. This degree is jointly offered by University of New Brunswick, University of Prince Edward Island, Saint Mary's University and Memorial University.

Undergraduate Medical Curriculum at Memorial University

The Centre's Director is the Undergraduate Curriculum Liaison in the undergraduate medical program for The Division of Community Health and Humanities and a member of the management team of Phase 3 of the undergraduate medical program.

Destination Excellence Implementation Steering Team "Destination Excellence" was the Faculty of Medicine's strategic plan from 2018 to 2023, designed with an important goal in mind— achieving excellence in education, research and engagement with the communities with whom we serve and partner. Rochelle Baker served on the Destination Excellence Implementation Steering Team and was a member of the Social Accountability Team until all committees concluded in 2023 and work on the faculty's new Strategic Plan, "Grounded in Excellence" commenced.

Canada's Drug Agency
L'Agence des médicaments du Canada

Canadian Agency for Drugs and Technologies in Health (now Canada's Drug Agency) The Centre continues its productive partnership with the CADTH/ CDA team at the local level, through consultation with the provincial liaison officer, and nationally, through participation in annual conferences.



National Alliance of Provincial Health Research Organizations (NAPHRO)

Dr. Rick Audas represents NLCAHR as a member of NAPHRO, a voluntary association of provincial health research funding organizations. NAPHRO provides a forum to share ideas, communicate lessons learned, and define opportunities for collaboration with respect to issues and challenges confronting the health research enterprise across the country. The Alliance meets in person twice a year and by teleconference three times a year, to share information and identify potential opportunities for working collaboratively on common issues. Additionally, Tyrone White sits on the NAPHRO Impact Assessment Group. This group includes representatives from each of the provincial health research funding organizations and CIHR and has been developing and implementing tools that assess the bibliometric and econometric impacts of provincial health research funding. These tools are intended to inform decision makers and research communities about the returns on research funding investments at the academic level and in terms of their benefits for Canadian society at large.



Lessons from a Pandemic: Health Canada Experts' Panel | Health Canada, in collaboration with the Public Health Agency of Canada, the Canadian Institutes of Health Research, and the Office of the Chief Science Advisor, has launched an important review to take stock of the lessons learned from Canada's approach to science advice and research coordination during the COVID-19 pandemic. The goal

of the review is to generate recommendations in these specific areas on how Canada can better prepare for and respond to future pandemics and other emergencies. The review will be informed by collecting a diversity of views from stakeholders across the country. Pablo Navarro, Senior CHRSP Officer served on the independent expert panel for this review.



Strategy for Patient-Oriented Research (SPOR) Evidence Alliance

NLCAHR, as an organization that produces evidence syntheses for its health system partners, is a member of the SPOR Evidence Alliance, a partnership between researchers, patients, healthcare providers, policymakers, and other decision makers who are committed to building a Canadian health system that is increasingly informed and improved using best available evidence and innovations uncovered by the health research community. The Alliance is jointly funded by the Canadian Institutes of Health Research and 41 public agencies and organizations across Canada to create a collaborative research environment that is centred on patients and health system decision-makers as part of the Strategy for Patient-Oriented Research initiative.

Brokering and Facilitating Connections

In addition to the engagement involved in NLCAHR's core programs, CHRSP and the Research and Knowledge Exchanges, staff at the Centre work every day in a brokering role— assisting university, healthcare system, and community partners in several important ways by facilitating connections and sharing information. The following is a brief accounting of these activities in 2023-2024.

25 Community Programs:

- promoting events
- community knowledge mobilization
- participating as volunteers
- connecting community agencies
- supporting program evaluations

36 Research Studies:

- helping researchers find partners/ funding
- helping recruit study participants
- research knowledge mobilization
- disseminating research findings
- connecting new/visiting faculty with research and community partners

3 New Project Start-ups:

- supporting proposals for new research projects
- supporting new community projects
- brokering partnerships to establish new projects
- providing resources and knowledge mobilization
- recruiting community volunteers

4 Presentations:

- to university classes/ learner groups
- at community and health system events

21 Student Projects:

- connecting students with supervisors
- helping students access research resources
- helping students find community partners
- connecting students with fellowship opportunities
- helping students recruit study participants

7 Requests from other Universities:

- connecting academics from outside NL with research/ community partners in NL

3 Referrals to Health/ Community Support:

- individuals seeking support for their families, referrals, or information about health or community programs or services

2 National Programs:

- Support for national programs seeking connections in NL





Finances



NLCAHR Budget 2024-2025

The Newfoundland and Labrador Centre for Applied Health Research receives an annual grant from the Department of Health and Community Services. This funding is administered by, and supported with funding and administrative support from, Memorial University's Faculty of Medicine. This year, NLCAHR also assumed responsibility for providing administrative support for the Aging Centre of NL (ARC-NL), work funded by a payment from ARC-NL.

Fiscal Year April 1, 2023, to March 30, 2024

NLCAHR Operating Budget			
CATEGORY	BUDGET	SPENT	REMAINING
Salaries and Benefits ¹	\$406,386	\$416,441	\$10,055
Operating Expenditures	\$1,300	\$0	\$1,300
Travel/Events	\$0	\$0	\$0
CHRSP Consultants	\$3,000	\$0	\$3,000
TOTALS	\$410,686	\$416,441	\$5,755

Funding Sources:

Department of Health and Community Services: \$378,500

Memorial University Faculty of Medicine: \$33,696

Aging Research Centre-NL: \$10,000

¹ The deficit in the budget for salaries and benefits resulted from unforeseen salary increases, retroactive pay, and bonuses that were awarded to staff as the result of collective bargaining.