2019-2020 IMPACT REPORT HYDROCEPHALUS CANADA ACCESS TO EXCELLENCE AWARD

Prepared for: Hydrocephalus Canada





COVER ART

Sharing Bioethics by **Lisa Boivin**, a member of the Deninu Kue First Nation, interdisciplinary artist and PhD student at the Rehabilitation Sciences Institute at University of Toronto's Temerty Faculty of Medicine.

ARTIST'S STATEMENT

Sharing Bioethics came about when my Mother asked me, 'Lisa, what do you do? How do I explain it?' My Mother knows what bioethics is and she understands aspects of my Dene culture, but she wasn't sure how I marry the two academically. I told her I would paint her an image-based story so she could understand. The painting is overflowing with bioethical, medical, familial and Dene stories. My Mother is connected to all of them. In the painting I am sharing bioethics with a clinician; in real life I am sharing bioethics with my Mother. Sharing Bioethics is an honour song that I painted for my Mother.

FROM THE TEMERTY FACULTY OF MEDICINE

Ethics guide us when the right path is not necessarily clear. The art selected for the cover inspires reflection about the many considerations and tensions that health care professionals must weigh when faced with hard choices. It is an apt image at this time of global pandemic, when difficult decisions are made on a daily basis. The artwork's origins following a conversation between Lisa and her mother also speak to another guiding force in our lives: our families, friendships and communities. In a time of crisis, our relationships and connections to one another are more valuable than ever. We are grateful to Lisa for sharing her work and story with us, and are delighted to share it with our community of Temerty Faculty of Medicine supporters.

HYDROCEPHALUS CANADA ACCESS TO EXCELLENCE AWARD AT THE TEMERTY FACULTY OF MEDICINE



NOROH DAKIM

MD Student 2nd Year

Temerty Faculty of Medicine, University of Toronto

I would like to say a big thank you to the Hydrocephalus Canada Board of Directors for the Access to Excellence Award, which gave me the opportunity to conduct my summer research project and explore the field of obstetrics and gynecology (ObGyn).

At the beginning of medical school, one of the questions I dreaded being asked was "what specialty are you interested in?" My answer to this question always sounded like a never-ending chaotic list of all medical specialties. As the first year of medical school progressed, I explored several specialties through shadowing, interest group nights and information sessions. With time, I realized that I gravitated towards surgical specialties. Unfortunately, I was still conflicted as some of my core passions - equity and advocacy - did not appear to be well represented in surgical specialties.

This research experience, however, offered me a different perspective. Investigating modes of delivery in women with physical disabilities demonstrated to me that advocacy and surgery can co-exist. Additionally, working with a supervisor, who has dedicated a major part of their clinical and research career to reproductive care in women with physical disabilities, reinforced the idea that I can choose to make advocacy work my central focus, irrespective of specialty. In addition to offering me a different perspective, this project contributed to my development as an aspiring physician by helping me build my research, writing and communication skills.

This summer was special because I no longer dread being asked my specialty of interest. This opportunity was very impactful because I enhanced my research skills and garnered a deeper understanding of the clinical and research opportunities ObGyn has to offer, particularly in the management of reproductive care in women with spina bifida. I am very grateful to the Hydrocephalus Canada for their contribution and donation to making this research project and experience a reality.



Research Summary

The goal of my research project this summer was to investigate reproductive and pregnancy outcomes in women with spina bifida. Women with spina bifida appear to undergo more caesarean sections compared to women without spina bifida, however, the reason for this has not been elucidated. Therefore, this summer, I examined the indications for caesarean sections in women with spina bifida. This project was part of an international study that distributed online anonymous questionnaires to women with spina bifida across various countries. I contributed to this project by analyzing data and extracting pertinent information collected from participants. I created charts, graphs and tables summarizing our key findings. I also wrote and submitted reports for publication and conference presentations. The results from this study revealed some of the pregnancy concerns and challenges faced by women with spina bifida. Our findings also highlighted some of the gaps in the management of reproductive health in women with spina bifida.