

Rethinking Health Inequities: A Panel Presentation

Presenters:

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We propose a panel presentation that would fit under the Vulnerable and Resilient Populations theme of the Population Health Status stream of the AHPRC Research forum. Its focus will be broadly on how we can address health inequities by developing policies that are more responsive to the needs of vulnerable populations. The panel would include 15 minute presentations on the following themes:

Social and Economic Inclusion (SEI) and the Case of 'Lone Mothers'

This part of the presentation will discuss a research project that has just been funded by CIHR to address among other questions: why do marginalized groups in poorer regions of the country, such as Atlantic Canada, tend to be hardest hit by illness and by economic and social exclusion? The presentation will provide an overview of alarming evidence pointing to lone mothers and their children as some of the most marginalized people in Canadian, indeed North American society, and thus vulnerable to poverty and ill health. It will specifically discuss the potential benefits (as well as possible problems) of using will introduce Social and Economic Inclusion as a way to reconceptualize public policies related to vulnerable populations (in particular lone mothers), as well as a research method.

Diversity on the Margins

This presentation will discuss the Diversity Management Strategy at ACEWH. This strategy's purpose is to use policy-based research to support social change for Black, Immigrant, and Aboriginal women who are disadvantaged because they are living in poverty, face discrimination and oppression, or are otherwise marginalized. The ACEWH's objective for this strategy is to ensure that its woman-centred approach respects and promotes the diversity of women's perspectives and experiences - especially of women not typically heard in health research or health systems. Its vision is that diversity will be integrated into all the Centre's work. This strategy intersects directly with, and enhances, the work of the Social and Economic Inclusion Programme already established, which focuses broadly on improving the health and well-being of marginalized populations. This presentation will also present some of the work in progress that supports this initiative including a project called "On the Margins," which examines the health of Black women in rural Nova Scotia.

Midwifery in Atlantic Canada: The last of the provinces to 'have-not'

This presentation will focus on the state of midwifery in Atlantic Canada, as well as the rest of Canada. It will briefly consider the state of maternity care in the region and provide a portrait of the need for the integration of midwives into the public health care system. It will specifically present evidence that makes a case for midwifery as a model of care that lends itself especially well to the care of vulnerable populations.

A Healthy Balance: A Community Alliance for Health Research on Women's Unpaid Caregiving

This presentation will discuss this five-year program of survey and case-study research funded by CIHR. This is an innovative and collaborative program of research to better understand the connections between Women's health and well-being, family life and earning a livelihood. It has employed various methodologies to answer questions that will help improve our understanding of the ways in which caregiving is now organized (e.g., unpaid caregiving shared between women and men), how caregiving affects people's sense of empowerment in their lives, and, in turn how that affects their health and well-being. Researchers have studied different kinds of unpaid caregiving in Nova Scotia to determine which unpaid caregiving situations -- on their own or combined with paid work, are associated with positive or negative health. This presentation will focus largely on the program's findings from focus groups, which have examined how social and economic factors interact with paid work, caregiving, empowerment and health status -- for example how ethnicity, race and culture, as well as rural and urban location, income, age of the caregiver and other factors affect the health and well-being of care providers in Nova Scotia.