

POSTER PRESENTATIONS



Stand Tall by Yoohyun Park

A MEDICAL STUDENT IN SEARCH FOR A SOUL (70)

Yifan Mo, Jasmine Yimeng Bao, Tuyaa Bi

Background/Purpose:

As medical students, we live our lives mostly unexamined. Many of us are anxious about our future, weighed down by the increasing demand for productivity. It feels as if we have lost our sense of self. One student experiencing these same feelings decided to embark on a poetry project to examine herself and find meaning in the seemingly mundane. Rooted in her interest in psychiatry, this project inspired her to reflect. Through reading and writing, the student started to contemplate on her own past and present, and ultimately, discovered much more than just her reasons for interest in psychiatry.

Methods

The student began by identifying a theme and developed a project exploring the concept of “madness.” She selected readings from philosophy, psychoanalytic theory, literature, history, and personal narratives. Through these readings, reflection of her own past and connection to psychiatry began. She started to examine her own experience in mental health, and wrote poems that blended personal narrative with social commentary.

Results

The medical student gained a deeper understanding of her passion for psychiatry, and her attitude in medical school began to shift. She approached learning with renewed joy and eagerness, reflected upon the kind of physician she desires to become, and found a sense of purpose and direction. She clearly identified her interdisciplinary interests in the humanities and is now developing a self-guided humanities curriculum to pursue alongside her medical training. She is also seeking to engage other medical students in similar reflective projects.

Discussion

The exploration of her curiosity towards psychiatry led this medical student on the road of discovery. She remembered the early days of medical school—days filled with anxiety and a sense of purposelessness. Through reading, contemplation, and writing she was able to find herself again.

Biography: Yifan Mo is a medical student interested in Psychiatry, psychoanalysis, poetry, and philosophy.

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APPROACHES TO SUPPORT CLINICAL COMMUNICATION WITH INDIGENOUS PATIENTS IN CANADA (100)

Qurat Ul Ain Qureshi, Dr. Jeremy Hui, Dr. Maria Cherba, Ishita Sharma, Linton Janice, Sam Filipenko, Dr. Katherine Collins, Dr. Amy Shawanda, Dr. Jessica Chan

Background:

First Nations, Métis, and Inuit patients often face barriers in accessing healthcare and report negative experiences within the healthcare system. Patient–provider communication is a key determinant of care quality and cultural safety. This review aimed to identify communication strategies used by healthcare providers that can strengthen clinical interactions and promote trust and understanding.

Methods:

We conducted a scoping review of studies published since 2015 describing First Nations, Métis, and Inuit patients' and healthcare providers' perspectives on clinical communication in Canada. Data were extracted on verbal and non-verbal strategies, approaches to relationship-building, and use of language or interpreters. A thematic analysis was performed, and each study was assessed for Indigenous involvement in research.

Results:

Of 3,285 records screened, 105 were included. 21 papers did not specify Indigenous community involvement but supported findings from the studies that did. Four key themes were identified: (1) expressing empathy and acknowledging systemic challenges; (2) discussing traditional healing practices and holistic perspectives; (3) conducting history-taking in ways that respect autonomy and preferences; and (4) conveying medical information and collaborating with Indigenous interpreters. Across studies, active listening, openness, and patient-led dialogue were associated with more positive care experiences. A few population-specific guidelines were also identified (for example, questions that healthcare providers can ask to support shared decision-making with Inuit cancer patients).

Discussion:

This review highlights practical communication approaches that foster culturally safe, relational care. The findings contribute to ongoing conversations about decolonizing healthcare and advancing reconciliation by centering respect, reciprocity, and contextual understanding in clinical encounters.

Biography: Second year medical student interested in health communication and health systems research.

COI Disclosure: I do not have an affiliation (financial or otherwise) with any for-profit or not-for-profit organizations

EXPLORING THE ADVOCACY EXPERIENCES OF MENTAL HEALTH SERVICE USERS (36)

Ayesha Bhatti

Background: This presentation will focus on the experiences of mental health service users who have engaged in advocacy work in Ontario to improve mental healthcare and policy. Historically, mental health service users have been largely excluded from influencing mental health policy and practice, with decision-making dominated by psychiatric professionals and institutions rooted in biomedical authority (Costa et al., 2012). Mental health service users have important knowledge to share since they are resourceful and are able to bring their educational, intellectual, artistic, and practical abilities from their lives to politically engage and create networks that lead to improved mental healthcare services (Boschma et al., 2014; Morrow, 2017). When decision makers listen to the voices of mental health service users, it allows mental health service users to influence mental healthcare and policy in ways that reflect their diverse experiences and are beneficial to them.

Methodology: Semi-structured interviews through Zoom were conducted with 20 mental health service users who have engaged in advocacy work in Ontario to improve mental healthcare and policy in order to learn about their experiences. They also completed an online demographic survey through Qualtrics.

Results: Participants were motivated to do advocacy work because of their own lived experience and desire to help others. Their advocacy work focused on education, peer support, increasing collaboration across sectors, and policies. Participants' advocacy work has made impacts through policy change, service creation, organizational change, awareness raising, and helping others. Participants said that promising approaches for improving mental healthcare and policy are increasing funding, increasing supports, greater collaboration in the sector, and including people with lived

experience in decision-making. Participants encourage people who want to do advocacy work to practice self-care, have their voice heard, and build relationships.

Biography: Ayesha is a PhD student in the health program at York University and her research focuses on understanding the mental health service user experience of engaging in advocacy work to improve mental healthcare and policy in Ontario. Ayesha has published poetry in *Front Lines: Until the Words Run Pure* and *Front Lines: Bent not Broken*. She has also published a paper on patient experiences of using mental health services in Canada in the *International Health Trends and Perspectives Journal* as well as a book chapter on biomedical dominance in mental healthcare and policy in the book *Institutionalized Madness: The Interplay of Psychiatry and Society's Institutions*.

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FROM CARE TO CONNECTION: EXPLORING YOUTH EXPERIENCES WITH SOCIAL PRESCRIPTION (125)

Nadia Mohamed, Dr Olivia MacLeod, Dr Nicole Racine, Dr Sue Bennett, Samantha Kempe, Leah Walton, Artina Madani

Background/Purpose

Child and youth mental health is continuing to decline post pandemic [1]. Current treatment approaches are illness-centered [2], often leading to negative effects on social identity development [3]. Social prescribing, which is currently being offered to youth in several settings at the Children's Hospital of Eastern Ontario (CHEO), is a novel person-centered approach that seeks to build on patient strengths by connecting youth to community-based activities, including the arts, athletics, or community groups. For this presentation, we will focus on elevating participant voices across multiple social prescribing initiatives at CHEO through focus groups and interviews, highlighting how participation can enhance outcomes and help participants feel better understood by their health care teams.

Methods

Qualitative data from focus groups and interviews with patients and clinicians was collected. and analysed using deductive thematic analysis. Both clinician and youth perspectives on how social prescribing can enhance care and help build bridges between patients and their care teams will be presented.

Results

Several themes relating to social connectedness, self-expression, and improved mental wellbeing were identified in the qualitative data analyzed. In addition, results demonstrate that youth feel better understood by their health care teams, and clinicians have a deeper understanding of their patients' strengths when social prescriptions are a part of their care.

Discussion

While this study demonstrates the positive impact that social prescriptions can have on patients' well-being, it also has the potential to provide clinicians and youth with an enhanced mutual feeling of understanding. These results will be used to inform future social prescribing practices at CHEO.

Biography: Nadia is a University of Ottawa student studying Biomedical Science. She is also someone with lived experience with the mental healthcare system and works as a youth advisor for the CHEO Research Institute, CAMH, and the Knowledge Institute on Child and Youth Mental Health and Addiction.

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ON PAPER: BUILDING SUSTAINABLE COMMUNITY ARTS-WELLNESS PROGRAMMING FOR 2SLGBTQ+ YOUTH (99)

Dr. Andrea Charise, Linda Li, Thea Weaver, Joseph Zhang

This poster presentation examines “On Paper: Toward a Queer of Colour Archival Practice,” an ongoing community-engaged research project which explores how art-making, storytelling, and archiving function as practices of care and identity formation for 2SLGBTQ+ youth in Toronto’s eastern, diverse suburb of Scarborough.

Originally developed through a collaboration between the University of Toronto and a local arts non-profit program, the project seeks to build a digital archive documenting the creative and affective histories of queerness in Scarborough - a space too often omitted from dominant, downtown-centric queer narratives and histories. Through creative practices such as postcards-making, collage, and painting workshops facilitated by local QTBIPOC artists and researchers, the project investigates how acts of creation may foster individual and collective well-being.

Inspired by and building on works such as Ann Cvetkovich’s concept of archives of feeling, Saidiya Hartman’s storytelling/critical fabulations, and José Esteban Muñoz’s vision of queer futurity, the project reimagines archives not only as repositories of information but as technologies of survival which hold trauma, care, and possibility. Participants’ art and testimonies show how queer of colour youth cultivate resilience and belonging even in conditions marked by spatial, racial, and socioeconomic marginalization.

Anchored in the frameworks of health humanities and participatory/qualitative research, we argue that creative archival practices constitute a critical mode of health intervention. By foregrounding lived experience and affective knowledge, Queer Scarborough “On Paper” expands what counts as evidence in health and humanities research, offering an ethics of care rooted in co-creation and representation.

Ultimately, this presentation situates Scarborough’s queer communities within broader discourses of identity, wellness, and place-making. It demonstrates that artistic and archival practices - especially those led by youth - may reorient understandings of health away from purely clinical models toward relational, interdependent, and imaginative practices of flourishing.

Dr. Andrea Charise

Biography: Andrea Charise, PhD, is Associate Professor in the Department of Health & Society and Acting Associate Vice-Principal Research and Innovation (AVPRI) – Strategic Initiatives & Partnerships at the University of Toronto Scarborough (UTSC), Canada. Visit www.andreacherise.ca for more information.

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READING ADDICTION: POETRY TO REHUMANIZE SUBSTANCE USE IN MEDICAL CURRICULUMS (78)

Ms. Mishaal Omer

Background/Purpose:

Stigma toward individuals with substance use disorders remains pervasive in medical settings and is often reinforced by implicit biases formed early in medical education. While biomedical curricula emphasize the pathophysiology of addiction, they rarely engage with the emotional and human dimensions of suffering. This project explores whether reading and discussing poems about addiction [such as “Portrait of an Alcoholic with Doubt and Kingfisher” (Kaveh Akbar), “My Brother at 3 A.M.” (Natalie Diaz), “Praying Drunk” (Andrew Hudgins), and “A River Is a Body Running” (Steven Espada Johnson)] can enhance medical students’ empathetic understanding of patients living with addiction.

Methods:

A mixed-methods pilot study was designed for first- and second-year medical students. Participants will attend a 60-minute session that includes (1) guided readings of four poems centered on addiction and identity, (2) facilitated discussion linking poetic imagery to clinical encounters, and (3) pre- and post-session surveys using the Medical Condition Regard Scale and qualitative reflection prompts. Responses will be analyzed using paired t-tests for quantitative data and thematic analysis for qualitative narratives.

Results:

I expect that findings will suggest a statistically significant increase in mean Medical Condition Regard Scale scores following the session ($p < 0.05$). I predict that thematic analysis will involve three domains: (1) recognition of addiction as a lived, embodied experience; (2) reframing of “noncompliance” as narrative complexity; and (3) heightened awareness of personal emotional responses in clinical contexts. Data will be collected in early 2026.

Discussion:

Integrating poetry into medical education may serve as a powerful, identity-centered tool for cultivating empathy and reducing stigma toward people with addiction. Literature provides a bridge between scientific understanding and human experience, encouraging students to see patients as whole, storied individuals rather than pathologies.

Biography: Born and raised around Milwaukee, Wisconsin, I grew up in a warm, loving Pakistani family and with a book always in my hand. I studied English at Case Western Reserve University before working at Epic Systems for a year before I matriculated to medical school this past July.

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REVIEW: MUSIC AND DANCE THERAPY FOR NEUROPSYCHIATRIC MANIFESTATIONS IN PARKINSON’S (117)

Ms. Shahrzad Rahmanian, Dr. Wendy Stewart

Background: Parkinson’s disease (PD) is the second most common neurodegenerative disorder and represents a growing global health concern given increased longevity and an aging population. While PD is traditionally characterized by motor symptoms, non-motor manifestations including anxiety, depression, and apathy significantly affect quality of life and are linked to disruptions in dopaminergic, serotonergic, and limbic circuitry^{1,2}. Pharmacologic treatments for these symptoms show limited efficacy, highlighting opportunities for complementary non-pharmacological therapies to meet this need. While music, dance, and auditory-based interventions have demonstrated efficacy in improving motor symptoms in PD^{3,4}, studies examining their impact on non-motor symptoms are limited despite the evidence for these therapies in alleviating anxiety and depression in other populations⁵.

Methods: We conducted a narrative review of studies investigating the effects of music and dance on anxiety, depression, and apathy in PD. Searches were performed in PubMed, PsycInfo, and Academic Search Premier databases. Results were synthesized narratively due to heterogeneity in outcome measures.

Results: Thirty-four studies (n = 836) met inclusion criteria (18 dance, 8 music, and 8 combined music and movement interventions). Most dance intervention studies reported improvements in depression and emotional wellbeing. Music interventions showed significant improvements in depression and anxiety. Participants also felt a sense of belonging and connection. Results for studies combining music and movement were inconsistent. Although the longest program was 24 weeks, trends show longer and more frequent interventions were more likely to yield significant improvements in non-motor symptoms.

Discussion: Our findings suggest that beyond potential modulation of frontostriatal and limbic networks, engagement in music and dance may preserve social identity and foster belonging, thereby maintaining wellbeing in PD. By enhancing motivation and social connectedness, these interventions may counteract anxiety, apathy, and depressive symptoms, reinforcing self-concept. Ongoing work includes developing a neurobiological and psychosocial framework to guide future studies and clinical applications.

Biography: Shahrzad Rahmanian is a 3rd year medical student at Dalhousie Medicine New Brunswick. Prior to medical school, she completed a MSc in Cell and Systems Biology at the University of Toronto, with her thesis focusing on behavioural characterization of a zebrafish genetic model of dystonia. Her other research interests include migraine, as well as music and dance therapy in Parkinson's disease. Outside of academia, she is passionate about fitness, nature photography, and playing classical piano.

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SEEING THE INVISIBLE: PHOTOGRAPHIC EXPLORATION OF VULNERABILITY AND HUMAN DIGNITY (123)

Mrs Aya-Maria Bouyarden, Mrs Yousr Jalal, Mrs. Marwa Bouksim, Mrs Sofia Hadjarab

Background/Purpose

When efficiency dominates conversations, it is easy to overlook the stories behind patients. We wanted to bridge this gap by linking art and care through photography. We aim to highlight human dignity by capturing portraits and personal testimonies of individuals who have experienced vulnerability, such as refugees, Indigenous peoples, people experiencing homelessness, members of the LGBTQ+ community, and those living with chronic illnesses.

Methods

Each participant is invited to take part in an interview exploring their personal story, followed by a photographic portrait session. Informed consent is obtained with clear explanations of image use, withdrawal rights, and portrait approval. Narratives and images are co-curated with participants to ensure authenticity, agency, and respectful representation of their experiences. We are currently collecting testimonies and coordinating exhibition logistics. Particular challenges include ensuring meaningful consent, cultural sensitivity, and equitable representation across diverse communities.

Results

We anticipate that the exhibition will bring together visitors to reflect on the portraits and stories presented. In a society as multicultural as ours, this activity aims to encourage a sincere desire to better understand one another and to invite everyone to look at others with greater humanity. We plan to

present the results. The results will be presented on the poster through selected photographic portraits and excerpts from participants' narratives, allowing viewers to engage directly with the lived experiences represented.

Discussion

This exhibition seeks to create connections between the portraits and the visitors, while encouraging dialogue. It invites viewers to question prejudices and first impressions. The images, along with written testimonies, tell life stories and offer a new dimension to empathy and connection. Throughout history, art has served as an accessible means of expression, whether through paintings depicting historical events or as a tool for social critique.

Mrs. Marwa Bouksim

Biography: Second year Medical student

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STITCHING REFLECTION: EMBROIDERY FOR EMBODIED RESEARCH (73)

Ms. Abhinya Gulasingam

Background:

This project explores embroidery as a reflexive and arts-based extension of Organic Inquiry. Situated within transpersonal and decolonial research traditions, this work positions embroidery as a contemplative and creative methodology that transforms affect, intuition, and embodied knowing into material form. It uses embroidery to hold complexity and multiplicity without needing resolution, creating space for alternative and reparative ways of knowing in medical education research.

Researcher Positionality and Reflexivity:

As a PhD researcher in medical education, I occupy a position both within and outside the field. My standpoint as a woman of colour and immigrant to Canada informs every layer of this inquiry. Reflexivity is not peripheral but integral, as I navigate questions of belonging, authority, and representation within colonial academic structures.

Methods

Guided by the principles of Organic Inquiry, I present embroidery pieces reflecting on the emotional and intellectual stages of developing my doctoral proposal. The process follows a sequence of reflection, design, and stitching, integrating reflexive journaling throughout. Drawing on embroidery traditions relevant to the sites I study, to embody emotional states and evolving perspectives. Triangulation across embroidery practice, reflexive writing, and dialogic interpretation will support meaning-making and methodological integrity.

"Results"

The process surfaces layered emotions (uncertainty, resistance, and care) embedded in researching race and gender in medical education. Embroidery as a subliminal method and metaphor, slows the research process and stitches inquiry to the embodied presence.

Conclusion

I share how I use embroidery to reimagine research as an embodied act of care and resistance. The approach offers a decolonial, tactile method through which academic knowledge is not only analyzed but is transformed and stitched into being.

Biography:

Abhinya Gulasingam, is a PhD student under the Department of Innovation in Medical Education at the Faculty of Medicine, University of Ottawa. She recently completed her Masters in Public Health at the University of Ottawa, where most of her research focused on structurally marginalized individuals, including women of color and immigrants, examining how their experiences are often left out of dominant health narratives. She is an early career researcher with a commitment to bringing a critical and interdisciplinary lens to questions of policy, power, and justice in health, with a focus on reimagining more equitable futures in medical education and global health.

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VERBATIM THEATRE IN PEDIATRIC ONCOLOGY: INTEGRATION INTO RESIDENCY/INTER-PROFESSIONAL EDUCATION (57)

Marina Liu, Dr. Paul D'Alessandro, Dr. Shauna Flavelle

Hybrid (in-person and virtual) sessions, including those involving medical humanities, are increasingly ubiquitous in health professional education since the COVID-19 pandemic. Ed's Story, a verbatim play written from the journal of an adolescent/young adult (AYA) osteosarcoma patient, has been utilized in medical education at Canadian institutions for over a decade. However, we have never integrated Ed's Story into sessions for pediatric resident physicians (PRPs) or pediatric oncology healthcare professionals (HCPs). We explored how hybrid sessions using Ed's Story, combining both passive viewing of a recording of the play followed by reader's theatre (RT) of the script, impacted PRPs and HCPs working in the provincial pediatric oncology program at our tertiary children's hospital. Hybrid sessions were feasible and enjoyable; participant empathy increased post-session; and the majority of participants preferred watching the recording over RT. Inductive thematic analysis of narrative feedback identified five themes: new or broadened understanding of interdisciplinary pediatric oncology care and patient/family illness experiences; recognition of AYA care needs; appreciation for nuances of advanced communication; acknowledgement of new skills gained; and session/logistic feedback. These results will inform future iterations of Ed's Story to optimize content delivery and session structure.

Biography: Marina is a third-year medical student at University of Saskatchewan College of Medicine.

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