

# PRESENTATIONS ON DEMAND



Samantha H.

Ephemeral by Samantha Gibbon

## A RELATIONAL EXAMINATION OF MENTAL HEALTH IN CANADA'S SWAHILI DIASPORA (95)

Mr. Yousef Al-Nahdy

Inspired by the diverse range of identity and positionality that those occupying diasporic groups hold. This research utilizes a narrative approach to investigate the experiences and views of mental illness within Canada's East African (Swahili) community. This niche population is known for its cultural diversity, carries complex views on mental health, which are disjunctive from those within the modern Canadian systems of care. Through an autoethnographic narrative approach, my lived experience in facing mental illness illuminates crucial tensions which prevail among members of the diaspora. Semi-structured interviews conducted with family members provided a lens to reformulate lived events in accordance with knowledge of Swahili practice. Utilizing an approach driven by relational ethics of care, a focus is placed on interpersonal experiences, illustrating the complex nature of the perspectives which surround and shape the individual. In engaging with the narrative, readers are prompted to critically reflect on the social production of care within the layered diasporic positionality. In employing the relational ethics of care, a proposed direction for practice emerges that values both the individual and the plural simultaneously.

**Biography:** My name is Yousef Al-Nahdy, I am a recent graduate from the University of Toronto, majoring in Health Policy and minoring in Health Humanities. During my undergraduate I conducted research exploring the ways that identities shape the mental health of the Swahili diaspora group in Canada. The culmination of the research led to the creation of a relational resource, which aims to address the complex relation between competing forms of identity. I hope to research this topic at the post-graduate level in order to further explore the ways that learnings can be applied to the broader Canadian context.

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

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## COMPLEX INVISIBLE DISABILITY: A NARRATIVE ETHNOGRAPHY OF THE CLASSROOM (130)

Ms. Téa Christopoulos, Dr. Michael Atkinson, Dr. Nadine Abdullah, Dr. Daniel Buchman, Dr. Gretchen Kerr

**Background/Purpose:** The clinical care of invisible disabilities, such as chronic pain, is associated with medical uncertainty and unsatisfactory doctor-patient relationships and health outcomes. Although managing uncertainty is a key clinical competency, there is a paucity of literature that explicates its teaching in the context of invisible disability. This study aims to better understand how students and their instructors narrate their experiences teaching and being taught how to diagnose, treat, and care for medically uncertain and complex invisible disabilities. **Methods:** A narrative ethnographic approach was adopted. Five ethnographic observations were conducted for an 11-week, second-year undergraduate medical school course focused on caring for vulnerable patient populations with complex presentations. Twenty second year and third-year students and three course instructors (n=23) participated in semi-structured interviews which were partially and iteratively guided by preceding ethnographic observations and a feminist bioethical lens. **Results:** Data are currently being analyzed using a critical narrative analysis (Souto-Manning, 2014). Early findings suggest that invisible disability is not explicitly taught as a concept in medical curricula. Students provide various conceptualizations for invisible disability and medical uncertainty and narrate their educational experiences with curiosity, empathy, and an openness toward learning from patient narratives. Students assume a personal responsibility toward learning more about these topics and recognize the importance of their management in clinical contexts. **Discussion:** This study will help illustrate what

and how students are currently learning about invisible disability to co-create a narrative medicine-informed framework that can be integrated into undergraduate medical curricula to enhance their education on these topics.

**Biography:** Téa Christopoulos is a senior PhD candidate and course instructor at the University of Toronto's Faculty of Kinesiology and Joint Centre for Bioethics. Her doctoral research interests include invisible disabilities, medical uncertainty, narrative medicine, and the medical humanities.

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## LONG COVID CRIP DOULAS: COUNTER-ARCHIVING DISABILITY CULTURE THROUGH PODCASTING (64)

Dr. Élaina Gauthier-Mamaril

**Background** Over 2 million people in the UK are currently living with long COVID. This mass disablement is happening in a hostile environment where years of austerity are compounded by major cuts to disability benefits and social support. In the margins, disabled people have been supporting each other forever, offering companionship and guidance to navigate uncertainty, systemic vulnerability, and self-identity. In the tradition of doulas who attend to the transformative process of pregnancy and birth, crip doulas (Park Milbern, cited in Piepzna-Samarasinha, 2017) accompany those who are making the transition to a disabled (or differently disabled) life. Doulas are not usually medically trained, yet they exist within healthcare broadly speaking and exemplify a different kind of expertise: one that is based in an intimate knowledge of being disabled in biomedical, financial, social, spiritual, and material systems. My work examines what it means for people living with long COVID in the UK to engage in crip doula relationships using podcasting as a co-creative research method. Methods I situate this project within a broader cross-disability landscape where cripistemologies – knowledge produced based on living as disabled in an ableist world – are anchored in various cultures of chronic illness. In this presentation, I will provide an overview of our current chronic care landscape and cover my use of crip theory and disability justice principles in relation to podcasting. Results I will also discuss the importance of paying attention to the histories of HIV doulas and HIV care trajectory when analysing current long COVID doulaships. Discussion Finally, I will lay out my plan to develop cripistemologies of chronicity through podcasting as a way of brokering between the discourse of healthcare systems and disabled knowledge..

**Biography:** Élaina Gauthier-Mamaril (she/her) is a disabled philosopher of disability. She holds a PhD in Philosophy from the University of Aberdeen and has worked as an Interdisciplinary Research Fellow at the Centre for Biomedicine, Self and Society (University of Edinburgh) where she produced *Massively Disabled: A Long COVID Research Podcast*. She is currently part of the Wellcome Anti-ableist Research Culture project (WAARC) at the University of Sheffield.

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## REIMAGINING EMPOWERMENT: WOMEN'S COLLECTIVES AND ARTS-BASED RESISTANCE IN RURAL KENYA (38)

Ms. Bhavana Akilan

This paper presents an autoethnographic study of a Women's Collective in rural Kenya, analysing its formation, impact, and decolonial significance through C. Wright Mills' sociological imagination.

Conducted as part of the Laidlaw Scholarship's Leadership in Action project in partnership with KULE Foundation International, the research explores how women in Kambirwa village navigate economic precariousness, gendered social expectations, and the pursuit of communal solidarity. Central to their practices are bead-making and sweater production, which function not only as income-generating activities but also as forms of cultural preservation, collective care, and self-determined resilience. Dominant narratives often frame rural women's collectives through Western paradigms of empowerment that emphasise structured economic integration, measurable outputs, and externally driven interventions. This study challenges such perspectives by demonstrating how the Women's Collective developed organically, outside the confines of neoliberal development frameworks, and by showing how its absence of rigid hierarchy or formal governance is not a deficiency but a deliberate and adaptive mode of organising. Such fluidity enables members to redefine empowerment on their own terms and sustain a form of solidarity rooted in lived realities rather than imposed models. By employing an autoethnographic approach, this paper foregrounds both the socio-political and economic conditions shaping the collective and the researcher's own positionality within the project. It situates personal narratives alongside community testimony to reveal how the collective embodies resistance, resilience, and relational belonging. The findings highlight the importance of recognising women's collectives as transformative spaces that disrupt conventional development trajectories. They call for a rethinking of empowerment, one that acknowledges decolonial ways of organising and honours practices emerging from within communities themselves. Ultimately, this study contributes to broader debates on decolonizing development, the politics of care, and the potential of grassroots women's networks to serve as agents of cultural affirmation and social change.

**Biography:** Bhavana Akilan is a graduating Bachelor of Science student at the University of Toronto Scarborough, majoring in Neuroscience with minors in Psychology and Health Humanities. She is an award-winning researcher and community leader, recognized as a Laidlaw Scholar and recipient of the UTSC Undergraduate Research & Creative Prize in the Humanities. Her work bridges neuroscience, health humanities, and storytelling, with a focus on social determinants of health and community-based mental health initiatives. In 2024, she founded a Women's Collective in rural Kenya through the KULE Foundation, fostering empowerment, resilience, and creative expression among women in Mukangu and Kambirwa villages. Beyond research, Bhavana is active in leadership, communications, and innovation. She is founder and president of the Society for Innovation at the Intersection of Natural and Artificial Intelligence (SIINAI), where she organized InnovAlte 2025, a conference exploring AI for the global good. She is also Co-Founder of Itrah, a fragrance and wellness venture inspired by sensory storytelling. Bhavana's interdisciplinary work has been showcased at the UTSC Research and Creative Forum, international conferences, and community events. Looking ahead, she is committed to leveraging her background in neuroscience, PR, and social innovation to advance inclusive health solutions and global community empowerment.

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## SEEING THE INVISIBLE: PHOTOGRAPHIC EXPLORATION OF VULNERABILITY AND HUMAN DIGNITY (121)

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 in an oral presentation, which will include a brief visual projection of selected portraits and excerpts from participants' narratives. 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 Aya-Maria Bouyarden

**Biography:** Second year Medical student

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## **SITUATING IDENTITIES IN SOCIALLY ACCOUNTABLE RESEARCH NETWORKS: A PARALLAXIC APPROACH (118)**

Dr. Katie Hemsworth, Dr. Erin Cameron, Wei Zhao, Dr. Amy Clithero-Eridon, Dr. Pauline Sameshima

Background: Social Accountability (SA) has become a foundational framework in medical and health education, yet its relationship to research, and particularly research networks, remains largely under-developed (Kennel et al., 2025). The CREATE Project is a multi-institutional, international research partnership that uses arts integrated research approaches to investigate the transformative potential of socially accountable research (SAR) networks across local and global scales. Drawing on preliminary findings from the CREATE Project, this workshop invites participants of various backgrounds to collectively explore creative approaches that deepen understandings of the dynamic, unfolding relationships between identity, positionality, and situated knowledge in the context of socially accountable research. Instructional Methods: Workshop organizers will begin with an overview of the guiding principles and methodologies of the CREATE Project to date. We will introduce and build on the concept of "parallaxic praxis" (Sameshima, Maarhuis, and Wiebe, 2019), a multimodal, arts integrated research approach that embraces the multiplicities of identity, perspective, and place. Through guided group discussion and collaborative art creation (such as drawing, poetry, comics) based on specific themes intended to deepen and extend inquiry, workshop organizers and participants will collaboratively address the question: How do arts-integrated approaches help researchers strengthen individual and collective identities across geographies, cultures, and disciplines for greater impact? This workshop is open to anyone interested in the potential of arts-integrated approaches (including but not limited to parallaxic praxis) for understanding and practicing socially accountable research across different health-related contexts and networks. No artistic experience required. In joining this workshop, participants are invited to become active contributors to future phases of the CREATE Project.

Dr. Katie Hemsworth

**Biography:** Katie Hemsworth is a critical-cultural geographer and currently a research associate at the Dr. Gilles Arcand Centre for Health Equity at NOSM University (Thunder Bay campus, situated on Robinson Superior Treaty territory and the lands of Fort William First Nation).

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## **STITCHING STORIES: FINDING MEANING IN TEACHING THROUGH QUILTING (98)**

Dr. Martina Kelly, Mattea Nixon, Dr Heather Buckely

Introduction: Recruitment and retention of clinical preceptors remain a pressing challenge in health professions education. Increasing administrative demands, competing clinical responsibilities, and the lower prestige of teaching relative to research threaten the time, motivation, and professional identity of clinician educators. This study explored quilt-making as an arts-based approach to support reflection, meaning-making, and build community among clinical educators. Methods: 7 workshops, ranging between 60-90 minutes, were offered at 2 different university faculty development programs (5 workshops) and at two medical education conferences (2 workshops). Participants included clinicians from different disciplines, with varying levels of experience. Workshops combined guided writing prompts, creation of individual quilt blocks representing meaningful teaching moments, and assembly of a collective quilt. Data collection included post-workshop evaluations comprising a mix of Likert and open-ended questions, and 8 semi-structured interviews with volunteer participants soon after workshops. Evaluations and interviews were analyzed using descriptive statistics and thematic analysis. Results: Of 140 attendees, 103 returned evaluations. Participants reported high engagement in the workshop, particularly appreciating the opportunity to be creative. Participants valued reflecting on meaningful teaching moments, expressing these experiences visually, and sharing insights with peers. The collaborative quilting process fostered a sense of community and reinforced professional identity. A composite quilt has been made from participants' quilting blocks and will be displayed during this presentation. Discussion: Quilting offers a novel, engaging platform for reflective practice in health professions education. The approach supports both individual insight and collective connection, enhancing motivation, meaning, and professional identity among clinical educators. Future directions include virtual adaptations, expanded interdisciplinary participation, and research on the long-term impact of arts-based reflective practices on faculty engagement and retention.

**Biography:** Martina Kelly is a Family Physician with an interest in Medical Education

**COI Disclosure:** Any direct financial relationships including receipt of honoraria, gifts, in-kind compensation, etc: SSHRC, CIHR

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## **Surviving Premed: Reality TV and Medical School Admissions (120)**

Mr. Hartley Jafine, Ms Abjot Basra

Survivors ready? GO! The reality television show Survivor, in many ways, mirrors medical school admissions. Survivor functions as an amplified social and psychological human experiment, where 16-20 players are placed in a remote location, challenged with the task to compete against each other and vote each other out until one claims the title of Sole Survivor. While Survivor is reality television, this presentation illustrates the many parallels that exist between Survivor players and medical school applicants and highlights how the journey of medical school applications mirror playing Survivor. Survivor contestants must outwit, outlast and outplay their competition, competing in team and individual challenges. When the players are not competing, they are building shelter, forging for food,

searching for hidden advantages, and building alliances with other players. Similarly, medical school aspirants work tremendously hard and compete and collaborate for grades, extracurriculars positions, publications, and reference letters, requiring extensive preparatory experience prior to submitting an application - essentially trying to outwit and outplay their peers. Drawing on a literature review of “premedical studies” and a thematic analysis of Survivor, we identified four overarching parallels between Survivor contestants and pre-medical aspirants: (1) Race and Equity, Diversity, and Inclusion (EDI) implications (especially within the context of the TMU inaugural class), (2) strategic approaches to the process of playing the game/applying to medicine, (3) constructing a narrative and persuasion others, and (4) competitive standards of admission. These themes reveal the challenging and competitive nature of medical school admissions and how the applicants are essentially competing in a Reality TV show like Survivor. Applicants, ready? GO!

Mr. Hartley Jafine

**Biography:** Medical Improv Expert and Survivor Professor

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