



Newsletter

Federation of Medical Women of Canada
Fédération des femmes médecins du Canada



Winter 2010 • Vol 23 • No 1

A “Smear” Campaign Against Cervical Cancer 2009

By President: Dr. Andrea Canty



After its inaugural Pap test campaign in 2008, the Federation of Medical Women of Canada partnered with the Society of Obstetricians and Gynaecologists of Canada (SOGC) and the Society of

Colposcopists (SCC) in 2009 to increase the scope of the campaign. The primary objective of the Pap test campaign is to increase access for women who face barriers in accessing a Pap. During Cervical Cancer Awareness Week (October 26-30, 2009) these women were able to drop-in or book an appointment for a Pap test with participating clinics. The secondary objective of the campaign is awareness – that publicity around the campaign will remind women who do have a physician, to book their Pap test.

Cases of and deaths from cervical cancer have been reduced by over 60% in the last 30 years, mostly due to screening using regular Pap tests. However, because of the barriers women face when trying to access a Pap, this useful screening tool is underutilized. The Public Health Agency of Canada and The Canadian Cancer Society predict that 1 in 148 Canadian women will develop cervical cancer in their lifetime and 1 in 423 will die from it. The barriers women face when considering their health are numerous; no family doctor, embarrassed to get a Pap from

their male physician, shame about other genital or rectal health issue.

Through partnerships with the SOGC, SCC and GlaxoSmithKline (GSK) and through the enthusiasm of FMWC members, we were able to build upon the success of last year's Smear Campaign. New this year, clinics received a package of bilingual colour posters, a local media release and patient questionnaires (results still pending). There were 750 women provided Pap exams in 43 clinics in 30 cities in 8 provinces and 1 territory; an overall increase of 250 exams in 28 clinics.

Clinics' feedback has provided recommendations for 2010. Advertising and promotional materials need to be in the hands of our clinics much earlier, early September being ideal. Due to the arrival of the flu pandemic and the H1N1 vaccine simultaneously with Cervical Cancer Awareness Week, media coverage was compromised. In addition, some clinics had to cancel their Pap tests to deal with flu cases and requested that we choose a different time of year for the campaign. An earlier start on media promotion and expanding our partnerships both nationally and at the local level will help to increase publicity of the campaign in 2010. In addition, the FMWC has been invited by the Canadian Partnership Against Cancer to participate in their 2010 February conference on strategies to maximize participation in cervical screening. This conference will provide additional strategies for patient recruitment.



Despite the interference from H1N1, our Smear Campaign was a success. Encouragingly, almost all clinics felt that the campaign was worthwhile and said they would participate again. We now have a committee in place to move forward with improvements for campaign 2010.

**Thank you again to all
participating clinics and
to our partners for
their support:
SOGC, SCC and GSK!**

FMWC Mission Statement

The Federation of Medical Women of Canada (FMWC) is committed to the development of women physicians and to the promotion of the well-being of all women.

La Fédération des femmes médecins du Canada est vouée à l'avancement des femmes médecins ainsi qu'à la promotion du bien-être des femmes en général.



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FMWC Newsletter

Editor: Dr. Nahid Azad

The FMWC Newsletter is published three times a year and sent to members as a perk of membership. Next deadline is April 1, 2010.

Views and reports appearing in the Newsletter are not necessarily endorsed by the FMWC.

Contributions of articles, reports, letters, notices, resource information and photographs are encouraged.

Submissions and membership inquiries to the National Office:

FMWC, 780 prom. Echo Drive
Ottawa, ON K1S 5R7

Tel: 613-569-5881 or
Tel Toll free: 1-877-771-3777
Fax: 613-569-4432 or
Fax Toll free: 1-877-772-5777
Email: fmwcmain@fmwc.ca
Web: www.fmwc.ca

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Passing On The Torch

By Newsletter Editor: Dr. Nahid Azad



Dear readers,

It has been over 3 years since I received the privilege of being the FMWC newsletter editor. From one perspective this time has passed

very quickly and from another perspective, I have had a tremendous time filled with learning experiences and building relationships. As I have said in the past, the benefits of being an FMWC member are many. It provides a stepping stone in leadership development for women physicians. Many opportunities are offered to members to practice skills necessary for their own development, which would otherwise have been neglected. My experience as an editor included receiving terrific support from the national office and the readers, and has been very rich

and fulfilling. I would like to take this opportunity to thank all of you, and more importantly, to encourage you continue to contribute to the newsletter as the face and voice of the FMWC. Let us know how we can do a better job.

It is also my pleasure to introduce you to our next editor, a long time member of the FMWC and a Branch President since May 2007: Crystal Cannon. She is a graduate of McGill U. and University of Toronto, and is an assistant professor of Clinical Sciences at NOSM. She is a Family Physician who had a busy obstetrical practice in Thunder Bay from 1980 until 2006, and is presently a Hospitalist in Chronic Complex Care and Rehabilitation at St. Joseph's Hospital in Thunder Bay. Crystal has been married to her classmate, Jim Middleton for 30 years and has three adult children. She is the proud owner of a standard poodle, Trixie.

It is time to pass the torch to the next bearer, Crystal – and I wish you all positive and fun experiences, as I have had.

Waving to all of you from Thunder Bay

*By Incoming Newsletter Editor:
Dr. Crystal Cannon*

I am honoured and a little nervous as I assume this new role. I am grateful that Nahid will be helping me along the way and I thank her for this. It will be hard to fill her shoes! I look forward to the learning curve and being able to interact with all of you in the Federation. Keep those articles and reports coming in to us and please send feedback and suggestions whenever you wish. All the best for 2010.





AGM, Leadership & Advocacy Workshops 2010 The Many Faces of Women

By: President-Elect & AGM Chair: Dr. Deborah Hellyer



Following on the heels of the highly successful FMWC meeting in Montreal, we are now planning for our next conference and AGM scheduled for Toronto at the InterContinental Toronto Yorkville Hotel on September 25 and 26, 2010. The theme will continue on advocacy and leadership development with a focus on “The Many Faces of Medical Women”.

During the lifespan of a physician’s career, a woman undertakes a myriad of

leadership roles including that of patient advocate, educator, medical politician, researcher, communicator, caregiver, mentor, entrepreneur, volunteer, negotiator and senior statesperson. The conference will provide the tools, insight and support to prepare physicians for these responsibilities. As in past years, issues of women’s health will be highlighted.

We are again planning to utilize various well recognized speakers and formats to provide optimal interaction and educational experience. More information will be provided as the program becomes finalized. I hope that this glimpse of our conference highlights will inspire you to join us September 25 and 26, 2010 in Toronto.



Share Your Story!

The deadline for the **Spring 2010** newsletter is **April 1, 2010**. The newsletter will come out in early May. Please forward submissions to the National Office at: fmwcmain@fmwc.ca. Please send us submissions/news about:

- ☑ **Achievements**, awards, announcements and congratulations as it pertains to yourself or another FMWC member. Relevant pictures (please include captions) are welcome.
- ☑ **Creative Corner**: We know that doctors have many other talents and we want to showcase them. We invite creative types to submit poems, drawings, cartoons or a humorous column.
- ☑ **“Letter to the Editor”**: Please submit your comments to the editor on your experiences/concerns on health care, on women’s health, or on your practices.

The newsletter is for your benefit and enjoyment – so please feel free to contribute!

Correction!

Fall edition, pg 3

The Letter to the Editor:
Better physician efficiency is the key to better productivity
was reprinted from
Medical Education Volume 43,
Issue 10, Date: October 2009,
Pages: 1019-1019.



Canadian Women Doctors Learn From Experience

By: Dr. Janet Dollin

In 2006, the Wonca Working Party on Women in Family Medicine (WWPWF) built consensus around the “HER” statement. The Hamilton Equity Recommendations (HER) Statement was endorsed by Wonca International, the group representing all Family Physicians worldwide. The WWPWF has gone on to work on how to make these philosophical underpinnings become tangible reality within their international organization. A successful spinoff of this venture was to obtain the endorsement of the Canadian College of Family Physicians, the Ontario College of Family Physicians as well as the Federation of Medical Women of Canada (FMWC) all of whom are now looking at the specifics of how that can be done. The goals of the HER statement and a subsequent report from the groundbreaking WWPWF “Gender Equity Standards for Scientific Meetings” are to start from within and address the World organization’s own success at achieving gender balance within its own governance and its own program development. It is a call for action to our own Canadian organizations to adapt these recommendations for their own situations. We can only change our own behaviour!

http://www.womenandfamilymedicine.com/wwpwm-statements/HER_statement.pdf/view.html

In 2008, FMWC undertook a Needs Assessment of its members to delineate what, in the minds of women physicians in Canada, are the top priority issues for women in medicine in our own country. The top ranking concern was to improve workplace flexibility, job sharing, part time work and to ensure that this flexibility is equitably distributed across all specialties. The 2nd concern was to increase physician resources overall in Canada and to stop victimizing women as the cause of human health resource problems. Generational changes in attitude, increased interest in flexible or less than full time work and the burnout rates of the past will mean we need to think differently about provider supply as well as population health needs. The 3rd concern was that increased numbers of healthcare trainees would require more teaching faculty, in both typical and non-typical female specialties, and this in turn would require more women choosing less typical paths and advancing to leadership positions as role models. Support for advancement was identified as a gap needing attention.

<http://www.fmwc.ca/index.php?page=395>

In 2009, FMWC went on to look at all of our own faculties of medicine in Canada (Gartke et al) and asked a few simple questions. What supportive programs could we find at Canada’s medical schools that allowed men and women to contribute their skills to their maximum- to work flexibly, to advance, to take leaves of absence for births or caregiving, to have childcare, to stop the clock during leaves, etc. according to their individual needs? The study goes beyond “women in medicine” in that it asks if, as a culture, we are ready to allow male and female physicians the ability to define family commitment and childrearing in a very personal way and make their workplaces reflect these philosophies. “Work Life Policies for Canadian Medical Faculty” a study which was done with the support of CMA, has been submitted for publica-

tion, so a description will be published in the Spring newsletter. It will demonstrate we are not so badly off in Canada compared to others on some measures, but we lag on others and there is clearly room for improvement. Most importantly it will point the way. It will ask Medical Schools to examine their policies as well as the “culture” surrounding them. The same type of research is also being done through the Association of Faculties of Medicine of Canada, and this will also inform future planning for medical training. This is the essential Canadian benchmarking needed on an ongoing basis to monitor and shape change.

The Medical Women’s Federation of the UK have added a new dimension to this discussion in their 2008 report Making Part Time Work. They clearly say that the medical profession needs to promote more positive attitudes to part-time working through mentors, role models and case studies. They recommend specific support for innovative job design, better openness to information, and the mainstreaming of less than full time work opportunities as well as support for part time workers and support for those returning to work after a gap. They identify the key players in making these changes, and also congratulate the European Working Time Directive for their strident efforts to normalize what constitutes a “normal work week”.

<http://www.medicalwomensfederation.org.uk/makingparttimework/>

While all of these reports have, in the main, focused on the barriers in individual specialties, or gaps in particular work areas, the 2009 UK National Working Group on Women in Medicine reviewed the literature to draw out the common threads in order to recommend a specific program of action to improve opportunities for women in every field of medicine. Their report, Women Doctors: Making a Difference, is aimed at 3 targeted areas.

- The first is aimed at improving the existing structures so that there is better advancement to certain crucial career turning points as well as different ways of working.
- The second area is concerned with ensuring that new processes such as revalidation have the flexibility and capacity to accommodate doctors who may not be conforming to the usual working patterns.
- The final area is concerned with providing additional support for the practical realities of caring for a child or a dependent relative

It is already quite clear that the problem is not access to medical school for women but rather how we ensure that the female medical workforce is able to use all of its skills within our healthcare system. It has become clear from this and all prior reports that it is not just women who are affected by these issues, but that attention to these new priorities will create a more equitable pattern of work, recognition and reward for all. While some of the specifics of the recommendations within this UK report may not be applicable here due to differences in systems, the core message of each

(continued on page 5)



Launch of the Canadian Menopause Coalition

By: Dr. Janet Dollin

Canada's female baby boom generation is rolling into its fifties, meaning that the number of women hitting the menopause, or perimenopause, milestone will peak this year. The significance of this huge demographic wave has not gone unnoticed by health-care professionals focused on women's health. Just days before the international observance of World Menopause Day on October 18, an alliance of 12 national

health organizations launched the Canadian Menopause Coalition, a diverse national partnership that will put a spotlight on menopause and women's health at midlife. Federation of Medical Women of Canada is proud to count itself as a member of this coalition. Collaboration, information sharing, communication and health practitioner education will be the priority of the Coalition.

Canadian *Menopause*
COALITION
canadienne sur la *ménopause*

For that purpose, The SOGC's menopause website, www.menopauseandu.ca, will house much of the new information flowing from the research community or from specific health disciplines. The Coalition will also have its own website, canadianmenopausecoalition.ca. You are invited to check out and use these resources. Your feedback is most welcome.

(continued from page 5)

of the 8 recommendations can definitely be translated for us in Canada. This is the future work of the FMWC.

To actually tackle the identified problems is going to require "a step change in how the medical workforce as a whole behaves. It will require an acceptance of alternative and differing patterns of working and training for all medical staff, not just women. Wider changes in society, such as some men choosing

to become the primary child carer, mean that the recommendations in this report are proposed not just to provide opportunity for women but to offer better options to the entire medical workforce.", according to Sir Liam Donaldson, the Chief Medical Officer of England. He is clearly listening. Here in Canada, are we?

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_106894

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Dr. Janet Dollin, Family Physician,
Ottawa, Ont.

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MEDICAL
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New! "Gender Equity Standards For Scientific Meetings"

By: Dr. Barbara Lent and Dr. Cheryl Levitt



A new document entitled **The Gender Equity Standards for Wonca Scientific Meetings** – GES Statement – was recently developed to provide committees planning and/or organizing scientific meetings with a framework to appropriately address gender equity issues during their deliberations. Two FMWC members, Dr. Barbara Lent and Dr. Cheryl Levitt, have been actively involved in the writing of this document. The document was endorsed by 35 women from 19 countries at a special meeting of the Wonca Working Party on Women and Family Medicine, a committee of Wonca, at the University of East Anglia, Norwich, U.K. in July 2009. The document will be brought forward to the Wonca World Council in Cancun in May 2010 for their consideration.

These standards fit well within the context of the UN's Millennium Development Goal #3: Promote gender equity and empower women. Under Dr. Levitt's leadership, the Working Party had previously developed two other unique documents, which also speak to gender equity issues from the perspective of large health organizations. The Hamilton Equity Recommendations and the 10 Steps to Gender Equity in Health (available at <http://www.womenandfamilymedicine.com/wwpwfm-statements.html>) have been endorsed by Wonca and by several national family medicine organizations, including the College of Family Physicians of Canada and the Ontario College of Family Physicians. The short version of the Gender Equity Standards is included here; a more elaborate version will be available soon at the group's website: www.womenandfamilymedicine.com.

Gender Equity Standards For Wonca Scientific Meetings

1. Committee structure. All committees involved in planning and convening scientific meetings adhere to basic principles of gender balance and gender equity.
2. Program content. The program incorporates gender equity throughout its implementation. All themes of the scientific meetings include a gender perspective or analysis. All calls for proposals for plenary, symposia and workshops explicitly request a gender consideration. No gender restrictions/bias in participation. Women's health topics are encouraged regardless of the theme for the meeting.
3. Gender balance. All scientific committees plan for gender balance for invited speakers for plenaries, workshops and symposia.
4. Plenary speakers. Deserving women are purposefully and proactively considered as speakers.
5. Bursaries. The Host Organizing Committee or the bursary committee makes every reasonable effort to purposefully increase the pool of funds available and distribute bursaries in a gender equitable fashion.
6. Leadership development. Scientific committees make every reasonable effort to promote leadership development at each conference.
7. Family activities The Host Organizing Committee collaborates with participants who are parents in order to facilitate appropriate arrangements for accessible childcare for infants, toddlers and school-age children.
8. Social Events. The Host Organizing Committee ensures that all social activities offered as part of the regular conference programme are respectful of the gender, national origin, and ethnicity of participants and their guests, and that highly sexualized humour or events, and/or demeaning comments will not be tolerated.
9. Corporate sponsorship and marketing. The scientific committee organizing Wonca meetings restricts external sponsors that conduct policy or market products that adversely affect women. Every effort is made to restrict imagery or products that objectify women or that make deceptive claims.
10. Interactive educational styles. Scientific committees encourage invited speakers to adopt interactive teaching and learning styles, and include this encouragement in the calls for proposals for each meeting.



Regional News

Dr. Teresa Clarke, **Vancouver Branch:** On October 15, 2009, the Vancouver Branch's physician and student members had a mentor meet and mingle evening and participated in a fascinating workshop facilitated by Sally Halliday entitled "Checking Your Vital Signs". Both students and experienced physicians had the opportunity through breakout group sessions to explore and share our career stories that led to a deeper understanding of our values, skills, interests, strengths, and ultimately, a sense of meaning and purpose in our medical careers. We checked our vitals and remembered what first got us fired up about medicine. The students helped to remind the seasoned physicians about that fire. Reconnecting with what is important to us and keeping in touch with our fire leads us to deeply satisfying and fulfilling careers. The workshop was a successful evening enjoyed by all. The UBC Medical Student FMWC membership has grown significantly the past year. The next FMWC student event is planned for the spring of 2010.

Dr. Setorme Tsikata, **Edmonton Branch,** Fall 2009 Activities: Members of the FMWC Edmonton branch were invited to a musical concert by the non-for-profit group, Women Influencing Nations on December, 1st to raise funds for sponsorship programs (provision of portable drinking water and education) for children affected by the genocide and HIV in Rwanda. Dr. Christine Botchway, a dentist in Edmonton, offered members of FMWC complimentary tickets to the event.

The second Learner-Physician networking session, originally scheduled for December 11th, has been postponed due to scheduling conflicts. Members will be notified of the new date and venue in the near future when it is confirmed.

Dr. Crystal Cannon, **Thunder Bay Branch:** Our fall meet-up is taking place rather late this year. We are planning to meet for dinner and then to attend our local North of Superior Film Association movie on December 10th. The film, "Mama est chez Le Coiffeur" is considered to be one of the top ten Canadian films of 2008. As incoming Newsletter editor, I must warn my branch members that they will be pestered to make news for me! Two of us attended the AGM in September in Montreal and had a great time. Lynn Pratt and I made the trip from Thunder Bay for the weekend. The

workshops and CME were excellent and we will be reporting to our branch members whenever we manage a longer meet-up in the New Year.

I would like to urge our local branch members to renew for 2010 and to try to recruit as many new members as possible. Plus please contact me if you have any ideas for a fun and interesting meet-up event. If anyone out there wants to volunteer as social coordinator, I would be ecstatic. My home is always available for meetings. Looking forward to attending the IBM in Ottawa in January.

Dr. Vivien Brown, **Toronto Branch:** Our Toronto Branch has been re-energized! We had a networking, reconnecting cocktail party on December 1, 2009 at Hart House, University of Toronto. Organized by the new Toronto Branch President, Dr. Vivien Brown and co-chaired by our dynamic student representatives, Grace Yeung and Kathryn Isaac, the event attracted more than 50 participants. Guests included some of our senior members, like Dr. May Cohen and Dr. Marjorie Moore, as well as a number of well respected Toronto doctors from a variety of specialties. What was refreshing and exciting were the numbers of medical students, residents, fellows, researchers, industry physicians and others, all sharing stories over wine and cheese and fabulous hors d'oeuvres. If you are going to do something, do it right!

Dr. Qaadri ended her 15 year tenure as President and started the evening introducing and welcoming the new President, Dr. Vivien Brown. Dr. Brown then shared the personal story of why Dr. Moore has chosen to be a member all these years.... basically her commitment dates back to the time when the FMWC supported her financially for a short time so she could study and write her boards in OBS GYN. She ultimately passed and was an active academic OBS GYN for many years at Women's College Hospital, caring for thousands of women. We were all reminded of the impact of support.

The keynote for the evening, Dr. Marla Shapiro, then addressed the group. She talked about evidence based research, from the Framingham data about the impact of loneliness as a health risk and the power we have as a group. She discussed the role of health promotion, the HPV vaccine and other vaccines and the role female physicians can play, regardless of specialty. The presentation, like the speaker, was uplifting, eloquent and empowering.

And so the Toronto Branch moves into 2010 with a positive attitude. Some student programming is already in the works, including an event on ovarian cancer and an ongoing mentorship program. We have an overall aim of reaching out to the large number of medical women in our vicinity and sharing information about this fabulous organization and its potential impact and role. The boundaries are truly limitless.

Dr. Janet Dollin, **Ottawa Branch:** Ottawa Branch has gotten off to a fun start with events this fall. We began with a student meet and greet in September, followed that with a CME event in October where we discussed menopause, and had another CME event in November on contraception. But we had the best time of all at our recent wine tasting event. This was held on Saturday, November 7th at "Play Wine and Food" (see photo below) where we proved that play and laughter are indeed the best medicine. We learned a lot about wine and got to pair that with very tasty and playful food accompaniments, all done in a relaxed style by expert hosts. Recommended November therapy for all. Planning underway for next year will definitely include more play to balance our learning.

Ottawa Branch Event





FMWC Medical Student News

By National Student Representative: Rachel Ptashny



The FMWC student branches have been busy during the fall semester. **The University of Toronto** student branch raised over \$1,400 for the Canadian Breast Cancer Foundation's "CIBC Run for the Cure".

In Toronto, 28,000 participants collectively raised over 4 million dollars for breast cancer research, education and awareness programs. This fundraising event is the largest single day event in Canada run exclusively by volunteers. Next year, the event will take place on October 3rd, 2010. The event was very well received by the FMWC Toronto student group and was an excellent opportunity to participate in a local event with a nation-wide impact.

Ottawa student events during Fall 2009 included a FMWC and **University of Ottawa** Student Meet and Greet Breakfast. This provided an opportunity for University of Ottawa female medical students to meet members of the FMWC Ottawa branch and find out more about the Federation. They are hoping to have a film screening in January to increase awareness of violence against women. In February or March, the University of Ottawa students are also planning a panel discussion about Women in Medicine: A Professional and Personal Balance.

University of Alberta students attended an informative and interesting presentation on Maternity and Paternity Leave in Residency, a collaborative effort by FMWC representatives, Family and Balance in Medicine representatives and the Professional Association of

Residents of Alberta (PARA). The talk featured a presentation on the current set up in Alberta as compared to Canada's other provinces followed by a Q&A session with a resident currently on maternity leave. In the new year, they will be working with the Edmonton Branch to host a networking potluck where medical students will have the opportunity to hear from and mingle with local female physicians in a wide range of practices. The event is a follow up to the hugely successful dinner in May 2009. In March, in collaboration with the Obs/Gyn Interest Group, they are planning a week-long focus on international women's health, to honour International Women's Week. They are planning a series of lunchtime talks to raise awareness of issues women across the globe face daily. They are in the process of collaborating with the FMWC to promote women's health and the organization to other students at the University of Alberta.

The highlight for this term's activities at the **University of British Columbia** was

a mentorship evening entitled "Checking Your Vital Signs". Student and clinician members gathered at the UBC Medical Alumni Centre with professional counsellor and facilitator, Sally Halliday, to engage in a discussion about what inspired them to pursue medicine, what keeps them motivated, and how they've tackled challenges along the way. Notable guests in attendance were Dr. Teresa Clarke (Vancouver FMWC Branch President), Dr. Shelley Ross (MWIA), and Dr. Alexandra Tcheremenska-Greenhill (Associate CEO of the BC Medical Association).

The University of Western Ontario's Schulich School of Medicine and Dentistry has recently expanded to include a satellite campus at the **University of Windsor**. In Windsor, the students are currently in the process of getting their branch up and running. They have been actively recruiting female physicians in the area to participate in a mentorship program and are in the process of planning their first event to take place in the new year.

"CIBC Run for the Cure", University of Toronto Team





Father and Child

This is a water soluble oil painting on canvas of my husband and daughter pictured many years ago as a tribute to our wonderful husbands who are with us helping us in our work and lives as women doctors. Dr. Lianne Lacroix, Kelowna, British Columbia.



Hope in Zimbabwe:

In May 2007, I had the amazing opportunity to work in a small rural village in Zimbabwe. Every day after work, a group of children would come to our house to visit. We would sometimes play soccer or just simply sit together and share stories, music and much laughter. This is a self portrait of some of these beautiful girls, so full of life, love and curiosity. Despite the hardships that Zimbabweans face due to poverty, extremely high inflation rates, high unemployment rates, and



HIV - I was constantly amazed by their warmth, beautiful smiles and their hope for a better future. Dr. Sheila Wijayasinghe, Toronto, Ontario.

Mountains at the Sunset

Somebody said that Medicine is Art. I can agree, and I add: Art is a great Medicine. I have loved drawing since early childhood. It makes my life brighter and happier. It calms and it warms - great therapy for many problems. Mountains are my favourite theme to draw. I was born and grew up at the most beautiful part of the Ukraine - Carpathian Mountains, a part of Alps. I love climbing the mountains! When you are on a top, it is such an amazing feeling that you never forget. Dr. Olena Berezovska, Toronto, Ontario.



I give myself permission to stand tall in life
Life itself is my permission to flourish
I am successful therefore I am important
I am important therefore I am a success
I possess authority, I am fundamental

The barriers of life are not enough
to hinder my motion
Hindrance is a barrier that can be dominated
I am as fluid as I want to be
I am part of a dynamic group that is successful
I possess confidence, I am essential

My creativity is not there for my inhibition
And the inhibition of life lacks sufficient creativity
Life cannot fashion enough difficulty
to shun me out of my originality
I stand tall, I stand strong
I possess self-assurance, I am indispensable

My strength is wrapped with ribbons
of empowerment
Situational empowerment formulates
a great deal of strength
The progression of the beauty of freedom
is my portion
I have come this far without anyone
and with everyone
I possess poise, I am central

There is no space for lease for negative emotion
For the emotion I possess are negative not
The progression of others inanity
will not affect my perception
The environment of change inspire me
to conform with my vision
I possess coolness, I am key

A great blessing is the goodness
of this group I fit in
I have inherited goodness therefore I am a blessing
The highways of life are just my byways
Pushing me towards the achievement of my goals
I am a woman therefore I triumph

I give myself permission to be happy
I give myself permission to be heard

I give myself permission to excel
I give myself permission to grow
For I am a woman

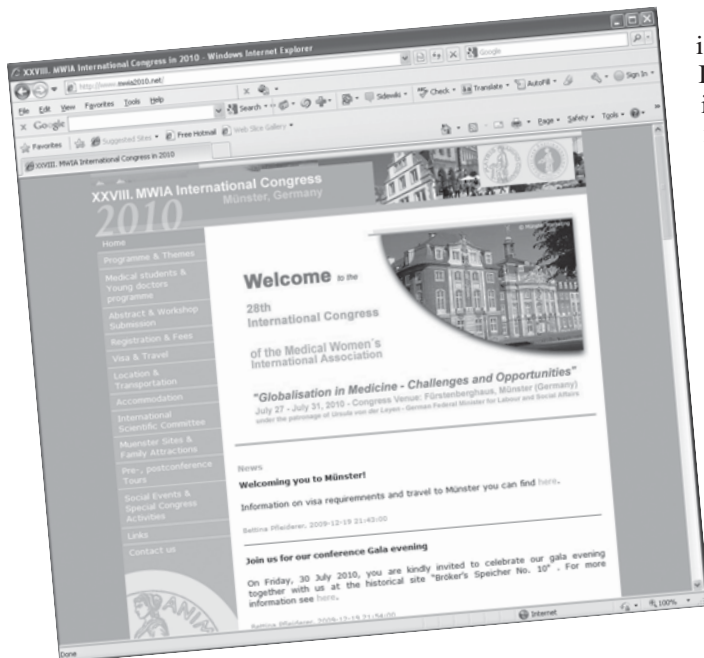
I give permission myself to pause and look around
And take in the beauty of the moment
For I am beautiful
I am important
I am a woman

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2009



MWIA's 28th International Congress

By: Dr. Shelley Ross



The Medical Women's International Association

is holding its 28th International Congress in Münster, Germany, from July 27-31, 2010. For those who have never attended a MWIA Congress, this is your opportunity to come and mingle with colleagues from around the world. For those of you who have attended before, come and participate in the scientific sessions and renew old acquaintances. The time of year is perfect for a European vacation and there will be many suggestions for pre- and post-congress tours on the website at www.mwia2010.net.

The theme is Globalization in Medicine – Challenges and Opportunities. The international scientific committee chose four main topics for the meeting in 2010, which were felt to represent important global issues and would be of interest to medical doctors from all over the world. These are: gender strategies, addiction, epidemic plagues and nutrition. Invited talks will cover topics such as gender strategies, gender based war violence, the addictive brain, internet addiction, TB-globalization and resistances, gender inequality and HIV prevention strategies, selfish brain: the origin of obesity and interventions for preventing obesity in children. The deadline for abstracts is February 28, 2010.

Münster is a lovely historic city in North Rhine-Westphalia, Germany. It is located in the northern part of the state and is considered to be the cultural centre of the Westphalia region. In 2004, Münster was awarded the title of "World's Most Livable City".

Welcome to the
28th
International Congress
of the Medical Women's
International Association

"Globalisation in Medicine - Challenges and Opportunities"
July 27 - July 31, 2010 - Congress Venue: Fürstenberghaus, Münster (Germany)
Under the patronage of Ursula von der Leyen - German Federal Minister for Family Affairs, Senior Citizens, Women and Youth





Belonging to Groups Enriches Us

By: Miriam Salamon BSc, MD CCFP, Family Doctor, University of Ottawa, Faculty of Medicine, Department of Family Medicine Lecturer (Voluntary, Part time), The Ottawa Hospital, Staff, Newborn and Maternity



Canadians Dr. Christiane Kuntz & Dr. Miriam Salamon with other delegates

Being a member and founder of the Ottawa Balint Group makes me a very fortunate woman. A Balint group is a group of practicing doctors who meet regularly in a leader facilitated group to present and discuss clinical cases in order to better understand and utilize the clinician-patient relationship in a meaningful, professional manner.

This group encouraged me (“kicked my butt”, to the anatomists out there) to write up the research project in which all members participated. As many of you know, actually writing a research paper is intensely laborious. When I finally birthed the reluctant darling, a day before the submission due date, my ever optimistic colleague, Dr. Christiane Kuntz said, “Pack your bags, Miriam. We are going to Romania.” And, so we did. The ensuing paper, “The Ottawa Balint Group Qualitative Research Project: A Radical Method of Continuing Medical Education - Exploring Reflection”, resulted in my being a plenary session speaker at the 16th International Balint Congress, in Poiana-Brasov, Romania September 5-9, 2009 as well as its publication in Proceedings of the 16th International Balint Congress. I felt like I had “arrived”, speaking, alongside my Balint world heroes /heroines whose articles I had studied for years.

Here I was part of an international network that values the scholarly pursuit of studying the daily interactions of doctors with their patients. The conference itself was excellent and intellectually stimulating. Not only that, but there was dancing. Should I tell you about how I swooned in the arms of a doctor whose country shall remain unnamed? Who knew that waltzing involved so much twirling? I really should have paid more attention when two of his female colleagues declined his invi-

tation to dance. Continuing on a personal theme, I was back, for the first time, in the land of my birth, Romania. Pleasant memories of my early childhood were evoked by sampling delicious “kremes belles”, a mille feuille type pastry. It was very special to have a taste of Romania but I am grateful to my long deceased parents for immigrating to Canada.

I would like to thank the FMWC, a group that I am proudly part of, for awarding me the Margaret Owen Waite Memorial Fund Scholarship. Being a woman doctor in Canada is to be among the most privileged in the world. Like others in the FMWC, I love my work - continuing to care for my 25 year old family practice, co-leading a Balint group with Dr. Dahna Berkson for family medicine residents, teaching medical students in the Faculty of Medicine at the University of Ottawa and being a Balint Group participant. What could be better? Making the time to publish “the reluctant darling” in a peer reviewed journal and dancing lessons with my husband. To be continued.

Members of The Ottawa Balint Group: Family doctors: Dr. Christiane Kuntz, Dr. Barbara Powell (retired), Dr. John Shier, Dr. Kathryn Gauthier, Dr. Hazem Hamdy, Dr. Kitty Carson, Dr. Stuart McLeod, Dr. Robin Beardsley, Dr. Miriam Salamon, Psychiatrist leader: Dr. Barry Dollin):

Dr. Mussarrat Qaadri, Toronto Branch, and grandkids Shamsa and Shafiq, catching up on FMWC news at the Pyramids in Egypt.





Honorary Member 2010 - Colonel Maureen Haberstock!

Colonel Haberstock enrolled in the Medical Officer Training Plan in 1972 and received her MD in 1975 from the University of Saskatchewan. She served as a general duty medical officer at CFB Esquimalt from 1976 to 1979, during which time she was the first female to qualify as a Ship's Diving Officer.

She was voluntarily released in 1979 and carried on a full family medicine practice from 1979 until 1990, with an emphasis on GP obstetrics. From 1982 until 1990 she was also active in the Medical Reserves, completing militia command and staff training and serving as Commanding Officer of 11 Medical Company (Victoria) from 1987 to 1990, the first female physician to command an Army Field Unit.

In 1990 she transferred back to the Regular Force as Deputy Commanding Officer of 1 Field Ambulance, managing the integration of women into that Regular Force unit. In 1991, she deployed to Gulf War I as Treatment Company Commander with 1 Cdn Fd Hospital forward elements in support of 1 UK Armoured Division during the ground battle. For her efforts during the conflict in ensuring excellent care for hundreds of Iraqi prisoners of war, she received the CF Middle East Commander's commendation.

She has also deployed to Ethiopia and Djibouti with the grain lift humanitarian mission Op Preserve, to Rwanda as Force Medical Officer for the United Nations Assistance Mission for nine months in 1995, and domestically for Op Recuperation (Quebec Ice Storm) in 1998.

She has been senior physician at Combat Training Center Gagetown and headed the closure of Canadian Forces Hospital in Lahr, Germany. She has also served as senior medical advisor for both the Army Headquarters of Atlantic and Western Canada, and was Commanding Officer of 1 Field Ambulance from 1997 to 1999, during which time she was admitted to the Order of Military Merit in 1998 and named the Edmonton CTV "Woman of Vision" for 1999.

More recently she has served from 2000 to 2004 as Canadian Defence Liaison Staff military medical liaison officer in Washington, the first female to hold an attaché position for the Canadian Forces. During that posting she was a guest lecturer at Howard University Medical School, the Georgetown University School of Public Health, Industrial College of the Armed Forces and United Services University of Health Sciences.

She then headed the medical policy and standards section at Canadian Forces Health Services HQ in Ottawa. On completion of French language training, she was promoted to Colonel and appointed Director Health Services Operations July 2005, during which time she planned and executed the stand-up of the NATO Canadian led hospital in Kandahar, chaired the Multinational Mil Med Steering Group, and managed overall medical support to all Canadian Forces members serving in international missions, including Afghanistan.

In August 2007, she moved to Edmonton and was appointed 1 Health Services Group Commander, overseeing all medical units from Thunder Bay west to Comox. She retired from the Canadian



Col. Haberstock

Forces October 2009 after 34 years of combined regular and reserve service.

Col Haberstock is a member of the College of Physicians and Surgeons of British Columbia and the Canadian Society of Physician Executives. She is married to Rod, an EMT, and has two children, Erica (32) and Kevin (30) Fensom, and one granddaughter, Sophia. She is an accomplished pianist, a fair skier, and a very poor golfer.

Announcement:

Ottawa member, **Dr. Mamta Gautam** has recently launched her company, PEAK MD. Having spent 20 years as a psychiatrist treating physician colleagues after they became seriously ill, she is now shifting her professional focus towards primary prevention in Physician Health, in order to sustain effective health care leaders and healthy physicians. She will continue to provide keynote presentations and seminars, offer workshops to medical teams, and additionally offer leadership advisory services to health care leaders, cultivating personal resiliency to enhance professional effectiveness and performance. She looks forward to coaching and mentoring leaders and teams to ensure healthy, engaged and successful medical workplaces.





Calendar of Upcoming Events 2010

March 2010 – November 2010

PMI: Leadership development for physicians (CMA)

Various Cities (BC, AB, ON, QC, NL)

www.cma.ca/pmi

April 22-24, 2010

The Canadian Conference on Physician Leadership

Toronto, Ontario

www.2010leadership.ca/

June 2- 6, 2010

Annual Clinical Meeting (ACM), SOGC

Montréal, Québec

www.sogc.org/cme/

July 15-18, 2010

Canadian Federation of University Women's AGM

Ottawa, Ontario

www.cfuw-ottawa.org

July 27-31, 2010

28th International Congress MWIA

Munster, Germany

www.mwia2010.net/

August 22-25, 2010

Annual Meeting of the Canadian

Medical Association

Niagara Falls, Ontario

www.cma.ca

September 25-26, 2010

FMWC's AGM,

Leadership & Advocacy

Workshops 2010

The Many Faces of Women

Toronto, Ontario

www.fmwc.ca



66^e assemblée
clinique annuelle
Du 2 au 6 juin 2010
Montréal (Québec)



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66th Annual Clinical Meeting June 2-6, 2010 — Montréal QC

Joint meeting with *l'Association des obstétriciens et gynécologues du Québec*

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THANK YOU TO OUR DONORS!

Your generosity to the Maude Abbott Loan Fund and to the Maude Abbott Research Fund is appreciated.

Anonymous, Nahid Azad, B. Lynn Beattie, Vivien Brown, Barbara Bulleid, Andrea Canty, Rebecca Dobson, Barbara Grueger, Janice Heard, Deborah Hellyer, Doris Jabs, Shajia Khan, Dr. Yolande Leduc, Elaine Mah, Ethel M McPhail, Marjorie B. Moore, Suzanne Morris, Barbara Nowinska, Lesley J Pinder, Henny Rappaport, Charmaine Roye, Elizabeth Schneider, Cathy Wilkie and Susan Wilkinson.

FMWC specially thanks Dr. Charmaine Roye for generously donating her May Cohen Award to the Maude Abbott Research Fund.

A special thank you goes out to all donors who contributed to the MARF Fundraiser at the 2009 AGM – \$2,135 was raised at this event!

These members supported the MARF Fundraiser by donating an auction item, buying auction items or by purchasing raffle tickets or combination thereof:

Chantal Ansell, Nahid Azad, Kathleen Bell-Irving, Therese Bouchez, Karen Breeck, Crystal Cannon, Andrea Canty, Kathleen Gartke, Deborah Hellyer, Angela Ho, Shirley Hovan, Yolande Leduc, Laura Lee McFadden, Pat Mousmanis, Oluwasayo Olatunde, Shelley Ross, Charmaine Roye, Sajni Thomas, Diane Watson, Carol White, Cathy Wilkie and Susan Wilkinson.

FMWC specially thanks Janet Dollin for donating her paintings for the fundraising auction.

"As female physicians we speak the same language-in a sense a short hand of shared issues that often are gender associated. Life balance and work satisfaction are both critical for success. Being a member of FMWC has allowed me to tap into a wealth of shared experiences and excellent advice and support."

Dr. Marla Shapiro (Toronto, ON)

"Joining the Federation of Medical Women of Canada was a very important decision I made as a medical student. It has provided me with incredible opportunities to network and find mentorship and support. The role and status of women in medicine has changed drastically over the generations and I'm very excited to be part of bringing women's health and medical education to the forefront."

Pamela Verma, medical student (Vancouver, BC)

"I love the FMWC events; they are a ton of fun. Put a group of great women together in a room; add laughter; relaxation, support; throw in an activity... its magic!"

Dr. Mamta Gautam (Ottawa, ON)

"I believe the FMWC is a forum to express solidarity with other women: both in our careers as physicians and as advocates for the health of all women."

Dr. Madeleine Cole (Iqaluit, Nunavut)

"I joined because Canadian female physicians have a much stronger voice if we are united on issues important to women... Our interconnectedness can spread messages quickly and good things happen. Case in point: FMWC's Pap Smear campaign!"

Dr. Caroline Kosmas, (Regina, SK)

"I joined the FMWC over 50 years ago as a medical student. I have been a member of the FMWC since then because it meant being part of the most powerful advocate on behalf of women physicians and an organization passionately committed to promoting women's health".

Dr. May Cohen, Past FMWC President (Toronto, ON)

Maude Abbott Research Fund

This year we are making a concerted effort at fundraising for the Maude Abbott Research Fund (MARF). Some of you have contributed to the fund when you renew your membership; FMWC sincerely thanks you for your support.

FMWC wants to build on this generosity by requesting **all members** to contribute to the fund. We need income from a base of \$100,000 to start granting research awards annually.

Some facts about the MARF:

- Started in 2000, now approved for charitable status as an endowment fund
- Research grants to be given to women physicians in Canada for topics in Women's Health and Health Issues
- Fundraising initial target for this year is \$100,000

Donate:

- By sending a cheque now
- By making a planned gift
- By pledging an annual amount
- By fundraising through your local branch

For further information contact Dr. Shajia Khan, Chair, MARF (Maude Abbott Research Fund) Committee, (613) 234-2594, shajia.khan@sympatico.ca



FMWC Membership Application Form

We encourage you to register on-line at: www.fmwc.ca

First Name: _____

Last Name: _____

Address: _____

City: _____ Province: _____

Country: _____ Postal Code: _____

Tel (Office): _____ Tel (Home): _____

Fax: _____ E-mail Address: _____

Specialization: _____

Privacy Choices/Media:

- ☐ Yes, you may share my coordinates (name, address, email, phone number, fax number) with other FMWC members as required for completion of FMWC business.
- ☐ No, I do not want to share my coordinates with other FMWC members.
- ☐ Yes, I would be willing to be interviewed by the media on behalf of the FMWC.

Newsletter (delivery choices): the Newsletter will be delivered to your email inbox. Please be sure we have your current email address. If you do not want to have your newsletter emailed to you, please indicate below (if you do not have an email address - we will of course mail the newsletter to you).

- ☐ No, I really prefer to have a paper copy

Referral (for new members): How did you hear about the FMWC? _____

A member suggested I join (member's name): _____

Membership Categories:

- | | |
|---|--|
| <input type="radio"/> Full Membership: \$150.00 | <input type="radio"/> 1 st /2 nd Year in Practice: \$85.00 |
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Membership Dues

(A tax deductible receipt will be sent) \$ _____

Maude Abbott Loan Fund Donation

(A tax deductible charitable donation receipt will be sent) \$ _____

Maude Abbott Research Fund Donation

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TOTAL \$ _____

Method of Payment:

- ☐ Cheque (Payable to "FMWC") ☐ BCMA ☐ Visa / Master Card

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**Fax to FMWC 1-877-772-5777 or (613) 569-4432
or mail to 780 Echo Drive, Ottawa, ON, K1S 5R7.**

Membership Renewal 2010

Early-Bird Incentive!

Renew your membership by January 31, 2010 & your name will go into a draw for a free 2010 AGM Registration! There will be one prize for a medical student and one prize for all other members. The two winners will be announced in February.

Renew your membership today

by renewing on-line at www.fmwc.ca or you can mail in the form in this newsletter. Members get access to branch events, the FMWC newsletter, awards and scholarships and to a reduced rate for the AGM.

Membership Recruitment Challenge: ONE NEW MEMBER – 2010!

Thank you to the following FMWC members who have already taken up the challenge & recruited at least one new member for 2010!

Ann Aldis, Crystal Cheung,
Laura Lee McFadden, Grace Yeung,
Nahid Azad, Elissa Cohen,
Melanie Phillips, Marjon Blouw,
Janet Dollin, Miriam Salamon,
Vivien Brown, Lisa Gabrielli,
Pamela Verma, Crystal Cannon,
Kathryn Isaac, Catherine Wach,
Andrea Canty, Barbara Lent
and Jessica Wong.

Recruit One New Member & Your Name Could Also Appear Here!

*(Please ask the person
you recruit, to credit you
when they join).*



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