

ADVOCACY WITH IMPACT

AMANDEV AULAKH
&
JAMES CARSON

CASEM MARCH 10, 2023

DISCLOSURES

AMANDEV (She/her)

Honorarium for this conference

JAMES (He/Him)

Honorarium for this conference

U of T DFCM, travel grant to Amsterdam 6th International Consensus Conference on Concussion in Sport

Scarborough Hospital honorarium for concussion and injection webinar CME

Speaker's honorarium (Humber River Hospital) for PriMed conference



Michelle Jalali

CEO & FOUNDER

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 @jalaliconsulting

Portland Trail Blazers (NBA)
Director of DEI and Carson family friend

ADVOCACY WITH IMPACT

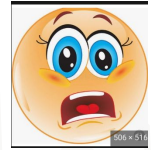
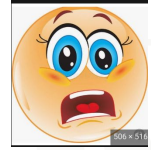


In this workshop, strong audience participation will enable the delivery of tested strategies for advocacy success. Facilitation by both early and later career SEM physicians will inform you regarding essentials for strong impact resulting from your advocacy efforts. You will be prompted to collaborate with many of your future CASEM best friends. We invite you to dive in!

- Check out our full PowerPoint & list of workshop resources at: sportmednorth.com/casem-advocacy-1

Objectives

**Sorry for the hurry /
fast pace! OMG 30
minutes!**



- To integrate collaboration strategies with an equity, diversity and inclusion lens into your advocacy efforts, aiming for high impact.
- To prompt you to consider the impact of small advocacy actions - a springboard leading to successful career achievements and milestones within your practice, within your community and (perhaps) with many Canadians as beneficiaries.

Go to www.menti.com and use the code 6639 8629




RANK WHICH OF THE 4 IS YOUR OR WOULD HAVE BEEN YOUR GREATEST NEED

In my early career, in order to create / promote more advocacy with impact, I wish I....

- 1st | Had more skills for persuasive writing / social media / podcasting
- 2nd | Had more tools for implementing DEI / EDI (Equity, Diversity & Inclusion)
- 3rd | Had more collaboration
- 4th | Had more mentors / gurus to consult / advise



This is the workshop I wish I had attended early in my sport and exercise medicine career

- What... Quick definitions, components of advocacy (in other fields), righting a wrong
 - When ... you can afford the time, in work life balance not ignoring your family, practice, friends and health
 - Where... in your own practice (QI), local, provincial, national, international
 - Why...the world needs your idea and passion. You will have greater career satisfaction
 - My latest big collaboration focused upon the HOW
- 

Advocacy creates positive change by pressuring decision-makers through lobbying and campaigning

- **The Activism Vs Advocacy Differences You Never Knew**
<https://viableoutreach.com/activism-vs-advocacy-which-one-is-viewed-as-more-effective/#advocacy-meaning>

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ADVOCACY CAN



- make the world more...
 - just
 - peaceful
 - tolerant
 - and equal
- through acts of
 - charity
 - kindness
 - and political action

Our awareness journey

Our actions

<p>We don't notice or understand some social changes being demanded by other people. We are disengaged from the conversation or we are not interested.</p>	<p>We realize there is something going on, and that we have been blind in some ways. You begin to understand other people's perspectives and demands, and start connecting your story to theirs.</p>	<p>You are proactively working for change, supporting those who need (underrepresented, marginalized, etc). You start pushing outside your comfort zone, and you are about to find your voice as your actions become visible and a priority for you.</p>	<p>Your voice is capable of transforming society, biased systems, and other social/political issues. You sparkle meaningful, widespread, and scalable lasting change. You have brave public actions that challenge deeply rooted beliefs and practices, and you take calculated personal or professional risk to shift behaviors.</p>
UNAWARE	AWARE	ACTIVE	ADVOCATE
BYSTANDER	ALLY	ALLY or ADVOCATE	ADVOCATE or ACTIVIST
<p>We don't act because we don't know how to or why.</p>	<p>You assist and support in an ongoing effort, activity or struggle.</p>	<p>As an advocate, you aim to influence with formal support, acknowledging and utilizing your privilege to engage in controversial situations on behalf of marginalized people and groups who can't afford to do so in order to make social and political change.</p>	<p>As an activist, you act on behalf of solving social and political issues. It is to be at the forefront of a movement, oftentimes compromising your own energy in order to seek justice and evoke change. make an intentional action to bring about social or political change, social change, political change, economic justice, or environmental well being.</p>

(Marilia Honorio)

<https://www.linkedin.com/pulse/ally-advocate-activist-understanding-who-we-world-honorio-ragazzo/>

Key Components of Effective Advocacy

- The rightness of the cause:
- Know the facts:
- Use the facts:
- Be clear and concise:
- Build up and nurture relationships and collaborative networks:
- Use a variety of advocacy tools and tactics:
- Apply different advocacy channels:
- Say thank you:

Copyright © Peers for Progress

<http://peersforprogress.org/resource-guide/key-components-of-effective-advocacy/#:~:text=Evidence%20has%20shown%20that%20effective,changes%20to%20peer%20support%20programs.>

This is the workshop I wish I had attended early in my sport and exercise medicine career

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If You Score Low On This, You Have No Time For Advocacy

The WHO-5 questionnaire

Instructions:

Please indicate for each of the 5 statements which is closest to how you have been feeling over the past 2 weeks.

Over the past 2 weeks...	All of the time	Most of the time	More than half the time	Less than half the time	Some of the time	At no time
1 ... I have felt cheerful and in good spirits	5	4	3	2	1	0
2 ... I have felt calm and relaxed	5	4	3	2	1	0
3 ... I have felt active and vigorous	5	4	3	2	1	0
4 ... I woke up feeling fresh and rested	5	4	3	2	1	0
5 ... my daily life has been filled with things that interest me	5	4	3	2	1	0

Scoring principle: The raw score ranging from 0 to 25 is multiplied by 4 to give the final score from 0 representing the worst imaginable well-being to 100 representing the best imaginable well-being.

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NO SMOKING SIGN

- **1983** - Started with community advocacy in my own waiting room before I saw my very 1st patient
- My father and my father-in-law warned me that I would be discouraging new patients!



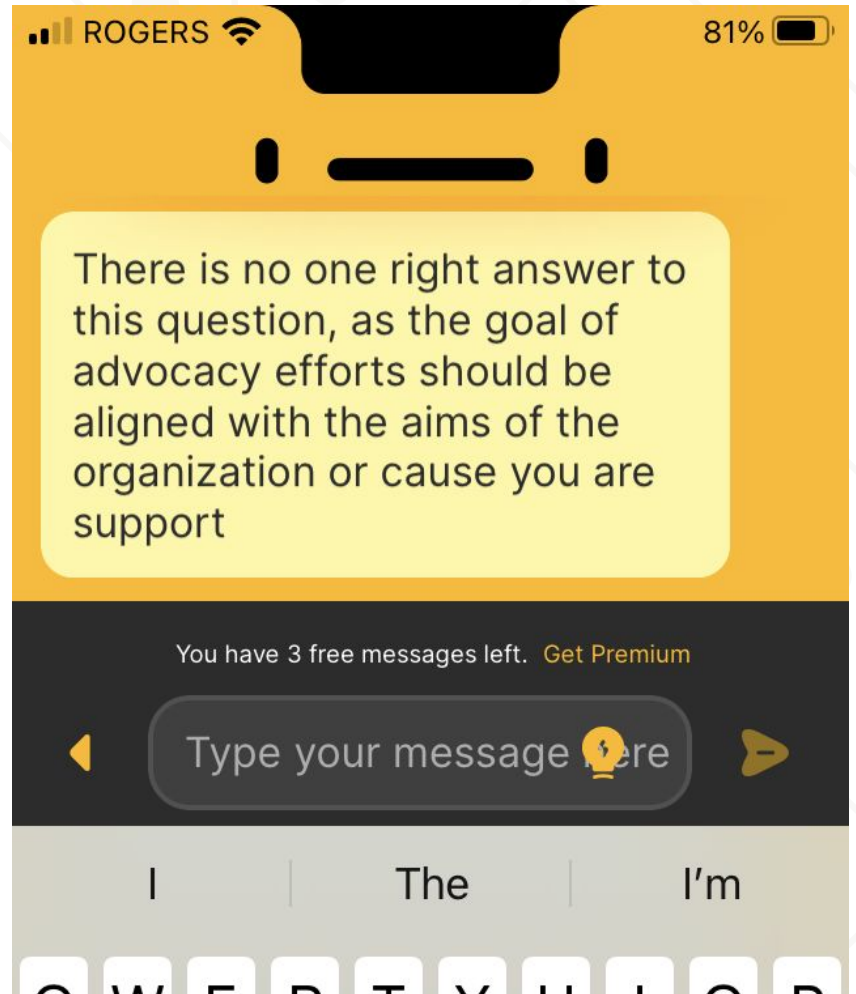
pixta.jp - 55366945

TIME MARCHES ON

Lots of things change in 40 years

- I have been reflecting upon my career and advocacy experiences, and my desire to inspire early and mid career colleagues to move forward on their advocacy journey

2023: ASK CHAT GPT

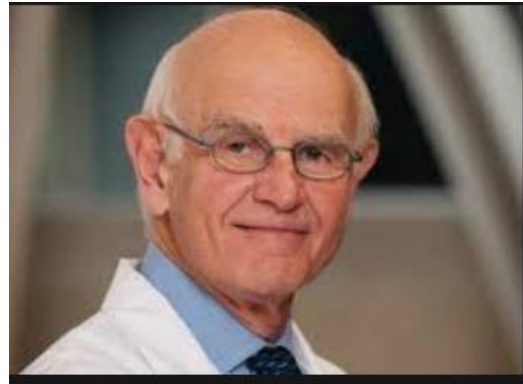


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I Witnessed / Befriended

- Tom Pashby put eye protection on hockey helmets, saving so many blinded eyes
- Charles Tator and Yelverton Tegner stopped hitting from behind in hockey, saving so many spinal cord injuries



Aim for Advocacy With Impact

- **Blame Andrew Pipe:**
 - Last year in Quebec I asked him and he replied: *“could be a symposium workshop next year in Banff”*
 - Dr. Pipe did much more than hang a “NO SMOKING” sign in his waiting room. He took on tobacco advertising at sporting events
 - Want to learn more... see our resource list



PLAY ALONG WITH

Player's

Outdoor girl... chic attire...
ready and eager for the ski-
time thrills ahead. And along
with her, those indispensable
Player's Cigarettes...



*Player's
Please*

CORK TIP and PLAIN

Player's 

A taste you can call your own.



Warning: Health and Welfare Canada advises that danger to health increases with amount smoked - avoid inhaling.
Average per cigarette: Player's Light: Regular-13 mg "tar", 1.0 mg nicotine; King Size-14 mg "tar", 1.1 mg nicotine.



- Yet, taking on the big tobacco companies and their lawyers is certainly going to smack you hard if you belly flop off the high diving board

- No need to aim so high, so advocacy is not as daunting as going over Niagara Falls in a barrel!



WE INVITE YOU TO DIVE IN!

- The (lower) springboard is less daunting, especially if you dive in (or just leap) with others in a collaborative effort.

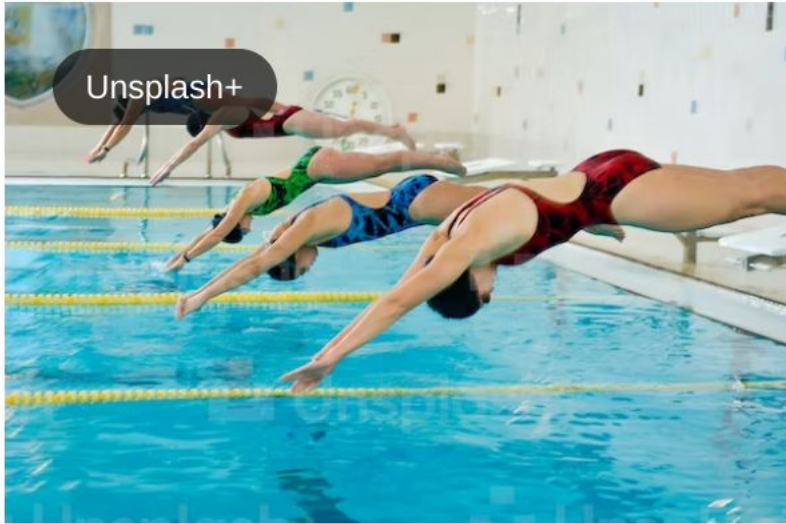


Photo by Ryoji Hayasaka on Unsplash



“You can plant seeds for trees that will grow, yet you may never enjoy their shade”

Michelle Jalali 2023:

Defining impact can be hard; its selfless, often thankless but most impactful when...



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Holland Bloorview Project - School First



SCHOOL First

Enabling successful *return-to-school*
for Canadian youth following a concussion

TELL YOUR
PATIENTS
ABOUT THIS!

READY TO BECOME A CONCUSSION CHAMPION?

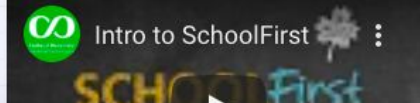
As an educator, it is important for you to be a 'Concussion Champion' and support students with a concussion within a school setting.^{1,2} Here's how:



Build Your Knowledge

- What is a concussion?
- Concussion recovery and returning to school

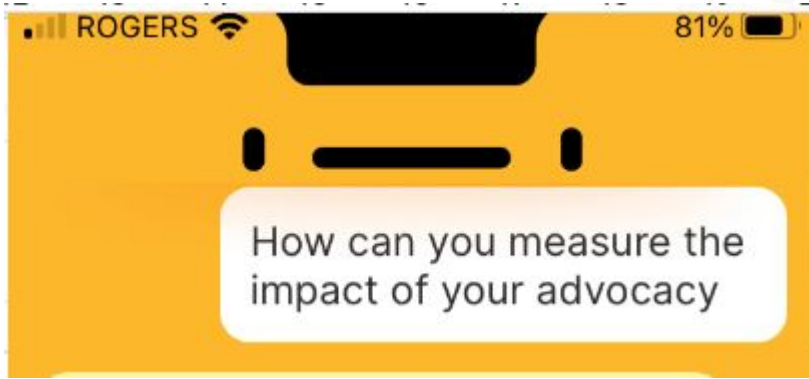
Watch this!



KEY COLLABORATORS

We had stakeholder representation...

- SEM
- Educators
- Occupational Therapists
- **Knowledge Translation (KT)**
Specialist

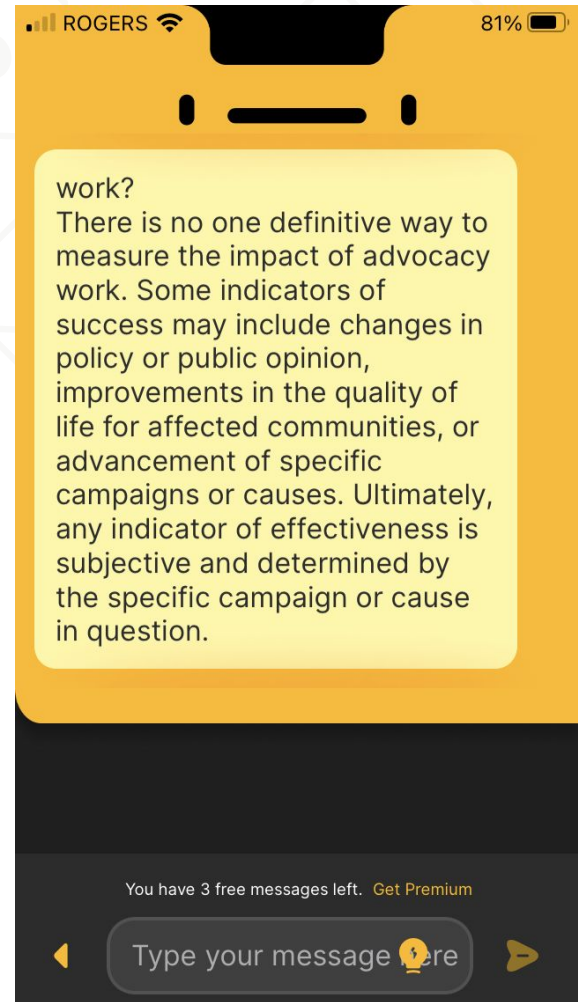


- Even CHAT GPT is now correcting my writing ;-(
- Don't discount INDIRECT impact
 - Students and residents we mentor often achieve greatness



Jane T

Dave L



INDIRECT ADVOCACY IMPACT

CFP MFC

CANADIAN FAMILY PHYSICIAN • LE MÉDECIN DE FAMILLE CANADIEN

The official journal of the College of Family Physicians of Canada



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Premature return to play and return to learn after a sport-related concussion

Physician's chart review

James D. Carson, David W. Lawrence, Sari A. Kraft, Alisha Garel, Catherine L. Snow, Ananda Chatterjee, Paula Libfeld, Heather M. MacKenzie, Jane S. Thornton, Rahim Moineddin and Pierre Frémont

Canadian Family Physician June 2014; 60 (6) e310-e315;

<https://www.cfp.ca/content/60/6/e310.short>

Teaching Medical Learners

- I now consider this a gift to me
- This is a privilege and an opportunity
- Your influence upon your students and residents affords **huge impact of your advocacy efforts**

Want to start somewhere?

- CBC Sports app reports on Advocacy and sports issues every day

<https://www.cbc.ca/sports/podcasts/players-own-voice/pov-podcast-waneek-horn-miller-1.6758213>



Player's Own Voice podcast: Waneek Horn-Miller, Canada's ultimate coach | CBC Sports

CBC Sports' Player's Own Voice podcast chats with Waneek Horn-Miller, activist, athlete, advocate for Indigenous sport, and now a coach on the CBC program, Canada's Ultimate Challenge.

www.cbc.ca



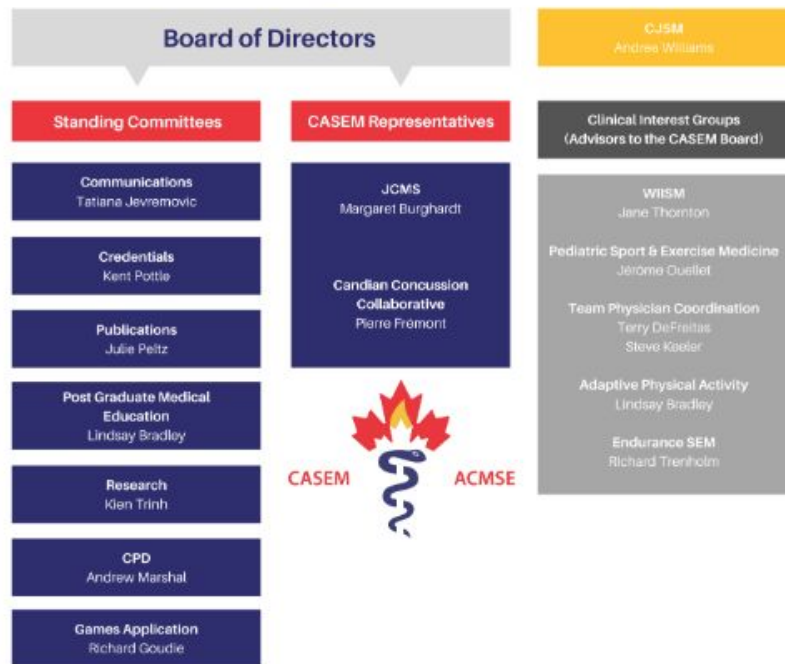
2023 BLACK CHANGEMAKERS i

His community group draws in kids with basketball. Then the real work begins

Beverley Jacques, who launched DOD Basketball 20 years ago, is a 'real force' for change in Saint-Léonard

Posted: February 18, 2023 4:00 AM

CASEM Organizational Chart 2021



COMMUNICATIONS/ MARKETING/ MEMBERSHIP COMMITTEE - OPEN to New Members

Chair: Tatiana Jevremovic - tjevremovic@hotmail.com

To develop and deliver communications strategies both within CASEM and to target audiences outside of the organization. To market CASEM and its activities to members and key audiences outside of CASEM. To ensure the highest level of membership services and satisfaction with the services. This committee meet in-person during the annual symposium and virtually, if necessary, the rest of the year.

CONTINUING PROFESSIONAL DEVELOPMENT – OPEN to New Members

Chair: Andrew Marshall - andy.marshall@me.com

This committee is responsible for the development of the CASEM CPD - Team Physician Course, the CASEM Advanced Skills Course in Sport Medicine as well as programs on specific clinical issues in sport medicine. To date, the Committee has delivered programs on: Osteoarthritis, Running Injuries, Anti-Doping and more recently Endurance Sport Medicine. This committee meet in-person during the annual symposium and virtually, if necessary, the rest of the year.

CREDENTIALS (DIPLOMA) COMMITTEE – CLOSED (by invitation)

Chair: Kent Pottle - kentpottle@hotmail.com

The Credentials Committee is responsible for the ongoing development and the administration of the examination for the Diploma in Sport Medicine. First administered in 1989, the examination is a multi-stage OSCE (Objective Structured Clinical Evaluation) process. The Diploma in Sport Medicine is awarded to those who successfully complete the exam and serves to identify to the public and the profession those with particular skills and special expertise in the area of Sport Medicine.

POST GRADUATE MEDICAL EDUCATION COMMITTEE – CLOSED (only for PGY-3 Program Directors) Formerly the Fellowship Committee

Chair: Lindsay Bradley - lindsaybradley@gmail.com

The Post Graduate Medical Education Committee comprises of Program Directors of sport medicine fellowships/PGY3s from across Canada.

PUBLICATIONS COMMITTEE – OPEN to New Members

Chair: Julie Peltz - jpeltz@alumni.stanford.edu

The publications Committee provides a formal platform for CASEM documents to be reviewed and prepared for publication. Documents include: position papers, discussion papers, website publications, etc. The publications committee will also review and categorize existing position papers according to approved criteria. This committee meet in-person during the annual symposium and virtually, if necessary, the rest of the year.

RESEARCH COMMITTEE – OPEN to New Members

Chair: Kien Trinh trinhk@mcmaster.ca

The CASEM Research Committee, established in 1986, includes members from across Canada and of different medical specialties. Its mandate includes the development of a systematic, comprehensive program of sport medicine research and research education in Canada.

GAMES APPLICATION COMMITTEE CLOSED (by invitation)

Formerly the Selections Committee

Chair: Richard Goudie drrgoudie@gmail.com

The Games Application Committee reviews all medical team applications received from the CASEM members, including physician nominations from National Sport Organizations, to represent the CASEM at Major Games. These Games include the Olympics, Paralympics, Commonwealth, Francophone, University and Canada Games. The Committee recommends the best qualified applicants taking into account expertise, commitment to Sport Medicine, the Diploma Exam in Sport Medicine and other needs from the Major Games. Also taken into account are specialties, gender and language representation.

CLINICAL INTEREST GROUPS (CIGS) - OPEN to New Members

CASEM CURRENTLY HAS 8 CIGS- ALL are OPEN to new members:

CIGs meet in-person during the annual symposium and virtually, if necessary, the rest of the year.

1. **Wilderness Medicine – Currently Inactive**

For physicians with an interest in wilderness medicine

2. **Women's Issues in Sport Medicine (WIISM) – Jane Thornton jane.s.thornton@gmail.com**

Advises on topics for the annual symposium and relevant CASEM courses.

3. **Pediatric Sport & Exercise Medicine – Jerome Ouellet jeromeouellet@hotmail.com**

Creates the content for the Pediatric Sport Medicine courses

Multiple projects in the works

4. **Team Physician Coordination – Steve Keeler Keeleryoung@shaw.ca and Terry DeFreitas**

ttd1@ualberta.ca

Open to all Team Physician's of National Sport teams.

Disseminates the latest developments relevant to team physicians and has a few projects in the works

5. **Adaptive Physical Activity – Lindsay Bradley lindsaybradley@gmail.com**

Creates the content for the Para Adaptive Sport Medicine Courses

Multiple projects in the works

6. **Endurance SEM – Rich Trenholm rich@triathlonmuskoka.com**

Creates the content for the Endurance Sport Medicine courses

- Thanks to Dawn Haworth for this resource list.
- Check out our full list of workshop resources at: sportmednorth.com/casem-advocacy-1

Calling for improved equity, diversity and inclusion in sport and exercise medicine – it starts with us

Jane S Thornton ,^{1,2} Lee Schofield,³ Victor Lun⁴

Welcome to the Canadian Academy of Sport and Exercise Medicine (CASEM) issue. As physicians who practise sport and exercise medicine (SEM) in Canada, we have a responsibility to treat each patient that we see with dignity and respect, and consider the whole person in our approach to their care. We have the unique opportunity to work with athletes, and it is key that recognise how unique each individual is as we support them. In this issue, we have made a concerted effort to showcase



CASEM'S ROLE IN EQUITY, DIVERSITY AND INCLUSION

One of us (LS) is the chair of the new equity, diversity and inclusion (EDI) committee within CASEM. This committee will have the opportunity to be educated and as best informed as possible so that we can support our fellow physicians in SEM, as well as advocate for the athletes and patients that we treat. We are in the initial stages of developing this committee within CASEM, but the variety of areas that this committee will be able to contribute to is already emerging. It is important for SEM physicians to understand how we can apply the EDI lens to the medical training programmes we come from, the projects that we are undertaking, and representing all groups in our communication and work. We are working to develop our terms of reference for the CASEM EDI committee this coming year, and will survey our membership to help guide what projects we may initially explore.

Amandev's Advocacy Journey

- Leadership roles in training:
 - Class Council
 - Chief Resident
- OMA Sport and Exercise Medicine executive
 - Dr. Taryn Taylor
- Involvement with Canada Soccer and multi-sport games
- WHO-5 in recent years → very low score!

Michelle Jalali's info

Check out our resources list for a more complete view of Michelle's:

- Key Terminology
- A Look at Language
- Reflection
- Resources

Michelle Jalali's info

A Look at Language ||

Diversity



Healthcare professionals, trainees, educators, researchers, and patients of varied race, ethnicity, gender, disability, social class, socioeconomic status, sexual orientation, gender identity, primary spoken language, and geographic region

Inclusion



Active, intentional, and ongoing engagement with diversity, including intentional policies and practices that promote the full participation and sense of belonging of every group or individual.

Equity



Ending institutional and discriminatory barriers that lead to health inequities such as racism and sexism, as well as factors outside the healthcare system, such as poverty and unequal distribution of resources.

Advocacy



Any action, big or small, that speaks in favor of, recommends, argues for a cause, supports or defends, or pleads on behalf of others.

Diversity, equity, inclusion, and impactful advocacy are critically important if medical research and practice are to deliver on the goal to improve human health.

THINK, PAIR, SHARE

2 questions to consider:

- What does EDI mean to you?
 - Personally
 - Professionally
- What were some of the barriers or difficulties that you have faced in previous advocacy efforts?

Barriers to Advocacy

- Time
- Comfort
- Mentors
 - CASEM Mentorship Program
- Financial/Limited Resources
- Implicit bias

Examples of EDI Advocacy

- Canada Games Sport Physiotherapy Leadership Program
 - Dr. Tracy Blake
- Indigeneity, Diaspora, Equity and Anti-racism in Sport (IDEAS) Research Lab
 - Dr. Janelle Joseph
- NFL Diversity in Sports Medicine Pipeline Initiative
- #WeThe15

Tools for Incorporating EDI

- Project Implicit website
- BJSM Equity, Diversity, & Inclusion (EDI) Guiding Document
- Canadian Women and Sport - Tools
 - To help advance gender equity

Michelle Jalali's EDI Resource list

Resources

- [Northwestern Feinberg School of Medicine: Anti-racism in Medicine Collection: Feinberg Academy of Medical Educators](#)
- [Doctors on Values and Advocacy: A Qualitative and Evaluative Study](#)
- [Promoting and Assessing Cultural Competence, Professional Identity, and Advocacy in Doctor of Physical Therapy \(DPT\) Degree Students Within a Community of Practice](#)
- [How to Be an Active-ist: A Framework for Advocacy in Sports Medicine](#)

- As Physicians, we all educate and advocate already, many of us 24/7!
- Today we want to inspire you to take your advocacy to the next level or higher
- We want you to imagine your advocacy efforts to produce greater impact

- 1st | Had more skills for persuasive writing / social media / podcasting
- 2nd | Had more tools for implementing DEI / EDI (Equity, Diversity & Inclusion)
- 3rd | Had more collaboration
- 4th | Had more mentors / gurus to consult / advise

A Call to ACTION

1st

Had more skills for persuasive writing / social media / podcasting

2nd

Had more tools for implementing DEI / EDI (Equity, Diversity & Inclusion)

3rd

Had more collaboration

4th

Had more mentors / gurus to consult / advise



PERSUASIVE WRITING FOR ADVOCACY

May 6, 2022 | DFCM Conference 2022

The Op-Ed

- Make one point (and only one!)
 - Personal – active voice
 - Provocative
 - Solution-oriented
- Know your audience
- 800 word **maximum**
- Short sentences and paragraphs

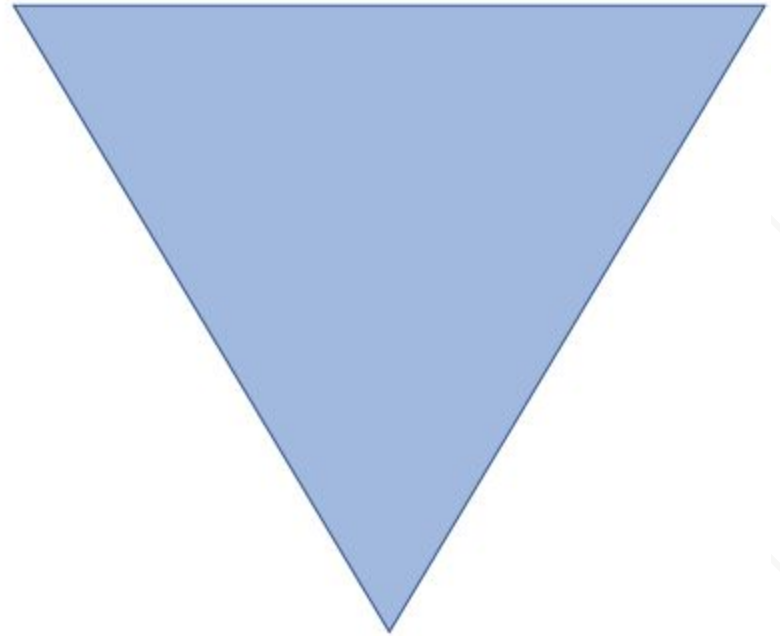
The Op-Ed: Structure

1. Hook
2. Set-up
3. Nut graph (“nutshell paragraph”)
4. Diagnosis
5. Prescription
6. Concession
7. Call to Action

Permission to reproduce granted by Hasan Sheikh, M.D. CCFP(EM) MPA

The Op-Ed: Structure (in medical terminology you can relate to)

1. Hook (abnormal vitals)
2. Set-up (chief complaint)
3. Nut graph (one-liner)
4. Diagnosis (Dx)
5. Prescription (Rx)
6. Concession (DDx)
7. Call to Action (f/u, disposition)



See Dr Sheikh's references in our resource list ***



MSK MATTERS

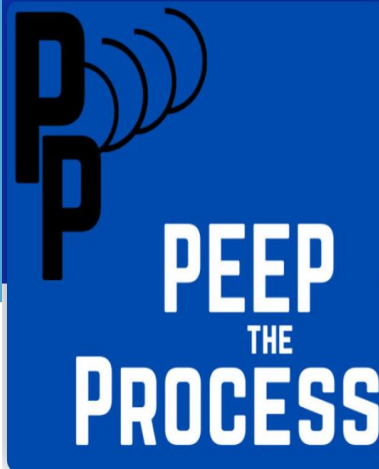
MSK Matters

Dr. Ali Rendely and Guests

A sport and exercise medicine podcast for Canadian medical residents and senior medical students

CASEM PODCAST

CASEM'S WOMEN LEADERS IN SPORTS AND EXERCISE MEDICINE



Peep the Process Podcast

James and Emma

A Sport and Exercise Medicine Podcast for Canadian Student Athletes

Clinical Journal of SPORT MEDICINE

Founded in 1990 by the Canadian Academy of Sport and Exercise Medicine

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The Clinical Journal of Sport Medicine Podcast

A regular discussion of highlighted content in the Clinical Journal of Sport Medicine and hot topics in the world of clinical sports medicine.

SafeSport – What Clinicians can do to Prevent Abuse and Harassment in Sport

Creator: James MacDonald

Duration: 26:24

Clinical Journal of Sport Medicine

Our guest is Margo Mountjoy MD, PhD, CJSM author and internationally recognized expert in the identification, treatment and prevention of abuse and harassment in sport

FINAL THINK, PAIR, SHARE

- How did you find your guru?
- How did you find your media person?
- How did your collaboration succeed?

1st

Had more skills for persuasive writing / social media / podcasting

2nd

Had more tools for implementing DEI / EDI (Equity, Diversity & Inclusion)

3rd

Had more collaboration

4th

Had more mentors / gurus to consult / advise

YOUR CASEM CELEBRITY ADVOCACY CRUSH

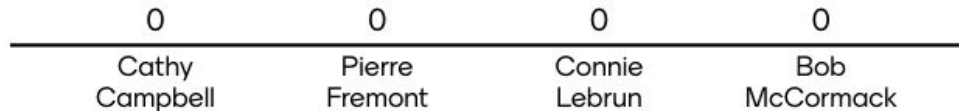


Go to www.menti.com and use the code 6639 8629



WHO WOULD YOU WANT TO WORK WITH?

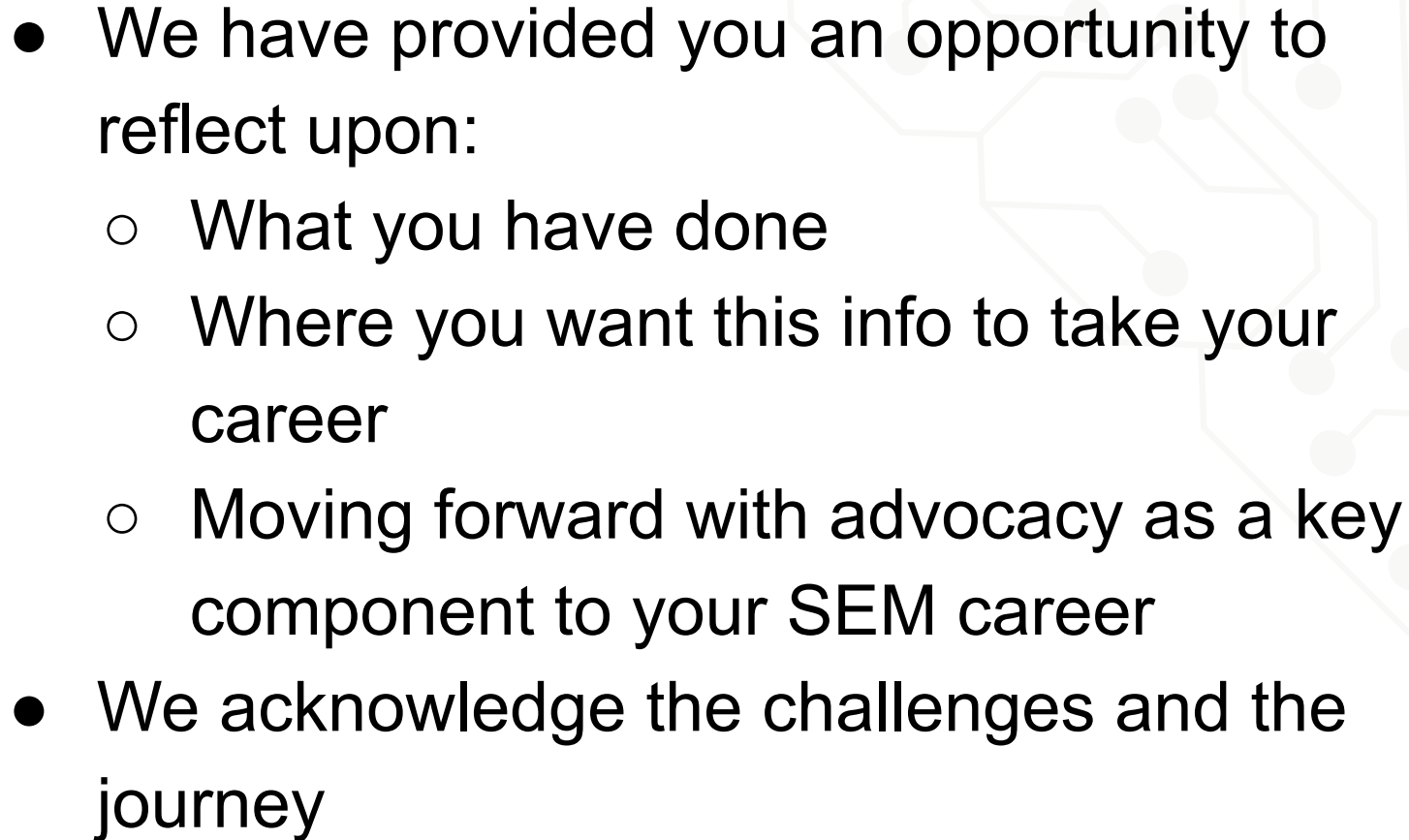
Who is your CASEM Celebrity Advocacy Crush?



We have let you glimpse through our collaborative lens

- Advocacy modeled by 2 SEM colleagues who have the Journey & Process but not all the answers



- 
- We have provided you an opportunity to reflect upon:
 - What you have done
 - Where you want this info to take your career
 - Moving forward with advocacy as a key component to your SEM career
 - We acknowledge the challenges and the journey

Acknowledgements



Hasan Sheikh, M.D. CCFP(EM) MPA

Emergency/Addiction Medicine Physician | UHN

Assistant Professor | University of Toronto DFCM

Clinical Lead, Substance Use Disorders | MHA CoE

Michelle Jalali

DEI Director Portland Trailblazers

Dawn Haworth

Cathy Campbell

Jane Thornton

Andrew Pipe

Challenge Yourself

- How do you want to measure your own advocacy impact & hold yourself accountable?

Thank you!

- Check out our full PowerPoint & list of workshop resources at:
sportmednorth.com/casem-advocacy-1