



Health Care, Technology, and Place: A Transdisciplinary Research Training Program at the University of Toronto

*A Knowledge Translation/Institute of Health Services and Policy
Research/Institute of Gender and Health CIHR Strategic Training Program¹*

Co-Directors:

Peter C. Coyte	AND	Patricia McKeever
Professor & Health Services CHSRF/CIHR Chair		Professor
Dept. Health Policy, Mgt. & Evaluation		Faculty of Nursing
Faculty of Medicine		

Doctoral and Post-Doctoral Fellowships Policy

Introduction: 21st century health care is characterized by unprecedented flows of information, mutable coalitions of care providers and new configurations of physical settings and cyberspaces. Technological connections blur boundaries between bodies and machines, life and death, public and private places, and geographic regions that hitherto were economically and jurisdictionally separate. A fusion of disciplinary perspectives and methods is required to address a range of issues pertaining this new health care order. The CIHR Strategic Training Program in Health Care, Technology, and Place (*HCT&P*) is the first academic program in the world to respond to this need for knowledge and research capacity.

Objectives: (1) To prepare a cadre of junior and senior researchers to understand, explain, and improve health outcomes associated with geographically-dispersed and technologically-mediated health care; (2) To bridge knowledge and communication gaps among health researchers,

¹ *The CIHR Strategic Research Training Program is an ambitious new initiative to enhance transdisciplinary health research capacity in Canada. For more information visit www.cihr.ca.*

social scientists, and humanists concerned with the interconnectedness of bodies, places, technologies, and health care work; and (3) To foster a transdisciplinary, transprofessional, and transnational culture of research collaboration, involving researchers and decision-makers throughout the research process.

Fellowships Policy: The CIHR Strategic Training Program in Health Care, Technology, and Place offers fellowships to highly qualified doctoral and post-doctoral fellows to specialize in this new field of transdisciplinary inquiry **at the University of Toronto and collaborating institutions.** Fellowships are specifically intended to **enhance existing funding support** awarded to promising applicants, and to share funding responsibilities with participating academic departments. To be eligible for the HCT&P fellowship opportunity, applicants **must receive financial support from additional sources**, such as home departments, research grants, and through government and agency scholarships.

Funded applicants will be referred to as "CIHR Strategic Training Fellows in Health Care, Technology, and Place." The CIHR, Supporting Institutes, and the Health Care, Technology & Place Research Training Program must be acknowledged in communication of research results produced by HCT&P Fellows.

Applicants will be assessed in terms of their: research promise and commitment; aptitude for transdisciplinary research in health care, technology, and place; disciplinary competence; and writing skills.

Applicants will be assessed by the HCT&P Admissions Committee, composed of a subgroup of HCT&P Mentors. The Admissions Committee will make recommendations for admission and funding to the Program Co-Directors.

Qualified applicants who do not receive HCT&P funding are still eligible to participate in all Health Care, Technology, and Place Research Training Program activities, including courses, seminars, and workshops.

Submit Applications by June 18, 2002 to:

CIHR Strategic Training Program in Health Care, Technology, and Place
Attn: Kelly Murphy
50 St. George Street
University of Toronto
Toronto, Ontario M5S 3H4
Canada

Doctoral Fellowships will be awarded in amounts up to \$10,000 per academic year to fellows in PhD, post-MD, post-LLB and analogous programs. It is expected that the fellow and the mentor will secure additional funding to satisfy CIHR's personnel guidelines and the home department's objectives for graduate student stipends. The term of doctoral awards is 1 year, with the opportunity, subject to satisfactory reviews, to renew for 2 additional years. Up to 8 doctoral fellowships will be awarded in 2002-2003.

Doctoral Funding Policies

1. Doctoral Fellows are required to meet the degree requirements of their home departments *and* to meet the doctoral-level requirements of the HCT&P Program.
2. Doctoral Fellows are required to enroll full-time and to maintain residency within reasonable proximity of their HCT&P mentor, either in Toronto or at a collaborating institution.
3. The doctoral-level requirements of the HCT&P program are:
 - (a) completion of at least one of the four HCT&P graduate courses;²
 - (b) regular participation in monthly HCT&P research seminars;
 - (c) participation in the annual Theory and Methods Workshop; and
 - (d) completion of research under the supervision of an HCT&P Mentor and a committee that includes at least one additional HCT&P Mentor.
4. Doctoral Fellowship Renewal Applicants are required to seek external funding (principally CIHR, SSHRC, and OGS awards).
5. Applications for 2002-2003 Doctoral Fellowships will be received until *June 18, 2002*. Announcement of awards will be made in July 2002.

² It is at the discretion of participating departments whether HCT&P courses will be taken in addition to customary course requirements or as part of those requirements. It is the objective of this Program to enrich the graduate and post-graduate experience without unduly extending its duration.

6. Doctoral Fellowship applications must include four copies of the following:

- Curriculum Vitae, normally indicating completion of a Master's or analogous degree;
- Indication of acceptance to a doctoral program at the University of Toronto or collaborating institution (in 2002-2003 the collaborating institutions are University of Calgary, Queen's University, University of Auckland, and University of Glasgow);
- Transcripts from all post-secondary institutions reflecting a minimum 3.5 GPA (A-) during the last two years of study;
- Written agreement from an HCT&P mentor (see 2002-2003 Mentor list) to serve as dissertation supervisor;
- A research plan (max. 2 pp) summarizing: research goals and past research experience; the relevance of the HCT&P Program to this Plan; and justification for the identified Supervising Mentor;
- Two confidential letters of recommendation from scholars familiar with the applicant's research background and aptitude;
- Two writing samples; and
- Evidence of application for competitive fellowships or scholarships.

For More Information, Contact:

Kelly Murphy
Manager, Knowledge Transfer
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www.hcerc.org

Post-Doctoral Fellowships will be awarded in amounts up to \$25,000 per academic year to fellows in post-PhD and analogous programs. It is expected that the fellow and the mentor will secure additional funding to satisfy CIHR's personnel guidelines and the home department's objectives for post-doctoral stipends. The term of post-doctoral awards is 2 years, subject to satisfactory review in Yr 1. Up to 2 post-doctoral fellowships will be awarded in 2002-2003.

Post-Doctoral Funding Policies

1. Post-Doctoral Fellows are required to meet the requirements of their home departments *and* to meet the post-doctoral level requirements of the HCT&P Program.
2. Post-Doctoral Fellows are required to participate full-time in their program of research and to maintain residency within reasonable proximity of their HCT&P mentor, either in Toronto or at a collaborating institution.
3. The post-doctoral-level requirements of the HCT&P program are:
 - (a) participation of at least one of the four HCT&P graduate courses;³
 - (b) regular participation in monthly HCT&P research seminars;
 - (c) participation in the annual Theory and Methods Workshop; and
 - (d) completion of research under the supervision of an HCT&P Mentor and at least one additional HCT&P Mentor.
4. Post-Doctoral Fellowship Renewal Applicants are required to seek external funding (principally CIHR and SSHRC awards).
5. Applications for 2002-2003 Post-Doctoral Fellowships will be received until *June 18, 2002*. Announcement of awards will be made in July 2002.

³ The nature of the participation required will be determined in consultation with the Post-Doctoral Fellow and the respective Teaching Mentors, and will usually include active participation in class meetings.

6. Post-Doctoral Fellowship applications must include four copies of the following:

- Curriculum Vitae, normally indicating completion of a PhD or analogous degree;
- Indication of acceptance to a doctoral program at the University of Toronto or collaborating institution (in 2002-2003 the collaborating institutions are University of Calgary, Queen's University, University of Auckland, and University of Glasgow);
- Transcripts from all post-secondary institutions reflecting a minimum 3.5 GPA (A-) during their graduate program;
- Written agreement from an HCT&P mentor (see 2002-2003 Mentor list) to serve as research supervisor.
- A research plan (max. 2 pp) summarizing: research goals and past research experience; the relevance of the HCT&P Program to this Plan; and justification for the identified Supervising Mentor;
- Two confidential letters of recommendation from scholars familiar with the applicant's research background and aptitude; and
- Two writing samples;
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2002-2003
Health Care, Technology and Place Research Training
Program Mentor Team

Includes: Co-Directors; Mentors at University of Toronto; and Mentors Beyond University of Toronto

Co-Directors:

Peter C. Coyte is a Professor of Health Economics in the Department of Health Policy, Management, and Evaluation. He holds a CHSRF/CIHR Health Services Chair in “Health Care Settings”, is Co-Director of the Home and Community Care Evaluation and Research Centre (HCERC), a Senior Scientist at the Institute for Clinical Evaluative Sciences (ICES) and a Network Scholar for the Canadian Language and Literacy National Centre of Excellence. He was a recipient of a CIHR Senior Investigator Health Career Award. He supervises a large cadre of scholars with diverse affiliations, reflecting his significant experience as a multidisciplinary mentor and proponent of translational research.

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AND

Patricia McKeever is a Health Sociologist and Professor in the Faculty of Nursing, Co-Director of HCERC, and the recipient of an OCUFA award for outstanding graduate teaching. She has supervised numerous graduate students from a wide range of disciplines. She co-created the “Academic Boundary Crossing” health research seminar series at the University of Toronto, co-developed SSHRC’s recent “Society, Culture, and the Health of Canadians” research theme, and chaired its second Grants Review Committee.

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Mentors at the University of Toronto:

Michael Carter (Mechanical and Industrial Engineering)

Areas of Expertise: Health care productivity and efficiency, resource and capacity planning, simulation, scheduling, queuing models, mathematical programming, and timetabling.

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Adrienne Chambon (Faculty of Social Work) publishes on the intersection of social identity and institutions in top tier journals in sociology, sociolinguistics, and social work. Health care, place and the arts are salient to her interdisciplinary research about immigrant/refugee well being and Aboriginal health services. She has examined PhD dissertations in a range of cognate fields.

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Angela Colantonio (Occupational Therapy; Graduate Coordinator, Rehabilitation Science) conducts transdisciplinary research that integrates clinical and social science perspectives on disability outcomes. Her research documents the long term needs of persons many years after traumatic brain injury and has conducted studies of the support needs and preferences of caregivers of the elderly.

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Paul Dick (Paediatrics, Tele-Home Care)

In developing a health services research focus in hospitalization and home care services used by children, HCT&P will provide me with crucial opportunities for cross-disciplinary research collaboration and non-medical teaching and supervision that are not readily available within medical departments per se. In turn, I expect to contribute expertise in clinical pediatrics and health services research within the area of diagnostic tests, tele-health and administrative data research.

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Geoff Fernie (Department of Surgery, Director; Centre for Studies on Aging) creates technologies that enhance health and dignity in long term care. Under his mentorship, trainees are exposed to complex, applied research activities in a range of laboratory, clinical, design studio, manufacturing, and business settings. He recently chaired the International Conference on Technology and Aging.

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Colleen Flood (Health Law)

Dr. Flood spearheaded the development of a research and teaching focus on Comparative Health Policy at the Faculty of Law and launched the Health Policy and Law Speaker Series, which draws an interdisciplinary audience from across the University of Toronto. Her research and teaching address: theories of distributive justice demand in terms of access to health care, the extent of market failure in health insurance and health service markets, regulation of privately financed health care, the shift to home care, and privatization, deregulation and reregulation.

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Monique Gignac (Division of Outcomes & Population Health, The Toronto Western Research Institute; Department of Public Health Sciences).

A social psychologist, Dr. Gignac has worked with include epidemiologists, sociologists, physicians, health economists, physical and occupational therapists, and social workers. Her research examines determinants of health for people with chronic illnesses, and evaluates current treatments and interventions for individuals with chronic conditions.

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Ross Gray (Department of Public Health Sciences; Co-Director, Psychosocial & Behavioural Research Unit, Toronto-Sunnybrook Regional Cancer Centre) focuses on community consultation, research translation for education and policy, and the use of the arts in effective dissemination of cancer research. His research-based drama on breast cancer received international acclaim, and his recently published book is based on life histories of men with prostate cancer.

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Elizabeth Harvey (Dept. of English; Coordinator, Women's & Gender Studies Program) has extensive experience managing and teaching cross-disciplinary graduate programs and supervising research that bridges the humanities and health sciences. Her writings on the history of the body and the history of medicine are published as books and in top ranked journals in literature and women's studies.

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David Hulchanski (Chow Yei Ching Endowed Chair in Housing, Director, Centre for Urban and Community Studies, Faculty of Social Work). My research has addressed lower income households and their housing/neighbourhood situation, most recently focusing on health and human rights issues. I carried out a national study on the housing situation of people with AIDS in 1990 – the first of its kind and continue to examine the relationship between housing and health. In 2001 I was invited to be the keynote speaker at a WHO symposium on housing and health.

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Alex Jadad (Department of HPME; Director, Centre for Global eHealth Innovation, Rose Family Chair in Supportive Care, Canada Research Chair in eHealth Innovation;) is a physician, patient advocate and researcher who examines innovative ways to help people, regardless of who they are or where they live, use state-of-the-art information and communication technologies (ICTs), with enthusiasm, proficiency and confidence, to achieve the highest possible levels of health and to help the health system make the most efficient use of available resources. He is actively involved in several international academic-private sector partnerships to improve the quality of the research infrastructure to accelerate the transformation of the health system in the information age, and minimize inequality in health in societies across the world.

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Wendy Levinson (Vice Chair, Medicine, University of Toronto; Assoc. Director, Research, St. Michael's Hospital) is an international expert in physician-patient communication. Past Program Director of the Robert Wood Johnson Clinical Scholars Program and Chief of Medicine at the University of Chicago, she has also published extensively on medical training programs and on women in medicine.

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Linda MacKeigan (Faculty of Pharmacy)

Dr. MacKeigan's research focus is the role of the pharmacist in ensuring optimal drug therapy, and the impact of the pharmacist's clinical services on economic and patient outcomes (patient satisfaction and quality of life). The development of new technology (drug dosage forms and drug delivery technology; automated dispensing systems; information, decision support, and communications technology) affects the need for clinical pharmacy services, the ability to deliver services across different settings, and collaboration between the pharmacist and other members of the health care team in ensuring optimal drug therapy.

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Linda Lee O'Brien-Pallas (Faculty of Nursing) holds a CHSRF/CIHR Chair in Health Human Resources, and is Director of the Nursing Effectiveness, Utilization and Outcomes Research Unit. She leads a multi-disciplinary team of researchers and trainees who generate evidence to inform decision-making and government health policy.

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Blake Poland (Geography, Public Health Sciences)

Areas of Expertise: community development as an arena of practice for health professionals; qualitative methods; critical social theory; health promotion; harm reduction; social exclusion; governmentality and smoking.

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Edward Shorter (FRSC, Hannah Chair, History of Medicine)

A social historian of medicine, Professor Shorter has published widely on the family and the social history of medicine, including the history of obstetrics and gynaecology, the history of the doctor-patient relationship, and the history of psychiatry. In 1997, he received a Humboldt Research Prize, and he spent Spring 2000 as a Fulbright Scholar at the Sigmund Freud House in Vienna. He has twice been awarded the prestigious Hannah Medal for contributions to the history of medicine in Canada.

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Dorothy Smith (Professor Emerita, OISE/UT)

Dr. Smith is an internationally renowned social theorist who has revolutionized understanding of women's work and the role of texts and documents in shaping social relations. She has mentored a generation of scholars who teach across diverse disciplinary fields at leading universities. She received the American Sociological Association's Distinguished Scholarly Career Award in 1999.

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David Streiner (Psychiatry; Director, Kunin-Lunenfeld Research Unit, and VP Research, Baycrest Centre for Geriatric Care) Explaining complex statistical and research methodological issues has earned Dr. Streiner worldwide recognition. Trainees and research colleagues will be exposed to the psychometric tools that Dr. Streiner has developed and to assess the psychological effects of medical conditions. Trainees will be able to use these tools in their applied research undertakings, to assess and compare psychological effects of medical conditions in various health care delivery settings.

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Nancy Young (Scientist, Community Health Systems Resource group and Population Health Sciences, The Hospital for Sick Children Research Institute). develops and evaluates innovative models of tele-home care delivery and examines the impact of home and community on outcomes. She also studies transitions between care providers in the community on the health and health services utilization of young persons with Cerebral Palsy, Spinal Bifida, and Acquired Brain Injury. This work examines the impact of place (i.e. community living) on resources, utilization and health.

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Mentors Beyond University of Toronto:

Jim Dunn (Community Health Sciences, University of Calgary) is a social geographer who holds a CIHR New Investigator Health Career Award, and both a Health Scholar Award and an establishment grant from AHFMR. His research focuses on social inequality, population health, and housing.

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Mark Rosenberg (Geography, Queen's University) is Chair of the International Geographic Union Commission on Health and the Environment, Vice-President of the Canadian Association on Gerontology, Secretary-General of the North American Regional Council of the International Association of Gerontology, Treasurer of the Canadian Federation of Demographers, and serves on the editorial board of *Health and Place*. He received the Canadian Association of Geographers' Award for Service to the Profession of Geography in 1999.

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Margaret Reid (Reader and Head, Public Health, University of Glasgow) is a sociologist who specializes in multidisciplinary evaluations of health technologies in the European Union, with a focus on telemedicine. She brings expertise in European tele-health in order to complement and provide comparisons with Canadian experiences and research.

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Robin Kearns (Health Geography, University of Auckland) is an internationally renowned human geographer and has published extensively across a range of cultural and health themes. He has recently coauthored the book, *Culture/Place/Health*. Transdisciplinary in outlook, he has coordinated the interdisciplinary Master's program in New Zealand Studies and is currently coordinator of the BA Health Social Sciences programme at the University of Auckland.

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