

Friday, Oct 22**Abstract Presentations****Homelessness and Covid-19: Findings from Two Health Disasters**

Dr. Catherine Leviten-Reid, PhD CBU | Dr. Jeff Karabanow, PhD Dal | Dr. Haorui Wu, PhD Dal |
Dr. Jean Hughes, PhD Dal | Kaitrin Doll, PhD (c) UofT | Meghan Richardson, MSc (c) AU



Abstract: This presentation shares the findings of a community-engaged research project that took place in CBRM and HRM on homelessness and the pandemic. We will share the experiences of those without housing or who were precariously housed during this time: based on the 28 interviews we conducted, participants reported that the pandemic impacted their physical and mental health, and that they had a lack of information about the pandemic, felt left behind and had nowhere to go. We will also share findings from 26 interviews with service stakeholders in the two communities, including shelter providers, health clinic workers, outreach personnel, staff from non-profits providing essential services to low-income households, and public health workers. We found that participants reported tensions with government and that they were caught off guard, but that there were positive outcomes as well including increased public support for the work of front-line organizations and an increased awareness of the homelessness crisis. Organizations also innovated, and in different ways: in HRM, individuals experiencing homelessness were placed in hotels for a period of time, while in CBRM, comfort centres were established so people could access showers, laundry and public health information. We will conclude our presentation by providing lessons learned and recommendations from participants, including the need for public wi-fi, harm reduction services, and upstream interventions which prevent homelessness. During our presentation, we will share both present research findings and show a short animation based on our work.

Getting the Whole Picture: An Anthropological Epidemiology for Future Epidemic Response

Dr. Joseph Parish, PhD CBU



Abstract: The lessons we learn from the COVID-19 pandemic will continue for decades, perhaps centuries. We are at the pinnacle of information recording and gathering in developed nations and enjoy the marvels of innovative technologies that have allowed for the fastest creation of vaccines ever known. The connectedness of our shrinking world has been made clear by the rapid spread of this pandemic. Despite the advances this experience has prompted, central problems remain that also make it clear that, in many ways, we are no different or better off than those that came before us who experienced the grip of pandemic influenza in 1918-1919 or earlier tragedies. Human epidemics (and pandemics) are socio-cultural phenomena. Because of our reliance on socio-cultural institutions and behaviours as a species, these inevitably influence and direct our shared experiences with disease outbreaks. Advances in science and medicine enable us to mitigate the biological components of epidemics like never before, but we remain subject to behaviours and responses hard-wired within the human brain to rely on socio-cultural models that no longer work for our species. This paper seeks to explore the many ways in which an anthropological epidemiology can examine past epidemics, like the 1918-1919 influenza pandemic, and take lessons from those known outcomes in Cape Breton Island to inform our decision-making in public health into the future as we will undoubtedly face increasingly challenging threats from the micro-organismic world. A framework for deep understanding of socio-cultural factors as they affect human epidemics is presented.

“They say ‘we’re sorry’, but sorry doesn’t really help”: Results from COVID-19 Rapid Research Study on Dementia Care in the Community in Eastern Nova Scotia

Dr. Katie Aubrecht, PhD StFX | Dr. Stephanie Mason, PhD StFX | Trudy Flynn, Maritime Strategy for Patient Oriented Research | Dr. Elaine Moody, PhD Dal | Dr. Meaghan Sim, RD PhD NSH | Kristin Hadfield, Trinity College | Mary Jean Hande, MSVU | Michelle DePodesta, NSH



Abstract: This presentation shares results from a multi-institutional rapid research study on COVID-19 related dementia care in the community service delivery changes in Nova Scotia, with a focus on the perspectives of caregivers of people living with dementia in Eastern Zone. Information was collected using a multi-method research design that included a scoping review, policy scan, online search for public information about dementia specific community-based services and supports, online survey and interviews. Information was analyzed and interpreted using an intersectional health equity framework and Sex and Gender Based Analysis Plus (SGBA+) analytical approach. Study findings provide a picture of pre/post pandemic realities of dementia care in community. This picture highlights rural/urban disparities in rural and remote communities as perceived and experienced by caregivers. Participants described challenges and costs associated with accessing healthcare due to geographic distance from hospitals and clinics, and to social supports such as adult day programming, home care, home maintenance, internet access, and necessities of daily life, such as groceries, prescriptions and other essential goods and services. At the height of COVID-19, province-wide pandemic responses failed to account for disparities-leaving caregivers with little more than an apology. Caregivers described barriers as something they had learned they would need to live with, accept and adapt to, to survive. Rather than accept rural/urban disparities in dementia care in community as an unfortunate consequence of where people live, we frame differences as the result of systemic inequities, and propose recommendations to support more equitable public health emergency and post-pandemic responses.

Maskwiomin: Study of an Almost Forgotten Traditional Mi'kmaq Skin Remedy made from Birch Bark

Dr. Matthias Bierenstiel, PhD CBU | Dr. Tuma Young, PhD CBU



Abstract: Indigenous knowledge is rich but at risk as elders pass away and the knowledge is lost. One traditional Mi'kmaq remedy is maskwiomin (maskwi = birch bark; omin = oil). Only two Elders recalled a story from the 1920'ies about maskwiomin that alleviated a skin condition. This viscous bark extract is used as topical ointment for skin issues such as eczema, psoriasis, acne, sunburn, rashes and bug bites.

The project balances Indigenous knowledge and science using etuaptmunk, or 2-Eyed Seeing method, and by working closely with the community of Membertou First Nation of Sydney, Nova Scotia. The traditional way of obtaining the bark extract is with a fire pit method that was taught to the community in the pillar of Awakening of the Knowledge to preserve this oral tradition from being lost. Chemistry and microbiology are used to study this complex organic compounds matrix. The project has Membertou Ethics Watch and REB approvals.



The community made creams and soaps and then started reporting amazing results of skin improvements (rashes, eczema, sensitive skin). Working with the community of Membertou on the ethical commercialization, a company was founded in 2020 selling skincare products. Our goal is to have the extract rightfully recognized as medicine, i.e. natural health product.

UPLC-MS analysis showed the extract containing over 200 compounds. Preliminary disc diffusion study showed effectiveness against Gram+/-bacteria demonstrating that maskwiomin is as topical antibiotic. This CIHR Project Grant funded project is in its early stages. We want to bring awareness to the health community and look for potential collaborators to expand the project.