WINTER 2014/15

ONMANITOBA

CONNECTING ALUMNI AND FRIENDS OF THE UNIVERSITY OF MANITOBA



SOCIAL MEDIACINE

IMMEDIATE IN NATURE AND IMMUNE TO DISTANCE, SOCIAL MEDIA SEEMS TAILOR-MADE FOR AN INDUSTRY WHERE THE NEED FOR FAST, ACCURATE INFORMATION MATTERS MOST: HEALTH CARE. WHY BLOGS, TWEETS, GOOGLE AND 'THE CLOUD' WILL REDEFINE HOW MEDICINE IS TAUGHT, PRACTICED AND PERFECTED.

PATHOLOGIST, PHILANTHROPIST, FRIEND

REMEMBERING DR. GEORGE YEE

ALC IS YOUR ABC
OF ACTIVE LIVING

INTRODUCING MANITOBA'S NEW HOME FOR FITNESS, ACTIVE LIFESTYLE

SETTING THE BAR

BRITTANY HABING EXCELS ON, AND OFF. THE COURT





HACKING HEALTH CARE Tech-loving physicians like Dr. Ali Esmail see social media as the future of medicine



NEXT GENERATION FITNESS

Healthy lifestyles begin here: the U of M's new Active Living Centre



REMEMBERING DR. GEORGE YEE

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WHAT'S NEWS

AT THE FACULTY OF ENGINEERING?

WINTER 2015 ISSUE OF

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- Finding sustainable solutions in Honduras
- A 2014 Canada's Most Powerful Women winner



ONMANITOBA

VOLUME 75 # **3** WINTER 2014/15

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CANADA POST AGREEMENT #40063720

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If undeliverable, please return magazine cover to:
Alumni Relations
200.137 Innovation Dr. Winning Man. Canada P3T

200-137 Innovation Dr., Winnipeg, Man., Canada R3T 6B6

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WE ARE IN THIS TOGETHER

Opportunities abound for us to connect—with people, with ideas, with the world. These connections make us stronger than we could ever be on our own, and create the context for enduring success.

At the University of Manitoba, we strive to foster connections. We see the inextricable links between supporting the aspirations of our people, and fulfilling the potential of our University and province.

A perfect example is Dr. George Yee [MD/60], who joined the University medical community more than 60 years ago. The bursary he received then was a stepping stone to the incredible contributions he went on to make, including the George and Faye Yee Centre for Healthcare Innovation. Dr. Yee died in November 2014, and the University of Manitoba is proud to honour his legacy.

Stories like Dr. Yee's are the inspiration behind Front and Centre, our visionary new fundraising campaign. Our comprehensive strategy is all about recognizing connections: between physical infrastructure and the quality of life of the communities we serve; between opportunities to learn and one's ultimate success; between investing in Indigenous achievement and realizing our province's potential; between research excellence and economic growth.

Our alumni, donors, and university community shaped this integrated approach, and encouraged the same focus for the next five-year phase of our strategic plan. Each of these visionary strategies is ultimately about ensuring our University has the means to create a stable environment for learning, discovery and engagement.

Partnering with all levels of government is central to the realization of these goals.

At the civic level, we recently saw the election of Winnipeg's new mayor, Brian Bowman [BA(Adv)/96]; Brandon's new mayor, Rick Chrest; and both city councils. Our University is

proud to support municipalities' efforts not only to advance education, but to enhance our cultural communities, improve our infrastructure, and address the many interconnected components of successful cities.

We are proud to be an economic engine whose impact is felt province-wide. The University of Manitoba contributes approximately \$1.8 billion annually to the provincial economy and supports more than 20,000 Manitoba jobs. That translates to roughly an 85 per cent return on every dollar invested in our University, an economic impact outweighing that of other major industries.

Without government support, such remarkable contributions would be nearly impossible. Approximately 78 per cent of University of Manitoba revenue comes from government grants and tuition fees, which are controlled by government policy. Our relationship with government is arguably the most significant and influential relationship we have with any partner.

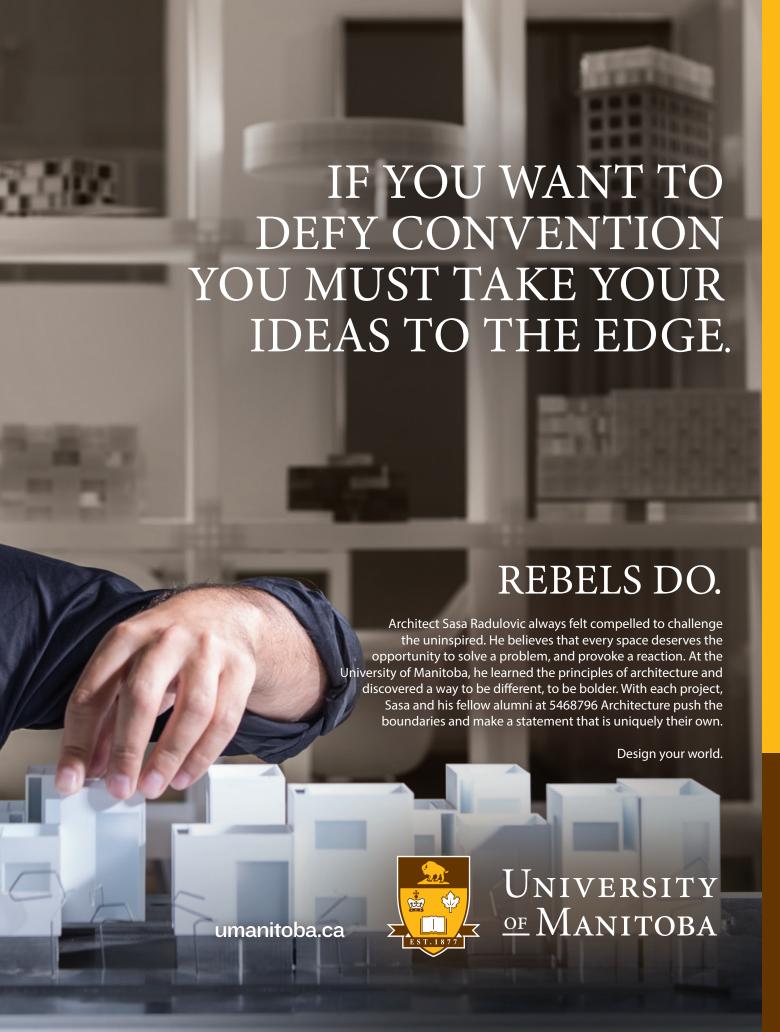
We are grateful for this symbiosis, but we must be wary of the challenges it presents. Economic forces, unexpected events, and shifts in the political climate can all cause governments to change priorities, policies, commitments and leadership. And with a leadership contest underway in Manitoba, and both provincial and federal elections expected in 16 months or less, there are many unknowns on the horizon.

How do we weather this uncertainty? We rely on a robust network of allies and partners, on our solid strategic plan, and on a compelling fundraising campaign supported by a committed team of volunteers.

There should be no doubt that universities support successful communities, or that universities thrive through community support; we need each other. We must fortify our efforts by continuing to build connections.

DAVID T. BARNARD PRESIDENT AND VICE-CHANCELLOR





SET FOR SUCCESS

BY HEATHER SAXTON

Rarely does a university student share a 'you get me' moment with the highest-ranking official in the nation. But Brittany Habing, setter for the Bisons women's volleyball team, did just that when she met Governor General David Johnston.

During an award ceremony at Rideau Hall for Habing and her fellow CIS Top 8 Academic All-Canadians, Johnston shared his own experiences of balancing academics and sports; he played four years of hockey during his studies at Harvard. "He has been around sport and understands what it takes to be a student athlete," says Habing. "He was an interesting person to talk to. He's very down to earth, and encouraging."

On and off the court, Habing is at the top of her game. To be an Academic All-Canadian, one needs to play on a varsity university team while maintaining a minimum academic standing of 80 per cent—Habing's GPA is 4.0. For her efforts, she has received an athletic scholarship each year she has played, as well as Academic All-Canadian scholarships. Last season, Habing was a standout in the Bisons national championship win over six-time defending champion UBC, and she led the country with 10.46 assists per set. The Faculty of Science student attributes her success to time management and confesses that finding the right symmetry wasn't easy. "I think the hardest part about being a studentathlete is balancing sleep, school and practice," says the 22-year-old. "You want to stay up late to get your school work done, but you can't be exhausted for your practice or game."

A social life also finds its way into the mix, which the East St. Paul, Man., native attributes to a supportive network. "My friends are very understanding," says Habing. "They come and watch my games or watch online when we are away. For my entire life, my excuse has always been 'Sorry I have volleyball.' So they're used to my commitment by now."

Beyond her own training, Habing also volunteers as a coach in community youth camps. "I enjoy giving back," she says. "I think about the girls from university who came back to club and helped coach when I was there. It's cool to be that person now for some of the other girls."

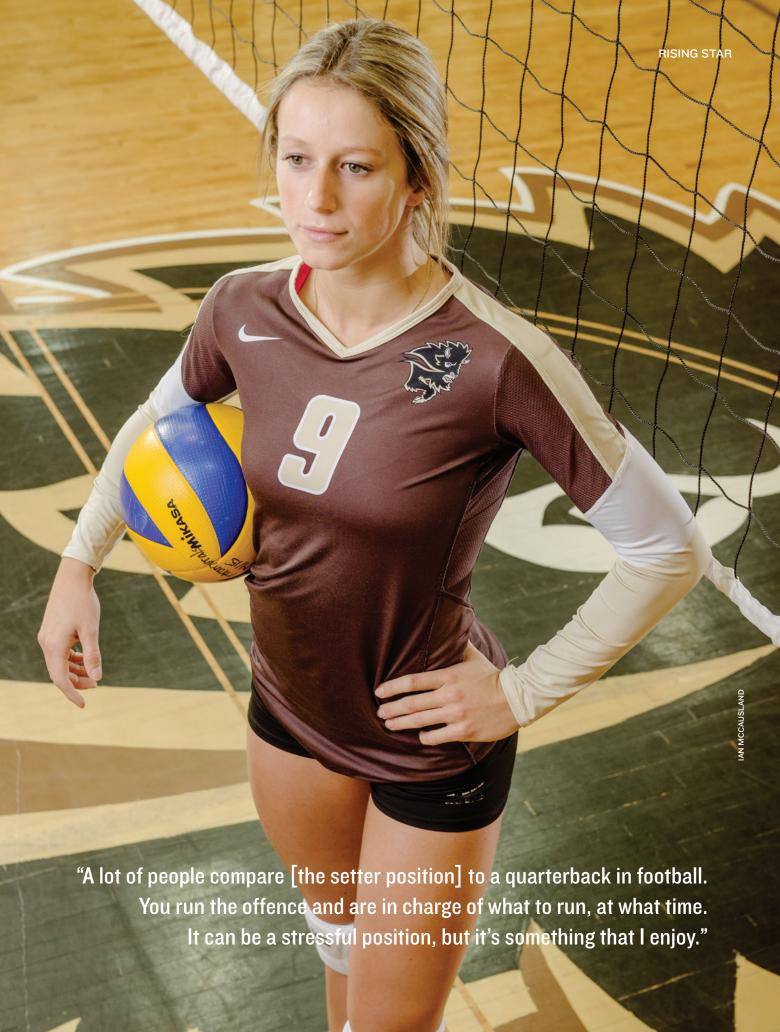
Volleyball is in the Habing's blood. Her mother played throughout high school and attended nursing at the U of M on an athletic scholarship. Her father also played the sport at a post-secondary level for Red River College. "Volleyball kind of runs in the family," jokes Habing, whose brother also played in high school.

Her love for the game spiked in elementary school gym class. From there, Habing went on to play for her junior high team with her mother as a coach, at which time Habing got her first taste of victory: her team won provincials in Grade 8. She credits a good foundation of skills in the sport to her mother's coaching and to club coach Rob Hailstone from Selkirk, Man., who was very technical is his approach. "I still to this day thank him for where I am in volleyball because he definitely built all those skills from the bottom up," says Habing.

Habing's responsibility on the court is to establish the direction of plays. "A lot of people compare [the setter position] to a quarterback in football," she explains. "You run the offence and are in charge of what to run, at what time. It can be a stressful position, but it's something that I enjoy. I was a hitter before and they get the glory. But it is cool to be the person behind all that."

She acknowledges that good leadership is required for the position. "I've always had that leadership quality in my personality. And that stems on and off the court," says Habing, who aspires to follow in her mother's footsteps and apply to the Faculty of Nursing next year. Her goal is to be a nurse practitioner.

Though volleyball has taken Habing to Rideau Hall and back, her new goal is slowly overshadowing her previous ambition. When asked if she'll continue volleyball after university Habing replies, "Maybe once I'm not playing and maybe once I'm done my time here and I don't have volleyball in my life I'll desire to play more. There's always the option to play professional and go overseas. Who knows?" However, she's presently focused on her new goal of becoming a nurse. "As for now volleyball is not number one on my priority list. It's always been number one and it's nice to have another focus."



Words of Wisdom

FALL CONVOCATION 2014

Honorary degree recipients—journalist **Chantal St-Cyr Hébert** [LLD/14] and **Rick Waugh** [BComm(Hons), LLD/14], former president and CEO of Scotiabank—offered food for thought in their remarks to graduands; here are some choice bites:

"There is nothing more fun in what I do than to discover that reality is not what you thought it was."

Chantal St-Cyr Hébert, reflecting on her pursuit of a news story involving the plight of a French-speaking hippopotamus at the Metro Toronto Zoo.

"You will find that many of life's decisions are neither black or white, they are in the grey ... when faced with uncertainty ... if you're still in doubt ... go with your instincts."

Rick Waugh, on the importance of going with your gut.



LONDON CONNECTION

Alumni from the University of Manitoba are making an impact all over the globe, including in London, England. Last October, many of our London-based alumni attended an event hosted by H. E. Gordon Campbell, High Commissioner for Canada to the U.K., and the U15 Group of Canadian Research Universities.



For more on this story, visit: news.umanitoba.ca/london-connection



Solid season for Bisons

Though hoisting a second Vanier Cup in seven years was the ultimate goal, the 2014 campaign was still a success for the Bisons men's football squad. Highlights included a 4-4 regular season record; a nail-biting 26-23 loss in the CIS semifinals; and record-setting performances by players like slotback Nic Demski, who made Bisons history by being named to the CIS All-Canadian Team for a fourth season in a row.

UMTODAY



Charting her way into history

Emily Choy, a PhD student in the Clayton H. Riddell Faculty of Environment, Earth, and Resources, drew on Inuit oral history to assist with the successful effort to find the HMS Erebus—one of two missing ships from Sir John Franklin's expedition more than 165 years ago.



Hazing: when a rite-of-passage is wrong

What are the prevalence and extent of hazing in university athletics? KinRec associate professor Jay Johnson is leading an intensive national study—the first of its kind—to find out.



Paul Soubry [BComm(Hons)/84], flanked by President David Barnard and Vice-President (External) John Kearsey

Historic \$500-million campaign introduced

U of M alumnus, Paul Soubry, selected as campaign chair

Front and Centre, the U of M's recently introduced comprehensive campaign, forms the backbone of a vision to position the province at the forefront of the world stage. Support of the university's strategic priorities in teaching and learning, discovery, and community engagement will be the path to this goal; and its success will help ensure Manitoba's long-term economic, social and cultural vitality.

Campaign chair Paul Soubry, President and CEO of New Flyer Industries, spoke of how proud he is to lead what is the largest campaign of its kind in Manitoba history.

"As an alumnus and Manitoban, it is a great honour for me to be able to give back to the community through this campaign," Soubry says.

Front and Centre will officially launch at Homecoming 2015.



For more details and video, visit: news.umanitoba.ca/taking-our-place-front-and-centre



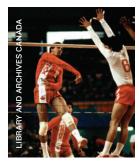
U of M launches new strategic plan

More than 50 input sessions—including the spring 2014 Alumni Forum—invited alumni, faculty, students and staff to help inform the U of M's new strategic priorities. Close to 1,200 of our community members shared their thoughts. The new plan is built upon the following five pillars:

- Inspiring Minds through innovative and quality teaching
- Driving Discovery and Insight through excellence in research, scholarly work and other creative activities
- Creating Pathways to Indigenous achievement
- 4 Building Community that creates an outstanding learning and working environment
- **Forging Connections** to foster high impact community engagement



SEARCH THESE STORIES AND MORE AT UMTODAY.CA



Pischke smashes record books

An October sweep of the Regina Cougars on home court vaulted Bisons men's volleyball icon, Garth Pischke, to the top of the list for all-time wins by a coach in North America: 1,240.



Asper MBA among nation's best

The recently reimagined Asper MBA program has caught the eye of more than just prospective students: in its annual ranking of the top 10 MBA programs in Canada, *Canadian Business* magazine gave the U of M its number nine spot.

FEBRUARY 9

Become a More Informed Patient, Health-care Professional

A wealth of health information resources and services are available to patients and health professionals at the Neil John Maclean Library. Discover how Manitoba's largest health library can help you become a more educated member of your health-care team.

6 to 7:30 p.m. | Neil John Maclean Health Sciences Library Free public event

MARCH 17 - 28

Who's Afraid of Virginia Woolf? by Edward Albee

March 17 & 24, 7 p.m., March 18-21, March 25-28, 8 p.m. Black Hole Theatre, lower level University College Tickets: \$12 student/senior, \$15 regular | bhtc.ca

MARCH 20

The 22nd J.B. Rudnyckyj Distinguished Lecture with Dr. Serhii Plokhy, Harvard University

Dr. Plokhy's talk will focus partly on his recent book, *The Last Empire: The Final Days of the Soviet Union*, and the recent invasion of Ukraine by Russia (in both Crimea and in Eastern Ukraine). A reception and book signing will follow.

6:30 p.m. | Archives & Special Collections, 330 Elizabeth Dafoe Library Free public event | Call 204-474-9986 for more information.

MARCH 28

Noctis Lucere: Night to Shine

Featuring University Singers, Women's Chorus and Concert Choir

8 p.m. | Crescent Fort Rouge United Church, 525 Wardlaw Ave. Tickets: \$15 adult, \$7 student | Available at the door.

APRIL 23

Canadian Medical Hall of Fame 2015 Induction Ceremony

Academic, research, and health-care leaders from across Canada will join Gary Doer, Ambassador of Canada to the United States, honorary chair, and co-chairs, Dr. Brian Postl and Dr. Arnold Naimark, to celebrate medical innovation and excellence and pay tribute to the 2015 inductees.

Reception 5 p.m. | Program 6 p.m. | Metropolitan Entertainment Centre, 281 Donald St. Tickets: \$200 | cdnmedhall.org

MAY 12

Distinguished Alumni Awards 2015 Celebration of Excellence

Join us for an extraordinary evening celebrating the achievements of our 2015 Distinguished Alumni Award recipients.

Awards Celebration: 7:30 p.m. | Reception 9 p.m. | Winnipeg Art Gallery Tickets: \$75 | <u>umanitoba.ca/distinguishedalumni</u>

FIRST THURSDAY OF EVERY MONTH

Ewen Campus Observatory and Lockhart Planetarium Open House

View the night stars through the Ewen Telescope and learn about the night sky from experts in the U of M's department of physics and astronomy and the Royal Astronomical Society of Canada.

15 minutes after sunset | Presentations take place in the planetarium in the event of rain. Lockhart Planetarium, 394 University College



THE PURSUIT OF HAPPINESS IN THE MODERN AGE

Wednesday, March 4, 2015

UNIVERSITIES TODAY

WHERE DO CENTURIES-OLD INSTITUTIONS FIT IN MODERN SOCIETY?

Wednesday, April 29, 2015

Robert B. Schultz Theatre
St. John's College
Reception \\ 6:30 - 7 p.m.
Panel Discussion \\ 7 - 8:30 p.m.
umanitoba.ca/visionaryconversations

3,2,1...
THREE MINUTE THESIS COMPETITION
FINAL

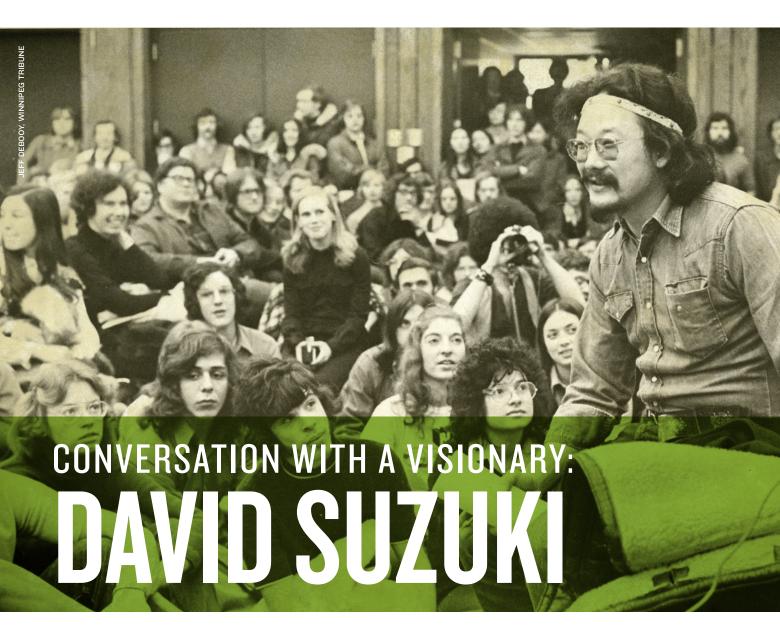
Hear our innovative graduate students explain their research – in three minutes or less. Cheer on the competitors as they present to our judges, and vote for the People's Choice winner!

ROBERT B. SCHULTZ THEATRE ST. JOHN'S COLLEGE FORT GARRY CAMPUS FEBRUARY 25, 7 P.M.

UMANITOBA.CA/3MT







Since his debut in 1979 as host of the Canadian Broadcast Corporation's long-running documentary series *The Nature of Things*, geneticist David Suzuki has cultivated the environmental conscience of Canadians from coast to coast. His connection to the U of M spans more than four decades to the early '70s when Suzuki spoke with students (see photo above from 1972).

In a recent visit to Winnipeg as part of a cross-country event—the Blue Dot Tour—to entrench the right to fresh air, clean water and healthy food into Canadian law, Suzuki sat down with President David Barnard for a conversation. Topics included the failure of environmentalism, its cause, and what is needed to catapult the issue from special interest to global imperative. Though governments, big business and universities were placed under the microscope during the discussion, Suzuki made it clear that the future of the environment depends on all of us.

DAVID BARNARD: There's a lot of scientific evidence about climate change. In addition, when our researchers work with Indigenous people in the North and Indigenous people in other parts of the world, they say that they're aware of change. So, what's needed for the general public and for governments to take action on these things?

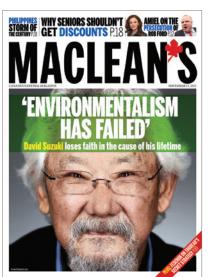
DAVID SUZUKI: Well, I mean, we obviously need a new government. This government has clearly indicated that climate change is not something that they're even interested in. Any evidence, any scientific evidence, they're not interested in. I mean, it's clear just from their track record.

The average Canadian understands very much. The polling indicates that climate is changing. You're asking, 'How do we bring them around?' I have no idea. This is what I've been doing since I did the first program on climate change in 1989. And we've done literally dozens of shows on different aspects. I think the problem we face now is the enormous power and wealth of corporations. In 1988, Brian Mulroney was re-elected and interest in the environment was at its absolute peak then. George Bush ran for president and said, 'If you elect me, I will be an environmental president.' I mean, not because he cared at all about the environment, he didn't, the public made him say that. So, to show he cared about the environment, Mulroney appointed his hottest star to be Minister of the Environment, moved him into the inner cabinet. Do you know who that was? Lucien Bouchard, I interviewed Lucien three months later. I said, 'What do you feel is the most pressing issue facing Canadians today?' and he immediately said, 'Global warming.' So that was impressive and I said, 'How dangerous is it?' and these are his exact words: 'It threatens the survival of our species.'

BARNARD: That's a good perspective on government and you also talked about business, but what do you think the position of the average Canadian is? You say when we're surveyed we're very aware, but are we changing our behaviour in a way that is consistent with what we say we believe?

SUZUKI: Yes, well, it's very difficult when you don't have the infrastructure for people to do the right thing. To abandon their cars for example, you really have to have top-notch transit. So,

I mean, I think a lot of people are trying in their own way. When you look at the use of bikes in Vancouver for example, it's tremendous. Vancouver, I think, shines as a real example where we've had growth of the city in the last 20 years yet in terms of use of cars it has dropped over the last 20 years, which is astounding as we've had greater densification. But we need bigger "big" decisions to be made. That is where governments simply aren't reflecting that.



This is why we are fundamentally failing in the whole area of environmental issues. Because the environment is perceived as a fundamentally niche issue.

BARNARD: We just elected a new mayor and council, and transit was one of the big issues in the conversation.

SUZUKI: And it's *the* issue in Vancouver too. And Toronto. Transit is the big issue ... [But] while we're on the climate issue, the Prime Minister of Canada spent five days in the Arctic, which is where the impact of climate change is simply undeniable. And never once, at least publicly, even said the words 'climate change.' And so, you know, this is a real challenge I think. And if Canadians see this as a real issue, then they've got to register that, in a democracy.

BARNARD: In 2012 you wrote a blog about the fundamental failure of environmentalism. One of the points you made there is that the environment has become another special interest and you were making a plea for a more bio-centric or more holistic view of it. It seems to me that we're good at disintegrating and not so good at integrating. And we characterize quite a few things that our ancestors probably would have viewed more holistically as, in your words, special interest. For example, with respect to religion and spirituality: we want to put that in a box as a society whereas for previous generations, as you suggest with the environment, it would have been viewed differently. Would you agree with that hypothesis and, if so, what's your observation more generally on our intellectual need or urge to disintegrate?

SUZUKI: Yes, we shatter the world. You just need to look at the way we communicate now. I really make a point of trying to listen to CBC Radio at six oʻclock; it's half-an-hour of news. In half-an-hour you may get 12 or 13 items. You may get a report from floods in Bangladesh, drought in Ethiopia, forest fires in Alberta and they're all reported as if they've got nothing to do with each other.

And so you get these disconnected pieces, very short, and if they say, 'And now we bring you an in-depth report' you're talking about

a three-minute report. So, we shatter the world into shorter and shorter bits of news and we lose sight of the interconnectivity of everything. I think that's part of the problem.

You've raised a number of questions here, not just one. I've said to Elizabeth May for years, although I've raised, or help raise, a lot of money for her and I'm glad she's in Parliament, there should not be a Green Party. The idea that there's a Green Party suggests then that, well, the environment is a special interest. The Greens are interested in the environment. And we saw before Elizabeth was elected, when they had an all-candidate debate or discussion on television, because there were no Greens there, all the reporters acted as if, well, we don't have to talk about the environment: the Greens aren't here. That's ridiculous! But that's what's happened now. This is why we are fundamentally failing in the whole area of environmental issues. Because the environment is perceived as a fundamentally niche issue. You know, like, ballet for the ballet experts, sports for the sports freaks, and environment for the environment nerds.

The environment should be an issue for every party. And so this is why what we're doing now with the Blue Dot Tour—the blue dot referring to the picture of Earth as seen from space—is to enshrine the right to a healthy environment in the Constitution. And there it's a non-partisan issue, it's that we think every Canadian should have the right to expect that our government guarantees clean air, clean water and clean food from the soil.

BARNARD: What would be your perspective on the responsibility or the possible response by universities to this kind of disintegration, this compartmentalization?

SUZUKI: Universities have enormous potential, it would seem to me. But you see, I got a bachelor of arts degree. At Amherst* it was felt that in order to be a fully educated person you had to get a liberal arts degree. So, even though I did an honours degree in biology, I was never allowed to take more than half my courses in science. I had to take courses in literature, in philosophy. And, I think that universities have become this gigantic thing servicing all kinds of people, the vast majority of whom I believe have no business being in university. I think that it should be looking at a group of scholars that want to explore knowledge at the cutting edge of human thought and that a liberal arts education should be at the heart of it.

To train people with a bachelor of science degree, with maybe one course in English in freshman year, is absurd! People going out and using the most powerful tools humans have ever had and not having any background in philosophy or religion, I mean, I think that's a failure of our educational system. And to me, the biggest change I thought was the universities going and welcoming corporations and private companies into the university and taking money from the corporations. You just have to go into the department of forestry at UBC to see why environmentalists like me were fighting against the professors. You see all these huge signs

that say, 'donations given by' and all of the [names of the] forest companies. And that's what the forestry department thinks they're doing: training people to go out and service the forest industry. A huge mistake—to bring corporations into universities.

BARNARD: Where in Canada, or where in the world, are there some good examples of things that can give hope and that others can emulate? On a scale that people can actually respond to.

SUZUKI: There are lots of things going on not just in Canada but around the world. When you look at a city like Vancouver, we're going into a civic election, but for two terms now we've had a mayor who has set his sights on making Vancouver the greenest city in the world by 2020. One of the things that we really lack is a target or a vision to which we can aim.

Development in communities generally goes in a helter skelter way. A developer comes along and says, 'I want to open a new subdivision'. You look at the environmental impact blah, blah, blah and then you approve that. And then you end up, 30 years later, with a city that you wouldn't want to live in. Because there's no overarching vision of where we want to go.

I think cities around the world are where the action is because, of course, that's where the rubber hits the road.

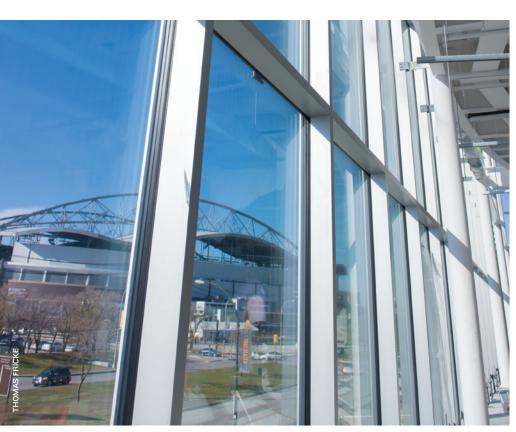
BARNARD: Are there other good examples in Canada besides Vancouver?

SUZUKI: Well, we've elected a number of, I think, very progressive mayors in Edmonton, in Calgary, now we'll have to see what happens in Winnipeg. Montreal, now we talk to Denis Coderre, there, and he's going to adopt our declaration for a healthy environment.

I see people all over the place doing good things. What are they doing? Well, I think the fact that transit is top of the agenda says they're trying to deal with the issue of cars versus other means. Vancouver's use of community energy, where, for example, the heat in sewers is being used to heat buildings. This kind of approach, I think, is a very good one.



*Suzuki earned his BA from Amherst College (Massachusetts) in 1958, followed by a PhD in zoology from the University of Chicago in 1961.





NEXT GENERATION FITNESS

Less than half of Manitobans get their daily dose of physical activity. With the pending opening of the Active Living Centre (ALC), the University of Manitoba is determined to change this.

BY JEREMY BROOKS [BA/98]

New technology emerges every day promising to make our busy lives easier. In the realm of fitness, wearable technology and myriad apps now allow users to track and customize their activity on the fly. And the modern 'gym' is chock full of high-tech machinery geared towards improving the workout experience. But for all the ways technology has enhanced physical activity, exercise still requires doing. And according to the Province—we're not *doing* so well. The provincial government acknowledges on its Manitoba in motion website that, "less than half of all Manitobans of all ages do enough physical activity to improve their health."

Enter the Active Living Centre.

When the ALC opens its doors in early 2015, its 100,000 square feet of sun-soaked activity space will have capacity for more than 2,000 patrons per day—a mix of faculty, alumni, students, staff and the greater community. It will be the largest facility of its kind in the province, boasting the latest and greatest in exercise equipment. But size is not what sets the ALC apart: it's the in-house Applied Research Centre where students, faculty and staff will help advance our understanding of healthy living and physical activity.

According to Douglas Brown, dean of the Faculty of Kinesiology and Recreation Management, the research lab will run a gamut of programs to engage the public, including fitness





assessment and exercise prescription. Faculty researchers will also run training studies that examine the impact of exercise on subjects ranging from high performance athletes to special populations. Most important for Brown is that all programs run out of the ALC are supported by evidence.

"We're striving to ensure every program that we run through that building is informed by research and based in best practices," he says.

Complementing the research side of the Centre is a something-for-everyone suite of active living options. On the Centre's fourth floor is a 200-metre track where runners and walkers have a bird's eye view of the various cardio and weight machines on the level below. Also on that level, a 12-metre wall juts out like a craggy mountainside, inviting flatlanders to experience the challenge and rush of rock climbing. The Centre's trio of group workout studios will cater to fitness classes, and there's also a dedicated training space for elite athletes.

Daylight from three walls of windows stream into the ALC, creating an environment Brown describes as "the complete opposite" of the university's soon-to-be-defunct fitness hub, known as the Gritty Grotto. The new building's location at the corner of University Crescent and Dafoe Road invites pedestrian traffic, with active living in plain view of members and non-members alike. "Walking through a facility that's all about physical activity sets a tone," says Brown.

At colleges across North America, facilities like the ALC, combined with robust intramural and recreation service offerings, continue to sprout up. In an Oct. 29, 2014 piece for *The Wall Street Journal* writer Rachel Bachman reported this trend as a response to the shift in thinking characteristic of today's student. "While previous generations of college students might have mixed in the occasional softball game amid test cramming and late-night pizza, the current one has grown up amid a fitness and wellness boom," Bachman noted.

Research suggests that campuses that provide students ample opportunities for wellness benefit in both recruitment and retention. A study in a recent issue of *Recreational Sports Journal* (2014, 38, 14-22, Michael McElveen and Alicia Rossow) compared data for students who had memberships to the fitness centre at a large Midwestern university in the U.S., with those who didn't. They found that five per cent more of the gym members were still enrolled in school two years later. They also found that having a gym pass might benefit academic success.

With resources like the ALC at our disposal, we can make even subtle shifts to our daily behaviours or routines and achieve more active, healthy lifestyles, notes Brown.

"I am going to start having walking meetings on the track," he says.



View virtual tour: <u>umanitoba.ca/activelivingcentre</u>

GOODBYE GROTTO

Don't know what you've got until it's gone. An alumnus reflects on the Grotto's legacy:

"The Gritty Grotto, to me, was like that favourite reclining chair that ages with you and it is not until you stand before the inevitable separation that you realize the magnitude of the impression each has had on the other.

Thank you for the great memories."

Momtchil Momtchilov [ExtEd/04, BKin/09]

Overcoming hurdles—like Jim Lowe did for this photo heralding its 1971 opening—was always part of the Grotto workout experience. Don't mind the dust!



Forget eHarmony; the Grotto is where true matchmaking happened.

To the guy in Gritti Grotto Wednesday mornings 8:30-10:30 in the black shorts, white shirt, and denim type cap: Our eyes have met but will we? If interested, respond. I'm the short red head who does laps and stepper.

Anyone out there still have their Grotto Club '500-miler' T-shirt? If so, email us a photo at: alumni@umanitoba.ca.

It wasn't pretty, but it served a purpose. How the Gritty Grotto changed one student's life.

That's how many push ups Keenan Rempel [BRMCD/12] could do when he first ventured down into the Gritty Grotto—the U of M's underground fitness facility—back in the spring of 2006.

Rempel admits he let himself go in his first year of university, focusing solely on studies while letting sports fall to the wayside.

"Unlike most people who might get the freshman 10, I definitely got, like, the freshman 40," says Rempel, 27, of his weight gain. The extra pounds didn't sit well with the St. Norbert, Man., native who, though husky in build for most of his life, was also a competitive athlete.

With April final exams looming on the horizon and yet another plate of fast food in his lap to fuel his studies, Rempel had finally had enough. "I was sitting there and eating and I was thinking to myself, what am I doing? This is just adding to the problem, this isn't helping," recalls the KinRec grad.

A group of buddies from high school convinced Rempel to try out for the St. Adolphe Hawks junior hockey team later that year. With that, he found his motivation: he would get fit for tryouts and quit junk food, cold turkey, until Christmas.

He hit the gym five to seven times a week and in those early days of pitiful push up tallies and a cardio level that made a lap around the block a chore, Rempel says it was the friendship and help of Gritty Grotto regulars that kept him going.

"If I ever had any questions or wanted any advice they were always more than open to offer that up to me," he says. "I'd say probably at least five to 10 people that I've befriended, I purely met at the gym. In fact, where I live now, my roommate is actually from the gym."

From April 2006 until the following Christmas, Rempel shaved 75 pounds

off his five-foot-11 frame, dropping from 245 down to 170. He made the Hawks and successfully avoided goodies until Christmas. Talking from his cellphone over a lunch hour—Rempel now works as an adjudicator at the Workers Compensation Board of Manitoba—he proudly says he's kept most of the weight off.

Tailoring his daily schedule to fit a workout regimen was tough but as Rempel attests, the benefits of getting active made it worthwhile.

"It was like a drug. I never slept better in my life," he says. "In 2011, I was actually able to compete in the half marathon which was just amazing and something I couldn't have imagined I could have done in that first year. Even for studies, it almost feels like [exercise] frees up your brain because it gives you that ability to recreate yourself."

Rempel continues to train at the Grotto, praising it as an ego-free zone.

"Very little judgment happens at that gym. It's very good for students who don't have a lot of experience," he says.

He plans to move over to the ALC when it opens in early 2015, and predicts his fellow Grotto 'regulars' will carry over their membership—and mentorship—as well.

BY JEREMY BROOKS [BA/98]





WORKING OUT IN WINTER

Weather no reason to avoid being active outdoors in winter says U of M expert

He goes by the moniker "Professor Popsicle." And his expertise on how cold weather affects the body has landed him guest spots on *The Late Show with David Letterman* and *The Rick Mercer Report*. In 2004, he completed a solo trek the length of frozen Lake Winnipeg—a hike of more than 400 kilometres that at one point included a game of follow the leader with a wolf. So, when Gordon Giesbrecht says outdoor activity in winter is safe, trust him.

You just need to *exercise* a little common sense.

According to Giesbrecht, an associate dean in the Faculty of Kinesiology and Recreation Management, we need to be mindful of four foes before we venture out to work out in the cold: trauma, hypothermia, frostbite and cold-induced asthma.

Trauma, or injuries, span a range of situations from a sudden wipeout on a slippery sidewalk to a crash or a muscle strain while out in the bush cross-country skiing. Giesbrecht's first piece of advice is simply to check the weather before you head out. If it's too icy to run outdoors, then don't. When you do, however, ease into your activity to get a feel for the road or sidewalk as you go. If your preferred outdoor pursuit takes you into the wilderness and away from your vehicle for any period of time—like skiing the trails consider this cardinal rule: "I never walk away from my car without a daypack," says Giesbrecht. His own kit always includes a heavier insulation layer, some food and fluids, and the means to start a fire.

Hypothermia is the bogeyman of winter threats, according to Giesbrecht. "In the

city, it's almost impossible," he says, unless you were knocked unconscious, and stayed so for the requisite six to eight hours it takes for hypothermia to set in. It's unlikely in the woods as well, unless an injury occurred, in which case one would turn to their trusty daypack for warmth and shelter.

As unlikely as hypothermia is, avoiding being cold and uncomfortable during activities depends heavily on dressing properly for the weather and the intensity of your workout. Layering is key and, it turns out, money doesn't guarantee success. "You can spend hundreds of dollars on all kinds of fancy clothing," says Giesbrecht. "But knowing how to use it is most important." Clothing should provide adequate insulation for your activity while at the same time allow water vapour and sweat from the body to be released. If at this point you're thinking your fancy Gore-Tex* shell has you covered, guess again. Giesbrecht cautions that this wonder fabric of wind/water resistance and breathability is a dud once temperatures drop significantly below zero. At that point, the vapour from your body condense into liquid and Gore-Tex®, being a liquidblocking fabric, traps that moisture inside the clothing, making it wet. Wet clothing is what gets most people in trouble in winter, says Giesbrecht, because of how it amplifies the heat-loss effects of cold and wind.

So, what's the ideal outdoor clothing scenario?

According to Giesbrecht, at the start of your activity it's okay to feel a bit cold; the idea being that as you get going your body will produce enough heat to warm you up, therefore you should take off a layer or

two just before starting on your journey. Always bring a warm, dry layer with you in the event you stop mid-activity; this will keep you warm at rest. Paramount is keeping moisture out of your clothing and maintaining a comfortable temperature throughout your activity.

Frostbite announces its pending arrival through a continuum of sensations from cold to pain to numbness to nothing.

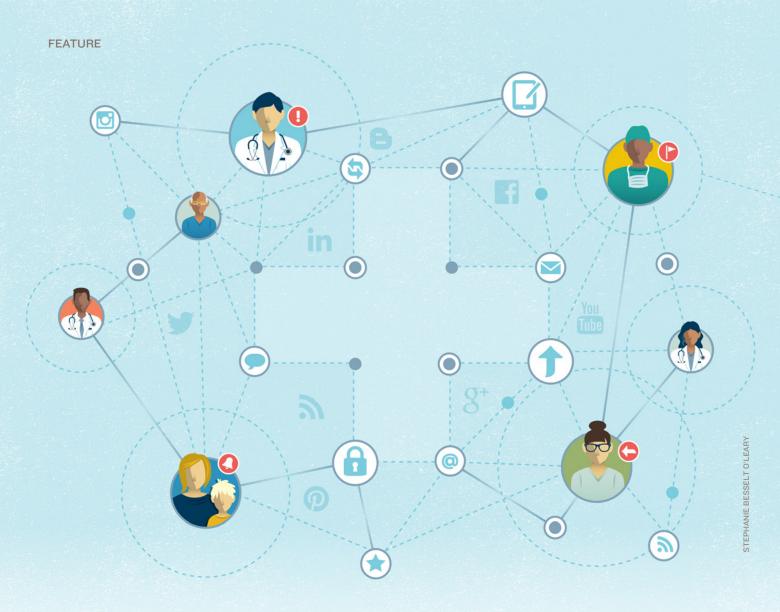
Never accept numbness, says Giesbrecht, and realize that exposed skin is not the only part of your body vulnerable to frostbite. Giesbrecht recalled one such experience crossing Lake Winnipeg when numb toes forced him to set up his tent and warm his foot for an hour or so before he could safely continue.

Cold-induced asthma affects a small population, says Giesbrecht. It can oftentimes be alleviated by wearing a mask or balaclava, or by using a doctor-prescribed inhaler. If you're prone to feeling a burning sensation in your lungs when you exercise outside in winter, fear not. "You cannot burn your lungs," says Giesbrecht, debunking a myth he hears often. "And in -40C you are not going to freeze your lungs." What you're feeling are the irritant receptors in your airways responding to the cold air.

Fueling up and staying hydrated

in winter is no different than for a fair-weather workout, advises Giesbrecht. If you're out on a long ski or snowshoe trip, be sure to graze on snacks high in calories every one to two hours. And don't let temperature trick you into thinking you need less water; you lose vital moisture with each steamy exhalation during coldweather exercise.

BY JEREMY BROOKS [BA/98]



SOCIAL MEDIACINE

BY SARAH RICHARDS

Search engines like Google have been added to the infectious disease researcher's toolbox for their ability to spot trends as—and where—they happen. And gadgets endowed with GPS and linked to 'the cloud' that enable users to monitor their sleep and track their steps hold massive potential as an information source for physicians. Add to this mix a generation of tech-savvy doctors, who embrace social media's ability to transmit knowledge in an instant, to open new frontiers in health care.



To resident otolaryngologist Dr. Ali Esmail [BSc/06, MD/10], it doesn't make sense: rather than make his job easier, the hospital administrative software he uses to track patients needlessly consumes both time and energy. For a young doctor who is as adept at using social media as he is at performing a tonsillectomy, that seems absurd.

"Part of that frustration comes about because, as a younger generation coming in, we know there's much better software out there doing pretty much anything else," says Esmail, the cofounder of Winnipeg-based Koronis Health and a self-described health IT disruptor.

Enter the physician-as-entrepreneur

That's why Esmail developed Medlinx, a social media communication platform for hospitals and clinics with a design and workflow inspired by Twitter, Facebook and Google Plus.

Medlinx isn't meant to replace the current electronic records being used, but rather provide an easy way of keeping everyone involved in a patient's care up-to-date with what's going on.

When a patient is admitted, a Medlinx 'page' is created to track her. Health care professionals can then post comments, files, pictures or instructions from their smartphones to the page—and it's all patient-privacy compliant.

"What I originally noticed is that people are already doing this in hospitals, but they're using e-mail, WhatsApp or even paper

notes or Excel spreadsheets to do this," says Esmail. "We basically took all those things, said 'What are they trying to get across using these methods?' and then put it on one platform so that everyone can see what's going on at that same time."

Medlinx also offers a separate app for patients, who can then communicate with their doctors, something Esmail feels will encourage the former to take greater responsibility for their health.

College of Medicine assistant professor of general surgery Ashley Vergis has tried the software and says it's easy to use because of the intuitive format. He thinks Medlinx could help improve communication amongst doctors, nurses and other health-care staff.

"I think we're very conscious of communication errors and we try to avoid them as much as possible," says Vergis. "But this is potentially the next step for really being able to tighten things up and to ensure we don't have gaps in communication."

While doctors may perform critically important work keeping us healthy and alive, they're not usually known as trailblazers when it comes to using social media. A report conducted in 2014 by marketing company MedData Group found that 44 per cent of more than 250 U.S. physicians surveyed did not use social media professionally. A majority said they were concerned about privacy issues and that they didn't have time.

Nevertheless, Esmail is one of a growing number of physicians harnessing the power of social media to improve health care. Some are using websites like LinkedIn and The Rounds, an online community for physicians; others are employing head-mounted displays like Google Glass (see sidebar on page 21) to stream medical procedures to teach students.

Enhancing the patient-physician relationship

Advances and acceptance of this digital technology mean many of today's gadgets may become important tools for our health tomorrow.

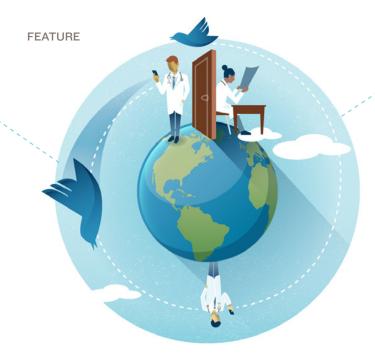
"Now, medical information and even measuring health parameters are accessible to anyone," says Bertalan Meskó, a medical futurist and author of *The Guide to the Future of Medicine*. "I measure my own sleep quality, I measure my physical activity. I can do an EKG at home, even an EEG right now."

Wireless wearable devices like the Fitbit smart watch, which tracks activity levels and sleep patterns, may one day collect extended periods of health data and relay them directly to our physicians. We'll no longer need our blood pressure taken or our heart listened to in a doctor's office.

"Social media is such a phenomenon because it allows people to connect. I can't think of a place where this would be more important than in a hospital where the stakes are so high."

- Dr. Ali Esmail





"In a few years, the patient will probably come to [their physician's] office with their history and even diagnosis already written down," says Ali Jalali, the University of Ottawa's interim head of anatomy and a special advisor on social media for the Royal College of Physicians and Surgeons of Canada. "At that point, a patient will probably be able to do a blood test from one drop of blood analyzed on their phone."

Others are dreaming even bigger. At a trade show last October in Japan, electronics maker Sharp showed off a prototype armchair capable of monitoring our health. The seat can measure health parameters like heart rate and body mass index before storing the information on 'the cloud' for a doctor to access. It includes a monitor so patients can consult directly with a physician from a distance.

"The most important change in medicine in the coming years will be the destruction of the ivory tower," adds Meskó, a geneticist by training who is also the managing director of Webicina, a website that curates online medical resources for doctors and patients. "By deconstructing the ivory tower, you'll see physicians who are stepping down from the tower and patients stepping up to have health management through an equal partnership."

Social media spawns 'meducation'

For doctors living in the present, however, social media remains a tool with big potential, especially in medical education. U of M department of pediatrics and child health associate professor Ming-Ka Chan opened her Twitter account (<u>@MKChan_RCPSC</u>) two years ago and uses it in part to follow news and trends from institutions like the Royal College of Physicians and Surgeons of Canada and the World Health Organization.

"I follow different topics in medical education and health in general that may be impacting practice locally, nationally and internationally—from flu vaccines to leadership development in medical education to Ebola," says Chan, who is also responsible for faculty development.

Dr. Joseph Bednarczyk [BSc/03, MD/08], a U of M emergency physician and fellow in critical care medicine, says he finds people who are the most up-to-date in their fields and evidenced-based in their practice are all deeply involved with online resources.

"The people who are staying most current are using online resources, and this is evident on a day-to-day basis," he says. Bednarczyk first became interested in online educational resources and social media while training to become an emergency physician.

"I became a bit frustrated with textbooks and peer-reviewed research when I was training," recalls Bednarczyk. "I found that a lot of the stuff I read in the resources that were being recommended to me was out-of-date."

He also found it was difficult keeping up with the volume of emergency care studies being added to Medline, the gold standard in biomedical bibliographic databases. Several thousand new articles are added to Medline every week.

Bednarczyk began hunting online for ways to keep up with cutting-edge studies on emergency care, including his interest in using heart and lung machines to keep critically ill patients alive, known as extracorporeal membrane oxygenation or ecmo for short. He started using information aggregators like Feedly to track these subjects on a daily basis, reading the latest studies before work or while getting coffee at Starbucks. He says his ability to stay hyper-current helped him extend the life of a critically ill patient last summer.

"We basically had no options left and I suggested perhaps flipping the patient prone on his stomach," recalls Bednarczyk.

Several of Bednarczyk's colleagues had yet to read the study that supported this suggestion—after all, it had just been published that same day. A scholarly debate ended with the team agreeing to turn over the patient.

"We tried that and it changed the clinical care of the patient in that scenario," says Bednarczyk.



"I find that the people in the fields that are most up-to-date and evidenced-based in their practice—they're all deeply involved with online resources. The people who are not using these things are falling behind so quickly and it's totally evident on a day-to-day basis."

- Dr. Joseph Bednarczyk

Along with emergency medicine blogs, Bednarczyk says
Twitter has helped him strike up collaborations with other
physicians studying ecmo. He's found that in contrast to
colleagues down the hall, experts around the world are sometimes
easier to reach through a tweet.

"It used to be these guys, you'd see them at a conference once a year, you'd sit in a lecture amidst a thousand other participants and maybe three or four people got to ask questions at the end of the talk," says Bednarczyk. "Now with these resources, if I see a clinical case that's very relevant to, for example, their research area, I might send them an e-mail or tweet something to them and usually I get an answer back within 15 or 20 minutes. It's pretty incredible."

Bednarczyk also follows EMCrit, one of a growing number of social media like lifeinthefastlane.com that promotes free, open-access 'meducation'—what's known as FOAM. There's now even an annual FOAM meeting, the Social Media and Critical Care Conference.

EMCrit is an emergency medicine podcast and blog published every two weeks by the director of Stony Brook University Hospital's resuscitation and critical care unit in New York. Dr. Scott Weingart started EMCrit in 2008 and says it's one of the most popular medical podcasts in the world.

"When I look at the concept of this generation, people want a group to talk to," says Weingart. "You get that as an academic doctor because you're teaching a group of residents, but I get it on such a larger scale and I get so many people giving their opinions and thoughts and interactions that it's just insane how good that makes you feel."

Weingart believes the FOAM movement is democratizing a system in which traditional journal editors and textbook publishers have snagged a monopoly on disseminating information. He says they hold too much power because the careers of academic doctors depend on their ability to publish high-impact papers that will change the practice of medicine.

From journal to blog: a changing of the guard

Traditionally, those physicians have submitted their research to publications like *The New England Journal of Medicine*, which then peer-review the research before deciding on whether it gets published. These journals usually require subscriptions which in part, their publishers argue, help pay for the peer-review process.

"That was your pathway to reaching an audience and that was your pathway to academic promotion," says Weingart.

Now, however, a growing number of online medical journals allow their articles to be read for free while the authors pay a publishing fee. And while established so-called 'open access' journals are peer-reviewed, some more fly-by-night publications are not

This, of course, has led to debate in the medical community. Who decides on what is—and isn't—legitimate, trustworthy and accurate in social media, be it journal, tweet or blog?

Could an extra pair of eyes save lives? And are smart eyeglasses equipped with a camera the digital solution?

While training to become a trauma surgeon, Dr. Paul Szotek noticed that first responders sometimes brought critically-ill patients to hospitals that weren't optimally equipped to deal with a particular injury or illness.

The availability of Google
Glass in 2013 got Szotek
wondering: what would happen if
ambulance staff wore the hightech glasses while responding to
emergencies? Perhaps the glasses' voiceactivated computer and camera could efficiently
communicate vital information on a patient's status
to a trauma doctor before the ambulance even arrived
at the hospital.

The idea would be for first responders to stream information to the ER about their emergent patients. The ER team could then get a heads-up on patients' conditions and direct the ambulance to the most appropriate hospital.

Last May, Szotek tested out his idea at the Indianapolis 500 IndyCar race weekend. He had four emergency responder teams—one at each of the oval track's four corners—equipped with a pair of Google's "smart eyewear".

"One of the first things we learned about was noise issues," says Szotek, an assistant clinical professor of surgery at Indiana University Health Methodist Hospital.

The roar of the race cars was so loud that the glasses couldn't be activated by voice command and had to be remotely operated by an iPad. Among other issues, the glasses overheated in the steamy track environment and struggled to transmit data because of less-than-perfect cellular coverage.

Szotek hasn't given up on the idea, however, and is considering further testing.

"There are a lot of little nuances with Glass but I think it's got the most promise right now to really do something," says Szotek.

Google Glass has been particularly useful to Szotek when it comes to teaching medical procedures because it provides students with a first-person view of how, for instance, to intubate a patient.

"It's that ability to see what I'm saying, instead of just listening and imagining it," says Szotek.

To see Szotek training others with help of Google Glass, search "Szotek Google Glass" on youtube.com.

"One of the biggest controversies is when you have a blog and you have one individual publishing content viewed by many, many people—in particular learners or perhaps more inexperienced clinicians or clinicians who practice in isolated environments where they don't have a good pulse on what the standard of care is in a particular area," says Bednarczyk. "There is concern about how influential someone can be in a medical blog post when they're telling you how to take care of patients."

Some organizations, like the international non-profit Health On the Net Foundation, offer accreditation of medical websites based on quality and transparency standards.

Weingart also contends that posts on medical blogs and podcasts that are followed by thousands of doctors are quickly dissected and corrected if they're wrong.

"My show is downloaded 250,000 times a month," says Weingart. "So I have 250,000 people doing that post-publication review. I have no fear—no fear at all—that if I make a mistake, it will be recognized."

Better connecting researchers with subjects

Social media isn't just changing the way doctors learn; it's also revolutionizing the way they plan and conduct research.

Two years ago, U of M pediatric surgeon and Manitoba Institute of Child Health scientist Richard Keijzer met Liz Crawford. Crawford runs a blog and Facebook page about her six-year-old son Malachi's struggle with a rare intestinal disorder known as Hirschsprung's disease; she was searching for accurate medical information for her hundreds of social media followers.

Keijzer and his team began providing Crawford with information on the illness. Eventually, they were able to communicate directly with parents and Hirschsprung's patients who helped them prioritize the information needs for this patient group. The goal is to educate them on these information gaps—things like the appropriate diet for Hirschsprung's patients and whether new medications and treatments are effective.

The websites have been a boon for Keijzer's research on Hirschsprung's, considering the disease affects one in roughly 5,000 children.

"We started to engage this community and one of the things I learned was it's really responsive and the potential reach is just amazing," says Keijzer, who is also Thorlakson Chair in Surgical Research, and research director for the College of Medicine's department of surgery at the U of M.

In a pilot experiment, Keijzer studied how social media could help patients and caregivers link up with others around the world suffering from the same illness. Keijzer had Crawford post links on her websites to a research survey that included a question on toilet training and Hirschsprung's children. Within hours, Keijzer had answers from 30 to 40 parents or patients from around the world.

"For a rare disease like this, it would normally take months to get that organized," says Keijzer.

The study was published in December in *The Journal of Medical Internet Research*, the highest-ranked medical informatics openaccess journal. Another paper by Keijzer on the medical concerns of Hirschsprung's patients and their caregivers will be published in 2015. Keijzer says the experience will help guide future research on the disease.

"More and more grants and research proposals that we write have a paragraph or a page where we have to explain how we're going to engage patients and how we are going to give them the information we find with our research," says Keijzer. "You can do this with a rare disease in a timely and efficient manner with the help of social media."

As for Crawford, she's amazed at how much research has taken place in two years.

"It's just astounding from what I see from the outside," says Crawford. "Knowing how medicine works and how long things take to get done, I'm absolutely mind-blown by it."





"More and more grants and research proposals that we write ...
have to explain how we're going to engage patients and how were
going to give them the information we find with our research. You
can do this with a rare disease in a timely and efficient manner
with the help of social media." – Dr. Richard Keijzer



Google and Twitter join vaccines in the fight against infectious disease

Some websites like HealthMap are even tracking outbreaks of disease and illness by monitoring online sources. Although crunching the big data of social media isn't always the information panacea it may seem to be—a similar website, Google Flu Trends, was criticized last year for frequently over-estimating the number of seasonal flu cases—many see promise in it.

Last January, researchers at the University of California, Los Angeles, published a study showing how real-time social media networks could help health officials monitor and possibly prevent behaviours that put people at risk for contracting HIV. The researchers analyzed tweets with keywords suggesting risky behaviour associated with HIV transmission. They then mapped out the locations of those tweets before linking them to data on the geographical distribution of HIV cases. According to the UCLA, the researchers ended up finding a "significant relationship between (tweets) indicating risky behaviour and counties where the highest numbers of HIV cases were reported."

Tapping the well of social media's potential

It's a creative approach to using social media—the sort of creativity that was encouraged at the first ever Hacking Health event held last November in Winnipeg.

Hacking Health events bring together the likes of developers, graphic designers and front-line clinicians to collaborate on new products and prototypes for the health-care industry. The idea is to give inventors a head start by quickly prototyping interactive digital media ideas that can be tested over the three-day health

hackathon. In this way, physicians and researchers can avoid becoming prematurely bogged down with complications like privacy laws or industry regulations.

"Let's strip away all those barriers for a moment and let's just talk about how we can create the best client experience—privacy concerns be damned kind of thing," says New Media Manitoba executive director Kevin Hnatiuk [BA/97], who co-chaired the event. "It's within this whole stripping away of the barriers that I believe the greatest innovation occurs."

In 2013, a Hacking Health event held in Toronto led to the successful development of an app that helps young, pregnant, homeless women manage prenatal care for their babies.

Still, Hnatiuk believes the goal of these events isn't just the development of the next big digital health-care product.

"Hackathons aren't necessarily about creating something that's commercially viable," he says. "It's creating something that improves the human condition in some way. It's all about planting seeds, right?"

For Esmail, those seeds are already beginning to sprout. Once Medlinx passes its security audits by the Winnipeg Regional Health Authority, it will be tested in St. Boniface Hospital's surgery division. Esmail's hoping it will be available to health-care facilities across Canada and the United States this January.



"Social media is such a phenomenon because it allows people to connect," says Esmail. "I can't think of a place where this would be more important than in a hospital where the stakes are so high. Social media repurposed for health care in the form of clinical social networks is going to transform the way care is delivered over the next five years."

INSPIRED TO GIVE

Remembering a prominent alumnus who turned the generosity of others into a lifetime of giving

BY ERIC POSTMA

More than 60 years ago, a welcoming community, dedicated professors and a single bursary made all the difference for a deserving student at the University of Manitoba.

George Yee [MD/60] grew up in one of Winnipeg's poorest neighbourhoods, and despite his family's financial challenges his parents supported and encouraged his pursuit of a university education.

After a battle with non-Hodgkin lymphoma, George Yee passed away on Nov. 11, 2014 at the age of 79.

"My father was a generous and humble man who was always dedicated to medical education," said Dr. Charles Yee. "He always said that if it wasn't for the generosity of the University of Manitoba helping him with bursaries, he doesn't know how he could have managed. That's something that always stayed with him."

Growing up in poverty didn't impact the Yee family priorities; from a young age George was told by his parents that he would have to go to university. Yee reflected on this journey at the College of Medicine's 2012 convocation, where he was presented with an honorary degree. "I was born a galaxy away from academia," he said.

The U of M Medical School opened up a different world to Yee. "I was accepted. The Hippocratic Oath says you accept your colleagues as brothers. Everybody looked at me as though there weren't any differences," he recalled in a 2009 interview with MB Medicine magazine. "I was inspired by the dedication of my professors, the other doctors, how much they gave, and I was helped ... I was in pretty tough financial straits but the dean came to me and said 'you know George you need some money' and gave me a bursary. That had a big impact on me because I came from a place where nobody helps anybody out; you got to fight for whatever you have."

Upon graduating, he worked at the Winnipeg General Hospital and then began residencies in pathology there and at the Henry Ford Hospital in Detroit. In 1964 he became an American Cancer Fellow. A year later, Yee was certified in general pathology by the Royal College of Physicians and Surgeons of Canada.

Throughout his career Yee worked in various hospitals, often as chief pathologist. In 1966 he was hired as the CEO and laboratory director of Canada's busiest lab: Medical Laboratories of Windsor, in Ontario. Yee would eventually become owner of the lab.

For a decade (from 1992 to 2002) Yee also served as inspector for the College of American Pathologists. He was president of the Ontario Association of Pathologists and a member of medical organizations such as the Canadian Medical Association and the Canadian Society of Cytology.

"Education enabled me to achieve success and I vowed that if I was ever fortunate enough, I would give back," said Yee.

That vow turned into a lifetime of philanthropy for George and his wife Faye. The Yees recently donated \$500,000 to support the new Anatomical Sciences Laboratory at the Faculty of Health Sciences.

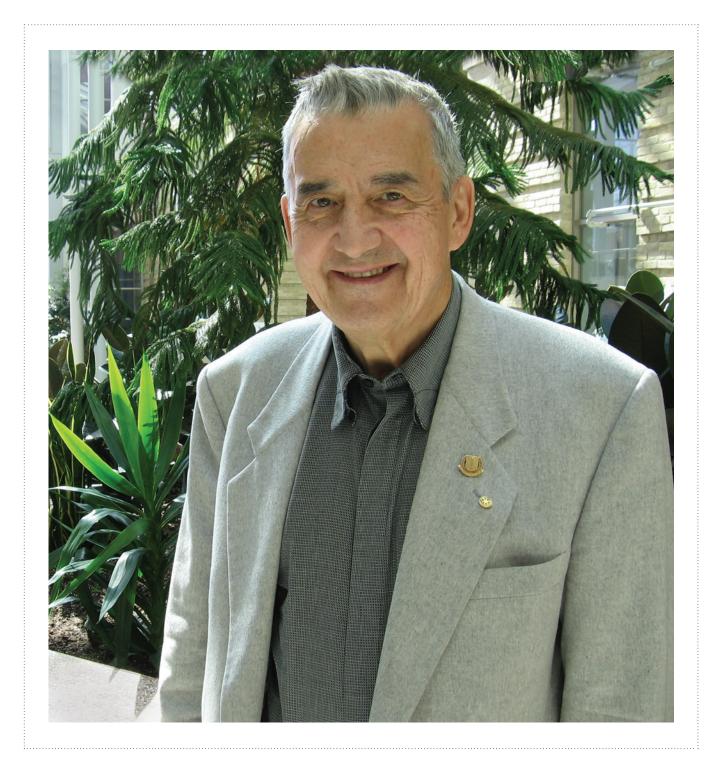
That donation was a continuation of a remarkable history of giving by one of the College of Medicine's most dedicated benefactors. The Yees have contributed more than \$3.3 million to the University of Manitoba for medical education and medical student support.

In 2006, Yee's class held their 46th reunion and he generously matched his classmates' total gift amount to support the Medicine Class of 1960 Entrance Scholarship award. This gift, a group effort, helps medical students with the financial pressures of medical school, a circumstance Yee experienced first hand.

President David Barnard offered the following reflection on Yee's gratitude and generosity. "The University of Manitoba is very proud of all of its graduates and in particular graduates like Dr. Yee who remember the days of getting in to medical school, always grateful for the support he received, and ready to give back to the school that gave him his start in life," said Barnard. "Dr. Yee exemplifies what we like to see in graduates: he was a thoughtful and humane person. It's that humane exchange between people that actually shapes the university experience."



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"Education enabled me to achieve success and I vowed that if I was ever fortunate enough, I would give back."

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Michael Rawluk, Asper MBA '03 Chief Operating Officer, Birchwood Automotive Group

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ACCOMPLISHMENTS

We welcome your news and photographs. Images MUST BE 300 dpi and in jpeg or tiff format. E-mail jeremy_brooks@umanitoba.ca. Deadline for our Spring 2015 issue is March 1, 2015.



From left: Mitchell [BSc(Hons)/05, PhD/II], Santiago [BSc/02, BSc(Hons)/04, MSc/07] and Hunt [BSc(Maj)/04, PhD/I2]

When it comes to your health, your body knows best. And a trio of U of M alumni has developed a way to deliver this knowledge to you quickly and accurately.

Waylon Hunt, Ryan Mitchell and Jon-Jon Santiago spent years in research labs as part of their doctoral work in pharmacology and physiology. Most of the testing they did was for research only; it could take decades before any of it trickled down to the public. The three expert investigators pooled their skills, negotiated an agreement to access those same high-tech labs they studied in, and in 2012 launched Intrinsic Analytics Inc., Manitoba's only bioinformation provider. "We've developed a framework for taking research technologies that are being used for research, solely, and applying them in ways which may benefit the public now," says Hunt. Though their business started off tailored to industry—they performed drug and alcohol testingthey've since created a suite of options for the consumer audience. One example is their Recommended Daily Intake (RDI) panel test, \$350, which gives you

a complete view of your body's levels of RDI vitamins and minerals, benchmarked against existing test samples of subjects in your same age range and gender. Maybe you're high in vitamin D? If so, test results will show this, as well as what impacts this can have on your health. The information becomes yours to share with your physician or use to more effectively manage your dietary habits. The goal is to arm people with knowledge and eliminate the tendency to take action blindly: like stuffing fists full of supplements into our bodies or performing cleanses in the hopes of trimming up for the summer beach season. "We are simply bridging the gap between health research and your individual health," says Hunt, of the scientifically backed outcomes they offer clients. "So that people can keep their desired diet and fitness programs accountable to the results they promise."

Learn more at intrinsicanalytics.com.

Andrews, Robert S [BSc(EE)/70] was appointed a Member of the British Empire in October in recognition of his service to the defense industry in the United Kingdom. Andrews, an electronic war expert, has led groundbreaking work in radar and radar-jamming technology.

Baragar, Joan [MEd/78] recently published the historical fiction novel *She'll Never Ask—a Tale of Partings and Secrets.* Baragar's book is available at McNally Robinson Booksellers.

Berry, Bonnie [AssocEd/71, BPed/78] received the TEAM (Teaching English as an Additional Language to Adults in Manitoba) Teaching Award in October 2014 for her work with Adult English as an Additional Language Literacy Learners.



Bond, Barbara (Shelford)

[BA/67] recently wrote, On Sober Second Thought, a satire on the Senate, where she worked for 15 years. The book, published by Heartland Associates of Winnipeg, is described

as "a rollicking good romp" by Elizabeth May, leader of the Green Party. The book, available at McNally Robinson Booksellers and online (heartlandbooks.ca) is Bond's second novel. Her first, *The Beach Walkers*, is set in Florida.

Bonetti, Adele [BID/75] was named a Fellow of The Interior Designers of Canada (IDC), in recognition of her distinguished service and contribution to the greater good of the IDC and the interior design profession. Bonetti is a licensed interior designer and principal of Concetto Interior Design Ltd., of Grande Prairie, Alta.

Campeau, Anita R [MA/82] recently published *The History of Mandeville: From the American Revolution to Bernard de Marigny de Mandeville.* Co-authored with historian Donald J. Sharp, Metairie, La., the book focuses on the main historical events that took place after 1760 on the North Shore of Lake Pontchartrain, including the legal disputes that shaped the city's geography subsequent to the Concession periods of English and Spanish Rule and to the sub division of the city. The book is available for purchase at Cornerstone Book Publishers and amazon.com.

Harrison, Cal [BA/91, MBA/98], author of *The Consultant with Pink Hair*, recently published his second book *Buying Professional Services: Replacing the Price-Based Request for Proposal with Qualifications Based Selection*. To learn more, visit beyondreferrals.com.



ACCOMPLISHMENTS

Harvey, William R C [BSc/59, BA/60, MA/63] received the 2014 Lifetime Achievement Award from the Canadian Bioethics Society in recognition of his outstanding contributions to teaching, clinical ethics, and research. In 2013, Harvey retired from teaching after spending 47 years in the department of philosophy at the University of Toronto where he earned the distinction of professor emeritus.

Hawranik, Gerald [BPE/73, BEd/75, LLB/79] relocated to Alberta in 2011 after 31 years practicing law in Beausejour, Man., to accept a full-time board member position with the Parole Board of Canada. In 2013, he was named chairperson and CEO of the Alberta Surface Rights Board and the Alberta Land Compensation Board. Hawranik's spouse, Pamela, [BN/77, MN/84, PhD/97] is dean of the Faculty of Graduate Studies at Athabasca University.



Kamchen, Richard [BA/95] published his latest hockey book in fall 2014, titled.

The Goaltenders' Union. For more information visit ecwpress.com/books/goaltenders'-union.

Macdonald, Catherine [MA/83] formed a small company in 1987 to market her historical research and writing skills and ended up doing a wide variety of projects from writing a centennial history of Winnipeg public parks to historical research to help evaluate core samples from the bottom of Lake of the Woods. Then one morning, she woke up with an idea for a historical mystery novel set in Winnipeg in 1899. That book, *Put on the Armour of Light*, was published by Dundurn in November of 2014. She also writes a blog called "Portage and Slain" at portageandslain.com, posting mainly about Winnipeg books, especially crime fiction.



Patkau, Karen
[BFA (Hons)/75]
recently published a
six-book Ecosystem
Series for young children
with Tundra Books. For
more information visit
karenpatkau.com.

Robinson, Dr. Ted [MD/63] competed in the B.C. Provincial Masters Games in Langley, B.C., in September. His finish times for the 800, 1,500 and 5,000-metre races were 4:18:95; 8:42:20; and 30:31:11 respectively. He plans to compete again next year, running the 10K as well as some of the shorter distance events.



Scaletta, Salvatore (Sam) [BA/65, BEd/68] was recently honoured by two former students of his grade 12 English class at Windsor Park Collegiate. Scaletta's one-time pupils Michael E. Saladin

[BA(Hons)/84, MA/87, PhD/92] currently a tenured professor at the Medical University of South Carolina (MUSC) and Lisa K. Saladin (Daubaras) [BMRPT/84, MSc/90, PhD/00], who is currently dean and professor at the College of Health Professions, MUSC, established two endowed scholarships in Scaletta's name at MUSC and named the Salvatore Scaletta Student Life Center in his honour. Scaletta and his family were present on Oct.10, 2014 in Charleston, SC, for the presentation of the inaugural scholarships and unveiling of the Center.

Schreyer (Ediger), Casia [BA/08] recently published a young adult novel—her first—titled Nothing Everything Nothing. The book, which deals with cyber bullying, depression, suicide and recovery, was used as part of a fundraising campaign in November for Kids Help Phone. In February, Schreyer will do readings at various schools and libraries for I Love To Read month and she is available as a guest speaker on the topic of bullying. Nothing Everything Nothing is available in paperback and as an e-book through Amazon, Create Space and Smash Words. Visit casiaschreyer.wordpress.com for more information.

Smith, Cynthia [BPE/79] is enjoying life in Victoria, B.C., where she is dean, health and human services, at Camosun College, which provides interdisciplinary and holistic education programs in nursing, dental, allied health and social services.



Stevan (Stephanchew), Diana [BScHEc/63, MSW/72] has published her debut novel *A Cry from the Deep.* The romantic mystery/adventure book is available on amazon.com. For more information visit

Stevan's website: dianastevan.com.

FIND A FRIEND

Alumni Relations is pleased to help graduates reconnect with former friends and classmates.



Complete the form at: umanitoba.ca/alumni Tompkins, Dr. Jeffrey [BSc(Med)/13, MD/13] received the 2014 Distinguished Young Alumni Award from Brandon University at their fall Homecoming. The award recognizes the significant professional achievements, since graduation, of a BU graduate under 35 years old. Tompkins is currently a second-year resident in anatomical pathology at the University of Alberta and he is the son of fellow U of M alumni and "very proud parents" Ron [BES/74] and Cheryl (Leung) Tompkins [BHE/76].

BIRTHS



Hamblin, Kari [BSc(HNS)/05, BN/10] and Hamblin, Bradley Lloyd, [BSc(Ag)/04] along with their son, Carson, are pleased to announce the birth of Jillian Charlotte Hamblin on June 24.

CALL FOR NOMINATIONS

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Nominations are accepted annually. Complete nomination and voting information is available at: umanitoba.ca/alumni

Nominations close Friday, February 27, 2015 at 3 PM (CST).





IN MEMORIAM

1930-39

Clark, Hart D [BA(Hons)/35] Aug. 17, 2014

Holden, Gordon W [DipAgric/39] Aug. 28, 2014

Hunter, Gwendolyn I [BA/30] Sept. 17, 2014

McLennan, Molly E F [BA/39, BSW/56] Sept. 25, 2014

Robson, Dorothy J [BA/36] Oct. 26, 2014

Stanton, Michael Stuart [BSc/38] June 23, 2014

1940-49

Campbell, Dr. Charles S [BSc/47, MD/51] Nov. 17, 2014

Cavers (Taylor), Geraldine Frances [BScHEc/45] Sept. 27, 2014

Christie, Edwin A [BComm/41] Sept. 5, 2014

Clay (Thomson), Ruth P [BScHEc/48] Nov. 30, 2014

Cosman, Dr. H Herbert [MD/49] Aug. 27, 2014

Donogh, Norm R [BA/48] Aug. 11, 2014

Downie, David Alexander

[BA/42, BEd/52, MEd/61] Aug. 22, 2014

Elders (Varley), Ruth M [BA/42] July 27, 2014

Goodman, Audrey [BA/46] Oct. 3, 2014

Hankinson, Elmore L [BArch/49] Aug. 9, 2014

Hardisty, A Pamela (Pamela) [BA/41, DipEd/42] Nov. 7, 2014

Johnson, Dr. J G L [MD/48] Oct. 13, 2014

Lavoie, Dr. Clement [BA(LatPh)/41] July 3, 2014

MacDonald, Jack L [CA/48] Sept. 17, 2014

Morgan, John Holcombe [BSc(CE)/45] Sept. 15, 2014

Murphy (Perry), Dorothy M [BSc(Pharm)/49] Nov. 15, 2014

Owchar Marchand, Dr. Margaret [BA/45] June 4, 2014

Phillips, George E (Bud) [BA/48, BSW/49] Nov. 23, 2014

Schneider, Rev. Roy L [BA/49] June 5, 2014

Shannon (McGuinness), Elizabeth [BScHEc/48] Oct. 21, 2014

Siddall, Robert William (Bob) [BArch/48] Sept. 14, 2014

Stern, Maurice Murray [BA/49, DipEd/50, BEd/58] Oct. 7, 2014

Stoddart (Norquay), Carol Louise [BA/49] Aug. 24, 2014

Stoller, Sidney [BSc(EE)/49] July 3, 2012

Sweatman, Lorraine [BScHEc/43] June 5, 2014

Symchych (Uhryniuk), Helen [BScHEc/48] July 29, 2014

Thorlakson (Olson), Lorna Marion [BA/45, DipSW/46] Aug. 30, 2014

1950-59

Alexander, Joyce E [BA/59, AMM/60, BEd/60] Nov. 26, 2014

Bell, Shirley Jordan [BScHEc/50] June 13, 2014

Boughton, The Rev. Keith D [BA/50] July 25, 2014

Bridge, Donald B [BA/51, LLB/55] July 18, 2014

Broder, Dr. Morris H [BSc(Med)/52, MD/52] Oct. 12, 2014

Burdeny (McDole), Margaret E [BScHEc/59] Nov. 3, 2014

Butcher (Bickford), Helen Elizabeth (Beth) [BScHEc/51, CertEd/69] June 9, 2014

Coburn, Clare W [BSc/59] Oct. 30, 2014

Cooper, Judith [BA/58, BSW/59] Aug. 13, 2014

Cuddy, Dr. Thomas E (Ted) [MD/54, MSc/58] Nov. 4, 2014

Devlin, Dr. Thomas J [BSA/59, MSc/62] Aug. 9, 2014

Dundee, Dr. Yvonne E [MD/54] Oct. 3, 2014

Elfenbaum, Bernice [BFA/54, BSW/61] June 12, 2014

Fahlgren (Anderson), Elsie M [BScHEc/53, BPed/54] July 23, 2014

Fedoruk, Dr. Alex N [BSc/58, MSc/62] Nov. 22, 2014

Found, Allan James [BSc(CE)/59] June 13, 2014

Godfrey, John W A [BSc(EE)/54] Sept. 18, 2014 **Green, Gerald R** [BA/53, BEd/59, MEd/64] Nov. 4, 2014

Hamilton, Hon. A C [LLB/50] July 25, 2014

Harries, Hubert R [BSc/55] July 4, 2014

Hedley, Harvey E [BA/53, BSW/56] June 21, 2014

Helgason, Dr. Erick R [BSc/54] July 31, 2014

Herdy, Harry [BSA/57] Aug. 16, 2014

Isabey, Dr. Amedee P [BA(LatPh)/54, MD/61] June 6, 2014

Johanson, Lya M [BSc/51] Sept. 17, 2014

Kell, John A [BComm/55] Aug. 11, 2014

Kent, Michael Robert [BSc(ME)/50] Oct. 19, 2014

Kerr, Prof. Audrey M [BA/53] June 23, 2014

Kroeker, Albert C (Bert) [BA/51, BPed/52, BEd/58] Sept. 13, 2014

Langer, Charles R [BSc(CE)/50] Aug., 2014

Malus, John G [BSc(CE)/52, MSc/68] Aug. 15, 2014

Millier, Roger G [BA(LatPh)/52, BPed/54, BEd/57, MEd/65] Sept. 17, 2014

Mulaire, Rene J [BSc(Pharm)/54] June 12, 2014

Newton, Constance Joan [BA/58, BPed/58, BEd/61] Nov. 26, 2014

Palmer, Erna-Anne [BSc(Pharm)/56] June 6, 2014

Pereira, Dr. Ronald R [BSA/59, MSc/61] June 28, 2014

Pinto, Dr. Jerry Morris [$\mathrm{MD}/51$] Oct. 29, 2014

Plattner, Harry [BSc/50, CA/60] June 28, 2014

Quinton, Richard J [CA/50] Nov. 5, 2014

Rajnarine-Singh, Dr. Carl R [MD/59] July 8, 2014

Riesen, David H [BA/55, BPed/56, BEd/59, MA/66] June 21, 2014

Ross, D C [CA/58] Aug. 16, 2014

Russell, Richard H [BSc(CE)/50] July 20, 2014

Schioler, Michael P [BSc(CE)/55] July 3, 2014

Simms, William M [BA/52, LLB/56] Oct. 14, 2014

Skryha, William J [BA/52] July 10, 2014

Slusky, Irvin Harvey [LLB/52] Oct. 22, 2014

Swan, Audrey M [AMM/51, BPed/72] Nov. 3, 2014

Tataryn, Michael W [BSc/52, BEd/58] Oct. 26, 2014

Tauber, Maurice J [BSA/58, MSc/59] Oct. 6, 2014

Townsend, Bruce A [BSA/50] Sept. 9, 2014

Walmsley, Dr. Douglas P [MD/51] Sept. 4, 2014

Whiteley, Donald G [BSc/55] Oct. 24, 2014

Wieler, Irmgard Katherine (Katie) [BA/59] Aug. 3, 2014

Wilson, James M [DipAgric/58] July 11, 2014

Wilson, John E N (Jack) [LLB/50] Oct. 16, 2014

Wong, Dr. John W H [BSc/57, MD/59] June 17, 2014

Wood, Dr. Marcia [MD/50] June 17, 2014

1960-69

Anderson, Dr. Donald T [MSc/60, PhD/63] Oct. 30, 2014

Bachynski, Boris V [CertEd/62, BEd/64] Aug. 16, 2014

Birch, Dr. Douglas Vernal [BSc/60, BEd/62, MEd/70, PhD/84] Nov. 19, 2014

Bochonko, Dr. D Richard [BSc(Hons)/63] Aug. 27, 2014

Brooks, Alfred R [BA/61, BEd/63] Sept. 3, 2014

Byram, Katherine E [BHEc/67] July 3, 2014

Day, William A [BSA/69, BEd/73] Oct. 8, 2014

Denbow, Carman F [BSc(Pharm)/66] Oct. 15, 2014

Doyle, Garry Henry [BEd/68, MEd/77] Sept. 13, 2014

Filkow, Kenneth A [BA/62, LLB/66] Oct. 2014

Flatt, Donald Arni [BA/64, BEd/67, MA/73, LLB/80] Oct. 4, 2014

Fleishman, Brian J [BSc(CE)/64] June 29, 2014

French, Rodney S [BSc(ME)/65] June 21, 2014

Friesen, Jacob I [BSc/62, BEd/65] Oct. 7, 2014

Gingera, Steve [BA/62, BEd/64, MEd/74] July 3, 2014

Goertzen, Abram Ewert [BA/63, BEd/67] June 6, 2014 **Golub, Murray** [BSc/68, CertEd/70, BEd/71] Aug. 26, 2014

Groening, Kenneth E [BComm/66] July 12, 2014

Harriott, Wayne M [BSc(EE)/63] Aug. 22, 2014

Hay, Dr. Robert J [BSc(Hons)/60, MSc/61] Nov. 13, 2014

Hebert, Dolores L [BA/67, BEd/74, M en Ed/92] Aug. 15, 2014

Hill, Joyce P [BPed/69, BA/74, BEd/74] Sept. 19, 2014

Huska, Michael [BA/61, BEd/63] Aug. 2, 2014

Jakobschuk, Prof. Alexander [BScEP/61] June 23, 2014

Johnson (Snyder), Evelyn [AMM/63] Nov. 2, 2014

Jones, Dr. Rene Francis [BES/69] Sept. 1, 2014

Kerr, Dr. Donald P [BSc(Hons)/60, MSc/61, PhD/65] Oct. 19, 2014

Knowles, Lorne R J [CA/62] June 4, 2014

Krindle, Daniel J [BA/61, LLB/65] Sept. 20, 2014

Kroeker, Erdman [BA/64, BEd/69] June 8, 2014

Kurtz, Maurice [BArch/60] Oct. 5, 2014

LaRiviere, Lorraine Yvette [BA/63, BEd/69] Oct. 24, 2014

MacDonald, William J [BA(Hons)/60] Sept. 25, 2014

Man, Rev. Sharon J [BID/60] August 2014

McDonald, Andrew James (Andy) [DipAgric/68] July 19, 2014

McKay, Raoul J [CertEd/62, BA/65, BEd/66, MA/73] Aug. 24, 2014

McMillan, Dr. Willis G [MD/62] Sept. 9, 2014

Moody, Nancy Mavis [CertNurs(PH)/69] Nov. 20, 2014

Moore, Dr. Ronald E [DMD/68] Sept. 20, 2014

Penner, Dr. David [MD/63] Oct. 28, 2014

Penner, Henry [BA/66, BEd/72] July 31, 2014

Potkonjak, Eli [BA/67, LLB/72] Nov. 23, 2014

Ramsay, Vaughn Clair [DipAgric/65] Sept. 22, 2014

Rempel, Dr. Gerald W [BSc/63, MD/67] Aug. 5, 2014

Saper (MacNeil), Martha L [BHEc/66, Cert-Ed/67, BEd/72] July 2, 2014

Stebnicky, Bohdan Evhenr [BSc/63] Oct. 2, 2014

Swindell, Gerald W [BA/66] Aug. 30, 2014

Teffaine, Gilbert [BA(LatPh)/64] Sept. 28, 2014

Vandenberghe, Douglas G [BSc(ME)/63] June 12, 2014

Wainwright, Judith D [BHEc/68, BEd/72] Aug. 29, 2014

Walkes, Cynthia E [BA/62, CertEd/63, BEd/68] Sept. 20, 2014

Wiebe, John B [BA/63] July 11, 2014

Wilson, Robert David [BEd/65, BA/65, MEd/74] July. 20, 2014

Wirth, Douglas W [CA/68] June 9, 2014

Yee, Dr. George E [MD/60, DSC/12] Nov. 11, 2014

1970-79

Bilawka, Peter [BEd/74] Oct. 3, 2014

Brooks, Glen C [BA/72, BEd/77] Aug. 27, 2014

Brown, John R [BA/73, CertEd/74] Aug. 6, 2014

Chappellaz, Lise Marie [AssocEd/72] July 19, 2014

Coates, Jean Mildred [BA/78] July 19, 2014

Davis, Donald Wayne $[\mathrm{BA}/70]~\mathrm{Sept.}~8,2014$

Durksen, Jacob B [BEd/72] June 15, 2014

Enns, Merle Elizabeth [BA/76, BEd/76] July 6, 2014

Ens, Henry [BA/73, CertEd/74, BEd/78] Sept. 17, 2014

Feller, Sheryl J [DipDHyg/70, BA/74, MBA/81] Nov. 25, 2014

Gagnon, Oscar J [BA/75] Nov. 13, 2014

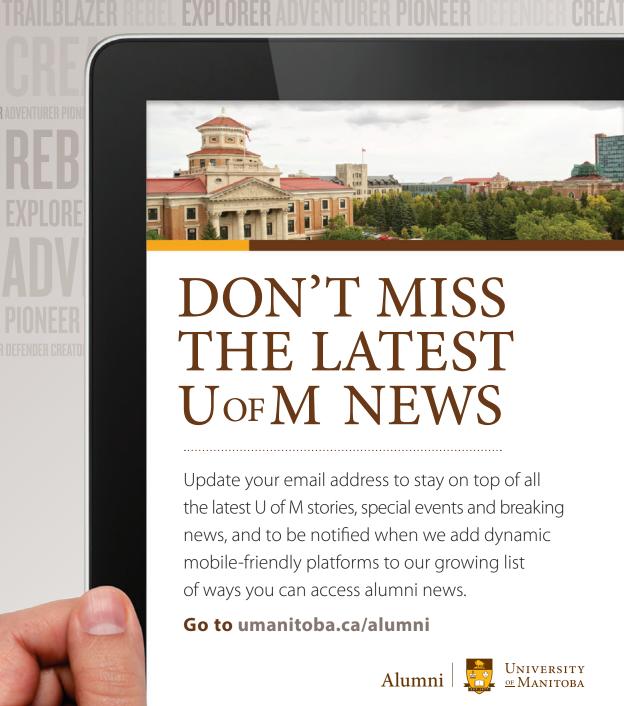
Gervais, Andre A [CertEd/73] June 16, 2014

Goldberg, Morley [BSc/71, CertEd/74, BEd/77] July 5, 2014

Harkness, Grant Edward [BEd/79] June 28, 2014

Harris, G Jack [BA/70, LLB/73] March 12, 2014

Hinkson (Alexander), Joan Marjorie [CertEd/75, BEd/80, MEd/86] June 26, 2014



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University of Manitoba

IN MEMORIAM

Hocking, Ronald [BPE/72, BEd/80] June 10, 2014

Jablonski, Margaret B [BSW/79] Nov. 30, 2014

Klinck, Sandra Mary [BEd/77] June 13, 2014

Lang (Leung), Dr. Clement Kar Hung [BSc/75, MSc/78, PhD/82, MD/87] June 18, 2014

Lee, Dr. Lindy M [MD/75] Nov. 10, 2014

Lymycz, William [BSA/74, CertEd/76] Aug. 10, 2014

Magel (Lewicki), Susan [DipDHyg/77, BA/78] Sept. 2014

McNeil, Catherine Mary [BHEc/74, MSc/82] Oct. 26, 2014

Oliver, Betty [BA/71] Aug. 10, 2014

Owen, Colleen Elizabeth [BA/75] Nov. 12, 2014

Painchaud, Leona [BA/70, BEd/78] Aug. 26, 2014

Parker, Earl L [LLB/75] Sept. 7, 2014

Raymond, Robert (Boris) [MA/71] May 6, 2013

Rosenbloom, Dr. Earl S [BSc(Hons)/70, MSc/71, MSc/99] Nov. 23, 2014

Sage, Susan E [BA/75] Oct. 15, 2014

Salim, Abdul [BES/73, BSW/86] Nov. 1, 2014

Steinberg, Dr. Frances Carol [BA/79, MD/84, BSc(Med)/84] Nov. 8, 2014

Stem, Cynthia June Marie [BA/79, BHEcol/83] Sept. 7, 2014

Tabachek, Edward J [BSc/74] Aug. 11, 2014

Tecter (Reimer), Avery R [BA(Hons)/78, MA/84] Nov. 5, 2014

Tropak, Robert J [BSW/75, LLB/91] Oct. 9, 2014

Ulasy, Lawrence Waldemar [BPed/73] July 22, 2014

Woolf, Margaret M [BA(Hons)/74, MA/76] June 8, 2014

1980-89

Ammann (Johnston), Sandra Lee [BA/86, ExtEd/92] July 17, 2014 **Barker, Kenneth Joseph Robert** [BA/86] July 2014

Berezowski, Ernie L [ExtEd/85] Sept. 8, 2014

Bouchard, Dr. Ronald Allan [BPE/86, PhD/90] June 14, 2014

Cada (de von Flindt), Kristin [BSc(Pharm)/87] Sept. 29, 2014

Caravelis, Antonios [BComm(Hons)/88] Nov. 8, 2014

Caufield, William James [BA/87] July 10, 2014

Charriere, Jeffrey L [BComm(Hons)/84, CA/87] Nov. 28, 2014

Chislett, Matthew B [BSc(CE)/81, MSc/83] Aug. 3, 2014

Cielen, Victoria Lynn [BEd/86] June 18, 2014

Curtis, Lesley Gail [BA/88] Aug. 19, 2014

Fiorentino (Signorello), Barbara [BA/86] Nov. 10, 2014

Froese, Dr. Warren George [MD/86, BSc(Med)/86] Oct. 17, 2014

Goritz, Marlene Carol [BHEcol/88] Aug. 22, 2014

Guttman, David Alan [BA/82, LLB/85] July 12, 2014

Gwynne, Paul Alexander [BFA(Hons)/84, BComm(Hons)/89] Oct. 16, 2014

Hammock, Candice L [MA/83] Nov. 1, 2014

Ilg (Smorang), Karen Heather [BA(Adv)/89] Nov. 28, 2014

Jamieson, Mark Robert [BSc(CE)/86, MSc/89] Sept. 28, 2014

Kirsh, Dr. Andrea Fern [MD/87, BSc/88] Aug. 4, 2014

Maksymowicz, Jonathon [BA/86] July 28, 2014

Masserey, Michelle Marie [BA/84, MA/88] Sept. 6, 2014

McGunigal, Randall Garth [MEd/89] Aug. 26, 2014

Murphy, Kevin George [BSc(Maj)/84] Nov. 29, 2014

Nesplak, D. Michelle [BFA/83] Sept. 20, 2014

Refvik, Isabelle G [BA/80] June 6, 2014

Regehr, Mary [MEd/82] October 2014

Sheng (Gottfred), Diane Marie [BComm(Hons)/84] July 3, 2014

Stadnyk, Anne Marie [BEd/80] Oct. 26, 2014

Symonds, L Richard [BA/80, CertEd/85] Nov. 14, 2014

Thomson, Elizabeth A [BA/80, LLB/83] Aug. 13, 2014

Wiseman, Stanley P [ExtEd/86] June 13, 2014

1990-99

Beaudoin, Dr. Carole Marie [BA(Adv)/92, MSc/95, PhD/04] June 7, 2014

Boubard, Lorraine [ExtEd/95, BA/04] Aug. 26, 2014

Bowman, Myfanwy Elizabeth [BA/91, LLB/98] Nov. 3, 2014

Muir, Marylou G [ExtEd/97] Nov. 1, 2014

O'Laney, Patrick Randolph [BA/93, LLB/96] Oct. 4, 2014

Rigaux, M. Sandra J [PB CertEd/92] July 15, 2014

Stark, Lisa Ann [BA/92, BMR OT/95] Sept. 12, 2014

Toews, Darryl David [BA/92, BEd/97] Sept. 25, 2014

Turner, Leslie Wayne [BSW/94] Nov. 26, 2014

Young, Lisa Marie Irene [BFA(Hons)/95] Aug. 10, 2014

Yurechka, Cynthia [BEd/92] Aug. 22, 2014

2000-09

Green, Laurie Lynn [BSW/00] Nov. 15, 2014

Kupchik, Leanne D [ExtEd/02] Nov. 6, 2014

Mukaminega, Thacienne [BSW/01] Nov. 22, 2014

Sarrasin, Madeleine [ExtEd/07] Nov. 6, 2014

Stobbe, Michelle Linda Elizabeth [BA/09] July 1, 2014

2010-Present

Johnson, Cindy Lou Jonina [ExtEd/12] Nov. 1, 2014

CORRECTION In our fall 2014 magazine, an erroneous memorial appeared for alumnus **Robert John Michael Jaska** [BSc(Pharm)/96]; he is not deceased. We apologize for the mistake.





Vice-president (external) John Kearsey addresses guests at the Homecoming Dinner and Concert



A tour group stops to admire the iconic Administration Building on Fort Garry campus



Lee Anderson [BScHEc/63, CertEd/64, BEd/80] and husband Wayne [BSA/63, LLD/13] pose for a picture with President Barnard



Put 'er there! Bisons head coach Brian Dobie [BPE/74, CertEd/75] congratulates players at the Homecoming Football Game



Bisons football faithful and super fan Dancin' Gabe huddle up for the camera



Alumnus and Desautels Faculty of Music benefactor, Marcel Desautels [BA(LatPh)/55, LLB/59, LLM/65, LLD/99], performs with piano accompaniment from dean Edmund Dawe



Members of the 1964 class of Civil Engineering gather for a group shot



Spirit Cup mayhem at the Homecoming Football Game



This enthusiastic couple enjoyed the photo booth at the Homecoming Dinner and Concert



College of Medicine alumna Tito Daodu [BSc(Med)/I3, MD/I3] shares words of inspiration at the Homecoming Dinner and Concert

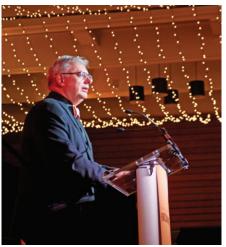
Photo galleries can be viewed at: **facebook.com/umanalumni**Photo booth pictures are available for free. Download here: **tinyurl.com/krzewj4**



Carl Stone [BA/00] at the Indigenous Achievement Celebration



Alumni reconnect at the President's Luncheon



President Barnard welcomes guests at the Homecoming Dinner and Concert



Bisons defensive lineman and Faculty of Nursing student Lauren Kroeker guides a tour of Investors Group Field



Future Bison Evan Proulx



Student ambassadors help get the word out about this year's Homecoming activities



Deanna Hansen [BSc/90], founder and CEO of Fluid Isometrics, speaks at the Alumni Leaders and You event



Steve Kirby and Quincy Davis of the Desautels Faculty of Music entertain the crowd at the Homecoming Dinner and Concert

MARK YOUR CALENDARS!
HOMECOMING 2015
SEPT. 28 - OCT. 4, 2015

BRIAN BOWMAN MAYOR OF THE CITY OF WINNIPEG

The weekend before I was sworn in as Mayor, I met with soon-to-be city council colleagues in a conference room on the fifth floor of the Inn at the Forks. Looking out at our prairie skyline, it struck me that Winnipeggers have transformed that entire landscape over the past decade.



The spectacular view of the Canadian Museum for Human Rights, the Esplanade Riel, the Variety Heritage Children's Park, made me ask myself, "What is Winnipeg going to look like in 10 or 20 years from now?"

Our City has made great strides in the right direction through developments including the Canadian Museum for Human Rights, Assiniboine Park's Journey to Churchill exhibit, the new James Richardson Winnipeg International Airport, Investors Group Field, and the return of the NHL, but our best days as a community have yet to come.

I am committed to growing Winnipeg to a city of one million people strong, and while I'm focused on us getting there, I think what's more important is how we get there.

A lot of what I've learned about working as a community stems from my days at the University of Manitoba. I earned my undergrad degree through St. John's College and benefited greatly from the tight-knit relationships it fostered between students and their faculty. In knowing one another, we were able to better work together towards shared and individual goals; something I now apply to my role as Mayor.

We need a city hall that works—one with greater openness, transparency and accountability than we have seen so far. We need to build stronger, safer neighbourhoods to attract more residents and encourage economic growth. But most importantly, we need to cultivate political leadership that is focused on having a growing, thriving, more modern Winnipeg.

I envision a vibrant Winnipeg as a national and international destination for business, investment, and new residents.

After four years, I envision a city that functions better and has greater pride and confidence in itself.

The most successful cities around the world, like New York, Paris and London, do a good job of celebrating themselves. And that's a big part of what grabs our attention internationally! But Winnipeg is not New York, or Paris—and that's okay. I want our city to be Winnipeg, and I want Winnipeg to be the best it can absolutely be. We're at the heart of the nation, and it's time we better celebrate our rich and storied history and accomplishments among ourselves, and with the nation and the world.

When I was Alumni Association president at the U of M in 2007, I met with alumni locally and abroad, sharing in the celebration of our alma mater. My takeaway from this experience, beyond the awe of meeting some truly extraordinary people, was that it's both acceptable and necessary to take pride in something, even when it's often our inclination to be modest. The U of M, Winnipeg and Manitoba—these are communities of experience that shape the world for the better, at home and abroad. We all contribute to this and it is truly cause for celebration.

I have an ambitious mandate for the City and I'm going to push myself, City Hall, and the community to be more—because we can.

We are going to work hard each and every day to communicate to our citizens, and to the world, about the things we cherish about our city. And we are going to work diligently to deliver tangible results.

You can help by getting engaged in your community by making donations to community organizations and through supporting community efforts. If you have already been doing this—thank you!

U of M alumni have an important role to play, too.

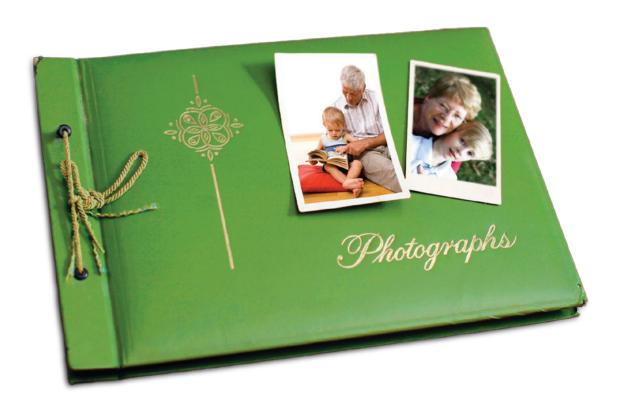
Post-secondary institutions contribute so much to Winnipeg's development through bringing in research money and brainpower, and the U of M has to be successful in order for Winnipeg to be successful. And as U of M alumni, we need to continue fostering the next generation of bright young men and women. I recently returned to campus and gave a lecture to David Asper's law class. I couldn't have done that were it not for the lessons I learned at the U of M and the confidence my experiences there instilled in me going forward. That engagement—past and present—holds incredible power.

If we're going to reach one million people strong, we're only going to do it through increased collaboration and support for post-secondary institutions like the U of M—we need alumni who have benefited from their university to step up and find ways to support their alma mater.

I believe in Winnipeg. And I believe our best days have yet to come if we work together.

Are you ready to do your part? Because I am.

Leave behind great memories, and a little extra



A lifetime of happy memories is the best legacy you can leave your family. Don't let worries about money get in the way. With Guaranteed Issue Life Insurance you can take care of your final expenses, pay off debts or leave something for your children and grandchildren. Guaranteed Issue Life Insurance is designed for alumni members aged 50+. No medical exam is required to apply and your acceptance is guaranteed.

Guaranteed Issue Life Insurance

For a personalized quotation or to apply online, please visit us at: solutionsinsurance.com/uofm 1.800.266.5667







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AWARDS 2015

CELEBRATION OF EXCELLENCE

Join us for an extraordinary evening celebrating the achievements of our 2015 Distinguished Alumni Award recipients.

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- // Professional Achievement
- **// Community Service**
- // Service to the University of Manitoba
- // Outstanding Young Alumni

Tuesday, May 12, 2015

Awards Celebration: 7:30 p.m. | Reception: 9 p.m. Winnipeg Art Gallery | Tickets \$75

To purchase tickets, learn more about the awards, or watch video highlights of the 2014 Celebration of Excellence, visit umanitoba.ca/distinguishedalumni

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