Sasakawa Nursing Fellow 2024 Progress Report

Mari Kaneoka

Master of Science (M.Sc.) Family Medicine, Global Health
McGill University

March 14, 2025

1. Background and academic objectives

I am currently studying for a Master of Science (M.Sc.) in Family Medicine (Global Health concentration) at McGill University. This program provides an opportunity to develop the knowledge and skills to engage in global health and support primary healthcare worldwide. The program focuses on supporting health equity, respectful engagement with communities, and human-cantered primary care. Topic in this field include infectious and chronic diseases, maternal and child health, aging and care for older people, HIV, community-based care, and Indigenous health.

Canada has developed a system to address the health issues of people from diverse backgrounds, supported by its immigration policy and framework for multiculturalism. In particular, it has taken a progressive approach to family medicine and digital health. Japan can learn many things from Canadian practices. As Japan faces a declining birthrate and aging population, it is gradually becoming a multicultural society through increased immigration. Studying Canadian practices will help me how Japan's healthcare system can be diversified and improved.

The COVID-19 pandemic has made me keenly aware that public health issues in Japan are not limited to domestic problems but are closely linked to global health. Beyond infectious disease epidemics, issues such as climate change, migrant and refugee health, and aging populations now influence each other across national borders. As a public health nurse in Japan, I was involved in a wide range of health promotion activities, before transitioning to international cooperation and working in Mongolia, Myanmar, and Turkmenistan. Through this experience, I realized that the global health crises can occur at any time and that Japan's health security depends on addressing these issues. Japan has advanced medical technology, a strong scientific foundation, and a universal health insurance system. Through my study abroad, I aim to explore how Japan can increase its presence in global health by utilizing these strengths.

Through this course, I will develop both global and local perspectives, gain research skills in primary care and public health, and study the latest approaches to health issues and policy proposals in Canada. Ultimately, I aim to apply this knowledge to address a wide range of public health challenges in Japan.

2. Reflections on my first year of the McGill University program
1) Understanding and practising participatory research methods

In the participatory research course, I learned how researchers and local communities collaborate as equal partners to co-create knowledge. I realized that, unlike in traditional research methods, the effectiveness of research is improved by the active involvement of stakeholders, including patients, medical professionals, policymakers, and local communities. As part of the course, I applied participatory research methods to develop a research proposal for

mobile health apps, including a menstrual tracking app, with the aim of improving access to reproductive healthcare and enhancing self-care care among cultural minority women. In particular, analysing how to approach issues using fuzzy cognitive mapping and learning how to visualize cultural barriers to healthcare helped me develop a practical understanding of participatory research. This learning process reinforced the importance of involving community participants and stakeholders from the outset to ensure that research outcomes are not only informative for researchers but also beneficial to the general public.

2) Acquiring skills in qualitative and quantitative research methods

In the course on qualitative research methods, I learned concepts and methodologies while clarifying the philosophical position of researchers (ontology and epistemology) and deepening my understanding of ethical considerations in the research process. To prepare for future research, I practised qualitative data collection methods, particularly focus groups interview, and considered how to analyse and share research results in an integrated manner. This experience helped me build a foundation for conducting independent research.

As part of my fieldwork, I observed mother–infant interactions in a Montreal market and analysed the impact of smartphone use on parental mental health and child-rearing. This experience highlighted the importance of researchers' observational skills and record-keeping while deepening my understanding of key considerations when collecting data.

In the epidemiology and data analysis course in primary care, I studied epidemiological concepts, advanced statistical analysis, and data processing and analysis using R statistical software. In particular, I learned how to evaluate the strengths and weaknesses of epidemiological research designs and apply them to my research. Furthermore, through case studies, I conducted statistical analysis on real research data, developing the ability to interpret results while considering the effects of causal inference and confounding bias. These skills will be useful for conducting health-related research, identifying key issues, and formulating policies in future.

3) Understanding of Indigenous perspectives and decolonizing health research

In North America, there is a movement to decolonize health-related research in response to reflection on historical injustices against Indigenous peoples. During the semester, I learned about the persistence of colonialism in society and explored culturally safe alternatives to Indigenous health and wellness. By planning a research project based on advice from an Indigenous community in Canada, I gained a deeper understanding of the importance of mutual respect and equal partnership in research.

As a key theme in Indigenous health, I developed a research proposal for a social program supporting the mental health of Indigenous youth, which I presented to experts and Indigenous

community representatives. Collaborating with other students, I examined culturally sensitive ways of providing spiritual healing by combining land camps and sharing circles rooted in Indigenous culture. I learned the importance of respecting the autonomy of Indigenous peoples and upholding research ethics, providing me with a useful perspective for decolonizing my own perspectives. Through this experience, I recognized the importance of questioning social norms, reflecting on one's own biases, and prioritizing the values of the target community when conducting research and designing projects.

4) Understanding the concepts of global health and building knowledge for its practice

In the second semester, I examined the main issues in global health and learned about the impact of historical colonialism and Western-centrism on global health and the initiatives needed to address future challenges. These include promoting global equity, integrating planetary health science to address climate change, applying systems thinking and complexity theory, considering intersectionality, and understanding the effects of polycrises on health systems, particularly in the aftermath of the COVID-19 pandemic. I also considered cultural safety and ethical partnerships in depth and explored ways to incorporate a decolonization perspective into global health research. In particular, through critical reflection on the initiatives of global health organizations such as the United Nations, I deepened my understanding of the structural inequities of international health policy and developed a perspective focused on pursuing more equitable healthcare. I also examined the three dimensions of universal health coverage (extent of coverage, quality of services, and financial risk protection) and considered the challenges involved in building a sustainable healthcare system.

Before studying abroad, I had limited opportunities to reflect on the deep connection between health and politics. However, through my studies, I examined how global political power structures affect health cooperation, which helped me understand the importance of questioning and challenging existing social structures. What struck me most was that the field of global health was founded on an unfair world and remains entangled with the legacies of colonialism, tropical medicine, and mission medicine affected by saviourism. The world can be divided into the Global North, made up of developed countries, and the Global South, consisting of developing countries, with the prosperity of the former often at the expense of the marginalized people in the latter. In global health, institutions and researchers from the Global North still have overwhelming control, with a particularly notable gap between the Global North and the Global South in the distribution of funding, academic publishing, and educational opportunities. The Global North's near-monopoly on resources is hindering the development of local leadership.

Reflecting on this inequality and the importance of allyship has been one of the most valuable aspects of a truly beneficial opportunity during my study in Canada. I was particularly struck by

the idea that, as allies, researchers and institutions in the Global North should act not as mere supporters but as true collaborators to empower Southern communities. For example, it is necessary to diversify international conferences and editorial boards of academic journals, fund projects led by local researchers in the South, and move away from a "saviorism" approach. Structural change will take time, but global health can ultimately achieve its original mission of reducing health disparities. I would like to use these lessons learned to explore equitable and sustainable healthcare approaches in my own future work.

3. Objectives for the second academic year (August 2025 to August 2026)

My goal for the second academic year is to conduct research on the specific field of digital healthcare. Montreal, which is a centre for IT technology, has many organizations that are actively engaged in innovation in digital technology. During my research in Montreal, I became interested in digital healthcare. I am particularly interested in how the use of smartphones by parents and technoference (the phenomenon of reduced interaction between children and parents due to parental use of digital devices) affect the quality of child-rearing, the mental health of parents, family dynamics, and child development.

In today's digital society, smartphones can improve access to health information for parents, but excessive use among parents can negatively impact parent–child relationships. Using data from a large-scale cohort study conducted in Quebec, I aim to clarify how parents' use of digital devices affects child-rearing and child development. Based on the results of this research, I hope to gain knowledge that will contribute to child-rearing support policies and health promotion measures. By proposing ways to improve the quality of parent–child relationships and the child-rearing environment while making more effective use of digital devices, I hope to strengthen child-rearing support in Japan in the near future.

I aim to develop the expertise to implement policy proposals based on scientific evidence by exploring the relationship between child-rearing and digital technology from a global perspective.

4. Aspects of living

1) Life at McGill University

McGill University is located in Montreal, Quebec, a French-speaking region of Canada, and offers a rich international environment. According to the latest figures, almost 40,000 students are enrolled at the university, including 27,196 undergraduates, 10,147 graduate students, and 1,461 postdoctoral researchers.[1] Approximately 30% of students are international,[2] primarily from the USA and France, with many students from India and Africa.[2]

The students at McGill University are from diverse backgrounds, with about half (48%) from Quebec, 22% from other Canadian provinces, and 30% from abroad[1]. The composition of native languages is also diverse: 48% of students are native English speakers, 20% speak French, and

32% speak other languages.[1] These differences in background promote cross-cultural exchange and enrich the learning environment.

2) Campus and urban environment

McGill University has two main campuses. The downtown campus, located in the heart of Montreal, hosts most undergraduate programs. The lively urban atmosphere and historic McGill University buildings combine to create a charming atmosphere. The Macdonald Campus in Sainte-Anne-de-Bellevue focuses on research in agriculture and environmental science. The Faculty of Family Medicine, where I am enrolled, is located in Côte-des-Neiges, a neighbourhood that is home to many immigrants from various cultural backgrounds and a short distance from the downtown campus.

Montreal has a well-developed public transport system, making it easy to travel around by subway or bus. Near my home is Jean-Talon Market, a large market that offers fresh fruit and vegetables all year round. Another characteristic of Montreal is its bilingual environment. In general, there are more French speakers in the west and more English speakers in the east, but both languages are used in everyday life. However, as French is the official language of Quebec, it is often given priority in public services and transportation. Therefore, a knowledge of French makes day-to-day living much smoother. Living in a bilingual city can be a linguistic challenge, but it is also a stimulating experience, providing me with opportunities to learn about diverse values.

Montreal is a relatively safe city. However, the crime rate is high in some areas, so caution is needed, especially at night. For example, the areas around Berri-UQAM and Saint-Michel metro stations are sometimes considered unsafe. It is therefore advisable to follow local advice in these areas.

Acknowledgements

References

1. McGill University [Internet]. Quick Facts. 2025. Available from:
    https://www.mcgill.ca/about/quickfacts

2. McGill University, International Student Services [Internet]. McGill International Student Body by Citizenship 2024-2025. 2025. Available from: https://www.mcgill.ca/internationalstudents/