FRESH IDEAS.
BIG INNOVATION.

Our WCHRI supported research leaders are thinking creatively to deliver innovative results for women and children’s health.

OUR VISION
To harness the power of research innovation for a healthy future for children and women.

OUR MISSION
WCHRI will foster the brightest minds to discover, innovate and ultimately transform the health of children and women through supporting research excellence.
BY THE NUMBERS 2018-19

- **38** Active Partnerships
- **372** New REDCap Project Requests
- **130%** Increase in Facebook Followers
- **78** Educational Workshop Events
- **80** Studies Supported by Our Expert Research Staff
- **329** Active Grants
- **37** Clinical Trials Supporting
All research starts with a fresh idea.

An uncharted area that hasn’t been explored, a new approach to a challenging problem, an “ah-ha” moment that leads to progress; fresh ideas lead to big innovations.

Each day, through progress that continues to build, our world-class researchers are growing a bigger base of knowledge—knowledge that shapes the health of future generations. The stories that follow provide a glimpse into these innovative approaches to health.

These innovations couldn’t happen without the support of our Foundations, the Stollery Children’s Hospital Foundation and the Royal Alexandra Hospital Foundation; and our partners at Alberta Health Services and the University of Alberta, including our home faculty, the Faculty of Medicine & Dentistry. Their unwavering dedication has pushed the progress of healthcare in Alberta and made a meaningful difference worldwide.

This past year was truly remarkable, and the milestones we share in the coming pages demonstrate the impact of our partnerships:

- With an additional $5 million commitment over five years from the Stollery Children’s Hospital Foundation, we are proud to recognize seven star researchers chosen to be Distinguished Researchers within the Stollery Science Lab.

- Our Postdoctoral Fellowship Program was launched—furthering our commitment to train the next generation of researchers within women’s and children’s health research.

- The Lois Hole Hospital Women’s Research Centre was officially unveiled in June; made possible due to the partnership with the Lois Hole Hospital for Women, the Royal Alexandra Hospital Foundation, the University of Alberta and Alberta Health Services. This research space with a focus on women’s health at all ages and stages, plays a pivotal role in directly embedding research into clinical care.

“Big” innovations in health are happening each day—through original thought and the steadfast commitment of researchers, organizations and community members who believe in a better world for women and children.

Sandra Davidge, PhD
Executive Director,
Women and Children’s Health Research Institute
Taking research to the line

Generations of kids stand to benefit when we take research to the line.

Whether it’s breaking down the complexity of kidney disease in children, improving earlier detection of autism, supporting the mental health of teens as they transition into adult care, reducing and preventing diabetes in Indigenous children, or harnessing the sun to prevent childhood deaths in developing countries—it all leads to a meaningful difference in the lives of kids and their families from backyards across Western Canada.

The Stollery Children’s Hospital Foundation is proud to be the primary funder of the Women and Children’s Health Research Institute. Since 2006, we’ve contributed $83 million toward children’s health research at the University of Alberta; $4 million of which has helped to fund 85 pediatric mental health research projects, including computer-based intervention for adolescent alcohol misuse, and music therapy to reduce pain and anxiety in cases of childhood trauma.

In 2018-19, our donors helped to fund 309 research grants and supported 400 investigators and 60 trainees. Our most recent investment of $5 million over five years to establish the Stollery Science Lab Distinguished Researchers program, which funds and recognizes award-winning pediatric researchers, will vastly improve the outcomes of children’s health for generations to come.

Research matters. Our donors tell us that it does. Our skilled researchers show us that it does. And our patients and their families know that it does because they are reaping the full benefits.

On behalf of all of us at the Foundation, congratulations to everyone at WCHRI on another exceptional year of innovation. We can’t wait for more amazing discoveries in the year ahead.

Sincerely,

Mike House, MBA, ICD.D
President and CEO
Stollery Children’s Hospital Foundation
To the esteemed researchers in women’s health and the donors who make it possible:

Together we are closing the gap in women’s health research. Donors to the Royal Alexandra Hospital Foundation understand that outstanding clinical care is shaped by ongoing research and that research today means improved health care for women tomorrow.

Great advancements in women’s health are made possible through partnerships like the one formed by our foundation with the Women and Children’s Health Research Institute. In fact, more than 400 women’s and maternal health projects have been funded since 2006 by our foundation through donor support.

June of 2018 saw the opening of the Lois Hole Hospital Women’s Research Centre. This long awaited next step in our hospital’s research journey provides a space where clinicians can work hand-in-hand with researchers on leading-edge medicines and procedures to provide the best possible patient outcomes.

With 4,000 square feet of interview and intervention rooms, a pharmacy, and a state-of-the-art meeting room, this integrated research facility, a Canadian first located within a tertiary care hospital, will impact women at all stages of their lives. Current studies span reproductive health, mental health and stress disorders, ovarian/gynecologic cancer and mature women’s health.

With 40 active women’s health studies currently underway at the Lois Hole Hospital for Women, advancements in women’s health are on the horizon. Currently, Margie Davenport and Craig Steinback are studying sympathetic and cardiovascular regulation in hypertensive pregnancies, and Sue Ross and Nese Yuksel are developing a walking exercise program for women in menopause transition. Just two examples of studies that span the generations.

I wish to congratulate all of the WCHRI researchers on another incredible year of innovation and growth. And a heartfelt thank you to all donors who have invested to make research possible. When women thrive, so do their families and communities, making a brighter future for all.

Sincerely,

Andrew Otway, MBA, CFRE
President and CEO
Royal Alexandra Hospital Foundation
The University of Alberta is honoured to be the home of the Women and Children’s Health Research Institute and its incredible work advancing children’s and women’s health within our community.

The passion, knowledge and expertise of WCHRI researchers across the University greatly improves children’s and women’s health outcomes everywhere. The institution is proud to support such a visionary institute, dedicated to big ideas and innovation.

On behalf of the University of Alberta, I would also like to thank our partners, the Stollery Children’s Hospital Foundation, for its $5 million gift for the Stollery Science Lab Distinguished Researchers program, and the Lois Hole Hospital for Women for its support in opening the Lois Hole Hospital Women’s Research Centre. This kind of generosity enables WCHRI to fulfil its mission of supporting research excellence, and mirrors the University of Alberta’s goal of developing new ideas and innovations, and educating the next generation of researchers.

Congratulations to WCHRI on another huge year and we all look forward to seeing what you will accomplish in the future.

Matthias Ruth, PhD
Vice-President (Research)
Professor of Economics
University of Alberta
On behalf of Alberta Health Services, Stollery Children’s Hospital, I wish to congratulate the Women and Children’s Health Research Institute on another extraordinary year of success. WCHRI epitomizes the power of partnerships, as the institute has worked in collaboration with Alberta Health Services, the University of Alberta, the Stollery Children’s Hospital Foundation and the Royal Alexandra Hospital Foundation to improve the lives of many women and children.

WCHRI has many reasons to be proud. I deeply appreciate and value the persistent work to continually drive change through innovation and research in order for us to build a health care system that delivers the highest quality of care that improves medical outcomes for the patients and families we see. I look forward to fresh new ideas and big innovations over the next year and beyond.

Together, as solid partners, we can create a brighter, stronger, and healthier future for women and children, not only in our province but worldwide.

Christine Westerlund, RN, BScN, MSc
Senior Operating Officer
Stollery Children’s Hospital

Investments in health research help us ensure our staff and physicians can access the resources and information they need to deliver the best possible care for our patients.

Last year, we celebrated the opening of the Lois Hole Hospital Women’s Research Centre, which integrates research directly into efforts at the hospital and allows health care professionals from multiple disciplines to collaborate and learn from each other.

Women are living healthier lives because of the advances made through our combined efforts. Together, we will continue to make a positive difference in the lives of patients and their loved ones, as well as staff and physicians.

In a research integrated hospital, like the Lois Hole Hospital for Women, the highest level of care is a reality thanks to our valued partnership with WCHRI.

Janie Clink, RN, BScN
Site Executive Director
Royal Alexandra Hospital
OUR GOVERNING BODIES

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WCHRI Theme Lead for Children’s Health and Well-Being

Sue Ross  
Cavarzan Chair in Mature Women’s Health Research  
WCHRI Theme Lead for Lifelong Women’s Health

Shannon Scott  
Professor,  
Faculty of Nursing, U of A

Lonnie Zwaigenbaum  
Professor, Pediatrics,  
Faculty of Medicine & Dentistry, U of A

THANK YOU!
Todd Alexander wants to develop better treatments for his young patients with kidney disease.

Lisa Hartling and Shannon Scott are helping parents to be more involved in their children’s healthcare.

Michael Hawkes is harnessing the sun’s power to reduce childhood deaths in the developing world.
In life, there are all kinds of stars. Hockey. Football. TV. But few stand out more than the seven star researchers chosen to be Distinguished Researchers within the Stollery Science Lab.

This innovative child health research program is made possible thanks to a $5 million donation over five years from the Stollery Children’s Hospital Foundation, and a shared partnership between the Foundation, WCHRI and the Stollery Children’s Hospital.

These passionate scientists are experts in their fields and are ready to take their projects to the next level.

“As a mother of two young children,” says Kate Storey, one of the successful Stollery Science Lab Distinguished Researchers, “I am invested in creating environments where all children have equal opportunities to grow and thrive, and where every child knows their voice matters.”

Through research and advocacy, the program will help address difficulties facing children and youth as they work through health challenges.

These seven children’s health researchers share their findings with parents, health providers, educators and others in the community, while also pushing for the next breakthroughs in care and treatment.

Andrew Mackie is working to make the transition from pediatric to adult care less stressful for patients and families.

Kate Storey is leading a peer-led mentorship program to empower Indigenous teens and improve their health and wellness.

Lonnie Zwaigenbaum is developing a screening tool that can detect Autism Spectrum Disorder in children as young as six months old.
Introducing the Lois Hole Hospital Women’s Research Centre
The Lois Hole Hospital Women’s Research Centre began as a 4,000-square-foot shell located at the far end of the ground floor at the Lois Hole Hospital for Women. Constructed alongside four outpatient clinics in the women’s hospital in 2010, the space spent the first seven years of its life waiting. Then it began to transform.

The massive cavity was given floors and a ceiling, sectioned off into interview rooms, exam rooms and lab space, and was outfitted with blood draw chairs and ultrasound machines. In 2018, the space opened as the Lois Hole Hospital Women’s Research Centre.

A partnership between the Royal Alexandra Hospital Foundation, Women and Children’s Health Research Institute, the University of Alberta and Alberta Health Services, the centre was created to provide a designated space for women’s health research within the hospital environment.

“We’re trying to reduce the barriers for people to participate in research,” says Lorin Charlton, WCHRI’s research officer and dedicated Lois Hole Hospital for Women liaison. Charlton is a well-known face around the research centre; committed to nurturing collaborations and facilitating research activities.

With a localized centre, patients can easily participate in studies right down the hall from clinics they visit, and researchers no longer have to haul expensive equipment back and forth from the women’s hospital to their labs at the University.

“This clinical research space is going to help new collaborations come together by acting as a catalyst and bringing researchers and clinicians from different disciplines together. We can be a driving force in women’s health research and this is going to help us do it.”

Sue Ross
Professor and Cavarzan Chair in Mature Women's Health Research, Lois Hole Hospital for Women

Ross will be conducting research within the centre.
By making women’s research more accessible for everyone involved, the centre aims to close the timeworn chasm between traditional research and women’s health outcomes. Historically, most research has avoided conducting trials on women since their hormonal systems are so complicated. But, Charlton notes, that’s exactly why it’s necessary. “Nothing changes without research,” she says. And with a space for clinicians, researchers and patients to collaborate, the rocks are already beginning to shift.

The centre is currently host to several women-specific research studies looking at topics like cardiovascular function during pregnancy, exercise in menopause transition and perimenopausal depression, with more about to begin. In the short year since the walls went up, the research centre has not only become a home for women’s health studies, but has stood as a totem for what is to come.

“Since it’s opened, there’s a lot of interest,” says Charlton. “People are just amazed that [this centre] exists.”

With the support of a sturdy partnership beneath it, this space transformed from a barren shell into an active research centre devoted to improving health outcomes for women. And it’s through the same collaboration and dedication that the landscape of women’s health research is about to blossom.
LET’S GET PHYSICAL

Encouraging more activity for children under five and minimizing their screen time can have long-lasting health benefits.
When Valerie Carson was growing up, physical activity was a huge part of her childhood—being outside in the snow, bike riding and lots of unstructured play.

That love of playing outdoors laid the groundwork for her career as a researcher, with much of her work now focused on physical activity and sedentary behaviour among children under five years of age.

Physical activity in the very young has been understudied and Carson wanted to fill that research gap. “People just generally assume that young children are active and that the research focus should be on older children and adolescents,” explains Carson. “But in fact, young children might not be as active as we think they are, especially with screens becoming a major part of their lives.”

While developing the Canadian 24-Hour Movement Guidelines for the Early Years, Carson and other researchers found that only 13 per cent of preschoolers in Canada met the guidelines, which provide recommendations for physical activity, screen time, and sleep.

Regular physical activity and minimal screen time is crucial, even in the very young. “Behaviour patterns formed at this very young age can continue over time. If a child is inactive at four, they are much more likely to be inactive when they are eight and 15. If we can start them on a healthy trajectory early in life it can have long-lasting effects.”

Inactivity is a risk factor for chronic diseases that affect many Canadians, such as cardiovascular disease, cancer and Type 2 diabetes. These diseases, says Carson, don’t typically present themselves until adulthood, but “we know there is a progression.” Unhealthy behaviours, even at a young age, can contribute to the later development of chronic diseases, she explains. “So primary prevention is a big part of what we are doing, in addition to trying to stimulate children’s social, emotional and mental well-being.”
She hopes her research findings will lead to guideline updates and effective health promotion programs and interventions for families and child care settings, within five to 10 years.

Carson has applied her research findings to her own life—modeling the active lifestyle she enjoyed as a child to her two-and-a-half year old daughter. “It’s been a goal of my husband and I to ensure that we are meeting the guidelines. Knowing the research, I am always trying to get us outside.”

1 hour screen time limit for toddlers and preschoolers over two years old

12% of Edmonton toddlers meet the Canadian 24-Hour Movement Guidelines for the Early Years

15% of Edmonton toddlers meet screen time recommendations

Supported by the Stollery Children’s Hospital Foundation through WCHRI
TURNING IDEAS INTO INNOVATION

Aisha Bruce is a pediatric hematologist working with children and their families affected by sickle cell disease.

Research question

How can clinical practices be improved for sickle cell disease patients and their families?

Seed grant

Understanding how immigrant families experience their child’s sickle cell disease in Western medical systems.

Results

Bruce and her clinic staff were able to better understand the barriers their patients’ families faced and adapt their practice to help patients and their families move past the stigma associated with sickle cell disease and more toward a better quality of life.

Five handouts were developed in areas identified by the families as lacking for the Pediatric Hematology programs in Edmonton and Calgary.

Alberta Health Services is hiring a part-time psychologist for the clinic, who would see ~120 families each year.

WHAT IS SICKLE CELL DISEASE?

Sickle cell disease is an inherited disorder that causes hemoglobin, which carries oxygen in red blood cells, to change from a normal “doughnut” shape to a crescent shape. Sickle-shaped red blood cells can cause a buildup in blood vessels, which may lead to sudden severe pain attacks, strokes, breathing problems and organ damage. Sickle cell disease takes a heavy physical and emotional toll on the patients and their families.
The only curative therapy for sickle cell disease is a bone marrow transplant, but what’s the quality of life for teens after bone marrow transplant and is the procedure a worthwhile endeavour?

Results

The discussions, decisions and process of the bone marrow transplant weighed heavily on the teens. A brochure was developed to help guide the teens and their families through the transplant year.

Innovation grant

Understanding adolescents’ paths through bone marrow transplant.

Additional questions raised by results

The only curative therapy for sickle cell disease is a bone marrow transplant, but what’s the quality of life for teens after bone marrow transplant and is the procedure a worthwhile endeavour?
Amit Bhavsar seeks answers to why chemotherapy toxicities, like loss of hearing, affect some patients and how this can be prevented.
Medical science has made huge progress in the treatment of childhood cancer, with the five-year survival rate now almost 80 per cent. While that is cause for celebration, this achievement sometimes comes with a terrible downside.

Many childhood cancer survivors suffer from serious health complications, ranging from deafness to cardiac issues, due to toxicities associated with chemotherapy. Amit Bhavsar is leading a team working to understand the biological processes that result in these adverse drug reactions. The hope is that someday, they will not only be able to predict which patients will be affected by drug reactions, but also develop therapies to prevent them from occurring.

“More kids are surviving cancer and that’s a great thing,” says Bhavsar. But researchers need to understand treatment-related toxicities and work toward preventing them. “This has been a real gap in our knowledge.”

One of the chemotherapies his team is studying is cisplatin, widely prescribed to children with brain, liver and bone cancer. Half the children treated with cisplatin lose their hearing permanently. Hearing loss in the youngest patients affects development of speech, language and social skills. “Imagine going through this horrendous ordeal, surviving cancer, and at the end of it, losing your hearing permanently,” explains Bhavsar.

Doxorubicin, another chemotherapy drug, is an effective treatment for blood cancers in children. But up to 20 per cent of young patients taking it suffer negative impacts on their hearts, sometimes including heart failure, either during or after treatment or later in their lives.

While adults can suffer serious side effects from anti-cancer drugs, treatment regimens in children differ from adults and children’s systems are still developing, making them more vulnerable to toxicities than adults, says Bhavsar.

If toxicities show up during treatment, oncologists have little choice now other than stopping or reducing dosages, which can affect the chemotherapy’s effectiveness. Bhavsar hopes his research will lead
to co-therapies that would target and prevent these drug reactions.

Even with advances in genomics, this won’t be achieved overnight. “These things take a long time. But what I hope we’ve done in five years is demonstrate success so that we have the confidence of institutions and funding agencies that really see strength in our research program.”

It’s not only anti-cancer drugs that carry risks for children, as Bhavsar has experienced in his own family. His three boys were all born prematurely and began their lives in a neonatal intensive care unit, receiving medications with known side effects. He and his wife know what it’s like to worry about drug toxicities. Bhavsar hopes his ground-breaking research will eventually have a wider impact beyond oncology.

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**CHEMOTHERAPY TOXICITIES RESULT IN**

- **40-60%** of children developing permanent, bilateral hearing loss
- **57%** of children developing heart valve abnormalities
- **6%** of children developing heart disease

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Supported by the Stollery Children’s Hospital Foundation through WCHRI
THERE’S NO PLACE LIKE HOME

Melissa Tremblay is working to enhance mental health services for young parents in a subsidized housing project.
Raising a baby isn’t easy and many new parents—especially teen parents—face mental health challenges. The pressure of being teen parents means they are at even higher risk for post-partum and general clinical depression. And because they are more often affected by trauma and family violence, teen parents are at risk for post-traumatic stress disorder (PTSD).

Melissa Tremblay is studying how to enhance mental health services for these teen parents. It’s crucial because when parents are affected by depression or PTSD, the well-being of their children is also impacted.

Tremblay evaluated how teen parents and their children benefit from an innovative subsidized housing and support program in Edmonton, called Supportive Families. It is run by Brentwood Community Development Group, with support from workers at the Terra Centre, an organization helping pregnant and parenting teens.

About 65 parents have taken part since the program began in 2014, with 70 per cent identifying as Indigenous. Around 90 per cent of the teen parents in the study are mothers and 75 per cent are single.

“We had some in-depth group discussions with the parents about what they need to raise their kids in healthy ways,” says Tremblay. “What are they lacking in terms of social support? One of the areas that really came out was mental health support.”

In a new study, Tremblay will examine how to best provide effective clinical mental health services to teen parents and the barriers that will need to be overcome to ensure they get timely help that encourages them to keep coming back.

Building rapport with the teen mothers in her studies has not been easy since many feel stigmatized and have had negative experiences with service providers and other professionals. But Tremblay, who is Métis, has some advantages that help her connect. She is the mother of two very young children herself.

In her initial study, she brought her first baby to group meetings from the time he was just two weeks old. “It shifted the power a little bit. I was no longer this outside researcher coming in to shed light on issues. This was my first child and the teen parents were able to tell me what to expect and I would ask them questions. They had more experience than I did.”

Moreover, Tremblay is inspired by her own parents, who had their first two children as teenagers and faced a lot of criticism. Her parents are still together, with five kids.
Tremblay hopes her studies will reach a broader audience than academia. “If we are able to come up with some meaningful findings in terms of what teen parents need, we can take those to people who can influence policy and advocate for change.”

_Tremblay conducted this study along with her PhD supervisor Rebecca Gokiert and other researchers at the Community-University Partnership for the Study of Children, Youth and Families (CUP)._
# Statement of Operations

## For the Year Ended March 31, 2019

### Revenue

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### Expenditure

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</table>

**Spent Not Invoiced (carry-forward to next fiscal year)** (119,009)

* Includes surplus available from prior year, transfers from closed projects and other donations
Stollery Children’s Hospital Foundation: 69%
Royal Alexandra Hospital Foundation: 17%
Faculty of Medicine & Dentistry and Other: 3%
Cost Recovery: 10%
Research Platforms: 27%
Research Grants: 37%
Research Catalysts: 36%

*The revenue percentages reflect the ratio of researchers who align with child health compared to women’s health, which is approximately 4:1

*Percentages only include research categories covered by the Memorandum of Understanding.
June
Opening of the Lois Hole Hospital Women’s Research Centre.

Summer
24 undergraduate students and their projects were supported through the Summer Studentship Program.

September
Stollery Science Lab - Distinguished Researchers Presidential Announcement

September
Royal Alexandra Hospital Foundation Harvest Celebration

October
WCHRI trick-or-treat stop at the Stollery.

October
550+ researchers, students and stakeholders attended our annual Research Day.

March
Lois Hole Hospital Women’s Society Wellness Speaker Series, featuring four WCHRI women’s health researchers.
December
Stollery Children’s Hospital Foundation Snowflake Gala

January
WCHRI volunteers at the Stollery Children’s Hospital Foundation Radiothon.

January
The launch of our Postdoctoral Fellowship Program. Five outstanding researchers will be able to continue their training here in Edmonton.

January
Meghan Riddell is the newest women’s health research recruit to the Lois Hole Hospital for Women.

February
The launch of our Leaders in Research seminar series! Research leaders dedicated to creating a healthier future for women and children through research excellence are highlighted.