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What's New

DLSPH Faculty: The importance of representation on women's health outcomes

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In this Q&A, DLSPH Profs. Shaza Fadel and Camellia Zakaria discuss the importance of representation on women's health outcomes.

By Sadia Akbar and Bonnie O'Sullivan

From spearheading digital mental health research that supports caregivers to inspiring the future of women in public health and health systems through mentorship, women in public health and health systems have brought meaningful and significant changes to the care, research and policies that impact girls and women. To mark [International Women's Day](https://www.internationalwomensday.com/) [<https://www.internationalwomensday.com/>] this year, we spoke to DLSPH Profs. [Camellia Zakaria](https://ihpme.utoronto.ca/faculty-profile/zakaria-nur-camellia/) [<https://ihpme.utoronto.ca/faculty-profile/zakaria-nur-camellia/>] and [Shaza Fadel](https://www.dlsph.utoronto.ca/faculty-profile/fadel-shaza/) [<https://www.dlsph.utoronto.ca/faculty-profile/fadel-shaza/>] about the importance of representation on women's health outcomes in their fields.

Camellia Zakaria, Assistant Professor

Institute of Health Policy, Management and Evaluation (IHPME)
Public Health Sciences (PHS)

Question: What inspired you to pursue a career in public health?

Prof. Zakaria: Growing up with a sibling who has a neurodevelopmental disorder and exhibited problem behaviours, I experienced firsthand the constant vigilance required to keep him safe. The worry was always there, and I often found myself wishing for a way to monitor him without needing to always be physically present. I had the idea to build an



automated system that could help me watch over him, but I didn't know how to bring it to life. All I knew was that I needed components that could, first, recognize when he was exhibiting a problem behavior, and second, alert me so I could focus on other tasks (often my games) without the ever-present anxiety regarding his safety and getting scolded for not keeping a close eye on him.



More than a decade later, while pursuing my PhD and around the time Android Wear was launched, I saw an opportunity to turn my lived experience into something transformative by prototyping a wearable system to detect problem behaviors and notify caregivers in real time. This vision eventually led me to conduct my first user study at a special education school. I still remember the first child participant responding to the digital intervention – watching them stop the behaviour and return to class without the teacher needing to step in. In that moment, I experienced the power of innovation rooted in empathy – a feeling that still drives me today as a health researcher.

Question: Are there particular public health issues affecting women that you think are underrepresented or understudied (locally, globally, in certain communities, etc.)?

Prof. Zakaria: While my research has not focused exclusively on women, it's impossible to ignore the disproportionate burden of caregiving placed on them in many communities. Women are often expected to be primary caregivers, yet their own health – particularly mental health – is frequently overlooked. Reflecting on my first study, I noticed that all the special education teachers were women, echoing research findings on gender imbalance in caregiving roles. When I began as a student researcher, the topic of mental health itself was a challenging area to explore. But I believe we are now witnessing a shift – there is better openness, awareness, and recognition surrounding it. We've reached a point where health research can now explore complex and previously taboo topics, such as the gendered expectations that are deeply intertwined with mental health issues, with greater depth and conviction.

Question: How could you potentially improve the health of women through your career or field?

Prof. Zakaria: The two most straightforward ways in which I see I can improve women's health through my career: First, by expanding my studies to focus on women, highlighting the unique challenges they face, and fostering greater awareness of the aforementioned issues. Second, by modelling the best version of myself to inspire and empower the younger generations of women in their pursuit of healthier, more positive lives.

Shaza Fadel, Assistant Professor

Public Health Sciences (PHS)

Question: Having women represented in all sectors is important. But why do you think it is especially important to have women represented in the public health sector?

Prof. Fadel: Women are generally well-represented in public health. However, invisible workloads that economically disadvantage women and the lack of representation in leadership roles impedes progress towards gender equity.

Question: How can women and girls be encouraged to pursue education and careers in public health? Do you have any ideas on how to engage them or spark their interest?

Prof. Fadel: Dedication time for thoughtful mentorship is useful for engaging women and girls. I still seek the support of mentors as I go through challenging times but also, at unanticipated times, mentors saw opportunities to lift me so I could shine.

I feel that seeing beyond traditional academic metrics when accepting mentees is important in identifying women who are passionate and innovate within their communities. Showing mentees how our interest in public health is driven by our own principles and values – such as social justice, equity and solidarity – can inspire not only the mentee, but also remind us as mentors how we can navigate real-world challenges.



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