

Upcoming...

OKA Annual Awards

Just a reminder that the deadline for nominations for the 2010 OKA Annual Awards is March 31. If you know a fellow Kin who you believe is deserving of an award please submit a nomination form which is available on the OKA website at the following address: <https://www.oka.on.ca/awards>

Partners in Prevention Tradeshow 2010

The OKA will once again be exhibiting at the 2010 Partners in Prevention Tradeshow (formerly the IAPA Tradeshow). The tradeshow will be held over two days, May 4-5, 2010 at the International Centre (close to Pearson Airport). If you are interested in volunteering to staff the OKA booth at the tradeshow please e-mail to: info@oka.on.ca

Facebook Fanpage

Join our new Facebook fanpage and be eligible to win an 8GB Ipod, OKA golf shirts and other great OKA stuff. Every Fan is eligible to win. Contest draw will be held April 30, 2010

Introducing the 2010 Board of Directors



Pictured at the January Board Retreat held at the Millcroft Inn on January 22-24, 2010, your 2010 OKA Board of Directors (L-R)

Mike Dickin, President, Scott Chapman, Director at Large – Special Projects, Jennifer Chapman, President Elect, Fabian Rayne, Director – Membership Services, Scott Tate, Director at Large, Sabrina Francescut, Director – Government Relations, Zach Weston, Director – Public Relations, Amy Harbin, Director – Education, Wendy Lee, Director – Communications & Marketing, Erin Carter, Immediate Past President, Janice Ray, Secretary/Treasurer, Andrew Zbyrko, Director at Large

Our next issue of Kinnection will include introductions and bios for each of our Directors

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Board Members may be contacted
via the Association office at e-mail
info@oka.on.ca

Editor's Corner

Welcome to the 26th edition of Kinnection. Preparing this newsletter in the midst of the 2010 Winter Olympic Games, it was hard not to be distracted by the wonderful opportunities unfolding for Canadian athletes in Vancouver. Kinesiologists have a passion for health and fitness, therefore the strength, power, endurance and agility of these athletes was incredibly inspiring.

Closer to home are the recent accomplishments made in our field. As you are well aware, the Transitional Council of the College of Kinesiologists of Ontario is working hard to set up our professional college. This Kinnection kicks off a series of newsletters that will focus on helping Kins prepare for being part of a regulated profession. Included in this edition is a segment which thoroughly explains the meaning of being "regulated."

As we continue to educate ourselves and represent our field as professionally as possible, the future holds nothing but bright opportunities for us. I hope you find this edition thought provoking. Please feel free to contact any members of the Board if you have any questions.

Wendy Lee, C.K., FIS

Kinesiology Related Journal Abstracts

Kinesiology related journal abstracts and media coverage relating to the profession are now posted to the Facebook Fanpage and will shortly appear on the OKA website.

Ontario Kinesiology Association

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President's Message

"Kinesiologists! Wow, you guys are really gaining popularity aren't you?" This was a comment from a gentleman who I shook hands with at the 2010 Heritage Dinner, where I represented the OKA. It was in that moment I realized that all of our hard work is paying off. The public is gaining a greater recognition of what Kinesiology is and how it can help to improve one's life.

I would like to welcome the new and returning members of the 2010 OKA Board of Directors; I am excited to see so many new faces, which I believe is reflective of a membership that is becoming increasingly interested in the future of the profession of Kinesiology.

The association's year has started off very busily, with several major projects being brought towards fruition and many more just underway. Projects just about complete include: putting the final touches on the website so that it has all of the functionality we desire, changing the appearance of the Kinnection, revamping and standardizing our student presentation, redeveloping the OKA's vision, mission and key messages and updating our display materials. We are also pleased to see increased Regional Group activity and we are working towards improving the resources available to each group.

The Ontario College of Kinesiology Transitional Council is up and running and the OKA has had a presence at some of their meetings. We were also happy to welcome Conny Glenn, the President of the Transitional Council, to the OKA board retreat in January of this year. At this meeting the board expressed its desire to have a positive working relationship with the Council, and eventually the College and we discussed ways in which we can be of assistance to the Transitional Council.

Now that regulation is underway and the OKA's project of many years has moved onto its next phase, it is important that we evolve to meet the demands of our members. I am often asked (as recently as last evening), "What does the association do for me?" This is bound to be a growing question as members are faced with both College and Association fees. We began to look at this question at this year's board retreat and I feel it appropriate to provide you with some of our results:

Insurance

The OKA offers home, auto, life and extended health insurance at group rates. For many members who take advantage of this service, the insurance discount realized is often enough to pay the entire membership fee, which is currently \$298. As a certified member of the OKA, your membership fee includes professional liability insurance, which provides coverage for costs related to complaints or investigations that may arise regarding your practice as a Kinesiologist. We anticipate that this insurance will be required in order to be registered with the College and our

research indicates that the cost to purchase individual professional liability insurance policy is much higher than the entire OKA membership fee.

Public Relations

The OKA is actively involved in promoting the profession of Kinesiology to the public. Last year, we retained a public relations firm to help raise the profile of the profession. With their assistance, we have had several interviews on local television stations, print media and radio stations. We have worked to develop clear and consistent messaging about kinesiology, which was communicated to members at the 2009 AGM, and we have finally been able to provide members with an answer to that question "How are you different from a Physiotherapist?"

We are present at many career fairs and we visit lecture halls to educate university students across Ontario about what kinesiology is and what career options await them upon graduation. As a result, we are helping students to realize that kinesiology need not necessarily be a stepping stone degree to something else.

Government Relations

With regulation upon us, many important decisions will be made that will affect the practice of kinesiology. As the voice of our collective membership, the OKA will be at the table with the Transitional Council ensuring that the interests of our members are reflected in the development of the rules and regulations of the College.

In 2009 the OKA retained a Government Relations firm. This firm

has helped us to get face time with many decision makers in order for us to educate them on the potential benefits that Kinesiologists offer the healthcare, employment and insurance industries. Most recently, we had the opportunity to meet with a Senior Policy Advisor for the Ontario Minister of Health. At this meeting, we discussed the importance of including physical activity in diabetes management and illustrated how Kinesiologists can help. With the Diabetes Initiative launch right around the corner, we are hopeful that we will be included in this province wide program and we continue to have discussions with the Minister's office about our involvement. In the spring of this year, we plan to spend a day at Queen's Park. During this time we hope to convince several politicians to join us in some kinesiology-related activities, while we educate onlookers on the benefits that we offer.

Education

Continuing education is currently a requirement of renewing your membership with the Ontario Kinesiology Association and we expect that the same will be required of the College. The OKA offers many educational opportunities at discounted rates to members and we are working to strengthen this service. The OKA also holds an annual conference, which is offered at a discounted rate to members. The conference offers education, networking and social opportunities and counts for a significant number of CESP's.

Grandfathering

I have been asked many times if OKA members will be grandfathered into the College. While this decision has not yet been made by the Transitional Council, the OKA supports the grandfathering of current members and we are optimistic that this will happen. The services that I have mentioned above, and many that I have not

listed, would not be possible without you, our members. Your dues directly fund everything that we do as an association. After many years of paying dues, I am confident that my membership provides excellent value for my money and I hope that you share that opinion. That said, we are always looking for ways to improve. Should you have any questions, or should you wish to provide any feedback to myself or any member of the board, please contact the OKA office. I am looking forward to a year full of growth and opportunity for the profession of kinesiology.

Yours Sincerely,

Mike Dickin, CK, President

New OKA Tradeshow Banners

The OKA has purchased new pull-up banners to use at tradeshow and events that we attend throughout the year. This year we have also ordered additional banners for the Regional Groups to use at their events.



Training for Improved Bone Density in Adults

Ed McNeely

Osteoporosis, defined as bone mineral density (BMD) more than 2.5 standard deviations below the young adult mean value (14), is a growing health problem for both men and women. In developed and developing countries the incidence of osteoporosis is increasing at a rate faster than what would be predicted by the aging of the population alone (15). In the U.S. it has been estimated that by 2025 the number of hip fractures attributed to osteoporosis will double to nearly 2.6 million with a greater percentage increase in men than in women (12).

Epidemiological evidence suggests that genetic factors are the most important cause of osteoporosis (20) and can account for as much as 80% of the variability in bone density in the population (6). However, a variety of environmental factors including: negative energy balance, low calcium intake, lack of fruit and vegetable consumption, low body mass index, strength, and hormone levels (13,22,9,7,23), may influence the ability to develop or maintain bone density.

For middle aged and older adults the primary goal of osteoporosis programs is to maintain bone density. Without an exercise intervention, after the age of 40 bone mass decreases by about 0.5% per year, regardless of sex or ethnicity (15). Whether appreciable increases in bone density can occur for this age group is equivocal (15) and dependent on the duration of the exercise program, age, dietary factors, and history of physical activity. A variety of

different types of exercise have been found in bone building programs middle aged or older adults.

Strength training

Although not all studies have shown improvement in bone density with strength training (15), strength training, if done with a high enough intensity for a prolonged period of time, seems to be effective for improving bone density in middle aged and older women who have low bone density (16). Programs that have been successful at increasing bone density have several common characteristics; training intensity above 70% 1RM, programs that last more than 12 months, and training frequency greater than two times per week.



Endurance Training

Endurance training can be an acceptable form of exercise for maintaining or increasing bone density in middle aged or older adults provided there is sufficient impact. Running has been shown to

have a positive effect on bone while walking and cycling programs do not seem to provide sufficient impact to increase bone density (3,18, 21). Rowing because of the high compressive and shear forces placed on the spine, 4.6 times body weight, can increase lumbar spine BMD but not at other areas (17). Even with sufficient impact training volume must be closely monitored. Running mileage of 20-30 km per week has a positive effect on bone, particularly lower leg and distal femur, but training volumes greater than this may cause a chronic increase in cortisol that negatively impacts bone (4) and high volume running, 92 km per week or more, has been shown to result in bone density lower than sedentary controls (2).

Jump Training

Although effective and popular in school based programs for increasing bone density in younger people jump training does not appear to be as effective in middle aged and older women. In a study comparing the effects of 12 months of vertical jumping on spine and proximal femur BMD in a group of pre and post menopausal women, Bassey, Rothwell, Littlewood and Pye (1998) found that 50 jumps six days per week increased BMD in the premenopausal group but not in the post menopausal group compared to group specific controls. Interestingly, the lack of change occurred even though the ground reaction forces and rate of force development on landing were higher in the post menopausal group resulting in a greater strain overload than in the pre menopausal group.

While a variety of exercise modalities have proven to be effective at maintaining bone density in adults there are some basic principals that should be considered when designing a long term program for people with osteoporosis:

Use a progressive program

Increase resistance and intensity progressively. This is necessary because for bone to form it requires a minimum amount of strain. Once a bone adapts to a given strain level, the stimulus for bone to form is removed and a higher strain level becomes necessary for it to adapt further (10).

Use dynamic movements

Mechanical loading of bone has an osteogenic effect only if the loading is dynamic and variable, static loading of bone does not trigger an adaptive response (4). Impact and rapid changes of direction can be particularly effective because ground reaction forces tend to be highest during these activities. Jumps, running, and more explosive or dynamic strength training activities should make up the majority of exercise in a bone building program.

Vary the exercises

Bone adaptations occur primarily at insertion and origin points where muscles attach to the bones. Ryan et al. (1994) suggest that increased BMD from strength training and explosive activities is related to the load placed on the muscles that act as prime movers. A wide variety of exercises that cover the whole body will help ensure that all bones receive stimulus to increase BMC or BMD.

Minimum intensity

As with most training there is a minimum level of intensity that is needed to stimulate increase in BMD. For strength training activities there is a linear relationship between weight lifted and improvements in bone density (5). Chilibeck, Sale and Webber (1995) suggest that intensities of at least 60% 1RM are needed to increase BMD. For impact activities like running and jumping ground reaction forces of greater than two times body weight can increase bone density with higher forces having a greater effect.

Training Frequency

Improvements in BMD can occur with relatively short training sessions if high impact activities like jumping are the core of the program. However, there is a need to perform these session frequently. Studies of jump training have found that where three or more sessions per week is sufficient to



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2010 Training Cities

New Orleans, LA	April
Keene, NH	May
Portland, OR	June
Keene, NH	July
San Diego, CA	September
Vancouver, BC	September
Orlando, FL	November
Burlington, VT	On Demand*

*The Matheson Mentoring Experience is scheduled on an individual basis.

On-Line Resources

An ever-growing library of learning resources is posted on the "Resources" section of the Matheson website. Go to www.roymatheson.com to view videos of the most popular Functional Capacity Evaluation tests.

Detailed information about Matheson programs and products is available at www.roymatheson.com or 1-800-443-7690.

increase bone density two sessions per week has negligible effect on bone density (11).

Program Duration

Consistency is one of the keys to long term bone health. Like other tissues bone undergoes both adaptation to training and detraining during periods of decreased activity. The bone remodelling cycle lasts four to six months (8); this is the minimum period of time needed for BMD to change significantly. Training programs need to be designed so that they offer the variety and adaptability for people to make them a year round part of lifelong fitness regime.

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How to Avoid Allegations of Sexual Harassment or Discrimination: Five Things You Need to Know

Mitchell Karp, Esq., MSOD

The following article is written by a Dentist from a Dentist's point of view. However, the basis of the article can be applied to any health care profession which is why it has been reproduced in this edition of Kinnection.

Ask any dentist, "On a scale of one to ten, how powerful are you?" and you'll likely get a low numerical response. That's because most dentists don't strut around their office thinking, "I'm a powerful person." Ironically, this tendency to downplay their personal power may lead many dentists and other health-care providers to overlook problematic behaviors that could result in allegations of harassment and/or discrimination. Although the dentist may rate him or herself a five or six on the 10-point power scale, everyone else in the office--including patients--would probably assign the dentist a much higher rating. It is this gap between the way one perceives oneself and the way others perceive us that leads to misperceptions and misunderstandings. If a person sees him or herself as not very powerful, how could that person possibly engage in harassment or discrimination?

Many people overlook two important facts:

1. Other people may perceive us as more powerful than we see ourselves.
2. Consequently those people may be reluctant to let us know when something we say or do makes

them feel uncomfortable or not respected.

When power imbalances are not acknowledged, it's difficult to establish a mutually respectful work relationship. Dental offices that do not foster mutually respectful work relationships are more likely to face work-related mistakes and misunderstandings, breakdowns in communication, damage to productivity and morale, disciplinary actions and/or legal liability, and damage to image and reputation. This article discusses five rules to help dentists and other health-care providers understand their rights and responsibilities in creating office environments that promote mutual respect.

Rule 1: Forget the Golden Rule and use the Platinum Rule

A positive work relationship is one in which both parties feel respected, valued, and motivated, which will ensure outstanding performance. Building positive work relationships involves both parties communicating their needs, preferences, and concerns before reaching an agreement. Many of us were raised with the Golden Rule as our guide: "Treat others the way you want to be treated." This works as long as everyone is just like you and shares your values, sensibilities, and sense of humor. In today's multi-ethnic, multi-racial, multi-cultural environment, people with different personalities, values, backgrounds, and perspectives must interact in ways that promote mutual

respect. Using oneself as the litmus test (e.g., "I wouldn't find this offensive so I guess it's okay") is a naïve and unreliable technique.

Opt for a Platinum Rule: "Treat others as they would like to be treated." This requires paying attention, noticing other people's preferences and sensibilities, and not making assumptions. When in doubt, ask before launching into a joke or engaging in unwelcome touching or other behaviors that may offend or demonstrate a lack of respect for others.

Respect is not a "what," it's a "how." It's a way of interacting. It means taking the time to understand another person's perspective. It means maintaining a professional image at all times. It also means being responsive to other people's concerns and feelings and responsibly speaking out against inappropriate behavior. Respect and harassment can mean different things to different people. What is respectful behavior in one culture may have a very negative connotation in another. Building a respectful work relationship and preventing harassment involves noticing how we approach people who are either different or similar to ourselves. Diversity--working with people who are different than us--is an increasingly common reality in all workplaces.

Rule 2: Ask yourself, "Is this appropriate workplace behavior?"

Many behaviors are easily identified as crossing the line. For example, most people readily agree that yelling at someone or touching them in a sexual way is always inappropriate workplace behavior. But there are many behaviors that may cause some disagreement in terms of appropriateness. How can you tell which behaviors will be perceived as crossing the line?

There are three questions people should use to navigate the confusing arena of appropriateness:

1. Would you say or do the same thing if it were going to be put on the front page of a dental journal or local paper (e.g., "Dentist A told the following joke in the office" or "Dentist B asked her chairside assistant the following question.")
2. Would you say or do the same thing if your spouse or child were standing next to you?
3. Would you say or do the same thing if the person were a different race, religion, gender, sexual orientation, or age?

If the answer to any of these questions is "I'm not sure," that's a good indication you should reconsider your actions. Some of the behaviors that have led to accusations of harassment and/or discrimination include:

- Making jokes about someone's race, religion sexual orientation, or physical appearance
- Making requests or demands for sexual favors
- Telling vulgar or sexist jokes

- Using sexually patronizing language (e.g., calling someone "babe" or "honey")
- Discussing sexual exploits or asking questions about a person's sexual experiences or practices.

While we are on the topic of inappropriate behavior, I want to offer a cautionary note about office romances. The two romantically involved people often think they're keeping it a secret. Ironically, they are usually the last ones to realize that everyone knows about their affair. Workplace romances are problematic because they foster allegations of favoritism, disrupt the work-related power dynamics, and often lead to inappropriate displays of affection during work hours. In addition, these office romances inhibit open communication. In most cases, workplace romances don't last long, and when a break-up occurs the office environment becomes unbearable for everyone.

Finally, remember that just because no one says anything or complains directly to you, doesn't mean the behavior is OK. Silence does not mean consent. Many people may find something objectionable but be reluctant to draw attention to their discomfort. So instead of telling you, they'll leave the office and tell their friends and colleagues--and you may never know the damage you've caused to your reputation and career.

Rule 3: It's not your intent; it's your impact that matters

I think it's fair to assume that no one wakes up in the morning saying, "Let's see how I can harass or discriminate against someone today!" Yet people DO engage in behavior that others see as harassing or dis-

crimatory. Saying "I didn't mean it" will not insulate you from liability. Over the last 25 years, the EEOC (Equal Employment Opportunity Commission) and both federal and state courts have frequently ruled that behavior that is inappropriate, harassing, or discriminatory violates the law, even when the individual did not intend to harass or discriminate.

Rule 4: Remember that power is always present

As a general rule, those who feel less powerful are always aware of power. In other words, if asked, "Who are the people who make your life miserable?" most people point up the power ladder to those "above." People are quick to point to those situations where they feel like a victim. Now imagine if someone were to ask, "Who are the people who you make miserable?" Those names don't come to mind as readily. The reason is that being in the more powerful position allows us to downplay these power dynamics. I call this dynamic "the power not to think about your power." It is essential for dentists to be aware that they will be perceived as dentists 24/7. We do not elect to "step out of role." We should assume that we are "in role" all the time and our words and actions will be perceived as that of employer or "person in charge," whether the conversation takes place in the break room, parking lot, at an office outing, or before the first patient walks in the door. Recognizing and being attuned to these power dynamics is imperative.

Rule 5: Invite constructive feedback

Even if we adhere to the first four rules, despite our best intentions, each of us will undoubtedly say or do something that may have the unintended consequence of making

someone else feel uncomfortable or not respected. We'd each prefer that people talk to us rather than about us, especially if we've said or done something problematic.

How does a dentist facilitate this process? By asking questions and eliciting feedback. For example, a simple inquiry to the dental team might involve asking them the following questions:

1. What do I say or do that promotes mutual respect within the office?
2. What do I say or do that undermines or hinders mutual respect within the office?

If you are uncomfortable engaging in an open conversation, it might be easier to invite your team members to submit their responses anonymously

in writing. Another alternative is to reiterate your intention to have mutually respectful work relationships and to specifically ask that if anyone feels that something you said was inappropriate or offensive, to let you know, preferably in person, but if not, then by sending you a note or e-mail. If you are not defensive and thank the person for the courage to give feedback, that message will be shared throughout the office, and next time it will be easier for you to elicit constructive feedback.

Good relationships take work. Some of us are very skilled at fostering mutually respectful work relationships. For others, it takes time, effort, and practice. In most dental offices, work relationships take work. By adhering to these five rules, you can minimize your risk and maxi-

mize your ability to foster mutually respectful work relationships.

Mitchell Karp, Esq., MSOD, president of Karp Consulting Group, Inc., is a national and international consultant, coach, and trainer. He assists organizations and individuals in developing productive work environments free of bias, harassment, and discrimination. He also specializes in team building, diversity initiatives, and conflict resolution. He can be reached at (212) 629-9158 or Karp Consulting.

For more information, visit one of Mr. Karp's Web sites at Vallot Karp or Karp Consulting. Mr. Karp holds a BS in Industrial and Labor Relations from Cornell University, a JD from Rutgers Law School, and a Masters of Organization Development from American University.

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At Custom Rehab & Assessments Canada Ltd. we're dedicated to simplifying and organizing complex and catastrophic files.

We can explain why 25% WPI + 25% WPI = 44% WPI.

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If requested we will review the OCF-19 and the file, identify missing information, suggest assessment teams and discuss assessment options.

Care is taken to avoid double rating as described in the fourth edition of the AMA Guides.

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From our Members

Windsor native named 2010 Student Entrepreneur Ontario Champion

Matias Golob, owner of Body Advantage and full time student at the University of Ottawa, has been named the 2010 Student Entrepreneur Ontario Champion by national charitable organization, Advancing Canadian Entrepreneurship (ACE) and proud program supporter, CIBC.

Since 2006, Matias has owned and operated Body Advantage, a company that leverages the services of Kinesiologists to provide aging adults with personal health and wellness services. Body Advantage bridges the gap between researcher and practitioner and answers the call for a more professional approach to fitness.

Matias's largest accomplishments to date include: leveraging his research to establish and cultivate a successful

business; advancing the profession of Kinesiology; and reaching out to the community through heritage restoration projects, charity fundraising, and the celebration of diverse physical activity practices.

"It's important for young people to be entrepreneurial and inspire our culture to envision social development through business endeavours," comments Body Advantage Owner, Matias Golob. "Being named a 2010 Student Entrepreneur Ontario Champion helps to solidify my vision to develop innovative approaches to preventative health care for all Canadians. I would like to thank ACE and CIBC for giving me this opportunity."

As a provincial champion, Matias moved on to represent Ontario in the regional round of competition that took place at the 2010 ACE Regional Exposition in Toronto on March 8, 2010. Provincial Champions will each present their business to a panel of entrepreneurs and industry professionals who will determine two Regional Champions, who will each

receive a \$1,000 cash prize and move on to the final round of competition at the 2010 ACE National Exposition in Calgary on May 12, 2010. The National Champion will receive a \$10,000 cash prize and represent Canada at the international level of competition, the Global Student Entrepreneur Awards.

"With today's ever changing economic situation, ACE is proud to continue its work developing leaders, creating connections and impacting communities, explains President of ACE, Amy Harder. Our 2010 Student Entrepreneur Provincial Champions will no doubt contribute meaningfully to the Canadian economy for years to come."

Mark Your Calendars!

**2010 OKA Annual Conference
October 15-17, 2010
Niagara Falls, Ontario**

The 2010 conference will feature an exciting line-up of speakers on a broad range of topics related to the field of Kinesiology.

Full conference details will be available shortly and will be distributed to members and posted on the website.

Why not make a weekend of it and bring your family to enjoy what Niagara Falls has to offer? Discounted accommodation rates will be available at the conference hotel. Watch for details.

Welcome New Members!

Certified

Sean Allt
Michelle Ashworth
Arianne Aucoin
Peter Babia
Colleen Barnier-Forrester
Brian Beaudette
John Behbahani
Jennifer Bell
Meagan Bell
Sarah Bergen
Cameron Bishop
Matthew Bonneau
Megan Boyd
Sylvia Brotherson
Michael Buisman
Ashton Calnan
Tai-Lee Chen
Maria Crome
Brady Claussen
Jackie Cramp
Jackie Cramp
Michelle Cruikshank
Anne Cunningham
Nurin Damji
Rajib Dash
Michaela Devries-About
Tony Doan
Stephanie Figas
Nicholas Genest
Carly Getz
Sadie Glendinning
Thurkka Gnanalingham
Ashley Grimshaw

Shauna Hamer
Simone Hamilton
Sarah Hermans
Caitlin Hooks
Joseph Hsiung
Allison Huston
Fiona Ip
Kimberly Juniper
Siobhan Karam
Angela Kerr
James Keung
Alexandra Kole
Stephan Kolotylo
Katrina Kotsopoulos
Katherine Krause
Alice Kwong
Amanda Lalla
Katie Lesperance
Kelly Levac
Cedric Lim Ah Ken
Alanna Lloyd
Curt Long
Carly Longmuir
Nicole MacDonald
Adam Maddalena
Chris Martin
Andrew McLean
Kevin Moloney
Maygan Motley
AnneMarie Muhic
Eric Nadalin
Joanna Ozimek
Georgia Parousis
Marie Ramsay

Reena Redkar
Farzad Refahi
Rachel Robertson
Ezechiel
Rothschild-Checroune
Lindsay Seale
Aaron See Long Hung
Natalie Singh
Serguei Smeretchinskii
Alicia Jane Sobura
Alekos Soriano
Andrew Spearin
Jenna Spencer
Amy Stewart
Emily-Jane Stewart
Inderjeet Takhar
David Tinter
Jacob Thadickal
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Blake Woo
Jackie Wood
Stephanie Woodard
Andrew Woolnough
Jennifer Works
Yaron Zehtser

Affiliate

Rhojean Campbell-Hussey
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