17th Qualitative Health Research Conference

"Research for Change:
Impacting Society through Qualitative Research"

October 25-27, 2011, Vancouver, Canada

Abstracts: Poster sessions

Listed alphabetically by title
(Author index p. 573)

Contents

Action and research in health education for elderly

Marilia Velardi
     Sao Paulo State University
Pedro Winterstein
     Campinas State University

In search of a background to create program in health education for elderly people this action research had as central objective to investigate the dynamics of the organization of the proposal developed in the Physical Activity Autonomy Program (PAAP) at São Paulo State University. In the exploring stage, the characteristics of the program, as well as the remarkable worries to the ten educators were identified. The initial interventions with twenty three elderlies were analyzed and the partial results from the impact of the program on the early preoccupations were pointed. The evaluations that followed raised new ways of educational actions, based on the adoption of theoretical references consistent with an phenomenological perspective that is the philosophical support of PAAP. Thus, the re-structuring of the educational program, with the adoption of constructivist references, took shape in both the organization of the contents and didactic actions, and in the redefinition of the concept of autonomy adopted in the program. Based on these experiences we are able to conclude that the construction of health educational programs to estimulate autonomy for physical activities for the elderly must be guided by the search for philosophical basis that may indicate the educational actions in order to draw coherence between philosophy and practice. This way, it must be considered that the qualification of the educators and its deep identification with the philosophical and educational theories that support the program will be the central point influencing the results of learning.

Advisory groups in qualitative health research

Davina Banner
     University of Northern British Columbia
Kathryn M King-Shier
     University of Calgary

As healthcare needs continue to rise, there is increasing pressure on healthcare organizations to develop services that are both effective and responsive to patient needs. In turn, this requires the development of appropriate knowledge and its effective integration and application. Despite many advances in healthcare research, the uptake of research evidence into practice remains poor. One contributing factor has been the limited collaboration between knowledge users and

researchers, resulting in differing research needs and expectations. Engaging key knowledge users in the research process can help ensure that research is useful for all parties. An advisory group is one way to achieve this.

Advisory groups often comprise a diverse range of stakeholders, such as community organizations, decision makers, healthcare professionals and patients. Advisory groups work to inform the development, implementation and translation of the research. In qualitative research studies, advisory groups may shape research questions and approaches, guide and assist with the recruitment of participants, and inform data analysis. This presentation will discuss the process of forming and engaging an advisory group in qualitative research and will draw on examples from the authors' own research studies. By engaging an advisory group effectively, qualitative health researchers can enhance the quality and translation of their work, which in turn may improve the experiences and health outcomes of patients and service users.

And you'll have to speak Dutch. Qualitative research in health care while learning a new language

Bethany Hipple
        Erasmus University

Disease management programs are a growing means of managing chronic diseases. My PhD research in the Netherlands focuses on the process of disease management program implementation in health care practices. Through my research, I not only learn how such programs are implemented, but also Dutch. While learning a language while researching is not uncommon, my research is conducted not as an outsider (as an anthropologist might) but as an insider with a strong knowledge of disease management and supported by the Dutch government. With this poster, I will explore issues that researchers may face when learning a language and conducting qualitative research.

For my research, I've conducted 31 interviews with disease management project leaders and clinicians. My first 11 interviews were conducted in English; the following interviews were conducted in English, Dutch, or a mixture.

Conducting research outside of your mother tongue offers challenges and benefits. Subtlety and underlying meanings are challenging for me. I am, as well, a bit exotic for my interviewees. However, as I have learned Dutch quickly, my interviewees find my ability 'knap' (impressive) and are interested in my efforts, frequently clarifying information. I ask my interviewees to define phrases or notions. While this is, in part, for my comprehension, it is also for my data collection; through these longer, more explicit definitions, I am better able to understand meanings in general and to the subject in particular. Second-language interviews are a co-production of data and of language, of seeking a common tongue in health care.

A Proposal to Conduct a Grounded Theory Study of Parent Involvement with Their Well Managed Diabetic School Aged Children

Elizabeth Ciaccio
        Student/University of San Diego

Type I diabetes is a complex condition that requires continuous physical, nutritional, and therapeutic monitoring to alleviate symptoms, prevent complications, and maintain quality of life

. It is a condition that has been identified in all segments of the US population, and affected one in four hundred children in the United States in 2010.The purpose of this research study is to develop a theoretical framework from the data gathered explaining parental involvement in the care of well managed children with type 1 diabetes reflected in stable HA1Cs as defined by the American Diabetes Association. Understanding this phenomenon more clearly can provide insights to help parents that have children that are not experiencing positive outcomes.

Parents managing the complexities of type 1 diabetes in their school aged children require variable regimes, which are complicated further by the child's ever changing needs due to growth and development and inability to identify potentially harmful hypoglycemic episodes. The literature does not describe what tools are useful to parents to positively manage a child's chronic health issue. As a result there is very little information for effective health policy or evidence to improve practice to support parents.

This Grounded Theory Study, informed by Kathy Charmaz's constructivist approach, will identify themes and develop a theory that describe what parents are doing well to manage their child's diabetes. Once the project reaches saturation the prominent dimensions will be organized into a theoretical framework.

Brazilian men vulnerability to HIV in Brazil and in Canada: a qualitative comparative study

Alberto Souza
FIOCRUZ (Fundacao Oswaldo Cruz)

The main purpose of this qualitative research is to analyse the meanings attributed by Brazilian young adults to their sexuality and to find out if their behaviour remains the same in Canada. The results show that men interviewed in this study, in both countries, express strong adherence to a notion of viriity that requires unfailing sexual performance. HIV prevention aimed at young Brazilian men is not likely to succeed solely by insisting on the importance of condoms as a means of prevention. To adopt consistent condom use, the demand to demonstrate virility through sexual performance must be addressed.Otherwise,men may experience a dilemma of having to trade virility as demonstrated through sexual performance for sexual health. The challenge for HIV prevention is how to affirm the search for pleasure without compromising their partner's and their own health. Therefore, there is a need to integrate condom use into a sexual script that preserves eroticism among this population.

Changing Lives, Changing Culture: Addressing the Stigma of Trauma in Journalism

Marla Buchanan
The University of British Columbia
Patrice Keats
Simon Fraser University

This presentation addresses the stigma of trauma in the culture of journalism. The content of this discussion is based on the results of a critical ethnographic study conducted with 31 Canadian journalists and photojournalists. There is a new movement within journalism to address the culture of silence and stigma that exits with regards to the effects of witnessing the trauma and suffering of others in response to reporting on traumatic events. Journalists often bear the suffering they experience in witnessing traumatic events in silence due to fear of repercussions from their news organizations and peers. In this study, journalists speak about the traumatic

effects of their work and how it impacts their lives. Many lessons have been learned about addressing these effects and the stigma of "not cutting it" in the field. Journalists offer recommendations that have important implications for longevity at work, for their relationships at home and their health.

Close Relationships of Women with Locally Advanced Breast Cancer

Natalee Popadiuk
        University of Victoria
Ali Dohadwala
        University of Victoria
Amrita Grewal
        University of Victoria
Lee Ann Martin
        BC Cancer Agency
Savitri Singh-Carlson
        California State University, Long Beach
Frances Wong
        BC Cancer Agency

A diagnosis of breast cancer can be a traumatic and life-altering experience for many women and their loved ones. The strength of their close relationships can play a critical role in their ability to cope and adapt to this life transition, and directly influence their sense of well-being and quality of life. Therefore, the aim of this study was to learn more about the relational experiences of women with locally advanced breast cancer (LABC) who received initial management in the community, and then at the B.C. Cancer Agency (BCCA). In this narrative study, we interviewed 12 women who had been diagnosed and treated for LABC to learn more about their lived experiences, with a particular focus on the role that their personal relationships played in their diagnosis, treatment, and recovery process. Using a thematic analysis, we coded 12 interview transcripts and found that many participants struggled with how and when to communicate their diagnosis in their close relationships. The women also relied on numerous ways of managing their relationships following the diagnosis, as well as different ways of turning to their loved ones for support. The extent to which different types of interactions with loved ones influenced their experience with cancer and treatment is explored. Implications for health care professionals will be discussed.

Cyber Mummies, Healthy Mummies: The Roles of Online Social Networking Sites in Mothers' Health

Diana Parry
        University of Waterloo
Troy Glover
        University of Waterloo
Caitlin Mulcahy
        University of Waterloo

Motherhood is one of the most important transitions in a woman's life. Social support is critical to the transition, yet research reveals a reduction in mothers' informal social networks. The internet has potential to connect geographically heterogeneous mothers who may have no prior acquaintance and to create a community of caring and information-sharing (Ley, 2007). Yet, the

literature has been largely silent on the value of face-to-face versus online communication and the implications of either for mothers' health. Given the overwhelming majority of Canadian women can expect to undergo the transition to motherhood, online social networking sites warrant investigation, particularly with their potential to reduce social isolation and positively impact upon mothers' health. Thus, the purpose of this study was to examine the roles of a social networking site on the health and well-being of mothers' with young children. We did so by studying a local chapter of Momstown.ca. Described as "Facebook for moms," this social networking site provides a way for mothers to interact virtually with the potential to build an online community of interest, but also facilitates the development of in-person interaction. Utilizing a feminist lens, active interviews with 23 members revealed the overwhelming positive role that Momstown.ca played in alleviating or reducing the challenges of motherhood. More specifically, Momstown.ca contributed to mothers' social, emotional, physical, and mental health. In turn, feeling healthy in these four dimensions enhanced the women's experiences of motherhood. Yet, at times the site served to reproduce narrow and constrictive views of femininity and motherhood thereby negatively impacting upon the mothers' sense of well-being. Taken together, these findings enhance understanding about experiences of motherhood, provide information on the implications of social networking for the health of mothers', and suggest societal changes that will address social isolation.

Development of a Theoretical Framework for a Systems Approach to Behaviour Change

Penny Deck
> *Simon Fraser University*
Diane Finegood
> *Simon Fraser University*

Feedback (e.g. self-monitoring), a defining characteristic of complex systems, plays an important role in health behaviour change for individuals as well as system wide health behaviour change. Often feedback is only viewed as a monitoring tool to assess success and consequently remains a poorly understood and underutilized leverage point for behaviour change interventions. Further understanding of feedback will address this gap and generate new opportunities for patient centered care.

Interpretive Description was used to develop a feedback typology. An initial descriptive framework that illuminates the role of feedback in behaviour change was generated from a review of complex systems literature, which has a clearly defined set of ideas about feedback. This general feedback typology was augmented with themes interpreted from examples of successful and unsuccessful feedback interventions related to health behaviour change in current practice.

Types of feedback and methods of communication about feedback either provide information about the behaviour itself or the behaviour outcomes. Mechanisms by which feedback is delivered, such as checklists and counters, were catalogued and used to classify examples from the literature. Characteristics that enhance or hinder the effectiveness of feedback were identified and used to expand thematic descriptions. Effectiveness of feedback is related to the accuracy of information and time delays in receiving information. This novel typology may be useful in developing new tools to provide patient centered care that supports behaviour change and in analyzing the effectiveness of current interventions.

Discourse analysis revealing meaning about attitudes towards older persons in acute care.

Lynne Slater
        University of Newcastle

Discourse analysis (DA) is seldom used in nursing or health research however it is a significant methodology that can reveal important information particularly relevant to social analysis. Alternatively, attitudes are complex with more than affective (emotional) components but including cognitive and behavioural foci leading to ageism or negative discursive behaviours towards older people. Negative attitudes, particularly behaviours, can lead to poor health care and poor outcomes. Previous research into attitudes towards older people has not focussed on acute care settings but has mainly engaged measuring levels of attitudes or knowledge of ageing using Likert type scales. Results have led to contradicting findings with little understanding of why certain attitudes occur.

Discourse analysis ranges in types from exploring how language is used (educational focus) to how discourses give meaning in the construct of the social setting, with context of the texts being important. These variations can be confusing and therefore impede use of DA in health research. However, this study used DA that shared critical and Foucaldian aspects to gain understanding through the language of health, the context of acute care and constructs of health care staff, patients and carers. This enabled discourses of being an older patient, and discourses of attitudes towards the older person as a patient, to be explored. DA clarified the complexity of attitudes in the acute care setting, of why or how attitudes occur. Discourses of rationalisation explained how the modern health system impacts attitudes and this could further lead to changes in health care management.

Embodied and emotional work in self-management for knee pain

Bie Nio Ong
        Keele University
Clare Jinks
        Keele University
Andrew Morden
        Keele University

In many western countries self-management is central to health policy, and most models are designed for people with long-term conditions, based upon health care professionals (or peer trainers) giving support and advice in order to manage the impact of the condition(s). However, most approaches underestimate what people already do themselves and the physical and emotional work associated with self-management.

This UK-based qualitative study examined how people live with knee pain. The study consisted of in-depth interviews (22 participants at baseline, 15 participants at 6 months follow-up) and monthly open format diaries. Thematic analysis was carried out and it emerged that self-management required conscious work, based upon learning from experience, experimentation, daily planning and balancing costs and benefits of chosen actions or activities. Participants expended a considerable amount of embodied and emotional hard work in maintaining a daily life that allowed them to fulfil social roles and relationships, and continue associated valued activities. This individual and contextualised work needs to be more explicitly recognised so that it can serve as the starting point and building block for professionally supported self-management approaches.

Evidence Mobilization through Knowledge Exchange and Partnerships

Ann Vosilla
　　　CADTH
Alison Hoens
　　　VCHRI; PHCRI

Evidence uptake in health care is challenging. Three key components to enhance uptake of evidence are (1) identifying symbiotic partners and (2) fostering productive relationships with partners through identification and fulfillment of needs and (3) inclusion of consensus processes to enhance uptake of evidence.

The BC Liaison Officer (CADTH) and the BC Physical Therapy Knowledge Broker partnered in 2009 to form an alliance to mobilize evidence into practice at local levels. CADTH provided evidence which supported translation of that evidence into decision guidance for purchase of equipment, provincial guideline renewal and informed clinical practice changes. Partnership success was built on the result of clear understanding of roles and needs. Processes to ensure consensus were essential components of knowledge transfer methods. Evidence was mobilized deep within the health system and local needs were met.

Evidence mobilization methods include a process which links knowledge brokering activities to maximize outcomes and minimize duplication of effort. Building and nurturing sustainable partnerships are important components of successful transfer and uptake of health evidence. Knowledge transfer includes both qualitative and quantitative components. Specific examples of both quantitative and qualitative methods used in the knowledge transfer process will be shared and discussed.

Exploring research engagement among autism stakeholders in Alberta

Jamil Jivraj
　　　University of Alberta

This poster will examine the needs and preferences of stakeholders of autism research in Alberta (i.e., individuals with autism, parents, clinicians, researchers, and policy makers). Specifically, this study will explore stakeholder involvement and preferences in provincial autism research engagement and priority setting. Literature suggests that ongoing engagement is needed to achieve desired aims of an integrated knowledge translation and exchange strategy and ultimately optimal knowledge uptake. Based on study findings, new mechanisms for enabling shared accountability and responsibility between stakeholders in furthering a provincial research agenda in child health can be developed. Specific research questions, addressed in this study, are as follows: 1.What involvement do stakeholders of autism research in Alberta want to have in the research process, 2.What do stakeholders perceive as an effective process of research engagement and priority setting among autism stakeholders in Alberta? 3.What are the evidence needs of stakeholders? 4. What is the preferred method for stakeholders to receive research information?

This qualitative study will reveal meaningful descriptive and thematic findings which will be advanced to an integrated set of policy and practice statements and guiding recommendations. Study findings will be communicated using effective knowledge transfer strategies.

Exploring the Issue of "Failure to Fail" in professional programs: A Multidisciplinary Study

Florence Luhanga
         Laurentian University
Sylvie Larocque
         Laurentian University
Leigh MacEwan
         Laurentian University
Yovita Gwekwerere
         Laurentian University
Patricia Danyluk
         Laurentian University

 There is a growing universal demand for well-prepared professionals in all disciplines and society has entrusted professional schools with the task of preparing such individuals. Within the professional programs, the field experience component of undergraduate programs is seen as critical in preparing prospective practitioners. It is within the field experiences that a student acquires knowledge, skills and values necessary for professional practice and becomes socialized into the profession. Moreover, it is within this context that the field instructor and faculty have an academic and professional responsibility to ensure that each graduate of their program is safe and competent. However, there is evidence that some field instructors and faculty experience difficulty in identifying and making decisions to fail students who display incompetent or unsatisfactory practice.

A qualitative descriptive study was used to explore the issue of failing a student in a field experience in professional programs (Nursing, Education, and Social Work). The sample comprised faculty members, field instructors or preceptors, and faculty advisors from different practice settings that serve as placement agencies for undergraduate programs. Data was collected by individual face-to face interviews or telephone interviews. Comparative and thematic analysis was used to analyze data. This presentation will discuss research findings that may improve the quality of field experiences and support for field instructors, which in turn will improve the quality of our graduates.

Keywords: Field experience, "failure to fail", incompetent or unsafe student, professional programs

Exploring the Lived Experienced of Healing Touch Level I and II Trainees

Galen Louis
         Idaho State University
Gina Decker
         Idaho State University
Janette Olsen
         Idaho State University
Judith Crews
         Meridian Health Science Centre
Susan Tavernier

This phenomenological study explored the lived experiences of Healing Touch (HT) Level I and Level II Trainee's to determine what role HT training had in the fostering and evolution of

presence; as well as compared participant experiences to the Theoretical Model of Presence. Inductive analysis was performed using secondary data from interviews of 11 participants of Saint Alphonsus Regional Medical Center's Integrative Care Volunteer Program. The data was transcribed, themed, and categorized, and the following themes emerged: motivation for training, physical and emotional responses, increase in selfcare, participating in a group setting, frustrations, increased confidence, improved patient care and job satisfaction, and presence. The findings suggest that HT training does play a role in fostering presence and the participants understanding and actual experiences of presence evolved throughout the training. The Theoretical Model of Presence was used to compare the participant experiences of presence and as a result, the trainees did experience presence as described by the model, including the antecedents, attributes and consequences. The findings suggest that presence requires certain elements to exist in order to fully experience presence. The insight provided by this research can be used to help further recognize the role and implications of complementary and alternative medicine in health care, and how it affects service delivery, patient care, job satisfaction, as well as helping ensure a competent healthcare workforce to meet the needs and demands of the healthcare consumers.

Finding Strength in the movement from supporting younger generations to preserving ones aging self

Silvia Bocchi
Univ. Estadual Paulista (UNESP)
Rodolfo Puttini
Univ. Estadual Paulista (UNESP)
Vanessa Maziero
Univ. Estadual Paulista (UNESP)
Alison Phinney
University of British Columbia

The objective of this qualitative research was to develop a theoretical model delineating the interactional experiences of Brazilian elderly living in situations of vulnerability and reduced autonomy. Nondirective interviews were conducted with 24 participants. There were 13 men and 11 women; they ranged in age from 60 to 89 and all were from low socioeconomic backgrounds. During the interviews, we asked participants to share their life experiences. The data were analyzed according to Grounded Theory. From the analysis process, two phenomena emerged as being the most important issues for the elderly participants as they neared the end of their lives: (1) having supported younger generations; and (2) remaining independent for as long as conditions permit. From the interrelations among the components of these two phenomena emerged the core category: Finding strength in the movement from supporting younger generations to preserving one's aging self. The discussion of the theoretical model according to the Theory of Social Recognition highlights the protective effects of this movement as told in the life stories of elderly people, serving as a coping strategy to restore self-confidence, self-respect and self-esteem throughout the aging process. This research suggests that families, communities, and health services need to stimulate and enhance opportunities for elderly people to share their life experiences as part of the therapeutic plan in support of their mental health.

How Relationships Smooth the Transition from Middle School to High School

Natalee Popadiuk
University of Victoria

Rick Oliver
  School District 23 Central Okanagan

The transition from middle school to high school can be a difficult time for many students and is considered the most vulnerable time for mental health concerns, academic failure, and school drop-out. When we examine the social aspects of school transitions, in particular, it is evident that peer and adult relationships are important in student adjustment. In our study, we wanted to learn more about the transition experiences of students navigating the middle-to-high school gap from their own perspectives. Using the Critical Incident Technique, our aim was to learn more about specific facilitating and hindering incidents that impacted student transition. We interviewed 31 high school students in a mid-sized school district in British Columbia and collected 203 critical incidents. Of the nine categories developed from these incidents, four categories were clearly linked to issues of relationality: (a) student teacher relationships, (b) school connectedness, (c) existing peer relationships, and (d) supportive adults. Additionally, relational incidents were commonly found in other categories. The findings from this research indicate that supportive relational connections, such as a caring and trusting relationship with an adult in the high school, facilitates transition experiences, while relational disconnections, such as the loss of a previous peer group, led to feelings of loneliness and anxiety. We also learned that the transition is an ongoing process often starting one year before the move to high school and continuing for an additional year after the move. We will specifically discuss the implications for school personnel in this presentation.

Therapeutic Relationships and Older Adults: Implications for Health Service Delivery across the Continuum of Care

Shelley Williams
  Queen's University
Margo Paterson
  Queen's University

Client-centred practice presumes an understanding of the complexities of therapeutic relationships. Relationships build trust and create an environment of caring which allows clients to express their needs. With the growing emphasis on client-centredness in healthcare, understanding the therapeutic relationship with older adults is essential to enhancing service delivery to an aging population. Elements of the therapeutic relationship have been shown to predict outcomes in rehabilitation, but the literature as it relates to older adults is limited. A qualitative interpretive case study methodology will be used to understand therapeutic relationships within the context of three distinct geriatric programs ('cases') across the continuum of care. Multidisciplinary teams form the foundation of geriatric programs. The therapeutic relationship will be explored with both healthcare providers (HCPs) and older clients. Data collection will include interview, observation and document analysis. Using multiple cases allows both within case and between case analyses. Results of this study will help HCPs: to understand the key components of the therapeutic relationship with older adults, to understand how therapeutic relationships are established in geriatric programs, to understand how therapeutic relationships impact service delivery in geriatric programs, and to understand the impact of the therapeutic relationship on satisfaction with healthcare services provided (HCPs) or received (clients). Establishing strong therapeutic relationships is critical to the development of trust and rapport which allows for the exchange of information necessary to provide high quality assessments and interventions. This research will provide insight to enhance the delivery of healthcare services to older adults by all HCPs.

Investigating peer-relationships as a means of pursing goals and growth in the transition to adulthood: A systematic review and critique

Krista Socholotiuk
    University of British Columbia
Leah Wilson
    University of British Columbia
Amy Green
    University of British Columbia
Laura Klubben
    University of British Columbia
Sheila Marshall
    University of British Columbia
Emily Polak
    University of British Columbia
Richard Young
    University of British Columbia

The capacity of Canadians to respond well to normative life events and developmental change is of interest to population health decision makers. In the transition to adulthood, peer relationships represent a means and constitute processes that help youth respond adaptively to the challenges and changes of this developmental period. These friendships can be an important resource that enhances the capacity of young people to pursue goals, skills, education, and growth.

Different conceptual frameworks are used in research (explicitly or implicitly) to investigate transition-to-adulthood activities between peers. Incongruence between the conceptual frame and method does occur in this research, with implications for quality/trustworthiness and understanding. Widespread focus on meaning in qualitative research, with limited or no attention to the steps or processes by which it is realized, also bears on the issue of comprehensiveness.

Contextual action theory and its corresponding method, the action-project method, systematically addresses meaning but also the processes (i.e., the steps or elements, such as cognitive, emotional, or social resources) that contribute to meaning. This approach has already been used to investigate parent-child transition-to-adulthood projects, and now is being used to investigate peer-transition projects.

This poster presents the findings of a systematic review of methodological congruence and comprehensiveness of the peer-related transition to adulthood literature. Additionally, it identifies how taking the conceptual frame of contextual action theory and goal-directed action to investigate peer-processes associated with the transition to adulthood can add to current understanding in this area.

"I was promising myself and him that we would keep looking at hope": Psychotherapists' In-session Experiences of Hope

Denise Larsen
    University of Alberta
Rachel Stege
    Hope Foundation of Alberta
Keri Flesaker
    University of Alberta

Common factors models of psychotherapy identify hope as a key agent of client change (e.g., Hubble & Miller, 2004). However, research on hope in therapy is confined to examining client hope in the therapeutic process. Therapists' experiences of hope during session and their impact on therapeutic interventions or the therapeutic relationship have not been examined. Nevertheless, many scholars associate hope with therapists' ability to cope with work-related stressors (e.g., Snyder, 2005). Reflecting on the situational stressors, individual factors, and vicarious traumatization that therapists encounter, Saakvitne (2002) asserts, "hope is our most essential commodity as therapists" (p. 338). Further, counselling research (Edey & Jevne, 2003; Flesaker & Larsen, 2011) suggests that therapists require hope in order foster client hope. Recognizing the importance of understanding therapist hope within the therapeutic encounter, five psychotherapists participated in individual Interpersonal Process Recall interviews (Larsen, Flesaker, & Stege, 2008) while viewing videorecordings of their recent counselling sessions (n=11 clients). During these interviews, therapists were asked to reflect on their own experiences of hope in the context of the recorded sessions. Three broad categories were found to influence therapist experiences of hope in session. These included: (a) self-influences, i.e., therapists' own thoughts, actions, and sense of direction impacted their sense of hope, (b) client influences, i.e., client behaviours and progress influenced therapist hope, and (c) relational influences, i.e., therapist hope was enhanced by experiencing the therapeutic relationship as meaningfully connected and jointly committed to the therapeutic process. Implications for therapist self-care related to hope are discussed.

Lessons in oral health from the use of mixed methodology: Giving primary school children a voice

Anna Cooper
        University of Salford
Lindsey Dugdill
        University of Salford
Cynthia Pine
        University of Salford

Oral health in North West England (UK) is poor; rates of dental decay are above national averages (NW dmft 2.0, English dmft 1.47, 2007). Initiatives tackling this are being given greater public health priority (but less than issues such as obesity). Schools have increasing responsibility to implement multiple health interventions however, evidence is limited as to the effectiveness of school oral health interventions. An evaluation was implemented in Salford, UK, (n=256) exploring the integration of a school oral health programme (SOHP) into the curriculum and effectiveness in changing toothbrushing behaviour of 6-7 year olds at home. A mixed method design was developed with children 'at the heart' of all components and evaluation methods. Using traditional clinical (plaque measurement) and quantitative (children's questionnaire),techniques, no overall change in behaviour was found post-intervention(1-month programme, when intervention schools (n=180) were compared with controls (n=76). However, within the intervention population, 3 different cohorts emerged showing an increase, a reduction and no change in toothbrushing. Through Draw&Write and focus groups with children, in-depth evaluation improved understanding of these cohorts and children's experiences of the programme. Using new methods in dental public health to triangulate results enables progressive redevelopment of a SOHP, maximising facilitators and reducing barriers. This research highlihhted children aged 6-7 are able to communicate their views on oral health and as they were actively engaged in the intervention, provided valuable feedback; hence enabling practitioners to learn more effectively about how children might benefit from targeted SOHPs.

Living here we are: The tensions within restorying the impossible

Joanna Szabo
Mount Royal University

The human condition is filled with complexities, which we often do not overtly acknowledge in most qualitative research. For example, the drafts of our process work that reveal and conceal certain precarious tensile difficulties, often get lost in translation or bracketed when we perform and disseminate the written up product. It is this very raw, messy and shaky process work that I want to bring to the fore and showcase as living inquiry; an irony which is not lost on me, but important to explore. I want the complexities of structure, form and boundaries to be questioned. Some of the tensions that I play with are those of my identity struggle as nurse educator and academic mother. The time/space continuum also offers difficulty when we look at data or content as static entities, from which we separate ourselves. For example in the privileging of text, as separate from author, or author in a different reflective and reflexive location looking back on research. Based on our frames of reference, we showcase certain lenses in such discursive engagements, make assumptions and have expectations of others to do so, thus perpetuating false boundaries and binaries. Through this poster presentation, I will offer a space for dialogue through text and image as an arts-informed example of my process/product exploratory journey.

Metasynthesis of women's vulnerability to HIV: methodological steps

Mónica Cecilia De la Torre Ugarte Guanilo
School of Nursing, Sao Paulo University
Renata Ferreira Takahashi
School of Nursing, Sao Paulo University
Maria Rita Bertolozzi
School of Nursing, Sao Paulo University
Kuitéria Ribeiro Ferreira
School of Nursing, Sao Paulo University
Elisângela Martins de Queiroz
School of Nursing, Sao Paulo University
Edilma Gomes Rocha Cavalcanti
School of Nursing, Sao Paulo University

It presents methodological steps of a metasynthesis designed to identify and synthesize reseaeches aboute women's vulnerability elements to HIV. STEPS: DEVELOPMENT OF PROTOCOL: Identification research question: What are the elements considered in the characterization and analysis of women's vulnerability to HIV?; Determining search resources: CINAHL, PubMed, OVID, Web of Science, LILACS, CAPES-BDTD, DEDALUS; Setting inclusion criteria and elements of vulnerability. INDIVIDUAL APPRAISAL: refinement of inclusion criteria (based upon the reading of retrieved studies) to ensure that these require no further modification; selection of studies; accuracy, credibility and relevance assessment of researches (Critical Appraisal Skill Programme instrument was used). COMPARATIVE APPRAISAL: Exclusion of duplicated researches; identification of key elements: geographical location and year of study; population characteristics (age, HIV status), identification of central themes: social norms, migration, low socioeconomic status, social and economic contexts of countries and management of health services. METASYNTHESIS: extraction, editing and grouping of vulnerability elements according to their similarities; abstraction of researches results: shorter version of results to eliminate redundancies and refine statements; Interpretative

Integration: Taxonomic categories were developed (this express the associations between elements of vulnerability found). This metesynthesis included descriptive, interpretive and theoretical validity criteria, as well as "audit trail" (This enables readers can replicate these steps and make judgments of metasynthesis). Metasynthesis does not prescribe rigid procedures, but systematic proceedings that keep philosophical foundations and integrity of research reports. Developing and "audit trail" is important. The methodology applied was pertinent to reach the research target.

Narrative Inquiry and Auto-photography as an Approach to Identity Exploration in Female Adolescents with Type 1 Diabetes

Leah Wilson
    University of British Columbia
E. Anne Marshall
    University of Victoria

Type 1 diabetes is a chronic illness affecting approximately 200,000 youth in Canada (Canadian Diabetes Association, 2003). Although there is a wealth of research documenting the medical, emotional, and familial challenges stemming from adolescents' experiences with diabetes, there is a relative paucity of research exploring identity formation in this population. Adolescence is a time of identity exploration and of developmental change and thus, has important implications for identity development, and future health and well-being. The current study examined the identity-related experiences of six female adolescents (13-18 years) with diabetes in an effort to highlight youth voices, largely absent in the diabetes literature. Using a constructivist framework, narrative inquiry and auto-photography were employed to capture the depth and richness of the lived experiences of these youth. The salient findings include: (1) the importance of relationships; (2) diabetes as one aspect of self; (3) dislike of diabetes; (4) responsibility and strength; (5) the importance of knowing oneself; (6) and being aware of one's body. This research demonstrated that the experience of diabetes is different for each of the young women. Thus, health care professionals working with female youth with diabetes should not assume that living with diabetes is a universal experience. The stories of these young women provide a foundation for understanding, and a path to future exploration of, life with diabetes according to a perspective that views the adolescent as a whole, rather than as a person with an illness.

Navigating the Grey: Determining appropriate data extraction methods for a complex systems analysis of chronic disease policy and health promotion documents

Lee Johnston
    Simon Fraser University
Karen Tulloch
    Simon Fraser University
Diane   Finegood
    Simon Fraser University

Our lab is currently constructing research methods for the extraction and analysis of recommendations addressing chronic disease and obesity prevention in Canada. Our analysis will be conducted with a complex systems framework that accounts for activity taking place at several levels of intervention – from the highest level of the paradigm driving the system down to actions taking place in localized settings. Our preliminary research suggests that traditional methods of data extraction for the analysis of grey literature (i.e. including only demarcated

recommendations) will be insufficient in capturing the depth of content necessary for a complex systems-based analysis. As such we are considering novel means by which to determine our inclusion and exclusion criteria. The ability to establish comprehensible tools when conducting an extensive synthesis of information is critical to the study's success. It provides a structure for the project and eliminates any residual ambiguity that may exist when extracting information from a large number of documents with varying formats. In order to determine the best approach for our project we will review the strengths and limitations of current extraction methods, and consider how the integration of other qualitative methodologies could improve our ability to draw meaningful information from our data set.

Nurses lived Experiences of their Responsibility for the Care of the Patient in the Swedish Ambulance Service

Mats Holmberg
Karolinska Institutet, Stockholm
Ingegerd Fagerberg
Ersta Sköndal University College, Stockholm

Registered nurses (RNs) in Sweden have the overall responsibility for the care of the patient in the ambulance care. RNs in the ambulance care are judged to lead to a degree of professionalism with a higher quality of the medical care and technical skills. At the same time earlier studies on the ambulance care, describe abilities as; maintaining meaningful relationships with the patients, being flexible, open-minded and humble as important for the carer. The aim of the study was to describe RNs' experiences of being responsible for the care of the patient in the Swedish ambulance service. A phenomenological reflective lifeworld approach within the perspective of caring science was used. Five RNs with experience from ambulance care were interviewed. The RNs' experiences of the studied phenomenon is to prepare and create conditions for the care and to accomplish this close to the patient. Three meaning constituents emerged: (1) prepare and create conditions for the nursing care, (2) to be there for the patient and significant others and (3) create comfort for the patient and significant others. The studied phenomenon can be described as emerging from the encounter with the unique human being. The study can implicate new perspectives on the ambulance care, and describe its complexity from a nursing perspective using qualitative methods, which is important to develop and improve a qualitative ambulance health care.

Nursing Student's Lived Experiences Surrounding Medication Administration

Sally Morgan
University of San Diego

 Medication errors are abounding and the complexity of medication administration creates an environment where health care providers are at risk for making errors. This environment includes nursing students learning medication administration. Coupled with a rigid, protocol-driven pedagogy, nursing students may be placed in a learning experience counterproductive to accuracy. Previous studies have focused on causes and perceptions of medication errors looking for the delineation between safe and unsafe practice. In doing so, past research may have narrowed the path of discovery needed to diminish medication errors. In addition, research regarding the lived experience of nursing students while they are learning medication administration is limited. Exploring such experiences may offer insight into educational pedagogies that inhibit or promote accuracy as well as unknown sources influencing medication

errors.

An interpretive phenomenological approach was chosen to hear the nursing students' genuine voices and to approach the reality of how nursing practice and practice wisdom is learned during medication administration. A purposive sample of students attending an entry-level masters nursing program in Southern California were recruited on a voluntary basis.

Individual interviews were conducted using an indirect discourse and documented by transcribed voice recordings and hand written jottings. Values coding was completed by hand and the QDA Minor software program. Jottings from the interview were converted to analytical, methodological, and personal memos as an ongoing process during data collection and analysis. Paradigm cases, thematic analysis, and exemplars will be identified from the narrative accounts. Analysis and the manuscript will be completed before the conference.

Nursing Team Dynamics – It's time for a social revolution!

Teresa Bateman
College of Licensed Practical Nurses of Alberta

This presentation examines a thesis study that discussed topics teams commonly think about, but rarely talk about.

Nursing and other health professions have been established in a hierarchical manner, based on a historical model. Today, health professions and governments focus on the importance of interdisciplinary collaboration, which includes core principles of trust and respect among all members of the health care team. However, a gap exists between what health professions and organizations say they want for collaborative practices, and what is occurring in the practice setting. Transformation within each nurse and throughout teams is necessary to enact a social revolution in the nursing world, creating a culture that no longer tolerates infighting and counterproductive behaviors that limit and negatively impact nursing careers, patient experiences, and collaborative practice.

This qualitative action research project assessed the dynamics of teams, organizational culture, and transformative learning within the context of a health care team. The research question: "What is the experience of team work and team dynamics among members of a multidisciplinary nursing team from a Licensed Practical Nurse perspective?" was posed to 24 licensed practical nurses (LPNs) and four key external leaders (KELs). Through appreciative inquiry, opportunity for open dialogue emerged, with discussion of multiple issues related to team dynamics. This action research project realized its goal of assisting nurses to understand the importance of their individual and collective role in creating the nursing culture within their practice environment through a positive transformative process.

Parental Perceptions of Healthy Eating and Physical Activity: A Photovoice Project

Nicole Mareno
Kennesaw State University
Marilyn King
Kennesaw State University

The prevalence of overweight and obesity among U.S. children and adolescents has reached

epidemic proportions. Parents are children's primary role models for eating and physical activity, and are the key change agents within the family system. The purpose of this proposed study is to understand parental perceptions of assets and barriers to healthy eating and physical activity. Understanding assets and barriers is essential in order to create culturally and socioeconomically sensitive family weight management interventions.

The proposed study will use a community based participatory research (CBPR) approach, employing the Photovoice data collection method. Photovoice will allow parents to reflect and communicate assets and barriers to healthy eating and physical activity through the use of constructed images captured with a camera. Eight to ten parents of 2-18 year old children from Marietta, Georgia, USA will participate in the proposed study. The sample will be recruited from a college affiliated community clinic. The participants will be given disposable digital cameras and instructed to take pictures on the theme of healthy/unhealthy eating and physical activity in their homes or communities. Focus groups will be used to encourage dialogue about the images. The researcher and participants will share key themes and photographs with community leaders.

Engaging parents, community leaders, and a nursing researcher in a critical discussion about health increases the likelihood of initiating the change process, and addressing childhood overweight and obesity. Part of this dialogue will include ideas and plans for a family weight management intervention tailored to the community.

Participatory Evaluation of a Multi-Lingual Phenomenographic Health Care Research Project to improve in-patient satisfaction

Niels Agger-Gupta
        Royal Roads University
Dorothy Agger-Gupta
        Fielding Graduate University

This paper reports on the participatory evaluation of a multi-year, multi-lingual, phenomenographic research project designed to better understand and address variation in ways patients make meaning of their in-patient experiences at The University Health Network (UHN) in Toronto, Ontario. The UHN system includes three of Canada's largest teaching hospitals.

This research team includes researchers, clinicians, administrators, and patients and liaisons with cultural and community leaders. Approximately 100 patients will share their stories and experiences through focus groups and interviews, in their own first language. Patients are involved in the project development, the analysis of the data, and the final reports. Patients will be invited to the presentation of the results, and may engage in subsequent partnering initiatives and actions.

Evaluation of the research addresses the reaction to the development of the research, the knowledge from the results, and discernable changes to UHN's planning, delivery, quality improvement, and evaluation of health services. The evaluation is sensitive to linguistic and cultural variations, supports staff and patient development, and promotes sustained positive change.

Phenomenographic research supports subsequent participatory action research designed to include the ideas of all stakeholders in understanding the perspectives of other stakeholders about needed changes in the organization. The action focus will help UHN design and implement more effective ways to improve patient satisfaction throughout its system by better understanding the

variation in ways that patients make meaning of their hospital experience. The University Health Network and Royal Roads University provided funding for this project.

Partnering with Patients: Multi-lingual Phenomenographic Research on Variation in Patient Satisfaction

Dorothy Agger-Gupta
    Fielding Graduate University
Niels Agger-Gupta
    Royal Roads University
Opal Robinson
    The University Health Network, Toronto, ON
Carolyn Plummer
    The University Health Network, Toronto, ON
Ted Meeking
    Toronto, ON

This paper presents key learnings from the participatory design and pilot study of a multi-year phenomenographic, multi-lingual, multi-cultural research project intended to better understand and improve variation in patient satisfaction: Partnering with Patients to Understand and Improve their Health Care Experiences.

The University Health Network (UHN) in Toronto, Ontario, includes three of Canada's largest teaching hospitals, cares for more than 27,614 inpatients each year. Even though it provides the highest quality patient-centered care system-wide, there remain differences among its units and hospitals in survey-based measurements of inpatient satisfaction, a key indicator of health care quality.

This multi-year phenomenographic research project is designed to improve understanding of how discharged inpatients at UHN's hospitals understand and make sense of their experiences with medical personnel, staff, processes, and procedures during their hospital stays. It asks patients themselves, in their own first language, to share their stories and help UHN better understand what is important to them. Interviews and focus groups are being conducted in the patient's first language by interviewers who share the participants' language and culture. The research participants will include 60 to 100 patients who represent UHN's linguistic diversity, such as Cantonese, Filipino, Portuguese, Mandarin, Italian, and others.

The collaborative research team includes medical staff, former patients, and academic researchers. The research findings, including phenomenographic outcome spaces by language and facility, adds new knowledge that will support UHN's need to better understand and address the variation in patient satisfaction. The University Health Network of Toronto, Ontario provided funding for this project.

Picture Me, Smokefree? - Young adults' photographs about smoking and quitting

Rebecca Haines-Saah
    University of British Columbia
John Oliffe
    University of British Columbia
Joan Bottorff

University of British Columbia Okanagan
Cameron White
University of British Columbia

In Canada, young adults have been identified as a priority population for smoking cessation with rates of tobacco use highest among those aged 19-24 when compared to all other population groups. Yet very little is known about how the social meaning of smoking might be different for young adult women and men, or how gendered norms influence tobacco use during young adulthood. To address this gap, we conducted a pilot research project using participant-driven photography to understand the types of imagery most likely to resonate with young adults' experiences of smoking and quitting. Our objective was to solicit photographs from young adults and assess how their images might be mobilized to design prevention programming that dislocates the stereotypical masculinities and femininities associated with smoking. Drawing from a selection of photographs by participants who have recently quit smoking, we reflect upon opportunities for using visual research as way to unpack complex theoretical questions regarding the socially-situated nature of gender as embodied practice. We argue that visual methods provide a view of smoking grounded within the gendered social context of young adults' relationships and the material conditions of their day-to-day lives. We position our visual work as both an intervention in the field of tobacco control research, practice and policy, and as a way to engage broader questions related to the (re)production of identity, bodies, gender and health.

Processes of Meaningful Community/University Research Partnership in Fostering Change: The Case Study of Qualitative Study addressing the Care Needs of Persons with Mental Illness and Developmental Disability

David Nicholas
University of Calgary
Avery Calhoun
University of Calgary
Anne Marie McLaughlin
University of Calgary
Sherri Tanchak
University of Calgary
Gail Zuk
University of Calgary
Janki Shankar
University of Calgary
Ralph Bodor
University of Calgary
Grace Elliot
University of Calgary
Linda Kreitzer
University of Calgary
Ernest Khalema
University of Calgary
Rob Scott
Alberta Hospital Edmonton
Kevin Cole
Alberta Hospital Edmonton
Wendy Hawkins
Alberta Hospital Edmonton

Mathew Milen
> *University of Calgary*

Individuals diagnosed with both mental illness and developmental disability are among society's most socially vulnerable. This population experiences impediments to stable and predictable living conditions due to insufficient government funding, under/unemployment, lack of affordable housing, caregiver burnout, challenging symptomatology, diagnostic challenges, and limited access to clinicians with appropriate expertise. The complex care needs of people with this dual diagnosis coupled with lack of appropriate health and community supports may contribute to intermittent or, in some cases, long term hospital care.

Involving a collaboration between academics from the Faculty of Social Work, University of Calgary and a number of community-based professionals, this project examines research processes in seeking to comprehensively respond to the needs of this 'at risk' population. Our collaborative work has involved a unique community/university partnership to conduct this qualitative study and ultimately foster translational both current and ongoing impact and change. Accordingly, we believe that the collaborative process inherent in this research endeavor will help to inform study outcomes, productive partnerships in moving forward, and our methodology as we communally explore meaningful collaboration approaches in addressing this substantive area. Trying to combine 'good science' with 'good social work' encourages us to attend to the relationship with and needs of our community partners in ultimately fostering meaningful research and advancing this area of practice and policy. In this session, we will describe both our findings as well as our research processes within the development of this community-university partnership. Study implications and recommendations will be discussed.

Readiness for nursing practice - A phenomenological study of nursing situations on a hospital ward

Yumi Nishimura
> *Osaka University*
Hiroki Maeda
> *Tokai University*

The majority of nursing studies deal with nursing care provided at the individual patient-nurse level. In hospital wards, however, 24-hour nursing care is provided by more than one nurse to multiple patients. This study described how ward nursing staff engaged in collaborative work from a phenomenological viewpoint. Fieldwork was conducted over a period of 3 years on the ward of respiratory and cardiovascular medicine. We made every effort to conduct the investigation ethically.

Immediately after these nurses entered the nurses' station, they recognized the work of others at the station and other locations, which, in turn, enabled them to grasp the situation of the entire ward. Moreover, they predicted what they needed to do for the day by obtaining and comprehending information on their duties as well as patients under their charge. Once they started to work, these nurses monitored their own work performance, and shared information and experience with other nurses to understand not only their respective roles and locations, but also the conditions of patients on the wards. They decided how to work and collaborate with each other based on assessment of the situation. All these practices contributed to their readiness to respond at any time to an unexpected event. Such readiness, for instance, enabled them to respond all the time to utterances of other nurses and take note of the absence of nurse call requests from patients. This description can also be used to help nurses reflect on their nursing practice.

Recovery and rehabilitation after lung cancer surgery

Trine Oksholm
Oslo University Hospital
Tone Rustoen
Oslo University Hospital
Mirjam Ekstedt
Oslo University Hospital

Lung cancer is a major cause of mortality and morbidity across the world. The subsequent phases of diagnosis and treatment often mean that patients are transferred between hospitals and different departments in the same hospital. Those transfers of patients is a challenge for both the patient and their family caregivers

The purpose of this study was to gather empirical knowledge about:
- how patients experience the transfer between different locations and between different departments at the same location
- and how the transition to home is experienced by the patients.
Qualitative interviews were conducted with patients diagnosed with lung cancer of both sexes and in different ages. Data was analyzed according to Kvale's method of qualitative analysis. Preliminary findings indicate that the respondents experienced a post-operative period characterized by discomfort and little support from their surroundings. The transfer to the local hospital was difficult, especially in patients with postoperative complications because of a lack of continuity between different health facilities. One theme includes distrust to their general practitioner due to delay in diagnosing, unanswered questions and experiences of lack of expert knowledge. After transition to home several patients expressed guilt and uncertainty in relation to adherence to prescriptions and continued treatment. So far, this study indicates a need for improved post-operative follow up of patients after lung cancer surgery.

Reflexivity and Transformation? Health care providers' perceptions of family health in a First Nations community

Donna Martin
University of Manitoba
Sarah Lazar
University of Manitoba

The purpose of this ethnographic study was to explore significant family health needs in a First Nations community from the standpoint of health care providers. Following ERB approval and permission from the Band Chief and Council, we utilized a convenience sample approach. Eight health care providers, working in the First Nations community, volunteered to participate in a one-hour audio taped semi structured interview. Participants shared their definitions of family health and identified factors that shaped family health. We documented field notes about our observations, feelings, and thoughts about family health. Transcripts and field notes were analyzed using Spradley's guidelines and a critical socio-ecological lens.

The most significant family health need was identified as "diabetes". Although a weekly diabetic workshop was a necessary resource to facilitate management of individuals' diabetes, health promotion and illness prevention programs were lacking.

By having the opportunity to practice reflexivity and share their experiences and perceptions

about family health and family health needs, these health care providers identified individual and collective strengths to promote family health. By sharing personal and professional stories about family health, these participants explored how food insecurity and lack of resources (human and physical) influenced the epidemic of type II diabetes within the community. Further research is required to determine if reflexivity and raised consciousness leads health care providers to personal, professional and social activism.

Reframing eating during chemotherapy in cancer patients with chemosensory alterations

Britt-Marie Bernhardson
Karolinska Institute
Karin Olson
University of Alberta
Vickie Baracos
University of Alberta
Wendy Wismer
University of Alberta

We lack knowledge about how patients with cancer make food choices when experiencing chemosensory alterations.
AIM: to further our understanding of the influence of beliefs and values about eating on food intake in individuals with perceived chemosensory alterations.
METHOD: Adult cancer patients experiencing alterations in taste and smell perceptions during chemotherapy were invited to participate. Beliefs, values and behaviors related to food preferences and food choices were elucidated using an ethnoscience approach. Data were collected using interviews and card sorts.
FINDINGS: Based on twelve participants receiving chemotherapy and experiencing chemosensory alterations, three overall taxonomies were identified; "constraints to eating","motivations to eat" and "behaviors to work around eating". Constraints to eating involved physical symptoms and personal dimensions of food choice. The motivations to eat were eating for health, eating to prepare for treatment, and eating for psycho-social benefits. The participants used behaviors involving strategies such as trial and error, selection of quick and easy foods as well as limiting social interactions or trying to work through the symptoms. The impact of constraints and motivations on participants' eating varied over time, with the greatest impact occurring shortly after treatment to times when participants were able to eat as desired when symptoms were manageable.
IMPLICATIONS: Knowledge about the factors that motivate eating and determine food selection, particularly when patients experience taste and smell alterations, will help health care staff develop interventions that target the factors associated with food choice, and thus may reduce patients' weight loss.

Seeking Licensure toward RN Employment in Canada: Experiences of nurses from the Philippines

Margery Hawkins
University of British Columbia

Increasingly internationally educated nurses (IENs), in particular IENs from lower income countries, are striving for licensure toward RN employment in Canada. Despite efforts to support their integration into the labour market, a significant number never complete the registration

process. I argue that to conform to guidelines for fair recruitment and integration practices, a contextual perspective is necessary. As such, I have drawn on ethnographic traditions informed by postcolonial feminism and relational ethical theory. Postcolonial feminism offers an opportunity for a multi-layered analysis of social, political, economic, and historical contexts that come to shape migration experiences. Ultimately, the aim of such a perspective is to generate knowledge that will achieve social justice. Relational ethical theory helps to account for forces that influence and sometime constrain decision-making by IENs as they progress along the trajectory towards Canadian RN employment. My sample consists of nurses educated in the Philippines, as these nurses represent the largest group of IENs in Canada and have a long history of nurse migration to learn from. To inform data collection and analysis, I have collaborated with an Advisory Group of IENs from the Philippines. It is my goal that knowledge be produced by and for nurses from the Philippines, rather than about such nurses. In this presentation I will describe my research methodology; data collection and analysis; and preliminary findings gleaned from focus group and individual interviews, that offer insights for policy making and ethical theorizing related to IEN recruitment and workplace integration practices in Canada.

Senior Project for the Active Life: A Participatory Research

Maria Luiza Miranda
        Sao Judas University
Mesaqu Correia
        Sao Judas University
MarÍlia Velardi
        Sao Judas University

This abstract is about a Participatory Research developed in the context of the Senior Project for the Active Life, created at the São Judas Tadeu University. The Senior Project aims, through physical activities, to build knowledge and to develop actions to build autonomy among elderly people, broadening their critical thinking about their reality. In order to do that, the pillars of its actions are the philosophical and methodological perspectives of the Principles of Health Promotion, the Theory of the Successful Ageing and the Paulo Freire's Pedagogy of Autonomy. The objectives of this study were to understand the educational daily life of the Senior Project, observing the dynamic of the social relationship at the educational process, as well as to identify how the educational praxis structures itself as a social practice. After eigth months of investigation, the results revealed that the pedagogical model of the Senior Project was coherent with an education that intends to contribute to social change based in the building of knowledge by the agents of the educational process. This coherence was perceived through the congruent way that the social relationships are established in the frame of the educational praxis. The results show that the educational practice in the Project Senior establishes in its praxis a social and political practice. Considering these results, to develop a practice for autonomy in the field of physical activity for elderly is an utopia possible to become true.

Tempting Fate: The Experiences of Older Women Who Continue to Delay Childbearing

Ashley Palandra
        University of British Columbia

Among Canadian women, the trend toward delaying childbearing continues to rise. As a consequence, we are seeing unprecedented rates of unintentional childlessness, a life event which may have devastating psychological effects for women for whom motherhood is an important life

goal. Research has implicated misinformation as a primary cause of unintentional childlessness. It is widely documented that women and their partners are largely uninformed about the reproductive lifespan and resultantly base fertility decisions on misconceptions about women's and men's fertility. However, there is a subset of women who do understand the specifics of fertility decline and the various risks involved with delaying childbearing, and still choose to delay motherhood. Using a qualitative, phenomenological methodology the current pilot study sought to understand how such knowledge impacts the childbearing decisions of these women, and investigate the lived experience of delayed childbearing among this understudied population. In-depth semi-structured interviews were conducted with two women, aged 31 and 35. Five broad themes emerged from the women's experiences: 1) knowledge, 2) choice, 3) importance of relationship, 4) readiness and developmental context, and 5) concerns about delaying. The results of this study suggest that for these women developmental and contextual factors are inextricably linked to childbearing decision-making. In addition, fertility-related knowledge appears to be a "double-edged sword" for the women in this study; specifically, having fertility-related knowledge appeared to allow for more informed childbearing decision-making, but also increased women's anxiety and fears. Future research needs to further explore the role of fertility-related knowledge in this population.

The Elephant in the Room: Care Providers' Perceptions about the Role of Non-Clinical Others in Breast Cancer Patients' Treatment Decision Making

Suepattra May
>	*Palo Alto Medical Foundation Research Institute*
Katharine Rendle
>	*University of Michigan*
Nicole Ventre
>	*Palo Alto Medical Foundation Research Institute*
Dominick Frosch
>	*Palo Alto Medical Foundation Research Institute*

The breast cancer patient is often part of a network of relationships and can rarely be isolated from the influence others in their lives may have. Accordingly, social support networks are likely to play a substantial role in treatment decisions. Much has been published in the peer reviewed literature documenting how breast cancer impacts social support, coping, quality of life and relationship satisfaction among patients, their partners and family members. This literature documents well the emotional distress breast cancer creates for patients and their social network and how its manifestations can impact a patient's clinical outcomes. Yet, very few studies have examined how these non-clinical others may influence treatment decisions and related outcomes. We conducted 20 in-depth interviews with clinicians, care providers and advocates caring for women diagnosed with breast cancer. Data were coded for key themes using ATLAS.ti Qualitative Data Analysis software. We describe the experiences of providers caring for these patients; and their observations of and experiences with non-clinical others in patients' treatment decision making. Our interviews highlight how the current healthcare delivery structure often treats patients as singular entities or diagnostic encounters; rarely acknowledging the circles of care that can exert influence on decision making. Lack of attention to non-clinical others can lead to sub-optimal medical decision making because these influences aren't adequately understood by clinicians, thus findings from this study may be useful for enhancing clinicians' and researchers' understanding of the influence of others in patients' treatment decision making, enabling them to intervene in these practices.

The Internal Strengths and Coping Strategies of Women with Locally Advanced Breast Cancer

Natalee Popadiuk
  University of Victoria
Amrita Grewal
  University of Victoria
Ali Dohadwala
  University of Victoria
Lee Ann Martin
  BC Cancer Agency
 Savitri Singh-Carlson
  California State University, Long Beach
Frances Wong
  BC Cancer Agency

Women who receive a diagnosis of breast cancer typically report feeling highly distressed and concerned about their treatment process, and the eventual outcome. Seeking medical interventions with multiple healthcare professionals, often located within diverse parts of the system, can be additionally overwhelming and disorienting. The purpose of this study, therefore, was to learn more about the experiences of women with locally advanced breast cancer (LABC) who received initial management in the community (Metro Vancouver), and then at the B.C. Cancer Agency (BCCA). In this narrative study, we interviewed 12 women who had been diagnosed and treated for LABC, with a focus on what experiences they found particularly helpful or unhelpful during their treatment trajectory. Using a thematic coding approach, we analyzed 12 interview transcripts and found that participants drew on a variety of internal resources, personal qualities, and worldviews to help them navigate the challenges and uncertainty involved in their treatment. We found that participants demonstrated particular attitudes, beliefs, and behaviours which were often reflective of a sense of personal agency and resilience. Implications for professionals will be discussed.

The breast cancer patient is often part of a network of relationships and can rarely be isolated from the influence others in their lives may have. Accordingly, social support networks are likely to play a substantial role in treatment decisions. Much has been published in the peer reviewed literature documenting how breast cancer impacts social support, coping, quality of life and relationship satisfaction among patients, their partners and family members. This literature documents well the emotional distress breast cancer creates for patients and their social network and how its manifestations can impact a patient's clinical outcomes. Yet, very few studies have examined how these non-clinical others may influence treatment decisions and related outcomes. We conducted 20 in-depth interviews with clinicians, care providers and advocates caring for women diagnosed with breast cancer. Data were coded for key themes using ATLAS.ti Qualitative Data Analysis software. We describe the experiences of providers caring for these patients; and their observations of and experiences with non-clinical others in patients' treatment decision making. Our interviews highlight how the current healthcare delivery structure often treats patients as singular entities or diagnostic encounters; rarely acknowledging the circles of care that can exert influence on decision making. Lack of attention to non-clinical others can lead to sub-optimal medical decision making because these influences aren't adequately understood by clinicians, thus findings from this study may be useful for enhancing clinicians' and researchers' understanding of the influence of others in patients' treatment decision making, enabling them to intervene in these practices.

The Lived Experience of High School Teens in Abusive Relationships: A retrospective narrative.

Sharyl Toscano
> *University of Vermont*

In this study, the researcher invited college Freshman and Sophomores who answered yes to one or more items on the Danger Assessment (Campbell, 1986) to participate in a qualitative study about that experience. All participants' answers were based on their experience in high school (including the summer following graduation). Based on previous work the researcher anticipated that college freshman and sophomores would have had more time to reflect on their high school dating relationships. To get a better picture of the entire high school experience, college freshman and sophomores were asked to recall their high school experience. Ten female college students participated in the research study. The qualitative method of phenomenology was used.

Analysis of this data is ongoing. Early themes are evident across narratives. The drive to become popular ends in isolation. Control is established by isolation and creating a sense of responsibility and is maintained by angry outburst and guilt. Hiding abuse is accomplished by explaining away the evidence usually in an elaborate story that often doesn't match in the telling. In their stories, these young women miss good and better times and continue to care and have concern for their abuser who is often described as being "troubled". The experience is replete with sexual pressure and/or rape followed by consensual casual sex. The experience follows and continues to the college setting.

The Never-Ending Quest: Experiences of Managing Body Weight after Weight Loss

Melanie Turk
> *Duquesne University*
Richard Zoucha
> *Duquesne University*

Weight-loss programs have succeeded in promoting weight reduction; however, little is known about the challenging experience of weight maintenance after weight-loss treatment. The purpose of this study was to understand the experience of weight maintenance two years after behavioral weight-loss treatment. The research question which guided the study was, "what is the human experience of maintaining weight loss?" Using the methodology of the Utrecht School of Phenomenology, in-depth, semi-structured interviews and qualitative analysis were used to identify themes from the informants' experiences of managing their weight. Informants were invited to participate until no new information was seen in the data, and theoretical saturation had occurred. Interviews from 16 informants were coded and analyzed by two investigators in concert with the method of analysis identified above. The two levels of analysis (common forms and shared themes) resulted in four shared themes: 1) external forces affecting the ability to manage weight, 2) justifications for inaction around the behaviors needed to support weight management, 3) managing the realities of life and the ever-present need to deal with life circumstances affecting weight management, and 4) perseverance and determination to overcome difficulties in the midst of struggle. These themes are interacting components in one's human environment and suggest a core process- weight management is a never-ending quest to find one's way within the context of personal life circumstances. These findings suggest the need to develop tailored programs that support persons in their efforts to handle influencing factors and real-life situations in their ongoing weight-management pursuit

Understanding the Role of Social Capital in Oral Health of First Nation Children

Mohammad H. Salehyar
        University of Alberta
Maryam Amin
        University of Alberta
Louanne Keenan
        University of Alberta
Steven Patterson
        University of Alberta
Nancy Gibson
        University of Alberta
Ken Caine
        University of Alberta

The objective of this study is to investigate the role of social capital in oral health of First Nation children in North Central Alberta. Developing effective strategies to promote oral health requires a more comprehensive understanding of biological, psychosocial, and environmental determinants affecting children's oral health. Current health promotion models emphasize a multilevel health determinants framework to structure the factors that influence health. Similar components need to be included in oral health promotion models. A qualitative method has been employed for a complete empirical exploration of the concept of social capital and its role in Aboriginal children's oral health using a case study approach. A purposive sample of 25 individuals will be recruited from a First Nation community. Individual interviews were conducted with the Band's elders, Health Director, and health workers. Focus groups will be conducted with primary caregivers of preschool children. An interview guide developed based on the Putnam's model of Social Capital will direct the interviews. The thematic analysis of the data is in process and preliminary results will be presented. The study will follow the framework for assessing the quality of qualitative research introduced by Guba and Lincoln, which emphasized: Credibility, Transferability, Dependability, and Confirmability. To ensure the delivery of the key messages to different stakeholders such as the community, policymakers, and academics, a multi-level dissemination of the study findings are planned. The results will be applied to designing a future study focusing on how to mobilize the community's social capital in order to improve children's oral health.

Utilizing Action-project Method to Capture the Joint Projects of Youth in Transition to Adulthood

Leah Wilson
        University of British Columbia
Krista Socholotiuk
        University of British Columbia
Amy Green
        University of British Columbia
Laura Klubben
        University of British Columbia
Sheila Marshall
        University of British Columbia
Filomena Parada
        Universidade de Coimbra
Emily Polak

University of British Columbia
Richard Young
University of British Columbia

Transition to adulthood has been conceptualized in a number of ways. Some approaches are concerned with the sequence of life events and social markers often tied to age, some are concerned with psychosocial maturity and capacity for autonomy and intimacy, and others focus on traditional and cultural marking of developmental events. Generally, research in this field overlooks the actions youth engage in with peers in the transition process. The aim of this study was to describe how naturally occurring joint projects of youth with peers assist youth in making the transition to adulthood. The peer-based transition projects in different social or cultural contexts were investigated in order to understand the process of transition to adulthood as socially constructed with peers. Fifteen youth-peer dyads (ages 19-25) participated. Data were collected using the action-project method allowing for a detailed, qualitative account of the youths' transition to adulthood projects. Data represented three perspectives on action: the manifest behaviour, the thoughts and feelings participants use to steer joint actions, and the social meaning they attribute to the joint action. The descriptive power of action theoretical research facilitates understanding of how youth jointly construct, articulate, and act on goals pertinent to the transition to adulthood. The transition projects identified from the data are described; main projects include: identity, social inclusion, and relationships. Utilizing a joint action framework to conceptualize young-adult transition captures the relational context of this process, highlighting specific ways in which families and professionals can intervene around youth-driven priorities and informing future research.

What support is available for pregnant women accessing maternity services who are at risk of family/domestic violence?

Jennifer Dodd
Telethon Institute for Child Health Research

This poster presents preliminary findings of how maternity system services in Western Australia currently identify and respond to pregnant women at risk of domestic violence.

Intimate partner violence during pregnancy has been associated with an increased risk for women developing stress and anxiety symptoms and presenting with abdominal injuries. Miscarriage, low birth weight babies, premature birth, fetal injury, ante-partum haemorrhage and perinatal death rates increase for pregnant women who are subject to domestic violence.

An audit was sent to health professionals in government and private maternity units, child health centres, women's health services and community health services so as to elicit methods for identifying women at risk. It also mapped the referral pathways used and barriers and facilitators to responding to this group. Another audit was sent to a range of community sector services to map the effectiveness of referral pathways between the health and community sectors.

The poster will present some preliminary findings that indicate access to professional development, more culturally appropriate processes and improved relationships with a range of community and welfare organisations have been identified as being the most important areas for development and improvement. Areas of contention and tension will also be presented, such as, child protection issues and fears that women's children will be taken away if they disclose they are at risk of FDV.

The presentation will show how these issues will inform the next phase of the study, including the qualitative methods that will be used to explore sensitive and complex issues.

Why postpartum mothers stop breastfeeding early in Hong Kong?

Ka Fai Wong
> *Open University of Hong Kong*
Kit Mui Ieng
> *Open University of Hong Kong*
Kam Ying Kan
> *Open University of Hong Kong*
Yuen Ching Lo
> *Open University of Hong Kong*
Pui Ki Lau
> *Open University of Hong Kong*
 Yin Ha Siu
> *Open University of Hong Kong*
Chui Lok Tang
> *Open University of Hong Kong*
O Yee Tsang
> *Open University of Hong Kong*
Elain Wong
> *Open University of Hong Kong*
Lok Ting Yeung
> *Open University of Hong Kong*

Background: Increasingly medical research was showing the health benefits of breast feeding for both mothers and babies. Despite breastfeeding was a health-promoting behavior, some postpartum mothers stopped breastfeeding early for different difficulties they experienced. Previous research into decision making about infant feeding had predominantly used surveys to look at the socio-demographic variables and attitudes associated with breast feeding, limited qualitative study was conducted in Hong Kong.

Methods: This qualitative study aimed to explore postpartum mothers' decision for early cessation of breastfeeding in Hong Kong. A total of 8 postpartum mothers, who carried similar socio-demographic background, were purposively invited. Semi-structured interviews, lasting for 45 minutes, were audio-taped, transcribed. Thematic an
alysis was applied to identify themes that captured the postpartum mothers' experiences on their breastfeeding. Respondent validation was used to check whether the data analysis and interpretation truly represented the postpartum mothers' views.

Findings: Four themes were identified: 1) high expectation from breastfeeding; 2) difficulties experienced; 3) Unexpected barriers perceived for breastfeeding; 4) cultural concern. Postpartum mothers had learned much difficulty in practicing breastfeeding that might affect their decision on the duration of breastfeeding.

Implications: The findings offered a picture on postpartum mothers' experiences on their breastfeeding. Sufficient preparation and training to postpartum mothers was highly suggested. The governmental policies should be implemented appropriately to facilitate the behavior of breastfeeding in Hong Kong.

Women's control during labour: experience of Brazilian women who participated and who did not participate of a program of preparation for childbirth

Maria Makuch
  Center for Reproductive Health Research (CEMICAMP)
Maria Amelia Miquelutti
  CEMICAMP
Jose Guilherm Cecatti
  University of Campinas

Brazil has high C-section rates and initiatives for change are being taken. A qualitative study based on semi-structured interviews with primiparous women attended at a tertiary maternity in the south eastern region of Brazil was conducted. The objective was to understand meanings and needs of laboring women. Participants were 10 women who participated and 11 who did not participate of a program of preparation for childbirth. The program consisted in group meetings after pre-natal consultation to inform participants of the stages of labour and delivery, to do specific exercises to improve general wellbeing, training of vertical positions, and breathing techniques for the control of contractions. Interviews were recorded and verbatim transcribed. For analysis themes were organized in categories: control during labour, positions used during labour and satisfaction with labour. All the women who had participated of the program referred they had felt in control during labour, maintained the upright positions and respiratory techniques to alleviate pain and discomfort without difficulty. In general, all expressed satisfaction with labour. On the other hand, more than half of the women who did not participate of the program referred that they had not been able to be in control of labour, had difficulties to maintain up-right positions, even though they acknowledged that those positions were more comfortable, and in general they were not satisfied with their labour. These results may contribute to a better understanding of the needs of labouring women and contributed to the discussion of initiates of reduction of C-section rates.

Author Index