



# UNB Faculty of Nursing 26<sup>th</sup> Annual Research Day

Agenda, August 25<sup>th</sup> 9:00am – 12:30 pm (ADT)

## UNB Faculty of Nursing Research Day Agenda

August 25, 2021

All times are in Atlantic Time

Time	Event
9:00 am – 9:05 am	<b>Welcome</b> Dr. Sue O'Donnell, UNB Faculty of Nursing
9:10 am – 10:20 am	<b>Oral Synchronous Presentations Session 1</b> 10 min presentation + 5 min discussion
10:20am - 10:40 am	Break
10:40 am – 11:20 am	<b>Student &amp; Faculty Virtual Networking</b> Faculty overview of research, 3 min + 1 slide + Q & A discussion
11:20 am – 12:30 pm	<b>Oral Synchronous Presentations Session 2</b> 10 min presentation + 5 min discussion
12:30 pm	Session is complete, thank you for participating 😊

# Oral Synchronous Presentations Session 1

## **Research Presentations** (10 minute presentation + 5 minute Q&A)

### **1. Health promotion in women with suicidal thoughts: Initial coding in a grounded theory study**

Dr. Petrea Taylor, PhD, RN, UNB Faculty of Nursing  
Jocelyn Russel, BN Student, UNB Faculty of Nursing  
Emma Pleshka, BN ASP Student, UNB Faculty of Nursing

### **2. New Graduate Nurses' Perspectives on Career Crafting in the Province of New Brunswick, Canada**

Dr. Emily Read, UNB Faculty of Nursing  
Ridhi Sharma, BN Student, UNB Faculty of Nursing

### **3. Awitgati Longhouse & Cultural Centre. A Place to Come Together and Be Well**

Dr. Jason Hickey, UNB Faculty of Nursing

### **4. Environmental Scan of Support and Resources for Family Caregivers of Persons in Hospice and Nursing Homes in New Brunswick: Protocol and Early Findings**

Dr. Pam Durepos, UNB Faculty of Nursing  
Dr. Catherine Aquino-Russell, UNB Faculty of Nursing  
Dr. Emily Read, UNB Faculty of Nursing  
Richelle Witherspoon, MLIS, MSc, UNB Libraries  
Karen Totton, BN Student, UNB Faculty of Nursing  
Odette Gould, PhD

## Health promotion in women with suicidal thoughts: Initial coding in a grounded theory study

Dr. Petrea Taylor, PhD, RN, UNB Faculty of Nursing  
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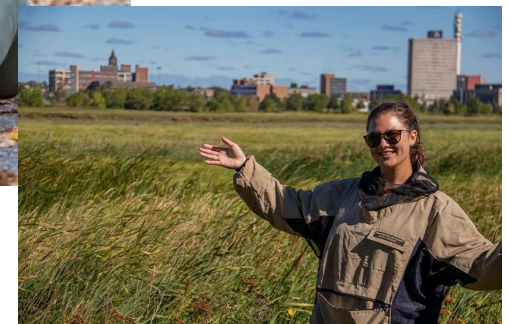
Despite assumptions that suicide is black and white, a person either wants to die by suicide and they go through with it or they do not, it is actually situated in ambivalence. Indeed, among 2 million Canadian women who have thought of suicide, most will never die by suicide and many will have the thoughts for long periods and continue to live. In her dissertation about women's help-seeking for suicidality after intimate partner violence, Dr. Taylor found that women prioritize many aspects of their health and actively promote their well-being even when thinking of suicide. Building upon these findings, the research team seeks to understand the process of women's health promotion during periods of suicidality, using a grounded theory design. Research assistants Jocelyn Russell, a 4th year nursing student, UNB Fred and Emma Pleshka, a 2nd year ASP student, UNB Moncton and Dr. Taylor, the primary investigator, are in the process of analyzing approximately 10 interviews Canadian women about their experiences promoting their health while having suicidal thoughts. The team will discuss 1st level coding in the line-by-line analysis approach through a demonstration in NVivo, a qualitative analysis software. We will also share initial insights through a discussion about memoing, or chronicling reflections, hunches, and ideas about potential patterns in the data.



Petrea Taylor



Jocelyn Russel



Emma Pleshka



## New Graduate Nurses' Perspectives on Career Crafting in the Province of New Brunswick, Canada

Dr. Emily Read, UNB Faculty of Nursing  
Ridhi Sharma, BN Student, UNB Faculty of Nursing

The current global nursing shortage has been exacerbated by the COVID-19 pandemic and has made it difficult for health care organizations to recruit and retain registered nurses. Registered nurses are in high demand, giving them more choices and control over their careers. Past research has also identified generational differences in career pathways among nurses, with younger nurses often preferring to work part-time or casual positions to achieve work-life balance and seeking new roles more frequently. Thus, new graduate nurses are likely engaging in career crafting, defined as an individual's proactive behaviours aimed at optimizing career outcomes through improving person-career fit. In practical terms, new graduate nurses are in a position to pick and choose the job(s) and roles that they want to take on and create their own career path. Unfortunately, this presents recruitment and retention challenges for health care organizations offering more traditional career options. The goal of this proposed study is to explore and describe how new graduate nurses engage in career crafting in order to better understand the career goals and needs of new graduate nurses in New Brunswick (NB). In order to answer our research question - How do new graduate nurses in NB engage in career crafting? - we will conduct semi-structured one-on-one interviews with a random sample of new graduate nurses ( $n = 50$ ) currently working in NB with up to 5 years of experience as a registered nurse. Interviews will be audio-recorded and transcribed verbatim. Data will be analyzed using interpretive description.



Dr. Emily Read



Ridhi Sharma

## **Awitgati Longhouse & Cultural Centre. A Place to Come Together and Be Well**

Dr. Jason Hickey, UNB Faculty of Nursing

This presentation sets out an ambitious plan to build Awitgati, a modern-day longhouse and cultural centre to serve the needs of the Indigenous community in New Brunswick and function as a site for building relationships, intercultural dialog and reconciliation. The facility will also act as a showcase for net-zero design and accessibility, stimulate growth in the regional green economy, and create good jobs.

Under One Sky Friendship Centre (UOS) in Fredericton is leading this project in close collaboration with the presenter, Dr. Hickey and other partners. The bold vision for an Indigenous healing centre is the result of over a decade of community service and research. Intensive community engagement leading up to a recent infrastructure funding application led to the formation of five strategic objectives:

- Foster community
- Empower people
- Enrich culture
- Sustainability
- Inclusion and equity

This presentation will outline how nursing faculty members supported a feasibility study and subsequent grant application for \$18.6 million through the Green and Inclusive Community Buildings Program (results pending). The project has been featured by CBC and Global News and received written support from 36 stakeholders from community, business, and government sectors. If the funding application is successful, the new centre will host over 30 new programs and services and offer extensive learning experiences and research opportunities for faculty, staff and students at UNB.



## **Environmental Scan of Support and Resources for Family Caregivers of Persons in Hospice and Nursing Homes in New Brunswick: Protocol and Early Findings**

Dr. Pam Durepos, UNB Faculty of Nursing  
Dr. Catherine Aquino-Russell, UNB Faculty of Nursing  
Dr. Emily Read, UNB Faculty of Nursing  
Richelle Witherspoon, MLIS, MSc, UNB Libraries  
Karen Totton, BN Student, UNB Faculty of Nursing  
Odette Gould, PhD

Caring for a family member or friend with a life-limiting illness can have negative impacts on the family caregiver such as depression, anxiety, burden and complicated grief in bereavement. These negative impacts can accumulate during the caregiving journey, making it difficult for the family caregiver to cope, prepare and manage during end-of-life. Family caregivers have described specific information, communication, actions and supports needed to maintain a sense of control, fulfill obligations and adapt to change at end-of-life. However, the extent to which current programs address these concepts and are accessible to family caregivers in New Brunswick is not known. Hence, we are currently conducting an environmental scan of interventions for family caregivers of persons in hospice and nursing homes in New Brunswick. The scan includes: 1) a realist review of literature to understand what interventions exist for family caregivers of persons at end-of-life internationally, how the interventions work and in what context; 2) interviews and survey of key informants in nursing homes and hospices in NB; and 3) focus groups to share study findings, and identify opportunities for quality improvement and collaboration with the nursing home and hospice sectors. A description of the protocol and early findings will be presented.



Dr. Pam Durepos

# Student & Faculty Virtual Networking

**Faculty overview of research; 3 minutes + 1 slide + Q & A discussion**

## **Faculty Presenters**

- Dr. Jason Hickey
- Dr. Isodore Chola Shamputa
- Dr. Marilyn Hodgins
- Dr. Lisa Keeping-Burke
- Dr. Sarah Balcom
- Dr. Sue O'Donnell



# Oral Synchronous Presentations Session 2

## **Research Presentations** (10 minute presentation + 5 minute Q&A)

### **5. A rapid qualitative investigation of stakeholder perspectives on in-home passive remote monitoring to support aging in place in the province of New Brunswick, Canada**

Dr. Emily Read, UNB Faculty of Nursing

Ridhi Sharma, BN Student, UNB Faculty of Nursing

### **6. Appraisal of Surgical Patient Education Materials Available on Ontario Hospital Websites**

Naomi Cailes, MN Thesis Stream Student, UNB Faculty of Nursing

Marilyn Hodgins RN, PhD, UNB Faculty of Nursing

### **7. Tuberculosis in New Brunswick: Where are we now and where are we going?**

Clara Kelly, BN Student, UNB Saint John Department of Nursing and Health Sciences

Isdore Chola Shamputa, PhD, Department of Nursing & Health Sciences, University of New Brunswick, Saint John, NB

Duncan Webster, MD, Dalhousie University New Brunswick, Saint John, NB

Kim Barker, MD, Government of New Brunswick, Department of Health, Saint John, NB

### **8. Masculinity and violence interconnectedness: Defining and reconciling the gender paradox among men with cumulative lifetime violence histories**

Dr. Sue O'Donnell, UNB Faculty of Nursing

Dr. Kelly Scott Storey, UNB Faculty of Nursing

Dr. Petrea Taylor, UNB Faculty of Nursing

Charlene Vincent RN, MN, UNB Faculty of Nursing

# **A rapid qualitative investigation of stakeholder perspectives on in-home passive remote monitoring to support aging in place in the province of New Brunswick, Canada**

Dr. Emily Read, UNB Faculty of Nursing  
Ridhi Sharma, BN Student, UNB Faculty of Nursing

This qualitative study investigated experiences and perceptions of four diverse stakeholder groups on in-home passive remote monitoring (PRM) systems to support aging in place. We conducted one-on-one interviews with a sample of diverse stakeholders of  $n = 28$  via telephone or in person between 2018 and 2020. Interviews were audio recorded, transcribed, and analyzed by a team of six researchers. Data was analyzed using a rapid assessment process approach that included matrix analysis. Our findings emphasized many benefits and challenges regarding the adoption of passive remote monitoring for clients, their family/friend caregivers, and the public provincial health and social services systems. Some of the perceived benefits were reduced isolation for clients, improved support for caregivers, increased peace of mind and increased accessibility of services, decreased caregiver burden, better relationships, monitoring of paid caregivers (prevent abuse) and tracked evolving care needs, economical, addressed the current workforce shortage, decreased institutionalization, etc. Perceived barriers included a lack of awareness and knowledge of the service, communication between entities, preference for traditional/familiar home support services (esp. in crisis), the additional caregiving responsibility required, reluctance to promote a service offered by a private company, costs, privacy, and language. Overall, stakeholders aimed to meet the individualized needs of each client; however, there was disagreement regarding which client's needs were a good fit for the PRM system, as well as was role ambiguity amongst social workers. We describe and discuss the findings in our paper and provide recommendations for further research.



Dr. Emily Read



Ridhi Sharma

## Appraisal of Surgical Patient Education Materials Available on Ontario Hospital Websites

Naomi Cailles, RN, BScN, MN Thesis Stream Student, UNB Faculty of Nursing  
Marilyn Hodgins RN, PhD, UNB Faculty of Nursing

**Background:** Many hospitals are making surgical patient education materials (PEMs) accessible online. This project appraises the readability, understandability, actionability, and content of the online surgical PEMs that are available on a random sample of hospital websites in Ontario, Canada.

**Methods:** The websites of 22 randomly selected Ontario non-teaching hospitals were searched for surgical PEMs. Readability was measured using the SMOG formula. Understandability and actionability were measured using the Patient Education Materials Assessment Tool – Print. Content was appraised by grouping information into themes and measuring the frequency of each theme.

**Results:** 21 hospital websites provided surgical PEMs. The median SMOG reading grade level was 12, which exceeds the reading grade level of 8 to 10 recommended by the Canadian Public Health Association. The median understandability score was 62% (IQR, 45-75) and the median actionability score was 60% (IQR, 60-60). Most PEMs used an active voice (95.2%), addressed the reader directly (95.2%), and provided explicit steps for action (95.2%). Only 2 PEMs used visual aids (9.5%) and none provided a summary. Eleven content themes were identified that spanned the pre-operative, operative, and post-operative periods. Most PEMs provided information on hospital policies and procedures (95.2%) and preoperative appointments (71.4%). Few PEMs provided information on post-discharge recovery (23.8%) or potential complications (9.5%).

**Conclusion:** There is opportunity to improve the readability, understandability, actionability, and content of the surgical PEMs available on Ontario hospital websites. The results of this project provides nurses and other healthcare providers with specific recommendations to improve online surgical PEMs.



Naomi Cailles



Dr. Marilyn Hodgins

## Tuberculosis in New Brunswick: Where are we now and where are we going?

Clara Kelly, BN Student, UNB Saint John Department of Nursing and Health Sciences

Isidore Chola Shamputa, PhD, Department of Nursing & Health Sciences, University of New Brunswick, Saint John, NB Duncan

Webster, MD, Dalhousie University New Brunswick, Saint John, NB

Kim Barker, MD, Government of New Brunswick, Department of Health, Saint John, NB

New Brunswick (NB) welcomes many newcomers from various parts of the world every year. With the increased pattern of immigration, the NB health care system needs to be prepared to manage diseases, including tuberculosis (TB), which may be of higher prevalence among certain newcomers. As part of a larger project, the objectives of my summer studentship project were to: i) describe the newcomer population in NB; ii) identify and adapt TB educational materials available to New Brunswickers, and iii) begin to refine protocols and guidelines for TB management in NB. To achieve these objectives, comprehensive searches were conducted on various websites to retrieve information. In liaison with the YMCA of Greater Saint John and the Saint John Newcomer Centre staff, we estimated the newcomer populations they serve. The Immigration, Refugee, and Citizenship Canada and Statistics Canada websites were searched for additional information. To identify TB educational materials, the government of NB, the government of Canada, World Health Organization, Pan-American Health Organization, and StopTB websites were reviewed. The findings revealed about 5000 newcomers arrive in NB annually, with about 3000 settling in southern NB. The TB educational resources available to the public were limited. Consequently, several resources were adapted or developed to meet the newcomers' needs. The TB protocols and guidelines have been updated and modified using internal documents from other provinces in Canada and elsewhere. The gathered information, educational resources, and refined TB protocols will help raise awareness with regards to TB and improve TB care in NB.



Clara Kelly



Dr. Isidore Chola Shamputa



# **Masculinity and violence interconnectedness: Defining and reconciling the gender paradox among men with cumulative lifetime violence histories**

Dr. Sue O'Donnell, UNB Faculty of Nursing

Dr. Kelly Scott Storey, UNB Faculty of Nursing

Dr. Petrea Taylor, UNB Faculty of Nursing

Charlene Vincent RN, MN, Research Assistant, UNB Faculty of Nursing

This presentation will focus on qualitative data gathered as a part of a mixed methods study of Atlantic Canadian men who experienced cumulative lifetime violence. Findings from this research demonstrated that gender and masculinity are linked to violence in ways that, not only informed participant views about what it means to be a man, but also their use of violence. The interrelationship of gender and violence was labelled masculinity and violence interconnectedness (MV interconnectedness). MV interconnectedness represents the complex connection between gender and violence, a connection that is difficult to separate due to persistent normalization and acceptance of violence. Normalization and acceptance of violence among boys and men is influenced by social norms, pressures, and stereotypical views about what it means to be a man. Use of violence is one way that men live up to individual and social pressure to 'be a man' and thus MV interconnectedness generates reward for men and contributes to their sense of self. MV interconnectedness also contributes to significant harm for men and others. The contradictory nature of MV interconnectedness and the tension that arises when men contemplate the link between gender and violence, the related harms, and their desire to separate violence from how they define themselves as men, was labelled the paradox. As men grapple with the paradox, and the ways that gender and violence have influenced their lives, they are better able to imagine and move toward separating or disconnecting violence from how they define themselves as men.



Charlene Vincent



Dr. Kelly Scott-Storey



Dr. Petrea Taylor



Dr. Sue O'Donnell