



UNIVERSITY OF  
SASKATCHEWAN

**College of Nursing**

## **Research & Scholarship Day 2022 Abstracts**

**Thursday, October 13, 2022**



**BE WHAT THE WORLD NEEDS**

## Land Acknowledgment

*The land is acknowledged as our Mother, the Earth. The University of Saskatchewan is committed to honour and support the \*Indigenous peoples, Indigenous cultures, Indigenous values, and Indigenous languages that belong to the land of Treaty 6 Territory and Homeland of the Metis. The University of Saskatchewan is committed to working towards honouring and support, colonized lands and protecting the land in a way that demonstrates respect and love. The University of Saskatchewan extends this commitment to the lands and Treaty territories (Treaties 2, 4, 5, 6, 7, 8, and 10) that constitute kisiskaciwan ([Saskatchewan], "the swift current", Cree/Saulteaux), and all Indigenous people that call kisiskaciwan home. We are born to the land and the land claims us.*



## Agenda

9:00 – 9:15	<b>Welcome and Land Acknowledgment</b>
9:15 – 9:40	<b>Opening Remarks &amp; Prayer</b> Judy Pelly, Knowledge Keeper, Cote First Nation
9:45 – 10:30	<b>Keynote Address</b> Dr. Darcy Marciniuk, Associate Vice-President Research Dr. Dawn Wallin, Associate Vice-President Research (Engagement)
10:30 – 10:45	<b>BREAK</b>
10:45 – 11:45	<b>Panel Discussion: The Evolution of Nursing Research and Scholarship</b> Panel Members – Dr. Lois Berry, Dr. Tania Kristoff, Dr. Kasha Mcharo & Jordan Sherstobitoff
11:45 – 12:30	<b>LUNCH BREAK</b>
12:30 – 1:15	<b>Virtual Poster Presentations</b>
1:15 – 2:00	<b>Keynote Address</b> Dr. Vivian Ramsden, Professor & Director, Research Division, Department of Academic Family Medicine, College of Medicine
2:00 – 3:00	<b>Panel Discussion: Collaborative Research</b> Panel Members – Dr. Donna Rennie, Dr. Tony de Padua, Lindsey Vold, & Shawn Emard
3:00 – 3:15	<b>Student Award Announcements &amp; Closing</b>

# Invited Speakers

## Opening Remarks & Prayer: Judy Pelly, Knowledge Keeper

Judy Pelly is a Knowledge Keeper/Cultural Advisor born and raised on Cote First Nation. She is a mother of three sons and a kohkum of five. Judy was raised with Anishnabae/Saulteaux cultural traditions, she is a practitioner and attends and participates in her family/community cultural ceremonies. She attended St. Philips Indian Residential Schools from 6-13 yrs. until 1964.

Judy eventually attended the University of Saskatchewan. She worked with FSIN with their post secondary programs and institutes, she worked in Alberta as an Education Manager for 13 years and returned to Saskatoon in 1996 to work with a FSIN Education post secondary institute, SIIT and was Dean for Community Health Studies department until her retirement.

Currently a contractor for SHA: Mental Health and Addictions Adult unit, this work provides the opportunity to work with women at risk and to provide guidance in cultural activities with various agencies and community based organizations. Judy encourages all organizations to continue to work together with TRC and reconciliation.



## Keynote Address: Dr. Darcy Marciniuk, Associate Vice-President Research

Darcy D. Marciniuk, MD, FRCPC, FCAHS, Master FCCP is a Professor of Respiriology, Critical Care and Sleep Medicine, and Associate Vice-President Research at the University of Saskatchewan.

Dr. Marciniuk is recognized internationally as an expert and leader in clinical exercise physiology, COPD, and pulmonary rehabilitation with more than 450 invited national/international presentations and 250 peer-reviewed publications, book chapters, and reviews. Dr. Marciniuk serves as Deputy Editor for the journal CHEST, is a past-President of CHEST and the Canadian Thoracic Society, past-Chair of the Forum of International Respiratory Societies (FIRS) and was a founding Steering Committee member of Canada's National Lung Health Framework. In his role as AVPR, Darcy leads the Responsible Conduct of Research portfolio, serves as the CIHR Tri-Agency lead, and provides oversight for International Research and Partnerships.



## Invited Speakers



### **Keynote Address: Dr. Dawn Wallin, Associate Vice-President Research (Engagement)**

Dawn Wallin is a Professor in the College of Education. As an alumna of our institution Dawn completed each of her Bachelor of Education (English and Mathematics), Master of Education (Educational Administration), and Doctor of Philosophy (Educational Administration) degrees at the University of Saskatchewan.

Dawn possesses an impressive and extensive career in the elementary, secondary, and tertiary education sectors. Having begun her career as a teacher in the Kindersley School Division, her career has quickly grown to include several formal and informal leadership positions. For instance, Dawn has worked to design effective educational programming opportunities for students in pre-K-12 and post-secondary contexts and has also consulted or partnered with organizations that represent a variety of interests, including ministries of education, educational organizations, regional colleges and university faculties. She has also held executive positions for the Canadian Association for Educational Administration, the Canadian Association for Women in Education, and the Canadian Society for the Study of Education. Her research interests focus on rural education, educational administration and leadership, equity issues in education, and teacher education.

Dawn began her career in academia in 2002. Since this time, she has held several faculty and leadership positions at the University of Texas, University of Manitoba, and University of Saskatchewan. Since joining the University of Saskatchewan as a Professor in August 2015, Dawn has held several leadership positions including Associate Dean Undergraduate Programs, Research, and Partnerships, Acting Dean, and most recently the university's Social Sciences and Humanities Research Council (SSHRC) leader.

### **Keynote Address: Dr. Vivian Ramsden, Professor & Director, Research Division, Department of Academic Family Medicine, College of Medicine**

Dr. Vivian R Ramsden, a Registered Nurse, is Professor & Director of the Research Division in the Department of Academic Family Medicine, College of Medicine at the University of Saskatchewan. She is an Honorary Member of the College of Family Physicians of Canada and a Fellow in the Canadian Academy of Health Sciences.

As a participatory health researcher in primary health care settings, she is a passionate advocate for authentic engagement, co-creation and action research. Primary health care research also involves strategies to engage individuals, organizations and communities in identifying and addressing locally-relevant issues that impact health and wellness. Thus, in collaboration with several Indigenous communities in northern Saskatchewan and a number in South India, she is engaged in research that is co-created, co-designed, co-developed, co-presented and co-authored with the communities.



# Abstracts:

## Health Equity Research

Alicia Gregory (Masters)

Shannon Hyslop (Masters)

Jordan Sherstobitoff (Masters)

## Community-Engaged Health and Nursing Research

Heather Nelson (Doctoral)

Uchechi Opara (Doctoral)

Lindsey Vold (Doctoral)

Rebecca Olney (Masters)

Tatum Wildeman (Masters)

## Innovations in Health Systems and Education Research

Geneveave Barbo (Doctoral)

Lisa McKendrick Calder (Doctoral)

Mariana S. Riberio (Doctoral)



# Health Equity Research

Alicia Gregory

## NURSING ACTIVISM IN THE ERA OF SOCIAL MEDIA

**BACKGROUND:** Nurses' participation in social justice activism is vital to ensuring the well-being of the individuals and communities they serve. This imperative to address societal inequities must compel the profession to identify new ways to facilitate nurses' activism. The non-nursing literature indicates that social media can promote and amplify collective action and online and offline activism engagement. Additionally, social media increasingly shapes political landscapes and gives rise to global socio-political movements. Yet, research examining social media activism in a nursing context is scarce. This study explores the role social media may play in aiding nurses in fulfilling their imperative to partake in social justice activism. The study objectives are (1) to explore how Canadian registered nurses use social media in their activism and (2) to illustrate the impact social media has on their activism.

**METHODS:** I am using Thorne's interpretive descriptive (ID) methodology and conducting virtual semi-structured interviews to gather detailed accounts of nurse activists' experiences with social media activism. I have completed eight interviews, averaging 45 minutes in length. Interview transcripts are analyzed using an inductive ID approach to identify practical applications of the findings in nursing.

**PRELIMINARY OBSERVATIONS:** The nurse participants were eager to share how social media informs, amplifies and accelerates their voice and social justice initiatives, sometimes in unexpected and powerful ways. Yet, many indicate that navigating social media activism as a nurse is nuanced and complex. They identify ways the nursing profession can engage and prepare new and practicing nurses to effectively and professionally participate in public forums such as social media in their activism. With the appropriate skill set and level of interest and engagement, nurses can be a collective force for change through activism that promotes healthy policies and just, fair socio-political systems, building healthier societies for all.





Shannon Hyslop

## BEYOND MORE HOUSES: BUILDING AN UNDERSTANDING OF HOUSEHOLD CROWDING WITH TWO FIRST NATIONS COMMUNITIES IN SASKATCHEWAN

**Background:** Housing is globally recognized as a social determinant of health and is a specific equity concern for First Nations Peoples living on-reserve in Canada. Lasting results of federal government control of housing on-reserve include challenges with housing quality and quantity. Some First Nations communities face distressing housing shortages and household crowding, notably more severe than First Nations Peoples living off-reserve and the non-Indigenous population in Canada. Housing challenges on-reserve impact wellbeing and are sustained effects of discriminatory colonial policies and related structures. Studies evaluating federally created housing systems alongside outcomes on-reserve are needed to yield impactful change.

**Research Question & Objectives:** The research question guiding this study was “How do First Nations Peoples in two First Nations communities in Saskatchewan describe challenges and solutions related to household crowding on-reserve?” The objectives of this study were to tell a story of (1) how participating First Nations Peoples perceived the challenges and solutions related to household crowding on-reserve and (2) how these perceptions reflect larger systemic inequities.

**Methods:** This study was a qualitative secondary analysis of data collected in a community-based research programme focused on community-driven housing design. Data analyzed in this study included individual, semi-structured interviews with 34 First Nations Peoples from two First Nations communities in Saskatchewan. Data were analyzed using reflective thematic analysis.

**Results:** Authors identified four themes during analysis: (1) designing for kinship, (2) relieving system pressure, (3) planning instead of reacting, and (4) renovating alongside building. Key needs evident across themes included the need for houses designed within community contexts, community control, and additional funding. First Nations need control of housing systems and sufficient and sustained funding to improve housing conditions on-reserve and meet rights to self-determination.





Jordan Sherstobitoff

## EXPLORING CONTRIBUTORS TO DISCHARGES AGAINST MEDICAL ADVICE BY CLIENTS WITH SUBSTANCE USE DISORDERS IN PRINCE ALBERT, SASKATCHEWAN

**Introduction:** Prince Albert is the third largest city in Saskatchewan, with a population of 34,000 people and serves a catchment area of 195,000 people. Prince Albert is experiencing a substance use epidemic, with 9.2% of hospital visits and 37.5% of violent crimes associated with substance use. Also, it has the highest per capita consumption at \$1,249 per person almost double the national average. Colleagues at the Victoria Hospital in Prince Albert raised concerns about the increased frequency of patients with substance use disorder leaving the hospital without medical advice. However, the rate and extent of this issue are not documented. Studies report that six to sixteen percent of individuals with a substance use disorder leave the hospital against medical advice. Discharges against medical advice (DAMA) increase a patient's risk of readmission, morbidity, and mortality.

**Aim:** This study aims to explore factors that contribute to the clients discharging themselves against medical advice in Prince Albert's Victoria Hospital.

The objectives of the study are:

- 1) Explore the scope of DAMA and factors that contribute to clients discharging themselves against medical advice
- 2) Describe the health care providers' experiences caring for clients who often discharge against medical advice
- 3) Discuss the policies and procedures of processing clients who discharge themselves against medical advice

**Methods:** A case study design will be utilized to explore and document factors contributing to clients discharging themselves against medical advice in Prince Albert's Victoria Hospital medical unit. This will be achieved by engaging care providers in the medical units in in-depth interviews, relevant document analysis of policies and procedures and exploration of Health administrative data.

**Significance of the study:** Since DAMA often indicates that the health care system is not responsive to the patient's needs, it is vital to understand the rate and factors contributing to DAMA to improve patient care, outcomes, and satisfaction.



# Community-Engaged Health and Nursing Research

Heather Nelson

## FINDING BELONGING THROUGH TRADITIONAL KARATE FOR CHILDREN FROM LOW-INCOME SETTINGS

**Introduction:** Sport improves the social and emotional health of participants; however, children from low-income settings have fewer opportunities and existing literature demonstrates lower rates of participation. For children, participation in sport is more than a hobby but is a human right. The purpose of this research was to examine the benefits and barriers of traditional karate participation for children from low-income settings and their parents.

**Methods:** Participants in this constructivist grounded theory study were children from low-income settings in a small western Canadian city who participated in traditional karate with the support of charitable support programs, and their parents. Children (n=8) and parents (n=7) completed a demographic survey and participated in 34 semi-structured interviews. Interviews were transcribed verbatim and analyzed using grounded theory procedures.

**Findings:** In this grounded theory, titled Finding Belonging through Sport, children experienced successes which strengthened their bond and failure which reduced their affinity to the group. Children had to overcome various challenges in their quest of Finding Belonging through Sport with the sub-processes of Physical Belonging, Social Belonging, and Building Competence. The subprocesses supported Finding Belonging through Sport and allowed children to improve confidence, competence, increased friendships, and improved sense of belonging which may impact many areas of their lives.

**Conclusions:** Children from low-income settings can Find Belonging through traditional karate participation, however, specific barriers existed to participate in sport. There is a need for future research to examine continuing barriers and novel methods to allow more children to experience Finding Belonging through Sport.



## WOMEN'S EXPERIENCES OF CULTURAL BELIEFS AND PRACTICES THAT INFLUENCE THEIR USE OF MATERNAL HEALTH SERVICES IN NIGERIA

**Background:** Maternal health services are healthcare services such as antenatal care, a skilled attendant at delivery, and postnatal care, provided for women during pregnancy, delivery, and six weeks after birth to reduce maternal mortality (World Health Organization [WHO], 2017). However, due to the lack and inefficient use of these services, 810 women died globally every day in 2017, mostly from middle and low-income countries such as Nigeria (WHO, 2021a). Nigeria's maternal mortality ratio is approximately 917 per 100,000 live births, making Nigeria the fourth- most impacted nation by maternal mortality globally in 2017 (WHO, 2019b). A major predisposing factor to maternal death in Nigeria is the limited uptake of maternal health services resulting from cultural beliefs and practices around childbirth (Yaya et al., 2019). These cultural beliefs and practices are a way of life, some of which could be harmful around childbirth leading to preventable maternal deaths. Although many policies exist to reduce maternal mortality in Nigeria, most are biomedically focused on approaches to increase skilled birth attendants, with little consideration given to women's cultural needs around childbirth. Objective: To explore the cultural beliefs and practices of Igala women in Kogi East Nigeria around childbirth that influence their use of maternal health services. Design and Methods: A focused ethnographic methodology, as described by Roper and Shapira (2000), would be employed. A purposive sampling technique will be used to recruit women in both rural and urban areas to enhance a thick description. Data will be collected using semi-structured, one-on-one interviews and focus group interviews. Focused observations will also be used to enhance triangulation and a thick description. Conclusion: Findings of the proposed research could promote culturally informed maternal health services to enhance maternal health outcomes and the realization of Sustainable Development Goal #3:1 in Nigeria.



Lindsey Vold

**A CASE STUDY OF AN ARCTIC COMMUNITY ORGANIZATION ADDRESSING  
COMMUNITY FOOD SECURITY THROUGH TECHNOLOGY AND  
INNOVATION: PERCEPTIONS, IMPACTS, AND ADOPTION**

There is no doubt that food insecurity is an issue in the sub and high Arctic Canada. In the Inuvialuit Settlement Region, the westernmost region of Northwest Territories, 33% of households are moderately food insecure, and 13% are severely food insecure. These alarming numbers are increasingly getting the attention of media outlets, researchers, and activists alike. While different government departments make significant financial investments and subsidies, some communities still struggle to access fresh and nutritious food. Despite struggles, communities continue to find ways to tackle food insecurity. In Inuvik, the Inuvik Community Greenhouse (ICG) is doing just that. The ICG is a community greenhouse that offers residents a place to grow food and community. Recently, the ICG, in partnership with Cold Acre systems, has extended its growing season to year-round production using a controlled environment agriculture (CEA) system. This system creates an ideal growing environment in a reconstructed trailer with LED lights on space-conscious vertical shelves that use water instead of soil. As these technologies are novel and exciting, media and researchers, among others, see this innovation as a possible solution to Northern food insecurity. Nevertheless, even with the best intentions and optimism, starting and sustaining new technology often rests on complex social and external conditions. Using Situational Analysis, the findings from this research aim to find ways to improve community food security services by talking with residents and stakeholders about their perceptions and experiences about buying and growing food. In this presentation, I discuss challenges and opportunities for implementing a novel local food production system. Additionally, I review the tensions and negotiations of major actors who have a stake in this domain and highlight the unique community perspectives and attitudes towards adopting existing and new technologies in a remote Arctic setting.





Rebecca Olney

## UNDERSTANDING FREQUENT USE OF THE EMERGENCY DEPARTMENT

Every year across Canadian Emergency Departments (ED) there are a growing number of patient visits related to mental health and addictions (MHA). An average of one in ten Canadians who attend the ED for MHA concerns have already had four or more visits in the past 12 months (CIHI, 2019b). In addition to human suffering, frequent use of the ED poses many challenges systemically for policymakers and healthcare providers alike, while also drawing attention to the ongoing concern regarding increased costs associated with recidivism (Raven, 2011; Soril et al., 2015). An important place to start when considering the phenomenon of frequent MHA related ED visits is to seek to understand the experience of the patients themselves. Current literature on this topic is limited by lack of in-depth studies that explore the qualitative side of these lived experiences. This study utilizes an Interpretive Phenomenological Analysis approach to address the research question: How do individuals who frequently pursue care in the ED describe their experience when seeking mental health care? The purpose of this study is to explore these lived experiences to identify unmet needs, service gaps, and strategies to improve MHA services. The main objectives of this study are to understand patients' lived experiences and to identify the challenges faced when seeking care. Findings from this study illustrated that both small and large experiences equally left impressions on the participant's lives, shaped their views, and influences their behaviour and decision making. Participants identified that they felt they were not receiving optimal mental health care, describing varying support systems and level of community care. However, within each support system, there were existing pieces that they identified as positive and helpful. While each of these areas was different, they all commonly shared a theme of being allotted time, having a connection, and accessibility.



**Tatum Wildeman**

**DANCE FOR WELLNESS: INDIGENOUS ADOLESCENTS' PERSPECTIVES ON MENTAL HEALTH, WELLNESS, AND DANCE**

Dance has long been a tradition of Indigenous cultures to celebrate, heal, and express. The effects of colonization, the Indian Residential School System, and intergenerational trauma damages Indigenous ways of living and profoundly impacts the mental health and wellness of Indigenous adolescents. This impact is felt by the youth in a northern Saskatchewan Indigenous community; therefore, the community initiated a wellness-based dance program. This qualitative case study aimed to generate insight into the understanding and experiences of mental health and wellness in Indigenous adolescents aged 10 to 19 and to identify if and how a 4-week dance program affects their sense of mental health and wellness. The research aimed to answer: 1) What are Indigenous adolescent's understandings and experiences of mental health and overall sense of wellness? What are the positive and negative influences on the adolescent's sense of mental health and wellness? 2) What are Indigenous adolescents' understandings and experiences of mental health and wellness after participating in a four-week dance-based program? Semi-structured interviews and symbol-based data collection methods were selected to honour Indigenous ways of knowledge transfer. Eight participants completed two to three one-on-one interviews. Thematic and symbol-based methods were used for data analysis. The findings demonstrated that the participants had difficulty defining mental health and wellness but could identify positive and negative factors that contribute to their mental health and wellness. The data suggests that dance is an enjoyable activity for the participants and improved their mood and confidence. Furthermore, participants stated that dance had a perceived positive impact on their mental health and wellness. The participants also stated they attended more school when dance classes were scheduled. The data suggests dance has a positive impact on the mental health and wellness of Indigenous adolescents; however, further research is needed as this is a novel study.





# Innovations in Health Systems and Education Research

**Geneveave Barbo**

## **IMPROVING UNDERGRADUATE NURSING STUDENTS' KNOWLEDGE, ATTITUDES, AND BEHAVIOURS TOWARDS NEWCOMERS WITH MENTAL HEALTH DIFFICULTIES**

Newcomers are highly susceptible to mental health conditions. Refugees, asylum seekers, and immigrants of all ages experience greater prevalence of anxiety, depression, and post-traumatic stress disorder as opposed to the general population. Nevertheless, literature reveals that such population has been underutilizing mental health services due to stigma, discrimination, and cultural and language barriers. Nurses are at the front-line of providing mental health support to newcomers, however, there has been a major shortage of mental health nurses as many felt not having adequate training upon graduating, which enhances their negative perceptions and stigma towards psychiatric patients and mental health care. In recent years, virtual reality has been emerging as an innovative approach to enhance mental health nursing education, demonstrating promising results in changing attitudes and preparedness of undergraduate nursing students. Yet, little is known about the integration of virtual reality with mental health nursing education and newcomers' care. This research, therefore, aims to examine the effects of virtual reality on undergraduate nursing students' knowledge, attitudes, and behaviours towards newcomers with mental health difficulties. Guided by participatory approach, this study will follow a concurrent mixed method design consisting of pre-and post-test design and interpretive description. Undergraduate nursing students from the University of Saskatchewan and McGill University will be invited to participate in the study. Through this research, we hope to enhance preparedness of nursing students, decrease mental health nursing shortage, and ultimately, reduce stigma and discrimination towards newcomers with mental health difficulties.



**Lisa McKendrick Calder & Dr. Kelly Penz**

**Innovations in Health Systems and Education Research**

**LANGUAGE DIVERSE UNDERGRADUATE NURSING STUDENTS – A  
NARRATIVE INQUIRY TO EXPLORE BELONGING AND EXPERIENCES WITH  
PEERS**

Globally there is increasing diversity of students in undergraduate nursing education, including students with English as an Additional Language (EAL). These diverse, non-traditional learners may face academic challenges with an increased likelihood of program modification and/or withdrawal. Two crucial factors that help to support academic success are peer support and a sense of belonging, however, little is known about EAL students' experiences with the phenomena. This study will utilize narrative inquiry to answer the following research questions: Do EAL nursing students feel they 'belong' in their programs? What experiences contribute to a feeling of belonging or a sense of not belonging? And what are their experiences with peers and peer support? Narrative inquiry allows for an exploration of participant experiences and afford a deep excavation into the complex factors such a socio-political, economic, cultural, and institutional factors that influence both participant experiences and their interpretation of experiences. Following ethical approval, purposive recruitment of approximately 8 upper-level undergraduate EAL nursing students from up to three nursing education institutions will be undertaken. The researcher will walk with participants over several months from data collection to co-creation of dissemination materials. Data will include journals, artifacts, electronic communications, and formal and informal conversations and will be stored in NVIVO. Data analysis will be ongoing with re-storying and adding depth. During dissemination, digital storytelling (within social media platforms) will be employed to engage a broader audience and as a mechanism to provoke curiosity, personal reflection, and to encourage dialogue. Traditional dissemination strategies of publication and presentation will also occur. This study will be the first of its kind to explore the experiences of EAL nursing students with peers and belonging. Findings from this inquiry will generate knowledge to inform inclusive curricula and/or effective mechanisms to enhance the academic success of EAL learners.





**Mariana S. Riberio & Uchechi Opara**

**EXPERIENCES OF GRADUATE NURSING RESEARCHERS IN A PATIENT-ORIENTED RESEARCH TEAM**

We are graduate nurse researchers in a collaborative Patient-Oriented Research (POR) team from Canada and Australia. Our team comprises researchers, trainees, and family partners with lived experience in the topic under research. POR strives to develop meaningful research that prioritizes family partners and their experiences. Their experiential knowledge adds valuable contribution and richness to the research team. The collaboration between Canadian and Australian researchers adds to diverse perspectives in similar health settings that further enrich understanding and interpretation. Using a narrative approach, we explored our experiences as graduate nurse researchers collaborating with other team members in research. We learned: 1) how to value and collaborate with diverse perspectives, including academics and non-academics; 2) the role that family partners play in research; 3) how to meaningfully engage team members and respect their perspectives; and, 4) the usefulness of POR in developing meaningful research that addresses the needs of people, caregivers, families, and stakeholders. We encourage fostering opportunities for graduate nurses to work and grow within POR teams.

# Thank you to our...

- Invited Speakers
  - Presenters
  - Attendees
  - Judges
- College of Nursing Research and Scholarship Committee
- College of Nursing E-Learning Centre
  - Research & Scholarship Day and Workshop Day Planning Committee

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