



University  
of Victoria  
Nursing

# COMMUNIQUÉ

UVic School of Nursing - Research and Scholarship Publication

Fall 2013

A black and white photograph of three nursing students at an orientation event. The student in the center is holding a sign that says "NURSING". The student on the left is wearing a name tag. The student on the right is holding a folder. The background shows other people and a sign that says "NURSING".

NURSING

*The History Issue*

Nursing Student Orientation, 1979  
Photo courtesy of UVic Archives

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# CONTENTS

<i>Growth, Change, Transition</i> <b>A letter from Noreen Frisch</b>	<b>3</b>
<i>Communique - An Issue on History</i> <b>Margaret Scaia</b>	<b>4</b>
<i>A History of the School of Nursing</i> <b>Margaret Scaia, Lynne Young</b>	<b>5</b>
<i>Reflecting on Dr. Sandelowski's Keynote Presentation</i> <b>Olga Petrovskaya</b>	<b>6</b>
<i>JBI Systematic Review: Our First Attempt</i> <b>Anastasia Mallidou, Lynne Young, Debra Sheets, Katherine Paul</b>	<b>8</b>
<i>Aging Study Data Collection Site Opens in Victoria</i> <b>Debra Sheets</b>	<b>10</b>
<i>The Power of Philosophy in Nursing – Thank you Dorothy Kegin!</i> <b>Jeannine Moreau</b>	<b>12</b>
<i>Food Studies in the Age of Sustainability</i> <b>Wanda Martin</b>	<b>14</b>
<i>Humanbecoming in Pittsburgh</i> <b>Coby Tschanz</b>	<b>15</b>
<i>CBS Lifetime Achievement Award</i> <b>Rosalie Starzomski</b>	<b>16</b>
<i>Nursing in the News</i>	<b>17</b>
<i>Successes!</i>	<b>18</b>

# LETTER FROM...

Growth, Change, Transition. A letter from Noreen Frisch, RN, PhD

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Dear Readers,

At this time we celebrate the University of Victoria's 50th Anniversary – a long history of growth, change and transition to becoming a major research intensive university. In our School of Nursing we find that there is much to celebrate as well when we consider our own School's history. Over the years, our School has been known for quality teaching, distance education, community engagement, and nursing scholarship. We applaud Margret Scaia for her willingness to uncover details about our School's past and present them to us in several venues this year, not the least of which is her contribution to this issue of our Communiqué.

Today, Communiqué becomes another important part of our School's history and its outreach to our peers. Communiqué is now an integral part of our School's work and communication to others. In each edition we report on some of our research activities. Like our university, our School has developed to become a unit supporting nursing inquiry, reflection and research at all levels. Our faculty are engaged in research teams within BC, across the country and beyond. Topics of study include virtually all of the foci of nursing practice with most emphasis perhaps being on social justice and developing nursing knowledge and practice. We present some very important work in this issue and we recognize our faculty contributions to the Canadian Longitudinal Study on Aging and our work on internationalizing our curricula.

We are excited about the state of research and scholarship here at our School of Nursing. We invite you to enjoy this edition of our research publication.

Sincerely,



**Noreen Frisch, PhD, RN, FAAN**  
**Professor and Director**  
**School of Nursing**

# COMMUNIQUE - AN ISSUE ON HISTORY

by Margaret Scaia, RN, BSN, MN, PhD

The accomplishments by faculty and students identified in this issue of *Communique* point to themes of continuity and change over time in the focus on, and achievements of, nursing scholars and scientists since the inception of the UVic School of Nursing (SON) over thirty years ago. In her opening remarks, Noreen Frisch commented that social justice and knowledge for practice informed the early development of the School's curriculum that shaped the distance degree completion program and the BScN degree program. These traditions are revealed in research conducted by Margaret Scaia and Lynne Young's about what faculty and students valued in the early days of the school's development--access to higher education, reduction of barriers to university entrance for women, and a feminist influenced approach to faculty/student relationships. Thus, a curriculum underpinned by the philosophical approaches of feminism, humanism, phenomenology and critical social theory emerged by founding members of the faculty and led to the establishment of the first distance degree completion program in British Columbia, and later to the four year baccalaureate degree program. The value placed on access to learning by the founders of the school, including Dorothy Kergin, profiled in this issue, is captured through the testaments offered by Coby Tschanz, Jeannine Moreau, and Wanda Martin about how they used funding from the Dorothy Kergin Endowment fund to advance their doctoral studies. While gender strongly influenced and shaped nursing and nursing education in the early and mid twentieth century in Canada, including the UVic SON, and women's second class status within academia tended to emphasize particular kinds of research questions and approaches to research, over time we can trace how women's greater presence in science and within academia meant that the discipline of nursing has gradually gained more autonomy from its traditional association with medically based—male—scientific paradigms. The history of this shift in, and expansion of nursing research and its methods and methodologies is explored through the work of now senior historians of nursing such as Margarete Sandelowski whose work is reflected on by Olga Petrovskaya's in her commentary on the key-note address presented by Dr. Sandelowski at the School's research conference earlier this year. Interest in, and acceptance of diversity in approaches to scientific research in nursing, such as presented by Dr. Sandelowski's presentation is evidence of the autonomy, creativity, and innovation in nursing research that has very gradually become a more acceptable and even desired standard in today's graduate nursing programs across Canada. This was not always the case. Further evidence of the power and ability of nurses to shape and influence the development of knowledge related to health, is the implementation of research institutes such as the Johanna Briggs Institute. An overview of history, goals, methods, and objectives of this organization is presented in this issue by Anastasia Mallidou, Lynne Young, Debra Sheets and Katherine Paul, as well as in Debra Sheets' presentation of the Longitudinal Study on Aging here in Victoria and across Canada. It is clear that nursing continues, as it has in the past, to provide valued and essential knowledge and service related to the health of Canadians and more broadly, at the global level. The substantial funding, and public acknowledgement for research and programs related to aging, chronic illness, nursing ethics, the homeless, youth, women, illness prevention and health promotion that has been and is being conducted by nurse scientists, documented in this issue of *Communique*, confirms and supports a social history of nursing history that acknowledges the tremendous courage, intellectual curiosity, creativity, and commitment to social justice and knowledge development whose roots are so clearly visible through each contribution to this issue.



## A HISTORY OF THE SCHOOL OF NURSING

by Margaret Scaia, RN, BScN, MN, PhD and Lynne Young, RN, PhD

The University of Victoria (UVic) School of Nursing (SON) opened in 1976 offering an on-campus program to registered nurses pursuing a baccalaureate degree in nursing after “stormy and uncertain beginnings” in which nurses strongly and relentlessly lobbied government for funding to open this program. At this time, there were no options on Vancouver Island for diploma-qualified nurses to pursue a Bachelor of Science in Nursing (BSN). By 1978 BSN degrees were conferred on 28 nurses; many had been lobbyists for this program; all were women. In 1989, in an effort to develop an undergraduate program in nursing, what was referred to as the “kitchen table” discussions began. In 1989 a partnership of ten colleges and universities established a collaboration to offer an undergraduate degree in nursing using the feminist foundations of Bevis and Watson’s (1989) “caring curriculum.”<sup>1</sup> For many early second wave scholars and activists, caring became an instrument of social action, which held particularly potency for women and potentially for nursing within Canada and globally.

Enactment of the curriculum included activities such as assignments involving different learning modalities, integration of affective learning, including caring, to consolidate psychomotor skills, the re-arrangement of desks into a circle to emphasize the relationality of the teaching and learning experiences and to reduce the perception of hierarchical boundaries between teachers and students, the use of reflective journaling to encourage self-understanding and reflection, as well as the consideration of partnerships between nurses and patients, families, and community. Opportunities for a “new” curriculum were consolidated as a result of nursing education moving more firmly into the university setting. These possibilities were also reflective of women’s changing roles in Canadian society and the increasing number of women in positions of influence both within and outside the academe.

In the succeeding years, the UVic SON continued to build on past success and reach out to students through their Post RN Diploma program in 1980; the Collaborative Nursing Program in 1989; 1991, the Multidisciplinary Masters Program; 1996, the expansion of the undergraduate program to the Lower Mainland; 2003, the Masters in Nursing degree; 2005, the PhD in nursing program; and 2010, the MN Double Degree – Nursing and Health Information Sciences.

<sup>1</sup> Bevis, E. O., & Watson, J. (1989). *Toward a caring curriculum : A new pedagogy for nursing*. New York, N.Y: National League for Nursing.

### CHRONOLOGY OF THE DEVELOPMENT OF UVIC SON PROGRAMS

1976	UVic SON opens offering an on-campus program to Registered Nurses pursuing a baccalaureate degree
1980	UVic SON offers a distance degree completion program for Registered Nurses
1988	UVic SON held a workshop to explore the possibility of offering a collaborative baccalaureate curriculum
1989	Collaboration begins between UVIC SON and Camosun, Caribou, Malaspina, and Okanagan Colleges to offer a generic baccalaureate degree within a shared curriculum
1991	Multidisciplinary Master’s Program commenced
1992	North Island College and Langara College join the collaboration
1993	Selkirk College joins the collaboration
1994	Kwantlen and Douglas Colleges join the collaboration
1996	The UVic SON opens a campus on the Lower Mainland of BC to enable students from Langara, Douglas, and Kwantlen Colleges to receive a baccalaureate degree without traveling to study in Victoria
2003	UVic SON offers a Master’s in Nursing degree. Multidisciplinary Master’s Program collaboration ends for the School of Nursing
2004	CNPBC dissolves, Collaboration for Academic Education in Nursing (CAEN) commences
2005	UVic SON offers a PhD in nursing program
2007	UVic SON Lower Mainland campus closes
2010	UVic SON offers the MN Double Degree – Nursing and Health Information Sciences

## NOT AFRAID OF DUALISMS: BOTH/AND ON THE ONE HAND; EITHER/OR ON THE OTHER. REFLECTING ON DR. SANDELOWSKI'S KEYNOTE PRESENTATION

by Olga Petrovskaya, RN, BScN, PhD(c)

The 2013 School of Nursing Research Conference opened with a presentation by Dr. Margarete Sandelowski, Distinguished Professor at the School of Nursing, University of North Carolina at Chapel Hill. Dr. Sandelowski persuasively articulated some of her thought-provoking views on the contemporary practices and language of qualitative, quantitative, and mixed-methods research, while arguing for the inadequacy of these very terms. Those familiar with Margarete Sandelowski's writing know how her thinking about methodological issues in health sciences developed. (Please note I am here largely bypassing other significant areas of Dr. Sandelowski's scholarship that include her feminist-inspired work on reproductive technologies and her analyses of nursing–technology relations.) For example, in the 1990s, she was a strong advocate for qualitative research; in the next decade, she spearheaded the development of innovative approaches to systematic reviews; and most recently, she is striving to blur the boundaries among various approaches to inquiry. In her keynote address, Sandelowski mentioned that this blurring is always at work in messy research practices, that is, in all research. She illustrates this claim in her writings when she painstakingly reveals a large degree of interpretation involved, albeit masked, in quantifying efforts of instrument development and quantitative studies in general,<sup>1, 2</sup> and on the other hand, the use of numbers in qualitative studies, for instance, an implicit work of counting inherent in identification of patterns.<sup>3</sup>

I first encountered Margarete Sandelowski as an author five years ago—in my doctoral Qualitative Research class—reading her authoritative and witty editorials and articles focused on methodological issues and memorably entitled, “Counting Cats in Zanzibar,”<sup>4</sup> “Rigor or Rigor Mortis,”<sup>5</sup> and an article co-authored with Julie Barroso, “Finding the Findings in Qualitative Studies.”<sup>6</sup> In addition to offering sound comments on research strategies, these pieces exemplified the practice of “writing a good read,” a practice that she invited health science researchers to appreciate and embrace.<sup>7</sup> Sandelowski reminds authors in health science disciplines that whatever we want to convey about methods or findings inescapably involves a production of text.



Dr. Sandelowski speaks at the 2013 School of Nursing Research Conference, Photo by UVic Photo Services

<sup>1</sup> Sandelowski, M. (2008). Reading, writing and systematic review. *Journal of Advanced Nursing*, 64(1),104-110.

<sup>2</sup> Sandelowski, M. (2011). When a cigar is not just a cigar: Alternative takes on data and data analysis. *Research in Nursing and Health*, 34(4), 342-352.

<sup>3</sup> Sandelowski, M. (2001). Real qualitative researchers do not count: The use of numbers in qualitative research. *Research in Nursing and Health*, 24(3), 230-240.

<sup>4</sup> Sandelowski, M. (2004). Counting cats in Zanzibar. *Research in Nursing and Health*, 27(4), 215-216.

<sup>5</sup> Sandelowski, M. (1993). Rigor or rigor mortis: The problem of rigor in qualitative research revisited. *Advances in Nursing Science*, 16(2),1-8.

<sup>6</sup> Sandelowski, M., & Barroso, J. (2002). Finding the findings in qualitative studies. *Journal of Nursing Scholarship*, 34(3), 213-219.

<sup>7</sup> Sandelowski, M. (1998). Writing a good read: Strategies for re-presenting qualitative data. *Research in Nursing and Health*, 21(4), 375-382.

## NOT AFRAID OF DUALISMS: BOTH/AND ON THE ONE HAND; EITHER/OR ON THE OTHER. REFLECTING ON DR. SANDELOWSKI'S KEYNOTE PRESENTATION CONT...

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I have since read many more pieces by Sandelowski. Complementing insightful content of her works, her stylish titles incorporate metaphor, as in “Triangles and Crystals”<sup>8</sup> that refer to validity criteria proposed by qualitative researchers, and allusion, as in her invocation of Freud in “When a Cigar is Not Just a Cigar,”<sup>9</sup> or “Venous Envy.”<sup>9</sup> These literary devices signal Margarete Sandelowski’s attention to the ways scholars read and write. Her penchant for the craft of writing can likely be attributed to Dr. Sandelowski’s educational background in American history and literature, as we heard her mention during the presentation. She also explained her view of research as a cultural and textual practice. This view is influenced by science studies—a contemporary line of thought in the philosophy of the social sciences—specifically writings of Latour, Mol, and Law.<sup>1</sup>

Sandelowski is mindful about a currently heightened emphasis on nursing as a discipline whose mandate is to deploy nursing inquiry in the service of practical ends.

What is the significance then of paying attention to the textual practices, that is, the ways we read and write, and to a certain relativization of scientific research (and all research) by positioning it as a cultural practice? Is there not a contradiction between an instrumental goal of serving the needs of the profession, health providers, and patients, and, on the other hand, insistence on seeing research as an act of cultural production that, in an academic setting, demands attention to not only what we say but how we say it? Dr. Sandelowski’s presentation hinted at the inseparability of these two goals, but her published words offer the rationale: “A discussion of writing ought not to be seen as yet another digression on the part of nurse researchers away from science and substance, but rather as a necessary move toward enhancing research utilization.”<sup>1</sup> That is, researchers’ attention to textual practices is required “to showcase the significance and actionability of findings to a wider audience.”<sup>10</sup>

Dr. Sandelowski’s inclusive, “both/and, not either/or” stance toward various approaches to nursing inquiry does not have room for the “anything goes” approach.<sup>11</sup> Indeed, in her publications her voice is strong and clear about specific regulative ideals. She is keen to uphold methodological connoisseurship and intellectual craftsmanship over both methodologic anarchy<sup>12</sup> and its opposite—policing methods’ boundaries. She also values researchers’ “disciplined subjectivity”<sup>13, 1</sup> over both their “egocentric hyper-reflexivity” and a veneer of objectivity.<sup>2</sup>

As the School of Nursing re-envision optimal ways to teach research to undergraduate and graduate students, I intend this piece of writing not only as a report on Dr. Sandelowski’s keynote message, but also as an invitation for my colleagues, both faculty and students, to gather and debrief, agree and argue, about useful messages brought by our guest, Dr. Margarete Sandelowski.

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<sup>8</sup> Sandelowski, M. (1995). Triangles and crystals: On the geometry of qualitative research. *Research in Nursing and Health*, 18(6), 569-574.

<sup>9</sup> Sandelowski, M. (1999). Venous envy: The post-World War II debate over IV nursing. *Advances in Nursing Science*, 22(1), 52-62.

<sup>10</sup> Sandelowski, M., & Leeman, J. (2012). Writing usable qualitative health research findings. *Qualitative Health Research*, 22(10) Special Issue: 1404-1413.

<sup>11</sup> Sandelowski, M. (2012). The weakness of the strong/weak comparison of modes of inquiry. *Research in Nursing and Health*, 35(4), 325-327.

<sup>12</sup> Sandelowski, M. (1997). “To be of use”: Enhancing the utility of qualitative research. *Nursing Outlook*, 45(3), 125-132.

<sup>13</sup> (2006). “Meta-Jeopardy”: The crisis of representation in qualitative metasynthesis. *Nursing Outlook*, 54(1), 10-16.

## JBI SYSTEMATIC REVIEW: OUR FIRST ATTEMPT

by Anastasia, A. Mallidou; Lynne Young, RN, PhD; Debra Sheets, PhD, MSN, RN-BC, CNE; Katherine Paul

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Joanna Briggs was the first appointed matron (1845-1866) of the Royal Adelaide Hospital (RAH) in Adelaide, Australia. In 1996, an RAH committee established the Joanna Briggs Institute (JBI) (<http://www.joannabriggs.edu.au>) to honour her contributions. Since then, the JBI has expanded all over the world involving nursing, medical and allied health researchers, clinicians, academics and policy/decision-makers across 47 countries and more than 60 entities in every continent. It is an international, not-for-profit, research and development, and knowledge-synthesis organization that undertakes systematic reviews addressing a broad range of questions to facilitate evidence-based healthcare practices and assist the improvement of healthcare outcomes globally. The first North American JBI Centre is located in Canada at Queen's University: the Queen's Joanna Briggs Collaboration (<http://meds.queensu.ca/qjbc>).

A systematic review (SR) is an explicit, transparent and rigorous research method to identify, critically appraise, analyze, and synthesize the findings of independent primary/original studies on a specific topic. Researchers/reviewers translate and transfer existing evidence for utilization to target audiences (e.g., clinicians, managers, policy-/decision-makers, consumers) by providing narrative summary or pooled statistical analysis of contradictory findings and identify the gaps in the literature for future studies. Quantitative (i.e., meta-analysis), qualitative (i.e., meta-synthesis) or both types of research evidence (i.e., comprehensive/mixed-method) are synthesized in a SR examining research questions on Feasibility, Appropriateness, Meaningfulness or Effectiveness (FAME) in the health sector.

In July 2012 three UVic nursing faculty (i.e. Lynne Young, Debra Sheets, and Anastasia Mallidou) and a research librarian (Kathryn Paul) attended a 5-day workshop at Queen's University in Kingston, Ontario. This core team was trained in the JBI method for conducting a comprehensive systematic review. Since our return from the workshop, we have developed a protocol for a systematic review to examine the effectiveness of community-based physical activity programs on the health outcomes of older women. Our process for doing this review has involved:

1. Identifying the gap between what we know and what we need to know on the physical activity in older women;
2. Developing a research question that includes the core elements (PICO): Population, Intervention or phenomenon of Interest (qualitative evidence), Comparator or Context (qualitative), and Outcomes;
3. Determining the inclusion and exclusion criteria;
4. Writing a concise and detailed research/review proposal;
5. Submitting the proposal for JBI Peer Review;
6. Using the JBI software (i.e., Comprehensive Review Management Software – CReMS) that with several other assessment and review instruments (i.e., QARI, MASTARI, NOTARI, and ACTUARI) constitutes the System for the Unified Management of the Assessment and Review of Information (SUMARI);
7. Reviewing the revealed publications using the inclusion/exclusion criteria.

Our next steps in this knowledge synthesis include:

- Development of a data extraction tool and extract the relevant to our research question data from each individual publication;
- Use of the Grant & Booth's (2009) analytic method (SAISA): Search, Appraisal, Synthesis, and Analysis
- Critical appraisal of each publication ;
- Synthesis of the findings;
- Writing a report including recommendations for policy and decision makers.

In support of this work, the SON is establishing a JBI Affiliated Centre at UVic and plans to send two more faculty members and one doctoral student to the JBI workshop this summer. We are grateful for the support provided by Dr. Noreen Frisch, Director and Professor, School of Nursing, University of Victoria for her support in attending the 5-day workshop organized by the Queen's Joanna Briggs Collaboration at Queen's University, Kingston, Ontario. We also acknowledge the support of Drs. Margaret Harrison and Christina Godfrey, Queen's University School of Nursing faculty members.



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## AGING DATA COLLECTION SITE OPENS IN VICTORIA

by Debra Sheets, PhD, MSN, RN-BC, CNE

The Canadian Longitudinal Study on Aging (CLSA) is unfolding at 11 major universities and in communities across the country. The CLSA is a large, national, long-term study that will follow approximately 50,000 men and women between the ages of 45 and 85 for at least 20 years, including approximately 8,500 men and women in B.C. The data collected as part of the CLSA will form a national research database that will help scientists to answer key questions about health and aging, and lead to new insights and better understanding of what it means to age well. The CLSA will be one of the most comprehensive studies of its kind undertaken to date, not only in Canada but around the world. The CLSA has recruited more than 14,000 participants thus far, with recruitment of 50,000 to be completed by 2015.



Drs. Debra Sheets and Lynne Young are UVic site leaders for the CLSA, working in concert with researchers at the UVic Centre on Aging. The UVic data collection site (DCS) at the Gorge Road Hospital opened in August 2012 with state-of-the-art equipment used for a variety of testing, including heart, lung and vascular functions, bone density and body composition, vision and hearing, strength, mobility and balance, and cognitive function. Blood and urine specimens are also collected and after processing are sent to the Biorepository at McMaster University. The clinical assessments take on average 3 hours to complete and about 5 participants a day will come through our clinic. Over the next year, the UVic site will recruit 1,000 randomly chosen participants living within a 25-kilometre radius of the campus. Study participants will return for further testing and interviews every three years for a total of 20 years. The UVic data collection site is being managed by Vincenza Gruppuso and employs eight interviewers, lab technicians and research assistants.

In addition UVic has a computer assisted telephone interview (CATI) site at the Centre on Aging. In total, 20,000 participants will take part in telephone interviews conducted at one of four Computer-Assisted Telephone Interview (CATI) sites throughout the country. The other CATI sites are located at Dalhousie University, Université de Sherbrooke and the University of Manitoba. All four CATI sites have been active since 2010 and will continue for the full duration of the study. So far, the UVic CATI site has completed approximately 2000 interviews. Data collection at the CATI sites uses secure hardware and software systems that store participant data in a de-identified manner. The CATI software schedules interviews, tracks their status and reports on their progress until completion of the study. The UVic CATI site is managed by Lois Edgar and employs 3 supervisors and 20 interviewers.

Co-Site Leaders for the UVic CLSA, Debra Sheets and Lynne Young, note that the CLSA is launching a new era in gerontology research that will provide a platform for interdisciplinary research that will increase our understanding of the factors that influence healthy aging. Researchers with an interest in aging will have many opportunities to become more actively involved in this project which holds great promise for the future of aging research in Canada.

The CFI and Canadian Institutes for Health Research (CIHR) are funding the study, with additional support from provincial governments and affiliated universities and research institutions.

Visit <http://www.clsa-elcv.ca/news/unprecedented-study-investigates-aging-well> to watch an interview with Debra about the CLSA.

## DOROTHY KERGIN FUND SUPPORTS UVIC NURSING GRADUATE STUDENTS

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*Dr. Dorothy J. Kergin was born, raised and educated in Prince Rupert, BC. Dr. Kergin was recognized nationally and internationally as an outstanding leader in expanding the role of nurses in primary care. Highly respected for her expertise, she was consulted by local, national and international organizations including the Aga Khan University, Pakistan, and the Canadian International Development Association (CIDA) for who she acted as consultant in the establishment of university nursing education in Malawi.*

*Dorothy began her career as a public health and occupational health nurse in Princeton, Kitimat and Port Alberni, BC. Her outstanding teaching career at McMaster University resulted in her becoming Associate Dean of Health Science. In 1980, she accepted the appointment of Director, University of Victoria, School of Nursing.*

*Dr. Kergin had a profound impact on nursing education in Canada when, through distance education, the University of Victoria made baccalaureate nursing degree education available to registered nurses through BC and beyond.*

*Dorothy's concern for students resulted in her establishing, with monies from her estate, the Dorothy Kergin Endowment Fund. This fund helps support faculty and student development through the provision of student stipends, travel grants and funds for the purchase of needed supplies and equipment. Recipients are selected on the quality of their proposals.*

*This year Jeannine Moreau, Wanda Martin and Coby Tschanz received funds from the Dorothy Kergin Endowment to support their research*



## THE POWER OF PHILOSOPHY IN NURSING –THANK YOU DOROTHY KERGIN!

by Jeannine Moreau, RN, MN, PhD (c)

Dorothy Kergin is special to me as my first UVic School of Nursing Director when I was hired in 1989. Her bursary well reflects her generous spirit. I am very appreciative for the UVic School of Nursing providing me a Dorothy Kergin bursary in support of my participation at the “Philosophy in the Nurses’ World” conference in Banff, Alberta, May 13th to 15th 2012.

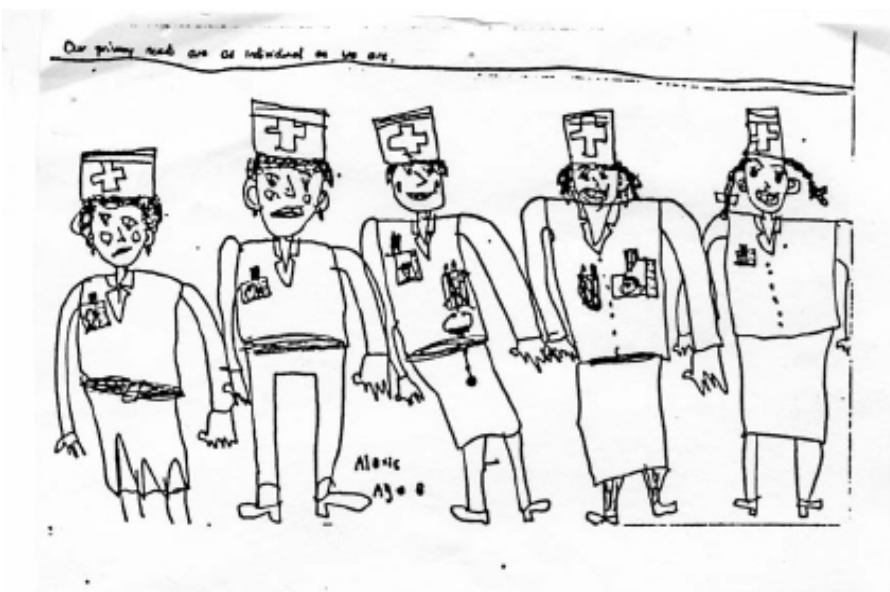
This biennial conference is an Institute for Philosophical Nursing Research (IPNR) initiative offered to provide leadership in the pursuit of philosophical nursing knowledge. The IPNR was established in 1988 in the Faculty of Nursing at the University of Alberta. This year, 2012, the conference focused on “the political” in nursing with a call to put philosophy in action in nursing practice by responding to this question: What is the difference that philosophy makes to practice? This was an invitation to critically reflect on the givens and assumptions in everyday nursing practice for purposes of gaining deeper understanding of the human condition in relation to the multi-faceted complexities of nursing practice.

There were five conference streams: standardization; technological practice; politics of knowledge; effects of managerialism; and shifting boundaries. To give a flavor of the presentations here are some examples: (1) “Technologies of/in practice” critiques of techniques of practice, e.g., “Safe practice as a technique of control”; (2) “Structural marginalization”, e.g., “politics of nursing the Other”; (3) Politicizing nursing theory, e.g., “democratic dialogue/actualizing political theorizing”; (4) “Theorizing nursing/knowledge”; (5) “Governing practices” e.g., “Beyond the values of state policy”; (6) “Educative rationalities”, e.g., “performance and politics of practice for new grads”; (7) “Body politics, e.g., “Losing touch in nursing”. I recommend this conference as a way to more deeply understand what is nursing in all its complexities and how what we value and believe is crucial to how we practice nursing.

The conference was provocative from the first to the last presentation and keynote speaker. I feel privileged to have been able to attend such a wonderful thought provoking informative conference. The first keynote aimed to make it compelling for nurses to reflect on the importance of “parrhesia” in nursing, i.e., to tell the truth at the risk of danger (Foucault\*). The speaker gave stimulating examples of how nurses engaging parrhesia can not only be productive for emancipation and political change but also effectively promote nurses as free and fearless speakers. She warned of the dangers of speaking up and speaking out but in the context of the rewards, setting an evocative tone of risk taking for the next days. The final keynote book ended the conference with an equally intriguing talk about desire

titled: “Desiring productivity: nary a wasted moment, never a missed step!” She unpacked how in health care systems the desire to measure productivity is a powerful driver, impacting the actual production and structure of nursing in subtle and not so subtle ways; often with unintended consequences that can lead to nurses’ feeling ineffective and uncertain.

What struck me is how a group of nurses can at first glance seem homogenous with such strong common interests. This was a fleeting notion as I took in diverse fascinating presentations and met and talked with so many different, dynamic and passionate nurses who offered an amazing number of unique angles about what is/can be nursing.



This charming drawing by an 8 year old in 1988 offers a compelling depiction of such paradox.

### The paradox of diversity within homogeneity

My own presentation “Discourses of functional decline: An exemplary of the politics of knowledge” offered a kaleidoscope of images of older adults to provoke thinking about how hospitalized older adults are positioned and represented. In particular how this population is taken up in political ways, e.g., through categorization for efficiencies in care that can lead to stereotyping, making invisible their unique sense of personhood. My final slide is an image that reflects my own thinking about aging and how if you live long enough you become one of ‘them’. Gerontology is about all of us.

In many ways by participating in this conference I gained knowledge and insight that will both enrich my PhD studies and my practice as nurse educator. Thank you again for the support of the Dorothy Kergin bursary.



<http://foucault.info/documents/parrhesia/foucault.DT1.wordParrhesia.en.html>

June 12th 2012

## FOOD STUDIES IN THE AGE OF SUSTAINABILITY

by Wanda Martin, RN, MN, PhD (c)

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With assistance from the Dorothy Kergin Endowment Fund, I was able to attend the Canadian Association of Food Studies (CAFS) 7th Annual Conference at the Congress of the Humanities and Social Science in Waterloo, Ontario. CAFS consists of academics and professionals from governmental and

community organizations who are interested in promoting interdisciplinary scholarship in the broad area of food systems: food policy, production, distribution and consumption. The conference theme was on food studies in the age of sustainability. As a conference volunteer, I missed the opening plenary, but had the advantage of a personal synopsis from the presenters. I was particularly interested in the Conference Board of Canada's work toward a national food policy. The first session I attended was on food as a commodity, where we talked about food waste, commodity exchanges, and Ontario's organic sector. I participated in the PechaKucha session, presenting part of my dissertation work in this alternative style of presentation. PechaKucha originated in Japan as a way for designers to network and share. It is a visual means of telling a story, consisting of 20 slides at 20 seconds each, for a total of 6 minutes and 40 seconds. The timing forces presenters to keep strictly on point, and without discussion in between the six presentations, we weaved our ideas together for an interesting discussion at the end. This was followed by a student/new researcher session that allowed us to nibble on fresh food from the farmer's market, network, and talk about some challenges such as 'imposter syndrome', writing paralysis, work-life balance, or transitioning in and out of academia. After the book launch of four separate authors (I restricted myself to only purchasing one!), we met informally at the Grad Pub.

Sunday morning started with a field trip to either a large organic farm, and asparagus farm, or a little city farm. I attended the later to experience the one-third acre with hens, greenhouse, cob oven, straw bale house addition, grey water system, and multiple raised beds. As with the previous day, the afternoon was filled with so many interesting options, but I chose the health and safety discussion where we discussed raw milk, child-targeted food marketing, relationship with food during kidney disease, and the quality turn and the new public health regulation for food. After a second engaging PechaKucha session, we had a round-table discussion on interdisciplinarity in food studies, emphasizing the importance of reaching beyond boundaries, being able to connect the dots, and looking for the sectoral synergies.

The final day started with a round table discussion on provincial food movement networks represented by BC, Manitoba, Nova Scotia and Ontario, followed by the last paper session on food environments and practices. The afternoon consisted of the annual general meeting and the keynote address by Terry Marsden. Dr. Marsden is Director of PLACE, the interdisciplinary Sustainable Places Research Institute at Cardiff University as well as the Dean of Graduate Studies. He highlighted the conundrum of capitalism in food and how we are in an era of neo-productivism or sustainable intensification, in the face of land pressure, climate change, resource depletion and health and welfare challenges. Dr. Marsden suggested there is a co-evolution of clusters of eco-economy and bio-economy happening at the regional or local level and to be sustainable, we need to get beyond the mindset of neoliberalism.

The conference ended with a local food banquet and awards presentation for the student essay, and excellence in food studies research. An overall highlight (besides reconnecting with friends) was the exploration gallery of a variety of artistic food representations. It is always a privilege to attend the CAFS conference and to be immersed in new and interesting research on a topic we all enjoy!

## HUMANBECOMING IN PITTSBURGH: 2012

by Coby Tschanz, RN, MN, PhD(c)



Funding support provided by the Dorothy Kergin Endowment Fund meant that I could spend 6 days of study at the Institute of Humanbecoming (IHB) held in June 2012 at Point Park University, Pittsburgh. The IHB is offered yearly, and is attended by nurses and others interested in the humanbecoming school of thought originally authored by Dr. Rosemarie Parse. This year, people from Indonesia, Europe, and North America were working or retired nurses in positions as administrators, researchers, theorists, educators, and/or direct caregivers. Together we refined our understanding and articulation of humanbecoming, and we took opportunities to share dialogue on related topics such as: undergraduate nursing curricula, graduate studies, practice and research issues, and teaching-learning principles. Pittsburgh is a wonderful setting for the Institute. The city is located at the confluence of 3 vital rivers—a richly historic and turbulent environment in which to reflect on what it means to be a nurse and nurse educator.

Participation in the IHB required commitments of in-depth preparation and engagement. In preparation, I re-read several seminal books and articles, studied the work of scholars who have influenced Parse's thinking, and developed questions to share with participants. Dr. Parse facilitated our studies with skillful pacing, guiding questions, humour, and an (astonishingly) extensive knowledge base. Attendees presented on their ongoing scholarly projects. Broad-ranging dialogue and consultation ensued throughout the meeting. An unexpected benefit of attendance relates to how studies at the IHB contributed to my process of preparing for reappointment to the SON. In addition, I've refreshed my commitment to examine and advance the philosophical and scientific ground of our discipline.

I have come away from this intense time of study feeling energized. Being away from both office and home provided an opportunity to create a retreat-like routine—I am seriously considering attending this Institute, or something similar, once every year or two. Overall, I have refreshed and deepened my understanding of humanbecoming, which is a useful framework for nurses who wish to focus their attention on quality of life as described by the person. I have had a welcome opportunity for concentrated study and reflection. I am looking forward to seeing how my experience at the Institute will contribute to fulfilling teaching and other responsibilities at the SON in the future. I extend my sincere gratitude to all who contribute to the workings of the Kergin Endowment.

### CONTRIBUTE TO THE DOROTHY KERGIN ENDOWMENT

The School of Nursing welcomes donations to this fund. If you are interested in supporting our graduate students through this endowment please contact Lynne Milnes, Development Officer at [lmilnes@uvic.ca](mailto:lmilnes@uvic.ca) or 250-472-503. Or visit us at <http://www.uvic.ca/hsd/alumnidonors/donors/#section0-13>

## UVIC PROFESSOR EMERITUS IS HONORED WITH THE CANADIAN BIOETHICS SOCIETY LIFETIME ACHIEVEMENT AWARD

by Rosalie Starzomski, RN, BN, MN, PhD

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The CBS Lifetime Achievement Award is given annually to an individual whose demonstrated scholarship and/or leadership has significantly contributed to health care ethics in Canada.

The 2013 Winner is Dr. Janet Storch.

Dr. Janet (Jan) Storch, RN, BScN, MHSA, PhD (Soc), DSc (Hon), LLD (Hon) holds earned degrees from the University of Alberta, and Honorary degrees from Ryerson University and the University of Western Ontario. She taught as sessional instructor in nursing for nine years at the University of Alberta while her children were young, and thirteen years full time in health services administration moving through the ranks of Assistant to Full Professor. She was a founding member of the Bioethics Center at the University of Alberta (the John Dossetor Ethics Center) and joined the Canadian Bioethics Society in 1987.

In 1990 she became Dean of Nursing at the University of Calgary, and shortly thereafter she was appointed co-Chair of the Provincial Health Ethics Network (PHEN). She then became President of the Canadian Bioethics Society, following which she became a member of the Board of the National Council on Ethics

in Human Research (NCEHR). Jan studied at the Kennedy Institute of Ethics in 1996 prior to becoming Director of the School of Nursing at the University of Victoria. From 1999-2001 she served as President of NCEHR and during a sabbatical year from UVIC she was Ethics Scholar in Residence at the Canadian Nurses Association. She was Co-Chair of the CBS Victoria Conference in Fall 2002.

She is Professor Emeritus at the University of Victoria, continues research and publication in nursing ethics, health ethics, and client safety in home care. Dr. Storch lead three revisions of the CNA Code of Ethics (1997, 2002, 2008), and she currently serves as Chair of the Health Canada and Public Health Agency of Canada Research Ethics Board.

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## NURSING IN THE NEWS

**Marjorie MacDonald**, President of the Public Health Association of British Columbia, has been involved in a series of editorials, blogs, and commentaries in the press on a variety of election issues. A commentary published on May 5th in the Times Colonist talks about the need for a poverty reduction plan in BC. <http://www.timescolonist.com/opinion/op-ed/comment-poverty-carries-a-high-cost-to-everyone-in-b-c-1.145539>

Thumbs Up/Thumbs Down. **Lenora Marcellus** received a Thumbs Up in the Times Colonist for her work in developing the Safe Babies program that is being used throughout BC and expanding into Alberta. She also spoke with Gregor Craigie about the "Safe Babies" program she pioneered, and which provides hope and care for babies born with prenatal drug and alcohol exposure. The program is now in place across BC, and is expanding to Alberta.



## SUCCESS!

- UVic School of Nursing Doctoral candidate **Olga Petrovskaya** won first prize in the International Philosophy Of Nursing Society's 2013 Essay contest for her essay "Is there nursing phenomenology after Paley?"
- UVic School of Nursing Doctoral candidate **Laura Tomm-Bonde** was the 2013 recipient of the President's Research Scholarship.
- UVic School of Nursing undergraduate student **Kira Antinuk** won the Paul Wainwright Student Essay Prize (2012/13) for her essay "Forced genital cutting in North America: Feminist theory and nursing considerations." Her essay was published in Nursing Ethics and the full text can be viewed at <http://nej.sagepub.com/content/20/6/723.full.pdf+html>.

## PUBLICATIONS and PRESENTATIONS – FACULTY

- **Pauly, B.** (in press). Close to the street: Nursing care for people marginalized by homelessness and substance use. M. Younger, S. Hwang (Eds), Homelessness and Health in Canada.
- **Pauly, B.**, & Varcoe, C. (in press). Vulnerable populations and nursing: Vulnerability as a health equity concern. D. Gregory, C. Raymond-Seniuk & L. Patrick (Eds), Fundamentals: Perspectives on the Art and Science of Canadian Nursing.
- **Pauly, B.** (in press). The multiple and intersecting stigmas of homelessness. The Wiley-Blackwell Encyclopedia of Health, Illness, Behavior, and Society.
- Belle Isle, L., Benoit, C., & **Pauly, B.** (accepted with revisions). Role of community agencies in addressing health inequities through participatory engagement. Action Research Journal.
- **Pauly, B.**, Reist, D., Belle-Isle, L. & Schactman, C. (2013). Housing and harm reduction: What is the role of harm reduction in addressing homelessness? International Journal of Drug Policy, 24(4), 284-290. doi:10.1016/j.drug-po.2013.03.008.
- **Tomm-Bonde, L., Schreiber, R.**, Allan, D., **MacDonald, M., Pauly, B.**, & Hancock, T. (2013). Fading vision: Knowledge translation in the implementation of public health policy intervention. Implementation Science, 8(1), 59. doi: 10.1186/1748-5908-8-59.
- **Pauly, B., McDonald, M.**, Hancock, T., **Martin, W.**, & Perkin, K. (2013). Reducing health inequities: The contribution of core public health services in BC. BMC Public Health, 13(1), 550. doi:10.1186/1471-2458-13-550.
- **Pauly, B.** (2013). Homelessness: What are we talking about and what do we know? Visions, 8 (1), 5-6.
- Bush, H.M., **Schreiber, R.S.**, Oliver, S.J. (March 2013) Failing to fail: clinicians' experience of assessing underperforming dental students. European Journal of Dental Education.
- **Sangster-Gormley, E., Frisch, N., Schreiber, R.** (2013) Articulating New Outcomes of Nurse Practitioner Practice. The Journal of the American Association of Nurse Practitioners. DOI: 10.1002/2327-6924.12040.
- Ploeg, J., Kaasalainen, S., McAiney, C., Martin-Misener, R., Donald, F., Wickson-Griffiths, A., Carter, N., **Sangster-Gormley, E.**, Martin, S., Brazil, K., Taniguchi, A. Resident and family perceptions of the nurse practitioner role in long term care settings: a qualitative descriptive study. BMC Nursing, 12(24). doi: 10.1186/10.1186/1472-6955-12-24.
- **Schreiber, R. & Martin, W.**, New directions in grounded theory. In C.T. Beck (Ed.), Routledge international handbook of qualitative nursing research (pp.183-202). New York, NY: Routledge.

- **Scaia, M., & Young, L.E.** (2013). Writing History: Case Study of the University of Victoria School of Nursing. *Int J Nurs Educ Scholarship* (10)1:1-8.
- **Ryan, M., Walker, M., Scaia, M., & Smith, V.** (in press, 2013)“(un)Disciplining the Nurse Writer.” *Int J Nurs Educ Scholarship*.
- **Scaia, M.** & McPherson, K. (2013). Challenges and change in undergraduate nursing education. In M. McIntyre & C. McDonald (Eds.) *Realities of Canadian nursing: Professional, practice and power issues* (4rd edition, pp.183-202). New York NY: Lippincott Williams & Wilkins.

## PUBLICATIONS and PRESENTATIONS - STUDENTS and ALUMNI

- **Humphries, J. M.** (2012). I wanted to glimpse: Perinatal isolation, women’s suffering as motet. *Creative Approaches to Research*, 5(2), 141-155.
- **Tomm-Bonde, L., Schreiber, R., Allen, D., MacDonald, M., Pauly, B., Hancock, T.,** (2013). Fading vision: Knowledge translation in the implementation of a public health policy intervention. *Implementation Science*, 8 (59).

## GRANTS and FUNDING – FACULTY

- Congratulations to **Kelli Stajduhar** and her colleagues across Canada who have been funded for \$24 million to examine how to best improve care for seriously ill older adults. Technology Evaluation in the Elderly Network supports multi-disciplinary research related to health care technology and tools for the seriously ill older adults and their families. The Network is a member of the federal Networks of Centres of Excellence (NCEs), Canada’s flagship science and technology program featuring collaborations between researchers, industry and other organizations to produce programs and products that further Canada’s economic strength and social wellbeing. The Network’s mission is to improve the care of seriously ill, older adults and their families through the development, rigorous evaluation, and ethical implementation of health care technologies, including drugs, devices, knowledge products, improvement strategies and tools, ultimately leading to better outcomes for patients and their families, health care professionals and the health care system as a whole. Dr. Stajduhar is leading research on end of life care within the Network.
- Co-Principal Investigator, **Bernie Pauly**. *Managed Alcohol Programs: Implementation and Effectiveness*. Funded by Canadian Institutes of Health Research, Partnerships for Health System Improvement (PHSI) Grant (\$758,500). Co-Principal Investigators: Tim Stockwell & Denise De Pape. Co-Investigators: Josh Evans, Siavash Jafari, Jamie Muckle, Dyanne Semogas, Colin Van Zoost, Claire Hacksel, Ron Joe, Wendy Muckle, Karen Smith, Jinhui Zhao, Irene Haigh-Gidora, Danielle Layman-Pleet, Joe Power, Vicky Stergiopoulos, Patty Hajdu, Patti Melanson, Manik Saini, & Tomislav Svoboda (2013 – 2016).
- Co-Investigator, **Bernie Pauly** *Canadian Observatory on Homelessness: Creating Policy Impact*. Funded by a Social Sciences and Humanities Research Council of Canada Partnership Grant (\$2,502,976). Principal Investigator: Stephen Gaetz (2012 – 2013).
- Principal Investigator, **Bernie Pauly**. *Building Capacity Among People Who Use Drugs: Reducing Stigma and Fostering Inclusion of Experiential Knowledge in Harm Reduction Research, Policy Development, and Service Delivery*. Funded by a Canadian Institutes of Health Research, HIV/AIDS Priority Announcement Planning Grant (\$24,998). Co-Investigators: Lynne Belle-Isle, Mark Wilson & Ashley Mollison (2013 – 2014).