

2015

Nursing Abstracts

First Annual International Conference
on Nursing

4-7 May 2015, Athens, Greece

Edited by Gregory T. Papanikos

THE ATHENS INSTITUTE FOR EDUCATION AND RESEARCH



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1st Annual International
Conference on
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Preface

This abstract book includes all the summaries of the papers presented at the 1st Annual International Conference on Nursing, 4-7 May 2015, organized by the Nursing Research Unit of the Athens Institute for Education and Research. In total there were 116 papers, coming from 23 different countries (Albania, Australia, Belgium, Brazil, Cameroon, Canada, China, Czech Republic, Egypt, Finland, India, Italy, Jordan, Romania, Saudi Arabia, Singapore, Slovak Republic, South Africa, Taiwan, Thailand, Turkey, UK and USA). The conference was organized into 23 sessions that included areas of Nursing and other related fields. As it is the publication policy of the Institute, the papers presented in this conference will be considered for publication in one of the books of ATINER.

The Institute was established in 1995 as an independent academic organization with the mission to become a forum where academics and researchers from all over the world could meet in Athens and exchange ideas on their research and consider the future developments of their fields of study. Our mission is to make ATHENS a place where academics and researchers from all over the world meet to discuss the developments of their discipline and present their work. To serve this purpose, conferences are organized along the lines of well established and well defined scientific disciplines. In addition, interdisciplinary conferences are also organized because they serve the mission statement of the Institute. Since 1995, ATINER has organized more than 150 international conferences and has published over 100 books. Academically, the Institute is organized into four research divisions and nineteen research units. Each research unit organizes at least one annual conference and undertakes various small and large research projects.

I would like to thank all the participants, the members of the organizing and academic committee and most importantly the administration staff of ATINER for putting this conference together.

Gregory T. Papanikos
President

FINAL CONFERENCE PROGRAM
1st Annual International Conference on Nursing, 4-7 May 2015
Athens, Greece

PROGRAM

Conference Venue: Titania Hotel, 52 Panepistimiou Avenue, Athens, Greece

Organization and Scientific Committee

1. Dr. Gregory T. Papanikos, President, ATINER & Honorary Professor, University of Stirling, UK.
2. Dr. George Poulos, Vice-President of Research, ATINER & Emeritus Professor, University of South Africa, South Africa.
3. Dr. Sue Coffey, Academic Member, ATINER & Associate Professor and Director of the Nursing Program, University of Ontario Institute of Technology, Canada
4. Dr. Anna Tsaroucha, Academic Member, ATINER & Senior Research Officer Fellow of the Higher Education Academy (FHEA), School of Social Work, Allied and Public Health, Faculty of Health Sciences, Staffordshire University, U.K.
5. Dr. Panagiotis Petratos, Vice President of ICT, ATINER, Fellow, Institution of Engineering and Technology & Professor, Department of Computer Information Systems, California State University, Stanislaus, USA.
6. Dr. Paul Contoyannis, Head, Health Research Unit, ATINER & Associate Professor, McMaster University, Canada.
7. Dr. Zoe Boutsioli, Acting Director, Health Sciences Research Division, ATINER, Greece, & Associate Teaching Fellow, Open University of Cyprus, Cyprus.
8. Dr. Andy Stergachis, Academic Member, ATINER & Professor, University of Washington, USA.
9. Dr. Fiona Timmins, Academic Member, ATINER & Associate Professor, Trinity College Dublin, Ireland.
10. Dr. Sara Brown, Academic Member, ATINER & Assistant Professor, College of Nursing, University of Nebraska Medical Center, USA.
11. Dr. Jennie De Gagne, Academic Member, ATINER & Assistant Professor, Duke University School of Nursing (DUSON), USA.
12. Dr. Efrosini A. Papaconstantinou, Academic Member, ATINER & Assistant Professor, Faculty of Health Sciences, Institute of Technology, University of Ontario, Canada.
13. Dr. Cheryl Brunoro-Kadash, Academic Member, ATINER & Lecturer, College of Nursing, University of Saskatchewan, Canada.
14. Dr. Emmanouil Mentzakis, Academic Member, ATINER & Lecturer, University of Southampton, UK.
15. Dr. Melina Dritsaki, Academic Member, ATINER & Research Fellow, Brunel University, U.K.
16. Dr. Stefanos Nastis, Academic Member, ATINER & University of Wyoming, USA.
17. Ms. Olga Gkounta, Researcher, ATINER.

Administration

Stavroula Kyritsi, Konstantinos Manolidis, Katerina Maraki & Kostas Spiropoulos

Monday 4 May 2015

07:45-08:40 Registration and Refreshments

08:40-09:05 (ROOM B-MEZZANINE FLOOR) Welcome & Opening Remarks

- Dr. Gregory T. Papanikos, President, ATINER
- Dr. George Poulos, Vice-President of Research, ATINER & Emeritus Professor, University of South Africa, South Africa.
- Gregory A. Katsas, Head, Sociology Research Unit & Associate Professor, The American College of Greece-Deree College, Greece.
- Dr. Zoe Boutsoli, Director, Health Sciences Research Division, ATINER.

09:05-09:15 Break

09:15-10:50 Session I (ROOM E-10TH FLOOR): Teaching Methods and Innovative Educational Program Models I	09:15-10:50 Session II (ROOM F-10TH FLOOR): Issues Affecting Nurses I	09:15-10:50 Session III (ROOM G-10TH FLOOR): Care of Patient Populations- Maternal –Child and Women's Health I
Chair: Sue Coffey, Academic Member, ATINER & Associate Professor and Director of the Nursing Program, Institute of Technology, University of Ontario, Canada.	Chair: Efosini A. Papaconstantinou, Academic Member, ATINER & Assistant Professor, Faculty of Health Sciences, Institute of Technology, University of Ontario, Canada.	Chair: Zoe Boutsoli, Director, Health Sciences Research Division, ATINER.
<ol style="list-style-type: none"> 1. Pierrette Guimond, Vice-Dean Academic, University of Ottawa, Canada. Preceptor's Attitude toward the Development of Nursing Student's Critical Thinking in Clinical Practice. 2. Jeanne Churchill, Assistant Professor, Columbia University, USA & Elizabeth Churchill, Columbia University, USA. Narrative Essays in Nursing Education. 3. Philip Davey, Lecturer, University of West London, U.K. The Flipped Classroom: Motivating Student Nurses to Learn Independently. 4. **Alastair Gray, Senior Lecturer, Coventry University, U.K. & Tim Morse, Lecturer, Senior Lecturer, Coventry University, U.K. The Use of the Viva in Making Visible the Richness Hidden within Advanced Nursing Practice Portfolios. 	<ol style="list-style-type: none"> 1. Debbie Kane, Professor, University of Windsor, Canada & Dale Rajacich, Professor, University of Windsor, Canada. Men in Nursing: Issues of Recruitment and Retention. 2. *Austyn Snowden, Chair in Mental Health, University of the West of Scotland, U.K. Social Disconnection: An Important Factor to Understand in Recruiting Nurses? 3. Yong Shian Goh, Senior Lecturer, National University of Singapore, Singapore & Violeta Lopez, Professor, National University of Singapore, Singapore. Acculturation, Quality of Life and Coping of International Nurses Working in a Contemporary Multi-Cultural Society. 4. Kay Norman, Senior Lecturer, Open University, U.K. How to Recruit and Retain the Next Generation of Nurses in the UK: Young Peoples' Views on the Image of Nursing. (Monday, 4th of May 2015) 	<ol style="list-style-type: none"> 1. *Chieh-Hsiu Hung, Professor & Director of School of Nursing, Kaohsiung Medical University, Taiwan & Chia-Yao Wu, Instructor, Min-Hwei College of Health Care Management, Taiwan. The Predictors of Health Status in Mothers of Premature Infants. 2. Zekiye Karacam, Professor, Adnan Menderes University, Turkey. The Effectiveness of PLISSIT Model for Solving the Sexual Problems of Women's in the Postpartum Period. 3. Sally Michael, Clinical Nurse, Flinders University South Australia, Australia. When in Doubt, Feed! Encouraging Longer Term Breastfeeding. 4. Lilian Varanda Pereira, Nurse and Associate Professor, Universidade Federal de Goias, Brazil & Louise Amalia Moura, Nurse, Universidade Federal de Goias, Brazil. Incidence and Predictors of Postoperative Pain in Children Undergoing Outpatient Surgeries in Brazil: A Cohort Prospective.

10:50-11:00 Break

11:00-12:20 Session IV (ROOM E-10TH FLOOR): Adult Health Challenges I	11:00-12:20 Session V (ROOM F-10TH FLOOR): Student Experience and Characteristics II	11:00-12:20 Session VI (ROOM G-10TH FLOOR): Care of Patient Populations- Maternal –Child and Women’s Health II
Chair: **Alastair Gray, Senior Lecturer, Coventry University, U.K.	Chair: *Cathy Dickson, Lecturer, University of Western Sydney, Australia	Chair: *Chich-Hsiu Hung, Professor & Director of School of Nursing, Kaohsiung Medical University, Taiwan
<ol style="list-style-type: none"> 1. <u>Maria de Fatima Mantovani</u>, Professor, Federal University of Parana, Brazil, Elis Martins Ulbrich, Ph.D. Student, Angela Tais Mattei, Master Student, Leila Maria Mansano Sarquis, Ph.D. in Nursing, Juliana Perez Arthur, Academic Nursing Students & Taisa Tatiane de Souza Santos, Academic Nursing Students, Federal University of Parana, Brazil. Scale for Predicting Complications of Arterial Hypertension and Managing Nursing Care. 2. <u>Jozef Novotny</u>, Professor, College of Polytechnics Jihlava, Czech Republic & Jaroslav Stanciak, Associate Professor, University of SS. Cyril and Methodius Trnava, Slovakia. The Role of Physiotherapist and Nurse in a Complex Balneotherapy. 3. Jaroslav Stanciak, Associate Professor, University of SS. Cyril and Methodius Trnava, Slovakia & <u>Jozef Novotny</u>, Professor, College of Polytechnics Jihlava, Czech Republic. The Quality of Life of the Patients with Rheumatoid Arthritis before and after Balneotherapy. 4. Ahmad Tubaishat, Assistant Professor, Al al-Bayt University, Jordan. Prevalence and Prevention of Pressure Ulcer in Acute Care Settings. 5. <u>Ubol Suttineam</u>, Lecturer, Boromarajonani College of Nursing Bangkok, Thailand, Jintana Buathongjun, Lecturer & Samerchan Teerawatskul, Lecturer, Boromarajonani College of Nursing Bangkok, Thailand. Effectiveness of Self-Management Program on Health Beliefs, Health Behaviors, and Health Indicators of Supporting Staffs. 	<ol style="list-style-type: none"> 1. Amanda Johnson, Associate Professor, University of Western Sydney, Australia Inherent Requirements in Nursing: An Enabling Student Support Strategy. 2. *<u>Samah Anwar Mohamed Shalaby</u>, Lecturer Critical Care and Emergency, Faculty of Nursing, Alexandria University, Egypt & Sara Mahdi Swaid AlDilh, Critical Care Nursing Student, College of Nursing, King Saud Bin Abdulaziz University for Health Sciences, Saudi Arabia. Exploring the Relationship between Perceived Stress and Academic Achievement among Critical Care Nursing Students. 3. **Efrosini Papaconstantinou, Assistant Professor, University of Ontario Institute of Technology, Canada. Coping, Perceived stress, Eating patterns, and Sleep characteristics (CoPES) of Undergraduate Nursing and Medical Laboratory Science Students in their Final Practicum Experience. 4. *Andrew Walsh, Senior Lecturer, Birmingham City University, U.K. What Interactions and Influences Mediate the Development of Key Concepts, Professional Identity, Attitudes and Values amongst Mental Health Student Nurses? 	<ol style="list-style-type: none"> 1. Beverly Leipert, Professor, University of Western Ontario, Canada. Sport and Rural Women’s Health in Canada: A National Ethnographic Photovoice Exploration of Curling. 2. <u>Gisele Ferreira Paris</u>, Professor, State University of West Parana, Brazil, Francine de Montigny, Professor, University of Quebec in Outaouais, Canada, Elizabeth Ishida, Nurse, State University of Maringa, Brazil & Sandra Marisa Pelloso, Professor, State University of Maringa, Brazil. Grieving over Stillbirth in Brazilian Women. 3. <u>Siriporn Mongkhonthawornchai</u>, Head, Srinagarind Hospital, Khon Kaen University, Thailand, Suteera Pradubwong, Darawan Augsomwan, Pornpen Prathumwiwattana, Jantira Wachirapakorn, Thippayawan Muknamporn & Bowornsilp Chowchuen, Srinagarind Hospital, Khon Kaen University, Thailand. Development and Monitoring the Key performance Index of the Quality of Care for Patients with Cleft Lip/Palate in Srinagarind Hospital. 4. <u>Eliza Cristina Macedo</u>, Assistant Professor, Federal University of the State of Rio de Janeiro, Brazil, Ph.D. student CAPES - PROC. N°009610/2014-06, Leila Rangel da Silva, Post-Doctor in Nursing, Federal University of the State of Rio de Janeiro, Mariana Alencar Barreto, Scientific Initiation Scholarship, Federal University of the State of Rio de Janeiro, Mirian Santos Paiva, Post-Doctor in Social Psychology, Federal University of Bahia, Brazil, Kleyde Ventura de Souza, Ph.D. in Nursing, Federal University of Minas Gerais, Brazil & Maria Natalia Pereira Ramos, Pos-Doctor in Clinical Psychology, Open University, Lisboa, Portugal. Transgenerationality Pregnancy in Adolescence: a Reality College Hospital.

12:20-13:30 Lunch

13:30-15:20 Session VII (ROOM E-10TH FLOOR): Technology, Simulation, and Informatics in Nursing Education	13:30-15:20 Session VIII (ROOM F-10TH FLOOR): Models and Structures Supporting Nursing Care	13:30-15:20 Session IX (ROOM G-10TH FLOOR): Adult Health Challenges II
Chair: * <u>Samah Anwar Mohamed Shalaby</u> , Lecturer Critical Care and Emergency, Faculty of Nursing, Alexandria University, Egypt	Chair: *Austyn Snowden, Chair in Mental Health, University of the West of Scotland, U.K.	Chair: * <u>Annette Bailey</u> , Assistant Professor, Ryerson University, Canada
<ol style="list-style-type: none"> 1. Leslie Graham, Professor, University of Ontario Institute of Technology, Canada. Simulation in Canadian Undergraduate Nursing Education: The State of the Science. 2. *Ruth Chen, Assistant Professor, McMaster University, Canada. Online Problem-Based Learning (PBL): Putting Cognitive Load Theory Principles into Practice. 3. Julia Greenawalt, Assistant Professor, Indiana University of Pennsylvania, USA. Charting in a New World. 4. <u>Christine Kurtz Landy</u>, Assistant Professor, York University, Canada, Ilo-Katryn Maimets, York University, Canada, Elisabeth Jensen, Associate Professor, York University, Canada, Mary Fox, Associate Professor, York University, Canada, Shelley Walkerley, Assistant Professor, York University, Canada & Claire Mallette, Professor, York University, Canada. A Snapshot of Undergraduate and Master's Students' Information Literacy Skills at Each Level of their Nursing Program. 5. <u>Muazzez Sahbaz</u>, Lecturer, Adnan Menderes University, Turkey, <u>Ruveyda Yuksel</u>, Lecturer, Adnan Menderes University, Turkey, Hulya Arslantaş, Associate Professor, Filiz Adana, Assistant Professor, Suleyman Umit Senocak, Assistant & Duygu YeSilfidan, Assistant, Adnan Menderes University, Turkey. The Viewpoints of A Group of Nursing Students on Nursing Informatics. 	<ol style="list-style-type: none"> 1. Beth Ann Swan, Professor and Dean, Thomas Jefferson University, USA. Coordinating Care and Managing Transitions across the Health-Illness Continuum. (Monday, 4th of May 2015, morning) 2. Louise Dyjur, Ph.D. Student, University of Calgary, Canada. Nurses' Medication Work: The Discursive Construction of Rules. 3. *<u>Elizabeth Ishida</u>, Nurse, State University of Maringa, Brazil, Lourenco Tsunetomi Higa, Gynecologist, State University of Maringa, Brazil, Marcela Castilho Peres, Nurse, State University of Maringa, Brazil, Viviani Guilherme Dourado, Nurse, State University of Maringa, Brazil, Ana Lucia Falavigna-Guilherme, Associate Professor, State University of Maringa, Brazil & Silvia Maria Santiago, Associate Professor State University of Campinas, Brazil. Network of Maternal-Child Public Health Services in South of Brazil. 4. <u>Colleen Counsell</u>, Nurse Manager, UF Health, USA & <u>Donna York</u>, Trauma Program Manager, UF Health, USA. Estimation of Knowledge and Preparedness to Care for Traumatic Brain Injury Patients. (Monday, 4th of May 2015) 5. Yeliz Dincer, Lecturer, Duzce University, Turkey. Investigation of Preventing Factors which Evaluation of Nurses Research and Application of Research Results. 	<ol style="list-style-type: none"> 1. <u>Lina Badr</u>, Professor, Azusa Pacific University, USA, Lucille Rayford & Vivien Dee, Azusa Pacific University, USA. Social Determinates of Risky Sexual Behaviors among African American Emerging Adults with Recurrent Sexually Transmitted Infections: A Multi-Site Study. (Monday, 4th of May 2015) 2. <u>Besher Gharaibeh</u>, Associate Professor, Jordan University of Science and Technology, Jordan, Byron J. Gajewski & Diane K. Boyle, Jordan University of Science and Technology, Jordan. The Relationships among Depression, Self-Care Agency, Self Efficacy, and Diabetes Self-Care Management. 3. Jean Ann Davison, Clinical Assistant Professor, University of North Carolina at Chapel Hill, USA. A Quality Improvement Project to Improve Hypertension Self-Management. 4. Vincenzo Fragonelli, Clinical Nurse Consultant, Nepean Hospital, Australia. Hepatitis B and C Care in the Opiate Substitution Setting - An Integrated Nursing Model of Care. (Monday, 4th of May 2015) 5. *<u>Lesley Wilkes</u>, Professor, University of Western Sydney, Australia, Debra Jackson, Professor, University of Technology, Australia, John Daly, Professor, University of Technology, Australia & Wendy Cross, Professor, Monash University, Australia. The Nursing Dean's World: Juggling Professional and Personal

15:20-15:30 Break

15:30-17:30 Session X (ROOM E-10TH FLOOR): Cancer Care and Oncology Nursing I	15:30-17:30 Session XI (ROOM F-10TH FLOOR): Care of Older Adults
Chair: *Andrew Walsh, Senior Lecturer, Birmingham City University, U.K.	Chair: **Alastair Gray, Senior Lecturer, Coventry University, U.K.
<ol style="list-style-type: none"> 1. *<u>Kathryn Anderson</u>, Professor and Director, Center for Nursing Scholarship & Research, Georgia Southern University, USA, Gloria Barnett, MSc Student, Georgia Southern University, USA, Sibyl Kirkland, Nursing Student, Georgia Southern University, USA & Jennifer Nunn, Cancer Patient Navigator, South Georgia Center for Cancer Care, USA. Needs of Rural Women during Breast Cancer: Focus on Couples/Family and the Health Care System. 2. <u>Ruth Grant Kalischuk</u>, Professor, University of Lethbridge, Canada, Aleitha Ward, Mary Kavanaugh & Cheryl Currie, University of Lethbridge, Canada. Complementary Therapy Use among those Living with Cancer: Navigating the Health Care Environment. (Monday, 4th of May 2015) 3. <u>Tzu-I Lee</u>, Ph.D. Student, National Yang-Ming University, Taiwan, Shuh-Jen Sheu, Professor, Hsueh-Chin Chang, Lecturer & Yu-Thing Hung, Ph.D. Student, National Yang-Ming University, Taiwan. Women's Perceptions of Their Breast Cancer Journey by Viewing a Comic Others' Personal Narrative Story. 4. <u>Filiz Okur</u>, Nurse, Aydin Public Health Directorate, Turkey & Zeynep Gunes, Lecturer, Adnan Menderes University, Turkey. Individual Breast Cancer Risk Factors and Regular Mammography use in Women who has been Living in a City Center of West Anatolia: Retrospective Cohort Study. 	<ol style="list-style-type: none"> 1. Cheryl Riley-Doucet, Associate Professor, Oakland University, USA. Implementing Multi-Sensory Environments (MSE): A Nursing Interventions for Patients with Dementia and their Caregivers. 2. Nurcan Gokgoz, Lecturer, Turgut Ozal University, Turkey. The Impact of Complementary and Alternative Medical Approaches to Menopause Symptoms Implemented by Postmenopausal Women on Their Quality of Life. 3. Zeynep Gunes, Instructor, Turkey & Fatma Nilin Atılmış, Nurse, Dokuz Eylül University, Turkey. Balance and Affecting Factors in the Elderly Who Are Hospitalized in Internal Medicine Clinics. 4. Valbona Alliu, Teacher, University of Medicine, Albania. Role of Education of Patients with Chronic Heart Failure (CHF), an Exploratory Study in Albania. 5. Stephen O'Brien, Head of Department (Nursing, Midwifery and Health Care Practice), Coventry University, U.K. Educational Partnership Working in Nursing: A Case Study in Social Capital.

17:30-18:15 Break

18:15-20:30 Session XII (ROOM E-10TH FLOOR-10th Floor): An International Symposium on Diabetes
Chair: Anil Mandal, Academic Member, ATINER & Courtesy Clinical Professor, Department of Medicine, University of Florida, USA.
<ol style="list-style-type: none"> 1. *<u>Mukesh Doble</u>, Professor, IIT Madras, India & Pranav Kumar Prabhakar, Assistant Professor, Lovely Professional University, India. Synergistic Interaction between Phytochemicals and Oral Antidiabetic Drugs Leading to Enhanced Glucose Uptake in Cells. (DIA) 2. *<u>Jeanne Ngogang</u>, Professor, University of Yaounde I, Cameroon, Bruno Mukette, Ph.D. Student, University of Yaounde I, Cameroon, Anatole Constant Pieme, Lecturer, University of Yaounde I, Cameroon, Proper Cabral Biapa, Lecturer, University of Yaounde I, Cameroon, Vicky Jocelyne Ama Moor, Lecturer, University of Yaounde I, Cameroon, Pauline Nanfack, Ph.D. Student, University of Yaounde I, Cameroon & Marcel Azabji, Lecturer, University of Yaounde I, Cameroon. Evaluation of the Hypoglycaemic, Hypolipidemic and Antioxidant, Properties of a Cameroonian Polyherbal Formulation on Diabetic Rats. (DIA) 3. *<u>Tai Liang Guo</u>, Associate Professor, University of Georgia, USA & <u>Wan-I Oliver Li</u>, Associate Professor, University of Georgia, USA. Sexually Dimorphic Effects of Genistein in Various Murine Diabetic Models. (DIA) 4. *<u>Kasturi Sen Ray</u>, Retired Professor, SNDT Women's University, India & Neha Paharia, Ph.D. Graduate, SNDT Women's University, India. Relative Glycemic and Insulinemic Response of Staple Indian Foods in

- Type 2 Diabetic Patients. (DIA)
5. *Doina Popov, Head of Pathophysiology and Pharmacology Department, Institute of Cellular Biology and Pathology "N. Simionescu" of the Romanian Academy, Romania. Organelles Stress and Their Crosstalk within Diabetic Myocardium. (DIA)
 6. Richik Tripathi, Professor, Banaras Hindu University, India & Deepa Pokharia, Research Scholar, Banaras Hindu University, India. CYR61 as a Factor Involved in the Pathogenesis of Impaired Wound Healing in Type 2 Diabetes Mellitus. (DIA)
 7. Neha Paharia, Ph.D. Graduate, SNDT Women's University, India & Kasturi Sen Ray, Retired Professor, SNDT Women's University, India. Impact of Specific Processing of Rice on Postprandial Glycemic and Insulinemic Responses in Individuals with Type 2 Diabetes Mellitus. (DIA)
 8. Anil Mandal, Courtesy Clinical Professor, Department of Medicine, University of Florida, USA. Diagnosis and Men-percent of Diabetes and Relationship of d-Glucose to Preservation of Kidney Function.

21:00-23:00 Greek Night and Dinner (Details during registration)

Tuesday 5 May 2015

08:00-09:30 Session XIII (ROOM E-10TH FLOOR): Child and Adolescent Health	08:00-09:30 Session XIV (ROOM F-10TH FLOOR): Cancer Care and Oncology Nursing II
Chair: *Aida Maris Peres, Associate Professor, Federal University of Parana, Brazil	Chair: Julia Greenawalt, Assistant Professor, Indiana University of Pennsylvania, USA
<ol style="list-style-type: none"> 1. Cheryl Mele, Professor, Drexel University and Pediatric Nurse Practitioner at Children's Hospital Philadelphia (CHOP), USA. Pharmacogenomics and Individualized Drug Therapy in Pediatrics. 2. Laila Habib Allah, Assistant Professor, Irbid National University, Jordan. Prevalence and Incidence of Pressure Ulcer in Jordanian Paediatric Population. 3. <u>Suteera Pradubwong</u>, Nurse Specialist, Srinagarind Hospital, Khon Kaen University, Thailand, Siriporn Mongkholtawornchai, Natda Keawkhamsan, Benjamas Prathanee, Niramol Patjanasoonontorn & Bowornsilp Chowchuen, Srinagarind Hospital, Khon Kaen University, Thailand. Clinical outcomes of Primary Palatoplasty in Preschool-aged Cleft Palate Children in Srinagarind Hospital: Quality of Life. 4. Darawan Augsornwan, Nurse Specialist, Khon Kaen University, Thailand. Comparison of Wound Dehiscence and Parent's Satisfaction between Spoon/Syringe Feeding and Breast/Bottle Feeding in Patients with Cleft Lip Repair. 5. Shema Ammer, Ph.D. Student, Cardiff University, U.K. Developing and Evaluating a Structured Diabetes Education Program for Adolescents with Type 1 Diabetes in Saudi Arabia. 	<ol style="list-style-type: none"> 1. *Shou-Yu (Cindy) Wang, Assistant Professor, Hungkuang University, Taiwan. Health Care Professionals' Views and Interactions with Cancer Patients who Use Complementary and Alternative Medicine in Taiwan. 2. <u>Maude Hebert</u>, Ph.D. Candidate & Professor, University of Sherbrooke & Universite of Quebec in Trois-Rivieres, Canada, Frances Gallagher, Ph.D., University of Sherbrooke, Canada & Denise St-Cyr Tribble, Ph.D., University of Sherbrooke, Canada. Nursing Interventions Adapted to the Transition of Women's Perceptions of Health Status when Diagnosed with Breast Cancer. (Tuesday, 5th of May, 2015) 3. <u>Elizabeth Skrovanek</u>, Ph.D. Student, University of Pittsburgh, USA, Janet Arida, Graduate Student, University of Pittsburgh, USA, Guyanna Ackison, Graduate Student, University of Pittsburgh, USA, Sarah Belcher, Graduate Student, University of Pittsburgh, USA, Grace Campbell, Post-doctoral Fellow, University of Pittsburgh, USA, Heidi Donovan, Associate Professor, University of Pittsburgh, USA & Teresa Hagan, Graduate Student, University of Pittsburgh, USA. Causal Attributions on Ovarian Cancer. 4. <u>Ching-Fang Wu</u>, Master Student, National Yang-Ming University, Taiwan, <u>Shuh-Jen Sheu</u>, Professor, National Yang-Ming University, Taiwan, Tsuey-Huah Jang, Nursing Practitioner, Taipei Veterans General Hospital, Taiwan & Yu-Ting Hung, Ph.D. Candidate, National Yang-Ming University, Taiwan. Using Action Research to Build a Breast Cancer Surgery Decision Aid Website.

09:30-09:40 Break

09:40-11:00 Session XV (ROOM E-10TH FLOOR): Adult Health Challenges IV	09:40-11:00 Session XVI (ROOM F-10TH FLOOR): Student Experience and Characteristics II	09:40-11:00 Session XVII (ROOM G-10TH FLOOR): Care of Patient Populations- Maternal –Child and Women’s Health I
Chair: *Peter Vermeir, Head Nurse/Manager, Ghent University Hospital, Belgium	Chair: **Jennie De Gagne, Assistant Professor, Duke University, USA.	Chair: *Cathy Dickson, Lecturer, University of Western Sydney, Australia.
<ol style="list-style-type: none"> 1. <u>Maria de Lourdes Souza</u>, Professor, Federal University of Santa Catarina, Brazil, <u>Rita de Cassia Teixeira Rangel</u>, Ph.D. Student, Federal University of Santa Catarina, Brazil & <u>Sabiha Khanum</u>, Ph.D. Student, Federal University of Santa Catarina, Brazil. Maternal Mortality by the Pre-Eclampsia/eclampsia in Santa Catarina Brazil. A Population-based Study. 2. <u>Threehambal Puckree</u>, Executive Dean, Faculty of Health Sciences, Durban University of Technology, South Africa, Nombeko Mshunquane, Senior Lecturer, Durban University of Technology, South Africa & Sangeetha Maharaj, Vice Principal, KwaZulu Natal College of Nursing, South Africa. Usage of Information Technology Systems by Administrative Staff at a Large College of Nursing in South Africa. 3. *<u>Olubunmi Daramola</u>, Faculty, Wayne State University, USA & Markia Jones, Faculty, Wayne State University, USA. Obesity and Physical Activity in African Immigrants. 4. <u>Lucimare Ferraz</u>, Professor, University of the State of Santa Catarina, Brazil & Wanessa Fritsch, University of the State of Santa Catarina, Brazil. Providing Care in Agricultural Activities to Occupational Community Health Agents of Rural Areas. (Tuesday, 5th of May 2015) 5. *<u>Etleva Rustami</u>, Lecturer, University of Medicine, Albania, <u>Alketa Hoxha (Qosja)</u>, Professor, University of Medicine, Albania & <u>Nikita Manoku</u>, Professor, UHOG “Mother Geraldine”, Albania. Pulmonary Neonatal 	<ol style="list-style-type: none"> 1. <u>Margot Rykhoff</u>, Professor, University of New Brunswick/Humber College ITAL Collaborative Nursing Degree Program, Canada & <u>Lisa Giallonardo</u>, Professor, University of New Brunswick/Humber College ITAL Collaborative Nursing Degree Program, Canada. Exploring the Effects of Structural and Psychological Empowerment on Bachelor of Nursing Students’ Academic Engagement. (Tuesday, 5th of May 2015, Late Morning) 2. *<u>Hala Bayoumy</u>, Associate Professor, Cairo University, Egypt. The Effect of Peg Tube Feeding Simulation on Nursing Students’ Knowledge, Competence, Self-Reported Confidence and Satisfaction with Learning. 3. *<u>Zaid Al-Hamdan</u>, Assistant Professor, Jordan University of Science and Technology, Jordan, <u>Hala Bawadi</u>, Jordan University of Science and Technology, Jordan & <u>Fowler J.</u>, Jordan University of Science and Technology, Jordan. Student Nurses’ Perceptions of a Good Mentor: A Questionnaire Survey of Student Nurses in Two Cultures. 4. <u>Eliane Da Silva Grazziano</u>, Coordinator of Undergraduate Research, Federal University of Sao Carlos, Brazil, <u>Stefanie Leda</u>, Scientific Initiation Scholar, Federal University of Sao Carlos, Brazil & <u>Bruna Felisberto Souza</u>, Undergraduate Student, Federal University of Sao Carlos, Brazil. Sense of Coherence as a Stress Moderator in Students. 5. <u>Beril Nisa Yasar</u>, Research Assistant, Hacettepe University, Turkey. Evaluation of Gender Roles Attitude at Teacher 	<ol style="list-style-type: none"> 1. <u>Connie Clark</u>, Professor, Bethel University, USA & <u>Bernita Missal</u>, Professor, Bethel University, USA. Somali Immigrant New Mothers’ Childbirth Experiences in Minnesota, USA. 2. <u>Yu-Ping Huang</u>, Associate Professor, Hungkuang University, Taiwan. A Woman’s Grief Experience for her Grandchild with α-Thalassemia. 3. <u>Demet Aktas</u>, Assistant Professor, Turgut Ozal University, Turkey. Prevalence and the Affecting Factors of Dysmenorrheal among Female University Students: Effect on General Comfort Level. 4. *<u>Nditsheni Jeanette Ramakuela</u>, Lecturer, University of Venda, South Africa, <u>Lunic Base Khoza</u>, Professor, University of Venda, South Africa & <u>Henry Abayomi Akinsola</u>, Professor, University of Venda, South Africa. Perceptions of Menopause and Culture in Rural Villages of Vhembe District Limpopo Province, South Africa. 5. <u>Pirjo Koski</u>, Lecturer, Helsinki Metropolia University of Applied Sciences, Finland. Experience of the Applicability of Participatory Action Research (PAR) to the Development of Birth and Parenthood Education Program (BPEP) for Somali Families Residing in Finland.

Morbidity after Elective Cesarean Section Delivery at the UHOG “Mother Geraldine”, Tirana, Albania.	Candidates by Nursing.	
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11:00-11:10 Break

11:10-12:45 Session XVIII (ROOM E-10TH FLOOR): Adult Health Challenges III	11:10-12:45 Session XIX (ROOM F-10TH FLOOR): Issues Affecting Nurses II	11:10-12:45 Session XX (ROOM G-10TH FLOOR): Mental Health & Other Essays
Chair: Threethambal Puckree, Executive Dean, Faculty of Health Sciences, Durban University of Technology, South Africa.	Chair: Dawn Prentice, Associate Professor, Brock University, Canada.	Chair: *Zaid Al-Hamdan, Assistant Professor, Jordan University of Science and Technology, Jordan
<ol style="list-style-type: none"> 1. Teresia Mutiso, Ph.D. Student, Binghamton University, USA. Comparing Nursing Care Approaches on Health Outcomes and Quality of Life for People Living with HIV Infection in Kasarani Kenya. 2. Der-Ying Hsieh, Nurse, National Taiwan University Hospital, Taiwan & Hui-Ya Chan, Ph.D. Candidate, National Taiwan University, Taiwan. The Outcome of a Home Total Parenteral Nutrition Patient Teaching Program in a Medical Center from 1989 to 2014. (Tuesday, 5th of May 2015) 3. Hui-Ya Chan, Ph.D. Candidate and Nurse Discharge Planner, National Taiwan University and National Taiwan University Hospital, Taiwan & Yu-Tzu Dai, Professor, National Taiwan University, Taiwan. Does Tablet Computer Help Respiratory Retraining Program of COPD Inpatients More Effective? (Tuesday, 5th of May 2015) 4. *Reneis Paollo Lima Silva, Nursing Assistant Teacher, Universidade Estacio do Recife, Brazil, <u>Emanoela Goncalves Dourado</u>, Nursing Assistant Teacher, Universidade Estacio do Recife, Brazil, <u>Suzana Goreth Gomes de Matos Jofilsan</u>, Nursing Assistant Teacher, Universidade Estacio do Recife, Brazil, Katia Rejane Vergueiro Cesar, Coordinator, Universidade Estacio do Recife, Brazil, Apolonio Alves Lima Junior, Universidade de Pernambuco, Brazil, Maria do Amparo Souza Lima, Nursing Assistant Teacher, Universidade Estacio do Recife, Brazil & Aurelio Molina Costa, Associate Teacher, Universidade de Pernambuco, Brazil. Knowledge about Sexual Transmitted Diseases / Aids and Sexual Practices of Adolescents from Recife City – Brazil. (Tuesday, 5th of May 2015) 5. *Yuchen Zhang, Graduated Student, Sichuan University, 	<ol style="list-style-type: none"> 1. Serap Bulduk, Associate Professor, Duzce University, Turkey. Informal Communication in Healthcare (Gossip and Rumour): Nurses’ Attitudes. 2. *Aida Maris Peres, Associate Professor, Federal University of Parana, Brazil & Priscila Meyenberg Cunha Sade, Ph.D. Student, Federal University of Parana, Brazil. Development of Managerial Competencies of Nurses through Continuing Education Services. 3. Aslihan Catiker, Lecturer, Ordu University, Turkey & Ozlem Ozkan, Associate Professor, Kocaeli University, Turkey. Factors Affecting the Unionization According to the Unionized Female Nurses: A Case Study of Public Hospital in Turkey. 4. Rose Boucaut, Health and Safety Officer, University of Adelaide, Australia & Lynette Cusack, Senior Lecturer, University of Adelaide, Australia. What do Nursing Students have to say about Occupational Health and Safety as University Undergraduates? 5. Hui-Min Wen, Head Nurse, National Taiwan University Hospital, Taiwan. A Study on the Factors Associated with Nurses’ Job Rotation Acceptance and Turnover Intention. (Tuesday, 5th of May 2015) 6. Esra Caylak, Research Assistant, Karadeniz Technical University, Turkey & Serap Altuntas, Associate Professor, Ataturk University, Turkey. Nurses’ Levels of Organizational Cynicism and Their Influence upon Nurses’ Intention to Quit Their Jobs. 	<ol style="list-style-type: none"> 1. Jean-Pierre Bonin, Professor, University of Montreal, Canada. An Innovative Nurses-Led Project: Creation of a Training for and by Family Members Living with a Person with Mental Disorders and with Aggressiveness. 2. Yu-Chuan Chang, Head Nurse, National Taiwan University Hospital, Taiwan. Exploration of Depression and Quality of Life in Patients with an Implantable Cardioverter Defibrillator. (Tuesday, 5th of May 2015) 3. Chien-Ning Tseng, Assistant Professor, Cardinal Tien Junior College of Healthcare and Management, Taiwan & Meei-Fang Lou, Associate Professor, National Taiwan University, Taiwan. The Influential Factors to the Effectiveness of a Non-Computer-Based Multi-Domain Cognitive Training in Improving Cognitive Function, Depression and Quality of Life for Institutionalized Older Residents. (Tuesday, 5th of May 2015) 3. E Zheng, Graduate, Sichuan University, China. The Mental Health of Psychiatric Nurse in Opening Wards. 4. *Annette Bailey, Assistant Professor, Ryerson University, Canada, Jennifer Clarke, Assistant Professor, Ryerson University, Canada & Bukola Salami, Assistant Professor, University of Alberta, Canada. The Influence of Race-Based Stigma on Resource Access and Support for Black Mothers who Lose Children to Gun Violence. (Tuesday, 5th of May 2015)

China, Xianqiong Feng, Professor. The Correlation between Self-Management Skills and Quality of Life among Chinese Community Dwelling Adults with Hypertension.		
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12:45-13:45 Lunch

13:45-16:00 Urban Walk (Details during registration)

16:30-18:30 Session XXI (ROOM E-10TH FLOOR): Teaching Methods and Innovative Educational Program Models II	16:30-18:30 Session XXII (ROOM F-10TH FLOOR): Interpersonal and Intraprofessional Education and Practice	16:30-18:30 Session XXIII (ROOM G-10TH FLOOR): Innovation
Chair: *Olubunmi Daramola, Faculty, Wayne State University, USA.	Chair: *Shou-Yu (Cindy) Wang, Assistant Professor, HungKuang University, Taiwan.	Chair: *Nditsheni Jeanette Ramakuela, Lecturer, University of Venda, South Africa
<ol style="list-style-type: none"> 1. Joyce Simones, Professor & Chair of the Department of Nursing Studies, St. Cloud State University, USA, Diana Neal, Director & Chair of the Nursing Program, St. Olaf College, USA, Vicki Schug, Professor, St. Catherine University, USA, Linda Blazovich, Associate Professor, St. Catherine University, USA & Kathleen Ohman, Professor, St. John's University, USA. Student Nurses' Thinking during Medication Administration. 2. Gisela Van Rensburg, Professor, University of South Africa, South Africa & Peggy Naicker, Ph.D. Student, Life College of Learning, South Africa. Reflection as a Student Support Strategy: Do we Know How? 3. Jindamas Kosolchuenvijit, Deputy Director, Boromarajonani College of Nursing Bangkok, Thailand, Wanee Tapaniyakorn, Director, Pratsani Srikan, Lecturer, Supaporn Wannasuntad, Deputy Director & Kalayarath Anonrath, Lecturer, Boromarajonani College of Nursing Bangkok, Thailand. Psychometric Properties of Thai Script Concordance Test for Assessing Clinical Reasoning in Nursing Students. 4. Treechada Punsomreung, Nurse Educator, Boromarajonani College of Nursing, Thailand. The Effects of Peer Learning through Blended Learning on Students' Thinking, Learning Achievement, and Critical Information Retrieval Skills: Evidence from Maternal and 	<ol style="list-style-type: none"> 1. Dawn Prentice, Associate Professor, Brock University, Canada & Jane Moore, Assistant Professor, Brock University, Canada. Nurse to Nurse Collaboration: How do we do it? 2. **Jennie De Gagne, Assistant Professor, Duke University, USA & Mary Val Palumbo, Associate Professor, University of Vermont, USA. Practicing Interprofessional Care of Elders: Utilizing Videoconferencing and a Virtual Environment. 3. Hilde Zitzelsberger, Assistant Professor, University of Ontario Institute of Technology, Canada. Interprofessional Education through University-Hospital Collaboration. 4. Huei Ying Lee, Assistant Professor, HungKuang University, Taiwan. The Meaning of the Professional Interactions among Clinical Coworkers in Taiwan. 5. *Peter Vermeir, Head Nurse/Manager, Ghent University Hospital, Belgium, Tamara Leune, Head Nurse, Ghent University Hospital, Belgium, & Christophe Jolie, Head Nurse, Ghent University Hospital, Belgium. The Impact of Nurse-to-Nurse Bedside Communication on Patient Satisfaction and Resources Use. 6. Joannie Hebert, Nursing Faculty, Southeastern Louisiana University, USA. Advancing Interprofessional Collaboration in Nursing Education. (Tuesday, 5th of May, 2015) 7. Wejdan Shagiqi, Nurse Intern, National Guard Health Affairs, Saudi Arabia, Hala Bayoumy, Assistant Professor, King Saud bin Abdulaziz University, Saudi Arabia. Exploring Importance of Professional Attributes of Nurse 	<ol style="list-style-type: none"> 1. Richard Vanderlee, Professor and Dean, Faculty of Applied and Professional Studies, Nipissing University, Canada & Emma Vanderlee, Student, Nipissing University, Canada. Educating Next-Generation Nurses: The Practice-Ready Scholar Practitioner. (Tuesday, 5th of May 2015) 2. Leticia De Lima Trindade, Researcher and Professor, Santa Catarina State University and University of Community Region Chapeco, Brazil, Vanderleia Muller, Nurse, University of Community Region Chapeco, Brazil & Lucimare Ferraz, Teacher, Santa Catarina State University and University of Community Region Chapeco, Brazil. Nursing Education Focused on Healthcare Workers. 3. *Cathy Dickson, Lecturer, University of Western Sydney, Australia. A Revitalization of Role Modelling: Providing Authentic Nursing Experiences for International Students. 4. Elaine Haycock-Stuart, Director of Learning and Teaching and Senior Lecturer, School of Health in Social Science, The University of Edinburgh, U.K. Evaluation of Current Practices to Involve Service Users and Carers in Nursing Students' Practice Assessments in the 11 Higher Educational Institutions (HEI's) in Scotland. 5. Aysegul Sarioglu Kemer, Research Assistant, Karadeniz Technical University, Turkey & Serap Altuntas, Associate Professor, Ataturk University, Turkey. Nurses' Levels of Innovativeness. 6. *Julita Sansoni, Head Nursing Research and Director ICNP Italian Center, Sapienza

<p>Newborn Nursing and Midwifery.</p> <p>5. Li Chen, Graduate Student, Sichuan University, China. Understand Undergraduate Nursing Students' Learning through Analysis of Their Reflective Diaries during Early Clinical Practice.</p>	<p>Students as Prior Indicators of Preparedness for Successful Clinical Education.</p>	<p>University of Rome, Italy. Health Improvement Science (HIS): some Results of Italian Participation in ISTEW (Improvement Science Training for Health Care Workers) European Project.</p> <p>7. <u>Cigdem Gamze Ozkan</u>, Research Assistant, Karadeniz Technical University, Turkey & Magfiret Kara Kasikci, Professor, Ataturk University, Turkey. Evaluating the Results of Education with the Demonstration Method Given Patients with Copd Intended for the Use of Metered-Dose Inhaler.</p>
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19:00- 20:30 Dinner (Details during registration)

Wednesday 6 May 2015
Cruise: (Details during registration)

Thursday 7 May 2015
Delphi Visit: (Details during registration)

Demet Aktas

Assistant Professor, Turgut Ozal University, Turkey

**Prevalence and the Affecting Factors of Dysmenorrhea
among Female University Students:
Effect on General Comfort Level**

Background: Dysmenorrhea is defined as pain menstruation. Dysmenorrhea is the most common gynecological disorders among menstruating adolescents and young adult females of reproductive age. Symptoms usually occurs just before and/or during the menstruation, and last for the 1-3 days.

Aim: The purpose of this study was to investigate the prevalence and the affecting factors of dysmenorrhea and the effects of dysmenorrhea on overall comfort among university students. **Method& Design:** The study is a cross-sectional study. The research was carried out between October 2013 and November 2013 at a university in Ankara. This study was conducted with 200 female students. The data were analysed using frequencies, means, standard deviations, chi-square tests, independent t-tests and ANOVA. Data were collected using an Interview Questionnaire, the Visual Analog Scale and the General Comfort Questionnaire.

Results: The mean age of students in this study group was 20.85 ± 2.15 . The prevalence of dysmenorrhea in the students was 84%. The mean severity of pain was 5.78 ± 2.45 on the VAS. In the present study, it is found that 45.8% female students experienced moderate menstrual pain and the most common co-occurring symptoms were irritability (34.6%) and fatigue (21.5%). One fourth of students with dysmenorrhea consulted the advice of a physician and the most commonly used methods for pain were analgesics (69%), heat applicaton (56.5%) and rest (71.4%). Family history of dismenorrhea, education about menstruation and frequency of menstrual cycle were identified as important factors in the development of dysmenorrhea ($p < 0.05$). The mean general comfort score for students with dysmenorrhea (2.57 ± 0.25) was lower than that of students without dysmenorrhea (2.65 ± 0.23). **Conclusion:** Use of the methods for management of dysmenorrhea was found to increase students' general comfort levels. Therefore, it is important for nurses to educate and advice adolescents about dysmenorrhea.

Zaid Al-Hamdan

Assistant Professor, Jordan University of Science and Technology,
Jordan

Hala Bawadi

Lecturer, The University of Jordan, Jordan
&

Fowler J.

Jordan Independent Consultant, Experiential Mentor, Leicester, U.K.

**Student Nurses' Perceptions of a Good Mentor:
A Questionnaire Survey of Student Nurses in Two Cultures**

Aims and Objectives: In 1995, students in the UK identified five characteristics of a good mentor. After 14 years, the author and other researchers repeated the study to investigate whether students still identify the same characteristics of a good mentor and if the students from different culture have the same perceptions regarding the good mentors

Design: Cross-sectional descriptive comparative study.

Methods: The study was conducted in the UK, USA and Jordan to validate the previous study in countries with different cultures and different mentorship systems. After ethical approval was granted, a structured questionnaire was distributed to a convenience sample of nursing students from one university in each country.

Results: A total of 336 students participated in the study: 38.7% from the UK, 10.7% from the USA and 50.6% from Jordan. Comparing the mean and median scores for each of the five qualities for the three countries, the highest means and medians were for the quality "has relevant knowledge and skills". For the four other qualities, there were similarities between UK and the USA, while the Jordanian nursing students had different mean and median scores.

Relevance to Clinical Practice

It is very important to identify the qualities of good mentor because selection of mentors with good qualities is important and a foundation for being a good mentor. And this will lead to have effective mentorship, and enhance the learning experience for the student. Achieving this one initial, important goal will firmly support every other aspect of mentorship and do much to reduce the usual anxieties of the student on a new placement and effective mentorship is essential to ensure that students become competent practitioners and this will improve qualities of patient care.

Valbona Alliu

Teacher, University of Medicine, Albania

Alketa Hoxha (Qosja)

University of Medicine, Albania

&

Petrit Bare

Professor & Cardiologist, Dean of Faculty of Technical Medical

Sciences, University of Medicine, Albania

Role of Education of Patients with Chronic Heart Failure (CHF), an Exploratory Study in Albania

Background: A key component of the structured approach to the management of chronic heart failure (CHF) is effective patient education. Cardiac educational programs are intended to prevent the recurrence of heart failure and improve patients' quality of life. However, patients' information requests have historically not been well met by physicians and nurses in Albania.

Aim: To assess the role of education of patients with CHF in Albania, because this information is the cornerstone for developing an educational program based on patients' needs.

Methods: This is a descriptive study. We recruited 100 patients with heart failure between the ages of 33-78 years. Self-report questionnaires, which included general characteristics, disease-related characteristics and a pre-test/post-test design was conducted to assess needs of the patients, changes in knowledge and self-care abilities.

Results: We found that more than 90% of patients desired information, particularly about heart failure symptoms, time to notify healthcare providers, prognosis, and exercise/physical activity. Of the 100 participants 61% were male, 59% were aged between 55 and 74 years, and 31.6% had not completed 10 year education. There was a statistically significant difference in the pre- and post-test scores for knowledge ($p=0.027$).

Conclusions: Albanian patients with chronic heart failure had a low level of knowledge about this disease. These conditions can negatively affect clinical outcomes. This pilot study has indicated that a patient-centre educating is beneficial and is associated with an improvement in patients' knowledge and self-care abilities. Healthcare professionals should utilize all educational resources specifically designed to the educational needs of patients with CHF.

Relevance to clinical practice: Therefore, this study will provide a basis for encouraging Albanian patients to obtain information about

their disease and to guide professionals in developing heart failure management and education programs.

Shema Ammer

Ph.D. Student, Cardiff University, U.K.

Developing and Evaluating a Structured Diabetes Education Program for Adolescents with Type 1 Diabetes in Saudi Arabia

Background: Type 1 diabetes (T1D) is a complex and chronic condition that leads to serious complications in adolescents due to their poor metabolic control. A Structured Diabetes Education Programme (SDEP) is recommended by NICE to improve self-management of adolescents. The prevalence of T1D is increasing in Saudi Arabia (SA). Thus, the SDEP is necessary to improve skills and confidence of adolescents to take increasing control of their own condition. In my research, I developed and applied the SDEP in SA. Thus, in this presentation, I will explain results of how this programme has effected on self-management, knowledge and glycaemic control of adolescents.

Aims: To:1) determine the SDEP has an effect on self-care behaviour, diabetes knowledge and glycaemic control in adolescents with T1D. 2) explore feasibility and acceptance of the SDEP by adolescents, their families and healthcare professionals (HCPs) in SA.

Design: Comprised mixed methods study using a pre/post evaluation design.

Sample: a) adolescents with T1D (n=20), b)their families (n=4), c) HCPs (n=4).

Setting: The two teaching hospitals in SA.

The intervention: A SDEP developed specifically for adolescents with T1D and delivered by the diabetes team in 3 weekly group sessions over a 3 week period in SA.

Data collected by utilizing questionnaire, interviews and measurement of HbA1c levels and analysed by SPSS and thematic analysis.

Results: Provided the impact of SDEP and explored experience of receiving the SDEP, as well as informed future policy on diabetes education for adolescents in SA.

Conclusion: The results suggest the SDEP may lead to large improvement in diabetes knowledge, self-care behaviour and glycaemic control in SA. The SDEP focused on self-management as the primary target to improve glycaemic control. Thus, to maintain the clinical benefits of SDEP over time, ongoing support from HCPs should be offered to adolescents with T1D and their families.

Kathryn Anderson

Professor and Director, Georgia Southern University, USA

Gloria Barnett

MSc Student, Georgia Southern University, USA

Sibyl Kirkland

Nursing Student, Georgia Southern University, USA

&

Jennifer Nunn

Cancer Patient Navigator, South Georgia Center for Cancer Care, USA

Needs of Rural Women during Breast Cancer: Focus on Couples/Family and the Health Care System

Background/Purpose: Breast cancer (BC) is the most common cancer diagnosed and the second leading cause of death among women in the USA. U. S. BC care does not traditionally include attention to psychosocial and relationship issues. In rural Georgia, support for women is unclear. Study of the impact on rural women and on couples/families is non-existent. The paper purpose is to describe the experience of rural women, to understand the issues they faced in their relationships, families, and with the health care system during BC, and its meaning. The research questions were: (1) What are major issues you and couples/families faced with BC?; (2) How did the doctor help you and your family with coping?; (3) How did being in a rural setting affect your care?; and (4) What would be feasible to include families in BC care to address the needs? **Methods:** A 2 hour focus group with nine women (8 patients/1 daughter), led by a PhD nurse psychotherapist, was held with the patient navigator from the clinic and data observers attending. The session was audiotaped after informed consent was obtained. The tapes were transcribed verbatim and double checked for accuracy. The transcripts were coded by phrases, and analyzed for themes using a constant comparative analysis approach. **Findings:** Results identified issues most common for the women, couples, and the families, as well as health care system responses to patient needs. Women reported feeling very alone in their experience and still having many communication issues within couples and families over the BC. The women elicited problem solving to some issues from their experience because of unwillingness for others to repeat their experience. **Discussion:** Recommendations for best practice for rural women and their family relationships while dealing with breast cancer and the solutions offered by the women will be shared.

Darawan Augsornwan

Nurse Specialist, Khon Kaen University, Thailand

Comparison of Wound Dehiscence and Parent's Satisfaction between Spoon/Syringe Feeding and Breast/Bottle Feeding in Patients with Cleft Lip Repair

Background: Cleft lip and cleft palate are the most common craniofacial anomalies, affecting approximately 2.49 of every 1,000 children born in North East of Thailand. Srinagarind Hospital has 100-150 cases of cleft lip each year. Children with cleft lip and palate need surgical procedures as soon as possible. After lip repair the normal recommendation is not using bottle or breast feeding for 2 weeks to avoid tension at the sutured area during sucking and possible cause of wound dehiscence. So this is quite complicated for the parents, and patients feel frustrated, cry, move their head around, because of hunger which cannot easily be satisfied. Previous research found that sucking does not cause wound dehiscence, but mentioned no detail about severity of cleft. Objectives: Primary objective is to compare surgical wound dehiscence between breast feeding/bottle and spoon/syringe feeding after lip repair.

Method: This is a experimental study: non-inferiority trials study. The population were the patients with cleft lip who underwent lip repair in Inpatient Department 3C, Srinagarind Hospital, Faculty of Medicine, Khon Kaen University. The study period is during May 2010-February 2013. The total sample size in this study is 192 participants, 96 cases breast /bottle feeding, 96 cases spoon/syringe feeding. The wound dehiscence rate was analyzed by Z-test. Parents satisfaction is a qualitative data and was analyzed through content analysis.

Results: No statistical significant difference between breast/bottle and spoon/syringe groups(p-value 0.320, 95% confidence interval -.031-.010). Parents were more satisfied to feed children by breast/bottle and patients were more relaxed with breast/bottle feeding. Conclusion: Breast/bottle feeding and syringe/spoon feeding have the same result on the surgical wound. Breast/bottle feeding are not causes of wound dehiscence.

Lina Badr

Professor, Azusa Pacific University, USA

Lucille Rayford

Azusa Pacific University, USA

&

Vivien Dee

Azusa Pacific University, USA

Social Determinates of Risky Sexual Behaviors among African American Emerging Adults with Recurrent Sexually Transmitted Infections: A Multi-Site Study

Statement of the Problem: The incidences of sexually transmitted infections (STI) in the US are among the highest in the western industrialized world. According to the US 2013 Communicable Disease Control report, the number of individuals with STI continues to rise, reaching a prevalence of 110 million with 20 million new cases annually. Adolescents and young adults make up one quarter of the sexually active population in the US; however, they are afflicted with half of all the diagnosed STI and HIV cases each year. These rates continue to be a significant public health problem in the United States. African Americans are disproportionately affected by STI. They have the highest rates among all of the other races, and are more likely to engage in behaviors that place them at high risk for STIs.

Purpose of the Study: To investigate the social determinants that impact the risky sexual behaviors of African American young adults with recurrent STIs.

Theoretical Framework: Guided by Orem's Self Care Deficit Theory, basic conditioning factors (social determinants) e.g. gender role beliefs, relationship power, substance use, income, STI health status, developmental stage, etc. that influence self-care behaviors are examined.

Methods: A cross-sectional study is conducted in three Los Angeles County Health Department clinical sites. Participants include 100 young adults ages 19-25. Survey instruments including Multidimensional Condom Attitudes Scale, Sexual Relationship Power Survey, Gender Role Beliefs Survey, Peer Norm Scale and Demographic Questionnaires are used.

Conclusions: Nurses are at the front line to provide care and education. Orem's Theory of the Nurse Agency will serve as the framework to develop supportive-educative interventions to address the social determinants that are barriers to self-care of African American (AA) young adults. Knowledge gained from the study will

assist in the development of STI preventive strategies tailored for to AA young adults.

Annette Bailey

Assistant Professor, Ryerson University, Canada

Jennifer Clarke

Assistant Professor, Ryerson University, Canada

&

Bukola Salami

Assistant Professor, University of Alberta, Canada

The Influence of Race-Based Stigma on Resource Access and Support for Black Mothers who Lose Children to Gun Violence

The historical context of colonization and neo-colonial relations continue to structure Black mothers' exposure to gun violence loss and shape their access to valuable grief and trauma supports. Race-based stigma, which is rooted in colonial discourses, dominates Black mothers' surviving experiences, creating social and psychological complexities that implicate their access to services and supports. Their resulting trauma is debilitating and persisting. Their psychological trauma is made more complex by denial of victim compensation, multiple job losses, negative social interactions, and witnessing the devastating social, educational and economic impact that the loss ensues on their remaining children. This presentation will explore race-based stigma as a determinant of access to resources and support in Black mothers' experiences of losing a child to gun violence. Drawing on the narrative of 12 Black mothers from a recent study that explored their experiences of losing children to gun violence, the presentation will demonstrate the dominating role of race in Black mothers' grief experiences, and the impact of its intersection with gender, immigration status, economic depravities, and the stigma of gun violence. The analogy of a pie will be used to facilitate emphasis and insights, visual representation, and conceptualization of these mothers' realities in accessing resources and supports, and the role of race in their lived experiences.

Hala Bayoumy

Associate Professor, Cairo University, Egypt

The Effect of Peg Tube Feeding Simulation on Nursing Students' Knowledge, Competence, Self-Reported Confidence and Satisfaction with Learning

Background: An important issue in training of nursing students is developing their patient care skills. PEG "Percutaneous Endoscopic Gastrostomy" tube feeding is a important skill for students to acquire. The fact that there is increasing evidence of its safety and the wider availability of endoscopic skills make it likely that the use of PEG will spread in general hospitals which further highlights the need for well trained competent nurses with specialized knowledge in PEG feeding. Nurse educators should design pertinent learning activities that implement innovative teaching strategies, and evaluate learning outcome. Simulation is now taking momentum in clinical nursing education. It should therefore offer a fresh approach to such skill education.

Method: The current study used a Randomized Controlled Trial design. **Aim:** The purpose of present study was to investigate the effect of PEG tube feeding simulation on nursing students' knowledge, competence, self-reported confidence and satisfaction with learning. The study compared simulation as a teaching strategy with video-led instruction to determine whether students who participated in the simulation sessions had better outcome than those who watched a video of a pre-recorded scenarios and skill.

Results: Significant difference in knowledge was noted for each group between the two studied time points (pre/post- test). However, no significant difference in either knowledge or competence acquisition found between the two groups at any of the studied time points. Participants from both groups reported significantly high satisfaction and self-confidence scores at post test.

Conclusion: Results of the current study indicated that psychomotor skill of PEG tube feeding is learned equally well with using either lab simulation or a video-led instruction. Both groups had shown high confidence and great satisfaction after skill education. This study examined outcomes pre- and immediately after the intervention program and did not address knowledge and skill retention. Further research is needed to assess retention of studied outcomes over time.

Jean-Pierre Bonin

Professor, University of Montreal, Canada

An Innovative Nurses-Led Project: Creation of a Training for and by Family Members Living with a Person with Mental Disorders and with Aggressiveness

Introduction: In Canada, 60% of families of persons with serious mental disorders have a responsibility to play a role as a caregiver without receiving the advice, support or respite they need. Persons with mental disorders sometimes present with aggressiveness and violence problems. The literature reports that between 10% and 40% of affected relatives showed aggressive behaviors since their diagnosis, and that 50% to 65% of these behaviors are perpetrated against family members.

Methods: Thus, in summer 2012, a nurses-led research group recruited 14 family members who followed the OMEGA training, usually reserved for health center staff, adapted the training for families of persons with mental disorders living with aggressiveness and violence, and participated to the creation of the new training tailored to families, "Learning to get closer without aggressiveness." Up to December 2014, nearly 500 persons registered and participated in 30 training sessions. Each of the participants had, on two occasions, answer a questionnaire; one before the start of training (T1) and a second 4 months after the end of training (T2). In addition, interviews were conducted with these trainers, training participants and key stakeholders.

Results: Training participants showed less psychological distress, and better physical and mental health four months after the training. Moreover, in qualitative terms, participants and network resource persons are very satisfied with this training. Caregivers said they act better with their loved one and that they better understand the OMEGA safety rules. The training, with its component called "Pacification", also allowed a better relationship between the person and his caregiver, as well as better family environment, which minimizes the risk of aggression. Four videos were created to describe the project and families were able to express their perception: we will present two of them with English subtitles.

Rose Boucaut

Health and Safety Officer, University of Adelaide, Australia

&

Lynette Cusack

Senior Lecturer, University of Adelaide, Australia

What Do Nursing Students Have to Say about Occupational Health and Safety as University Undergraduates?

Background: Nursing is a high risk profession in terms of occupational health and safety (OHS) as is evident in the extent of illness and injury sustained by nursing practitioners world-wide. Learning from nursing students about any OHS issues and concerns is an integral part of stakeholder consultation for teaching staff. Further, both clinical and non-clinical OHS subject matters are important for deliberation by staff in supervisory positions as part of their duty of care for their students. This paper describes some of the non-clinical OHS issues expressed by Australian nursing students.

Aim The broad purpose of the study was to more fully understand nursing students' perspectives about OHS. The intent was to subsequently consider this information when planning future OHS teaching and management initiatives.

Method: In 2014 a qualitative study was undertaken at an Australian University to establish nursing students' impressions and experiences about OHS. The study was descriptive exploratory in nature. Two focus groups were conducted, one with first year students and one with third year students. With student permission discussions were audio-taped and subsequently transcribed. Data were thematically analysed by the investigators following grouping of commonly occurring findings.

Findings: The principal theme for non-clinical OHS issues was 'Pedestrian Concerns'. Spanning life both on and off campus, this theme encompassed issues of self-care including stressors related to work-life balance and the transition from school (or pre-university) to university student. Other OHS concerns varied according to location and activity. On campus concerns related to safety, computer use, textbooks and storage. Placement concerns related to commuting (in terms of cost and safety) and apprehension about fatigue.

Conclusions: Students were able to identify hazards when sharing their concerns and provide suggestions for their management. This information can be used by staff to enhance the University experience for students in terms of health safety and wellbeing.

Serap Bulduk

Associate Professor, Duzce University, Turkey

Informal Communication in Healthcare (Gossip and Rumour): Nurses' Attitudes

Informal communication is a spontaneous communication that occurs as a result of interpersonal relations and does not have a specific agenda or purpose. Gossip, which is one of the ways of informal communication, is a natural part of every social environment and has a profound impact on organizations. Gossip can give rise to organizational conflicts and it can reduce employee's motivation. The hospital setting, which is a high-stress work environment, increases the amount of gossip shared. Gossip critically affects healthcare given on a daily basis and has a direct impact on healthcare staff, especially on nurses. Unmanaged gossip can have a negative effect on the relationships in the workplace and damage the organization's reputation. For an active management of gossip, nurses, as the primary care givers in the hospital setting, can play a proactive role in developing strategies to effectively control gossip (Thomas and Rozelle, 2007).

This study is a descriptive study aimed to determine nurses' attitudes towards gossip and rumour. The study used "The Gossip and Rumour Attitude Scale" developed by Eşkin (2010). The scale consists of four sub-scales: identification, causes, effects and reactions. A total of 268 volunteer nurses participated in the study. Data were collected from December 2011 to February 2012 and analysed using percentage, t-test, Mann-Whitney U test, Analysis of Variance (ANOVA) and Kruskal-Wallis Test. The study found that gossip and rumour occurred due to certain causes, the female nurses in the study tended to believe more than the male nurses that gossip and rumour harmed an organization, the married nurses in the study considered the results of gossip and rumour to be more positive, and, in comparison with the other groups in the study, the nurses in administrative positions considered reactions to gossip and rumour at the expected level according to social rules.

The study found that the nurses working in the state and private hospitals were severely affected by gossip. This result showed that particularly nurses in administrative positions play a key role in the management of gossip. Future research can be extended to include healthcare organizational roles and perspective so that feelings and relationship dynamics and details about starting and sustaining gossip can be investigated.

Esra Caylak

Research Assistant, Karadeniz Technical University, Turkey

&

Serap Altuntas

Associate Professor, Ataturk University, Turkey

Nurses' Levels of Organizational Cynicism and Their Influence upon Nurses' Intention to Quit Their Jobs

INTRODUCTION: Organizational cynicism which is employees' powerful negative feelings towards their institutions and a kind of critical attitude, may cause numerous negative conditions in time such as occupational discontent in organizations, sabotage, increase in emotional exhaustion, not giving support to the development of organization and quitting job.

OBJECTIVE: This study has been carried out as definitive and relation seeker in order to determine and put forward the influence of nurses' levels of organizational cynicism upon their intention to quit their jobs.

METHODS: The research was carried out between May 2013 and March 2014 in Ankara Gazi University Hospital with 323 participant nurses. Ethical committee approval and a written permission were taken from the relevant institution. The data were collected by using Personal Information Form, Organizational Cynicism Scale and Intention to Quit Scale and they were evaluated by a statistician.

FINDINGS: It has been found out that nurses were generally below 30, have bachelor's degree, are female and married are a little bit content of being a nurse and not considering to quit (50,5%). Nurses took $M=14.35\pm4.37$ points in cognitive cynicism, $M=10.38\pm3.90$ points affective cynicism, and $M=11.66\pm3.18$ points in behavioural cynicism and the total average point of organizational cynicism was $M=36.38\pm9.63$. It has been determined that there were significant differences between nurses' levels of cynicism especially in terms of age, institutional experience and occupational experience ($p<0.05$), and those who are discontent of being nurses have the higher levels of cynicism in all dimensions. It has been found out that affective cynicism was influential on nurses' intention to quit ($\beta=.362$, $p=0.000$), however behavioural and cognitive cynicism were not influential ($p>0.05$).

CONCLUSIONS: As a result of the research, it has been determined that nurses' level of organizational cynicism was medium-level and more like a cognitive level, and affective cynicism was influential on nurses' intention to quit.

Hui-Ya Chan

Ph.D. Candidate and Nurse Discharge Planner, National Taiwan
University and National Taiwan University Hospital, Taiwan
&

Yu-Tzu Dai

Professor, National Taiwan University, Taiwan

Does Tablet Computer Help Respiratory Retraining Program of COPD Inpatients More Effective?

Aim: To evaluate the effectiveness of a tablet-computer aided respiratory retraining program of COPD inpatients.

Method: From May 2013 to Sep 2014, participants were randomly assigned to experimental group (n=36) or control group (n=35). The self-efficacy, quality of life, accuracy in breathing skill, frequency of practice and the feedback on tablet-computer teaching were evaluated with double-blind assessments at baseline, immediate, 1-month and 3-month follow-up after training completion. Data analysis consisted of basic characteristics and outcome indicators presented in term of descriptive statistics; inferential statistics were by ANOVA and generalized estimating equations (GEE).

Results: The participants were mostly male (83.1%) with an average age of 71.5(SD =11.4). Finding showed the average total means of target indicators were improved but no statistic difference between experimental group and control group. Nevertheless, experimental participants expressed they have more satisfaction during learning. In addition, we found the more symptom patients had the more improvement in their self-efficacy (Wald $\chi^2=9.748$, $p=0.021$) and quality of life (Wald $\chi^2=7.764$, $p=0.021$).

Conclusions: Using tablets-computer aided health training might be an alternative to motivate and enhance elders' learning. Nurses may need to find the various strategy or material to motivate the COPD patients with different degree of symptom to benefit from the respiratory retraining.

Yu-Chuan Chang

Head Nurse, National Taiwan University Hospital, Taiwan

Exploration of Depression and Quality of Life in Patients with an Implantable Cardioverter Defibrillator

This study is aimed to investigate degree of depression and quality of life of patients who have received implantation of implantable cardioverter-defibrillator (ICD). Mixed method with triangulation design was applied in this study. Quantitative as well as qualitative methods were used to collect data and analyze the depression score and quality of life for patients 3 months prior to ICD implantation, 3, 6 and 12 months after implantation. By convenient sampling, SF-36 quality of life scale and BDI-Depression Scale were utilized for data collection at the cardiac clinic or ward in a medical centre in northern Taiwan from January 2013 to September 2013. Totally 62 patients were recruited. All statistical analyses were performed with the use of SPSS 20.0 to conduct *t*-test, one way ANOVA, Pearson's correlation, Kruskal-Wallis test and Wilcoxon Rank Sum to check association and difference in each variable, supplemented by qualitative data analysis.

The results of the study showed: (1) the highest quality of life score among patients with ICD is "bodily pain, BP" (66.58 ± 25.37 , $p = 0.041$); the lowest is "role limitation due to physical problems, RP" (33.47 ± 39.19 points, $p = 0.041$). From time scale, the lowest quality of life score is 3 months after ICD implantation (49.1 ± 16.6); the highest is 12 months after implantation (60.4 ± 18.4). Among basic properties, the patients in work before implantation have a significantly better quality of life. (2) The highest depression score is "loss of interest in sex". From time scale, the highest score is 3 months after ICD implantation (15.2 ± 9.3), which is a mild depression; the lowest is before ICD implantation (9.7 ± 8.6). (3) The depression and quality of life of patients showed a significant negative correlation ($r = -0.83$, $p < 0.001$), suggesting the higher score of quality of life, the lower depression of patient with ICD.

The results of this study can help the health professionals have better understanding of depression and quality of life among patients with ICD and therefore provide more appropriate health care. Health care providers should not only concern the benefit of ICD that prolongs patients' life but also pay more attention to life adaptation and psychological adjustment after ICD implantation.

Li Chen

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Understand Undergraduate Nursing Students' Learning through Analysis of Their Reflective Diaries during Early Clinical Practice

Objective: To analyze the reflective diaries written by undergraduate nursing students during their early clinical practice, and to systematically summarize their ideas, feelings and experiences. The information analyzed help to find out the strengths and weaknesses in relation to clinical teaching of early clinical practice and also contribute to curriculum changes for undergraduate nursing students.

Method: A combination of qualitative and quantitative research methods was used to analyze the contents of 46 undergraduate nursing students' reflective diaries, which include 1349 articles and 2764 key reflections.

Result: Three themes were extracted: knowledge and skills, nurse-patient communication and interpersonal relationship, and emotional experiences. These three themes accounted for 46.71%, 26.70% and 26.59% of the total reflections respectively. Subthemes were identified, and the frequencies for each subthemes were also calculated.

Conclusion: The results indicate, to some extent, students' diaries reflect their inner thoughts and perceptions about what nursing is , what nurses do, and what they would do in the future during their early professional learning. Students may encounter certain cognitive dissonance or emotional upset after contacting with real patients in hospitals. It is important for nursing faculty and clinical preceptors to educate knowledge, to train professional skills, and to build professional spirits simultaneously taking consideration of students' real thoughts and needs.

Ruth Chen

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Online Problem-Based Learning (PBL): Putting Cognitive Load Theory Principles into Practice

Online course offerings are rapidly proliferating across institutions of higher education. Problem-based learning (PBL), which has its origins in health professions education, has historically been delivered in physical classrooms with face-to-face interaction. Increasingly, students in nursing education programs are completing clinical placements in diverse settings that are at a greater geographic distance from the home institution. Therefore, some programs that deliver core theoretical nursing courses in a PBL format have developed online PBL courses to connect students and faculty. However, the transfer of in-class PBL to an online setting is neither simple nor straightforward. As facilitators of learning in online PBL, instructors can optimize the student learning experience by applying principles of Cognitive Load Theory (CLT) to online PBL course design and implementation.

The purpose of this presentation will be to highlight the many applications of CLT for online PBL instruction. Evidence-based education principles will be reviewed and feedback from senior-level nursing students who have completed one or more online PBL course(s) will be presented.

Research from education and cognitive psychology literature will be synthesized and applied to the online PBL context. Examples of evidence-based approaches to online PBL instruction will be provided. A mixed-methods approach was used to obtain feedback around the online PBL student experience pertaining to the three primary components of CLT: 1) identifying intrinsic load; 2) reducing extraneous load; 3) promoting germane load and cognitive processing.

Several multimedia learning and education strategies have strong empirical support and have been applied effectively in the online PBL context. These strategies can serve to optimize learning by decreasing extraneous cognitive load and increasing germane cognitive processing. Both quantitative and qualitative feedback from students will be presented that support online PBL as effective for student engagement and learning.

Online PBL has great potential in health professions and higher education to transform learning contexts. Learning can be optimized when instructors apply principles of multimedia instruction and cognitive load theory to online PBL course design and implementation.

Jeanne Churchill
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&
Elizabeth Churchill

Narrative Essays in Nursing Education

In 1860, Florence Nightingale wrote “observation tells us the fact, reflection the meaning of the fact”. Reflection allows students to process their experience, explore their understanding of what they are doing, why they are doing it and the impact it has on themselves and others (Boud, 1999). A nursing narrative is a brief recount of an actual situation or episode in clinical practice that is significant because it results in new learning and/or new understanding (Levitt-Jones & Bourgeois, 2007). Some of our most profound experiences such as witnessing a birth, suffering with a loved one or comforting someone who is dying, can’t be expressed through scientific writing. Narrative allows these events to emerge. The clinician is empowered by writing what he or she has done and it helps them to become more effective communicators and compassionate providers. It also provides important opportunities for uncovering nursing practices that often go un-noticed and increases the student’s mastery and appreciation of their own work and ability to better care for patients (Benner, 1984).

The narrative can be a patient experience, self reflection or clinical event or situation. It is written in the first person and includes the following: information that allows the reader to put the situation in context, descriptions of the student’s thoughts and feelings during and after the situation, why the situation is important and the impact it had on them as a person and their practice of nursing. The students then share their narratives in class with their fellow classmates. This is a powerful learning experience which is therapeutic for the listener as well as the storyteller. When these stories are shared aloud, it also creates a unique pedagogical interaction between the teacher and student.

Narratives can be a creative and powerful teaching tool in nursing education. They encourage students to listen, reflect and create therapeutic interventions for their clients. Writing and sharing these stories are a valuable means for communicating a special kind of knowledge that has been ignored in education. Narrative writing creates the bridge between the science and the art of nursing and allows nursing students to take responsibility for how they want to practice nursing.

Connie Clark

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&

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Somali Immigrant New Mothers' Childbirth Experiences in Minnesota, USA

Purpose. To explore Somali immigrant new mothers' experience of childbirth in Minnesota, United States of America.

Design. The ethnonursing research method was used. Semi-structured interviews with 12 immigrant Somali mothers in a Midwestern metropolitan area were conducted. Analysis of the data followed Leininger and McFarland's four-phase ethnonursing data analysis guide.

Results. Six themes were identified in relation to Somali immigrant new mothers' experience of childbirth in the United States of America: the limitations of support due to separation from family, the importance of cultural and religious beliefs and practices, the desired relationships with nurses, the fear of Cesarean section, the value of education, and views on postpartum blues/depression.

Conclusions and Implications for Practice. Nurses should develop trusting relationships with Somali mothers and facilitate cultural and religious practices. Provision of information regarding support resources in the community is essential for nurses.

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&

Donna York

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Estimation of Knowledge and Preparedness to Care for Traumatic Brain Injury Patients

The Traumatic Brain Injury (TBI) population is very challenging for nursing staff to manage in the acute hospital phase with increased agitation, hyperactivity, short-term memory loss, impulsivity, and/or sleep deprivation. We developed a multidisciplinary education program that focused on a standardized care plan, medication guidelines for agitation and measures to enhance the patient environment. Our goal was to determine the extent of knowledge and awareness of traumatic brain injury (TBI), and perception about available resources and use, amongst nurses working in the acute trauma setting. Nurses remain in contact with admitted patients and their families during the majority of their hospital stay. They are best-suited healthcare providers to facilitate TBI care, but the training and expertise are not always at an appropriate level. An anonymous survey was administered that addressed the preparedness to care for and to use available tools for TBI care which comprised of twelve questions using the Likert scale.

Thirty-one nurses working on the trauma floors and trauma ICU completed the survey (pre-test). Then all nurses completed just-in time (JIT) training and an educational module for TBI. After training, the same survey was given again (post-test) which was completed by 84 nurses. Results from these questions were divided into four domains (Education, Collaboration, Knowledge about specific requirements of TBI patients, and Preparedness to care for TBI patients). In our study population, knowledge and awareness about available resources and specific requirements in care of TBI patients, increased amongst nurses working in acute trauma units after a targeted educational intervention. They also felt more prepared to care for TBI patients, and for collaboration with other disciplines. This could be expanded to study of nurses providing rehabilitative TBI care as a next step.

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Sense of Coherence as a Stress Moderator in Students

Background: Stress have been associated with physical and mental diseases in health professionals, caregivers, students and others groups in different cultures. According to the sense of coherence (SOC) concept, those subjects who can give meaning to stressful events are capable in comprehend this experience and cope it better than those don't have it. The stress has been linked to nursing turnover and intention to quit and studies have reported the correlation between depressive symptoms and burnout among nursing and medical students at the end of their courses; however few ones studied these on the first period of them. Objective: to examine the SOC as a moderador of the Perceived Stress (PS) among nursing and gerontology students at the first period of their courses. Methods: This is an exploratory and descriptive study with a quantitative approach. A self-administered questionnaire containing the Brazilian version of the SOC scale and Perceived Stress Scale (PSS) was distributed to nursing and gerontology students in a Public University in Brazil, from March to May 2014 before evaluations period. The scales scores were standardized and classified into low (0 to 33.33%), medium (33.34 to 66.67%) and high (66.68 to 100%). Results: A total of 38 students aged 17 - 44 years consented to participate in the study and the majority had medium PS (68.42%) and medium SOC (81.58%) scores. Perceived Stress was positively associated with female and negatively with leisure time. SOC was high correlation and inversely associated with the perceived stress. Conclusions: The nursing and gerontology students on the first period are under stress even before to initiate their specific professional contents. The sense of coherence can moderate the perceived stress among students on this period.

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&
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Obesity and Physical Activity in African Immigrants

Increasing acculturation has been associated with declining health of immigrants due to adoption of unhealthy behavior as well as exposure to psychosocial stress such as racial and anti-immigrant discrimination. So also has increased duration of residency has been associated with increasing obesity in immigrants.

The self-regulatory model suggest that culturally constructed perceptions influence individual's coping patterns and adaptive outcomes.

The purpose of this study was to find out if the awareness of being overweight or obese is associated with weight management or the thought of engaging in exercise as well as the knowledge of hypertension.

A secondary analysis of a data from a cross sectional study collected in 2011 from 91 Nigerian immigrant women using the Women's and Men's Hypertension Experiences and Emerging lifestyle Survey (WHEELS).

Descriptive analysis shows the demographic variables. A t-test and ANOVA was done to determine the association between the variables.

There was no significant association between the awareness of being overweight or obese and engaging in weight management program or the thought of engaging in physical activity in the overweight and obese African Immigrant women.

In conclusion, awareness of being overweight or obese does not necessarily motivate the women in this study to take action to engage in physical activity. The implication for practice is the need to educate the women of the cardiovascular risks associated with obesity.

Philip Davey

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The Flipped Classroom: Motivating Student Nurses to Learn Independently

There have been long standing criticisms of traditional teaching methodology in nurse education where theoretical content is delivered through classroom and lecture based teaching models. Whilst simulated practice has become increasingly common in nurse education both theory and practice remain separate entities. While a range of educational models have been suggested to reduce the theory practice gap, one contemporary method is the flipped classroom. The flipped classroom is a teaching strategy that was initially developed in the United States of America in 2007 and has subsequently been adopted internationally by higher education institutions including many nurse education providers. Through interactive on-line activities this exploratory and practical approach to learning, allows students to learn theoretical concepts prior to attending a classroom session. During the classroom based session, the students immediately apply the theory they have learnt through practical activities that are facilitated by their nurse lecturer.

The objective of this research paper is to explore the extent to which the flipped classroom approach increases student motivation, participation and effort in completing the independent learning activities and how this relates to the individuals time investment in completing these activities.

In 2014 the author 'flipped' a first year module of the undergraduate nurse training programme. Through the creation of on-line lectures and self-paced, independent learning activities students steered their own direction, pace and depth of learning. Class time was then used to engage students in discussions, debates and active learning exercises. In this paper, the author will describe the motivating factors that led students to make significant engagement with flipped classroom on-line learning activities compared to those associated with traditional lecture models. The article will provide nurse educators with strategies to maximise student engagement with independent learning activities and enthuse student motivation to engage with self-directed study.

Jean Ann Davison

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A Quality Improvement Project to Improve Hypertension Self-Management

The purpose of this presentation is to give an example of a Advanced Practice Nursing quality improvement project focused on the United States of America's Million Heart initiative using a population based approach to improve patient self-management goal setting to reduce cardiovascular risks. Cardiovascular disease (CVD) causes one in three deaths in the United States. The American Heart Association (AHA) projects that by 2030, 40.5% of the U.S. population will have some form of CVD, with an estimated cost to the national health care system of \$1 trillion per year. A Nurse Practitioner led quality improvement (QI) project was designed to improve clinical performance in the practice of hypertension (HTN) management with a focus on self-management support (SMS) and patient lifestyle goal setting among adult patients at a rural primary care clinic with a high rate of cardiovascular disease. Using the Joint National Committee evidence based guidelines, a collaborative team-based approach and the Chronic Care Model as a framework a secondary goal of this QI project was to reduce the burden of CVD in this population. The primary objective, > 80% of adults would have documented self management goals, was achieved and significantly improved from baseline. SMART goals discussed included following evidence based guidelines such as the Dietary Approaches to Stop Hypertension (DASH) diet, aerobic physical activity, healthy weight management, tobacco cessation, moderate alcohol consumption, stress reduction, medication adherence, home BP monitoring, and, as applicable, blood sugar control .Conclusion- Advance Practice Nurses have an important role in meeting the current demand for CVD prevention and management by supporting patients in their self-management care. Implementing a collaborative team-based care approach could help towards the achievement of our nation's Million Hearts goals.

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Scale for Predicting Complications of Arterial Hypertension and Managing Nursing Care

This is a methodological and quantitative research, performed in eighteen public health units in the city of Curitiba, Paraná, Brazil, with 387 hypertensive adults. The objectives were to identify factors that predict complications of arterial hypertension and to develop a tool for assessing and monitoring care. Data were collected from May 2013 to April 2014, through semi-structured interview and five scales: anxiety, depression, quality of life, medication adherence and social support. The analysis took place on the basis of inferential statistics through the SPSS software, version 20. The project was approved by the Research Ethics Committees of the Federal University of Paraná and of the City Government of Curitiba. We have noted that the variables "age", "gender", "smoking", "alcoholism", "time of diagnosis", "risk classification", "number of medications in use", "hospitalizations in the year prior to the interview", "time of daily activities", "quality of life in the domains 'functional capacity', 'physical, social and emotional aspects' and 'mental health'", "remembrance for medication non-adherence" and "depression" were statistically significant for complications. After multivariate analysis and calculation of the odds ratio, we developed the tool with the variables: "age over 55", "male gender", "smoker", "diagnosis older than 10 years", "risk classification in the health unit", "use of more than four medications" and "diagnosed depression". According the score reached on the scale, patients are classified as low, moderate, high and very high risk of developing complications, and by means of which we propose actions for the management of care, such as health education, consultations with health professionals, home visits and agreement of goals. When identifying the risk of developing complications, health professionals can together manage care with a view to postponing complications

with actions to control blood pressure levels and thereby improve the quality of life of patients.

Jennie De Gagne

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&

Mary Val Palumbo

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Practicing Interprofessional Care of Elders: Utilizing Videoconferencing and a Virtual Environment

Background: Video conferencing and a virtual environment was used for teaching interprofessional practice (IPP) when caring for the elderly with students from eight healthcare professions. Is this pedagogy perceived as effective by the students in Interprofessional Competency Domains?

Methods: Twenty interprofessional conferences (90 minutes in length) were conducted. Students from nursing, physical therapy, speech and language therapy, social work, nutrition, medicine, exercise science, and pharmacy collaboratively developed a plan of care for a frail elder. Using the Interprofessional Competency Domains, an evaluation survey was developed which included 14 Likert-scaled, five open-ended, and demographic questions. Quantitative data was analyzed using descriptive statistics in the aggregate for all students and by discipline. Differences between disciplines were compared using Fisher's exact test. A qualitative analysis was performed on students' comments.

Findings: Eighty-three students completed the survey in the first year. Participants were predominantly female (77%) and white/Caucasian (83%). More than 60% of students strongly agreed on the value of the experience in the four competency domains. There were no significant differences by discipline (p values for difference between disciplines ranged from 0.14 to 0.89 depending on question). Thematic analysis of open-ended questions indicated the educational value of the experience; however, preference remained for in-person meetings. Second year results will be added after December, 2014.

Discussion: This virtual interprofessional practice experience showed positive ratings by students for the elements of collaborative practice in the first year and offered a means to offset the logistical difficulties of scheduling students from 8 professions. The creation of a "virtual environment" for students to interview the patient and meet for conferencing was added to the project in the second year and evaluation of this addition will also be presented.

Recommendation for Future Research: Further research involving IPP educational pedagogy and the use of distance technologies is needed.

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&

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Nursing Education Focused on Healthcare Workers

The study aimed to know how the higher education guides nurse students to care the workers health, such as the learning process involving the subject in Nursing graduation courses. The research portrays a qualitative approach of the descriptive kind, in which a study case was used as investigation strategy. Took part in the study 62 students and 6 teachers from three nursing graduation courses from the West of Santa Catarina. The information was obtained between August of 2013 to February of 2014, through documentary analysis, interviews and focal groups and were analyzed by content analysis. Results pointed to an absence of specific curriculum components and Collective Health and Occupational Health influences. Theoretical and practical activities, internship fields, research and extension have been offered in a restricted and discontinuous way. The formation indicates paths to expansion of policies and focused actions in workers, their weaknesses and intervention possibilities.

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Maternal Mortality by the Pre-Eclampsia/Eclampsia in Santa Catarina Brazil. A Population-based Study

Background: Pre-Eclampsia or Eclampsia is an unpredictable multi organ disorder, unique to human pregnancy. It is associated with significant maternal morbidity and mortality. Pre-eclampsia and eclampsia influence about 10% of all pregnant women around the world. Maternal mortality is a main indicator of disparities in women's rights. The main objective of this study, defined by the researcher's was aimed to describe the cases of maternal mortality associated with preeclampsia and eclampsia in Santa Catarina Brazil covering the period between 2005- 2013.

Methods: A population-based descriptive quantitative study was conducted and the data were extracted from the Mortality Information System (SIM) of the Ministry of Health, Brazil, through the DATASUS site, and from the State Health Department of Santa Catarina. Codes conforming to the ICD 10th revision in which diagnoses related to preeclampsia/eclampsia were defined. Maternal mortality associated with preeclampsia and eclampsia were identified.

Result: In this descriptive study, 256 maternal deaths that occurred in the period 2005-2013 were analyzed. Out of these 256, 32 deaths were related to preeclampsia/eclampsia, representing 12.5% of total maternal deaths. Preeclampsia was 37.5% and eclampsia was 62.5%. The highest number of maternal deaths due to preeclampsia/eclampsia per year was 21.9% in 2010 and lowest were 3.13% in 2011 and 2013.

Conclusions: The current role of nurses in the management of preeclampsia/eclampsia focus on the protection of maternal wellbeing. Routine nursing assessments of the signs and symptoms of preeclampsia/eclampsia are essential in the detection, monitoring, and effective management of preeclampsia-eclampsia. Patient education, awareness and supportive environment provided by nurses are also essential in the management of preeclampsia-eclampsia. Finally, individually tailored and warm-hearted nursing care of women with preeclampsia/eclampsia will improve the wellbeing of mother.

Cathy Dickson

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A Revitalization of Role Modelling: Providing Authentic Nursing Experiences for International Students

The clinical nurse has always had the potential to provide learning opportunities that enable a student's understanding of the reality and nature of nursing practice. The literature is replete with evidence that role modelling is necessary for students come to know and understand the practice of nursing. Role modelling is known to require critical interaction between student and registered nurse and is more than having a 'shadow'. Although the importance given by clinical nurses to role modelling has often been neglected and its links to student learning may have lacked clarity, its significance none the less, has not waned. Now as the numbers of international students in nursing programs are increasing, issues of safe and competent practice within our socially and culturally derived profession are being raised. The clinical nurse is in a prime position to influence and challenge students values and beliefs about nursing practice and to provide windows of opportunity for students to observe and emulate professional practice in context. This paper will present findings from an interpretive descriptive study that highlight the importance and essential nature of role modelling for undergraduate students learning to nurse in a new and different culture with specific reference to Social Learning Theory.

Yeliz Dincer

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Investigation of Preventing Factors which Evaluation of Nurses Research and Application of Research Results

The purpose of the nursing research; as well as to build a solid foundation for evidence-based practices (EBP), to provide the nurses to use best these basics and to create a basis for nursing practices with produced Knowledge (Buldukoğlu, 1997). The reason for these researches in nursing practice is to develop nursing practices via investigations/search (Stetler, 1994). Nursing studies which have been carried out using with scientific method is prompted nurses to motivate from decision making which is based on experience to decision making which is based on evidence. When the nursing produce their own scientific knowledge, the value of scientific knowledge and usage responsibility of it will/also increase (Stetler, 1994). The aim of this study is to determine nurses' perceptions about research and the factors that prevent them from using research results in their practice.

This study was designed as a cross-sectional and analytical study and it was conducted between April 2011 and July 2011 with 391 nurses working in two hospitals, one of which was university hospital. For data collection, "Question Form" was used to determine demographic characteristics and the nurses' views about research and the "Research Barriers Scale" was used in order to determine the factors that facilitate use of research. Descriptive statistics, Mann-Whitney-U test and Kruskal-Wallis test were used in data analysis. In variables with more than two sub-groups, LSD and Tukey test were used as post-hoc to identify the group making a difference.

The mean age of the nurses in this study was 31.12 ± 6.90 . The study found that 85.9% of the nurses were female, 43.2% held a bachelors degree, 25.8% had worked for 2-5 years, 85.9% were clinical nurses. Also, 54.2% of the nurses had not been involved in a scientific research before, those nurses who reported that they had been involved in a scientific research participated as a part of the audience by 62.1%, as paper presenters by 14.1% and as members of the organization by 5.4%. The study found that the total score of the nurses' perceptions that prevent them from using research results in their practice were moderate. The barrier sub-scale perceived by the highest percentage of nurses was institutional barriers. Also, five out of the top ten items that were perceived as an obstacle were those in the practice sub-scale. Recommendations for future research include developing strategies about institutional and educational regulations and carrying out similar

studies in different institutions with larger samples in order to increase the use of research results in practice.

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&

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Synergistic Interaction between Phytochemicals and Oral Antidiabetic Drugs Leading to Enhanced Glucose Uptake in Cells

Diabetes mellitus (DM) leads to endocrine disorder which is the third main cause of death. It is mainly due to defective or insufficient insulin secretory response. There are millions of children and adults in the United States who have diabetes and it causes about 5% of all the deaths globally each year [1]. The ethnobotanical information report says that there are about 800 plants that have antidiabetic properties, but experimental proof for the activities of only 410 plants is available [2].

Ferulic acid is a phenolics phytochemical present in the plant cell wall. Eugenol is a phenyl propanoid extracted from certain essential oils including clove oil (*Eugenia aromaticum* or *Eugenia caryophyllata*), nutmeg, cinnamon, and bay leaf. Traditionally it has been used in dentistry, for abdominal pain, and as an acaricidal, local antiseptic and anesthetic. Both these phytochemicals were used in combination with two commercial drugs, thiazolidinedione (THZ) and metformin, to study the glucose uptake by L6 muscle cells [3]. The study reveals that both the phytochemicals have enhancing effect on glucose uptake. They act in synergy with the two commercial drugs. Ferulic acid in combination with metformin (20 μ M) and THZ increases glucose uptake considerably with reference to the base value (without the drugs or the natural products). Eugenol also in combination with the drugs increases the glucose uptake. Our findings suggest that the phytochemicals can replace the commercial drugs in part, which could lead to a reduction in toxicity and side effects caused by the later.

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Nurses' Medication Work: The Discursive Construction of Rules

In today's hospitals, ideological understandings of quality and safety dominate the thinking about how to work with medications and impose activities that reinforce and support those formulations. Seen as an inherently risky activity, standardized policies and procedures regulate nurses' medication work in an attempt to manage risk and tightly control the processes that are used when working with medications. As the term "standardized" implies, the rules that have emerged are standard, and are meant to be applied consistently and universally, regardless of the circumstances. Constructed far from the bedside in the abstract realm of safety and quality, they are stripped of context and isolated from the complex and poorly understood work of nurses. While seemingly logical and rational, they simply do not always work the way they are meant to in practice. Nurses work within settings where little is standard, where the details and particulars are endless, and where accommodating inflexible processes may be difficult and time consuming.

In the preliminary findings of my institutional ethnographic study, my empirical observations confirm that while nurses are committed to safety, they do not always follow the formalized policies and procedures thought to accomplish this goal. Instead, nurses adapt the accepted procedures depending on the circumstances and context of their work, producing safety in ways that are not always recognizable or understood by others. Seen from outside the work as "breaking rules", the discursive understanding of safety cancels out the valuable discretionary work that nurses are quietly and continuously engaged in. Nursing work is powerfully organized by the dominant ideological formulations of safety and risk, and the interests that these discourses insert into medication work. In this paper, I provide evidence that shows that it is virtually impossible for nurses to "follow the rules" while simultaneously producing safe, competent patient care. In order to activate critical discretion, nurses are organized to break the rules through which their professional competence is judged. This then, is the root of the tension in medication work: the point of contact where the ideological world of standard processes and the everyday world of nurses working with particularities collide.

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Providing Care in Agricultural Activities to Occupational Community Health Agents of Rural Areas

Several studies indicate that rural work generates numerous health risks when developed without protection. Thus, we carried out a study in order to obtain information about the processes of health and work disease of the rural population, according to the interpretation of Community Health Agents, with the development of actions to promote occupational health. This is an action research with multiple strategies such as interviews, discussion and workshops wheels health education. The research was conducted with Agent Community Health in the rural areas in the municipality of Seara, in Brazil. The results show that the rural population is exposed to various occupational hazards among them were mentioned: risk of falls, burns, accidents with machinery, cutting and accidents in handling animals. As conclusion of the study it can be said that the perception of Community Agents on occupational health risks is still very restricted gross lesions, where the minor injuries are minimized and interpreted as being natural for rural labor activity. The Community Health Agent, as well as other health workers, configures itself as a major player in providing guidance and observer of the context in which they live and work farmers and their families. Therefore, it is crucial that these workers are trained and able to meet the needs of its jurisdiction in the territory in which they operate, with the primary focus of its action on health education.

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Grieving over Stillbirth in Brazilian Women

The loss of a child before being born is one of the predictive risks for the development of a complicated grieving, which was recognized as a mental disorder in the diagnoses of last edition of Diagnostic and Statistical Manual of Mental Disorders and it will be inserted in the next edition of the International Classification of Diseases. **Objectives:** To propose an appropriate evaluation of the phenomenon of grief over stillbirth. **Methods:** This is a descriptive-exploratory study, involving the use of Perinatal Grief Scale (PGS). It was carried out with all the women that had fetal death in 2013 in the municipal district of Maringá, Paraná, Brazil. PGS presents 33 psychometric statements purposed to evaluate the individual's thoughts and current feelings regarding a reproductive loss. **Results:** Grief over stillbirth was identified in 35% of the Brazilian women. As for the the risks of occurrence of grief and the sociodemographic characteristics, the grieving women presented chance 1.4 times greater at 20-34 years of age; 2.1 times greater when there was no mate; 1.4 times greater when the education level was lower than college degree; 1.4 times greater when there was no work condition; 19.2 times greater without religious belief; and 26.2 times greater in the absence of a religious person, although only for the religious belief and the visit of a religious person there was an association ($p < 0.001$). Concerning the chances of occurrence of grief and the reproductive characteristics, the grieving women presented 2.5 times greater chance of loss over 28 weeks of pregnancy; 2.8 times greater chance of having a previous live birth and 2.0 times greater chance of having no previous loss. **Conclusion:** Improving the nursing care provided to the women in situation of fetal death implies a previous evaluation of the process, in the sense of programming necessary interventions to each case.

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Hepatitis B and C Care in the Opiate Substitution Setting-an Integrated Nursing Model of Care

Hepatitis B and C are major global public health concerns with some 500 and 200 million worldwide cases respectively. Despite the availability of effective curative therapies for hepatitis C virus (HCV) and viral suppressive therapies for hepatitis B virus (HBV), to date only a minority of infected patients receive treatment throughout the world. In the general population, morbidity and mortality associated with chronic HCV and HBV infection is on the rise. Increased notifications of advanced liver disease and hepatocellular carcinoma are also rising at an alarming rate. This situation is more pronounced in the Opioid Substitution Therapy (OST) setting where people living with hepatitis B or C historically have been reluctant to access liver services. In Australia, an estimated 41% to 68% of people who inject drugs (PWID) are HCV-positive and between 28% and 59% of users are estimated to have been exposed to HBV. Although current treatment guidelines suggest that active drug use should not preclude people from HCV treatment, uptake of therapy thus far has been low to say the least. Patient, physician, social, and logistical-related barriers contribute to the low uptake of HCV/HBV treatment among PWID. Traditional means of managing HCV/HBV infection, that is, referral to a secondary or tertiary health centre, to date has proven to be an ineffective model for providing assessment and treatment options for this patient population. Approximately 50,000 Australians receive OST through a range of services, including public and private clinics, thus this setting is an ideal target for identifying and treating people at risk for and already infected with HBV and HCV. This is of particular relevance with the emergence of all-oral direct antiviral agents (DAA) that are more tolerable and efficacious than conventional interferon subcutaneous injection based treatment. This paper will describe the creation and functioning of a multidisciplinary, nurse-led model of care initiated by a teaching hospital in Sydney, Australia, that integrates viral hepatitis screening, assessment and treatment into the OST setting. In the world of escalating burden of liver disease and healthcare costs, this nursing model of care has been effective in enhancing access to HBV/HCV services among the marginalized injecting drug use population.

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The Relationships among Depression, Self-Care Agency, Self Efficacy, and Diabetes Self-Care Management

Aims and Objectives: To examine the relationships among depression, diabetes knowledge, self-care agency, self efficacy, and diabetes self-care management based on a modification of the Diabetes Self-Care Management Model.

Background: The coexistence of diabetes and depression is associated with negative outcomes such poor diabetes self-care management. Complex relationships exist between diabetes knowledge, self efficacy, self-care agency, depression, and diabetes self-care management. However, no study has examined the relationships between all these factors in the same study.

Research Design: A cross-sectional, correlational model testing design was used to examine the relationships within the study conceptual framework.

Methods: A total of 78 participants completed study questionnaires that contained measures for each of the conceptual framework variables and demographic questions. Inclusion criteria were 18 years or older, medical diagnosis of either type 1 or type 2 diabetes, minimum diabetes duration of 6 months; and managed with insulin. Multiple regression analyses tested the hypothesized relationships in the conceptual model.

Results: The mean participant CES-D score was 20.5 ± 11.4 (range 21.7 to 95.7). Depression had a direct negative relationship with self-care agency and self efficacy, but the relationship between depression and diabetes self-care management was not direct. Self-care agency and self efficacy completely mediated the effect of depression on diabetes self-care management. Self efficacy completely mediated the effect of self-care agency on diabetes self-care management.

Conclusions: Effective treatment programs for persons being managed with insulin likely include not only screening and treatment of depression, but also skills training to enhance patient self-care agency and self efficacy alongside diabetes self-care management.

Relevance to clinical practice: This study explored strategies for providing effective ways to mitigate depression and therefore delay or prevent diabetes-related complications.

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&

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Acculturation, Quality of Life and Coping of International Nurses Working in a Contemporary Multi-Cultural Society

Background. Acculturation of international nurses is becoming a topic of concern as there is a growing acknowledgement between the relationship of acculturation; work environment; quality of life; nursing work stress; cultural values and coping processes. The aim of this study was to explore the level of acculturation among international nurses in Singapore and the predictors affecting their acculturation.

Method. A cross-sectional design using self-administered survey was conducted on a stratified random sample of 814 (response rate 85.7%) international nurses working in two tertiary institution in Singapore. Demographic characteristics, level of acculturation and data on six variables including Practice Environment, WHOQOL-BREF, WAYS of Coping and Cultural Values were collected during the study.

Results. The mean score for acculturation level among international nurses was 32.95 (SD = 6.88, range: 12 to 60) with Chinese PRC (M = 27.27, SD = 5.23) international nurses reporting the lowest. Multiple regression (stepwise) showed that being Chinese PRC ($\beta = -3.461$, $p < .001$) international nurses; with age up to 40 years old ($\beta = -3.03$, $p < .001$), working in a mental health setting ($\beta = -1.059$, $p < .05$), chose confrontive coping ($\beta = -.171$, $p < .001$), distancing ($\beta = -.174$, $p < .05$), and seeking social support as a coping process ($\beta = -.328$, $p < .001$) reported a poorer acculturation outcome.

Conclusion. Results from this study provides an understanding that demographical characteristics; work environment and the chosen coping process affects the acculturation level among international nurses. Knowing factors that influence acculturation allows administrators to plan for integration program that takes into considerations the differing needs of different ethnic groups of international nurses.

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The Impact of Complementary and Alternative Medical Approaches to Menopause Symptoms Implemented by Postmenopausal Women on Their Quality of Life

This is a descriptive study aiming to determine the complementary and alternative treatment methods implemented by women in the postmenopausal period to address menopausal symptoms and identify the impact of these methods on their quality of life.

The study sample consists of 270 women who visited the Turgut Ozal University Hospital Menopause Polyclinic. The data was collected using the Individual Information Form and the Life Quality Scale for Menopause, which were developed by the researcher based on literature knowledge. Data analysis was conducted by using average, frequency, percentage, chi-square, the Mann-Whitney U test and the Kruskal-Wallis test with Bonferroni correction.

The average age of the participant women is 54 ± 5.0 . The most common menopausal symptoms among the women were hot flashes (86.9%), sweating (82.1%) and vaginal dryness/dyspareunia (81.7%). It has been demonstrated in many studies that these menopausal symptoms are more intense in housewives, the elderly, those taking medication regularly, those for whom surgery caused the onset of menopause, those not receiving any hormone therapy and those with a surgical history. It has also been proven that there was a decrease in life quality for these groups of women ($p < 0.05$).

This study found that the rate of CAM use was 62.2%. Women most frequently turn to methods like soybeans (50%), black bugbane (28.9%), herbal tea (11.2%), acupuncture (39.7%) and hydrotherapy (10.3%). It was determined that those with a maternal history and receiving hormone therapy were more inclined to implementing CAM ($p < 0.05$). It was also found that those implementing CAM had more rare menopausal symptoms and had a higher quality of life ($p < 0.05$).

The research outcomes indicate that more than half of the participant women implement CAM; however, they do not seek enough information on this issue from healthcare professionals. It is suggested that menopausal women receive education, consultancy and take on further activities as menopausal symptoms are proved to be better-controlled through CAM.

Leslie Graham

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Simulation in Canadian Undergraduate Nursing Education: The State of the Science

The priority in undergraduate nursing education is to ensure graduates are prepared to practice in highly complex and rapidly changing environments. With declining clinical placements particularly in specialty areas such as paediatrics or obstetrics, as well as increased patient acuity, and lack of clinical faculty (Harder, 2010; Nehring, 2008) nurse educators are looking for innovative ways to provide experiential learning. Simulation is rapidly becoming a favoured teaching and learning strategy for both clinical and theory courses, and in some jurisdictions as replacement for clinical hours (Nehring, 2008, Hayden, Keegan, Kardong-Edgren, & Smiley, 2014). Simulation offers a safe environment for nursing students to develop mastery of psychomotor skills as well as to cultivate critical thinking and clinical judgment. In advancing the patient safety agenda, simulation provides the opportunity for the learner to engage in high risk, low frequency events, enhance communication skills and improve interprofessional competencies. As the results of the United States National Council of State Boards of Nursing landmark study are now available, it is reported that replacing 50% of clinical hours with simulation is no different than traditional clinical hours (Hayden, Smiley, Alexander, Kardong-Edgren, & Jeffries, 2014). This leaves educators deliberating on how to best integrate simulation into the curriculum as an active learning strategy. As a preliminary step to understanding the state of the science in Canada, this study was undertaken to explore the current use of simulation for teaching and learning in undergraduate nursing programs across the country. Prevalence of simulation use in Canada, along with barriers and strategies for overcoming these challenges will be presented.

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&
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Complementary Therapy Use among those Living with Cancer: Navigating the Health Care Environment

Background: A majority of individuals living with cancer engage in some form of complementary therapy (CT) use as a way of improving their health status. A variety of CTs have been successfully used to increase the quality of life for those living with cancer. Arts-based approaches have been recognized as helpful in terms of sharing thoughts and feelings associated with cancer care.

Study Objective: The main objective of this study was to develop a narrative, arts-based, grounded theory that explains how individuals who use CTs during cancer care interface with the health care environment.

Methodology: Employing grounded theory and arts-based methodologies, this qualitative, mixed-method study, was conducted in 2013 and extended over an 18-month period. Twenty individuals voluntarily participated in the study. Each participant was involved in two group interviews within a three month timeframe. Each group interview lasted approximately 2-3 hours and took place in a private setting appropriate for the group size. The primary data collection sources included: textual data (e.g., narrative interview data), observational and reflective data (e.g., fieldnotes), and non-technical data (e.g., journals, art work) shared by the participants. Both manual and computer analyses were conducted.

Findings: Located within the broader health care environment, participants experienced an overarching dimension labelled *Manoeuvring within the Quagmire*. Within this dimension several elements were experienced including: *Receiving the 'Big C' Diagnosis*, *Exploring Health Care Options*, *Straddling Two Approaches to Health Care Delivery*, *Solo Venturing*, and *Envisioning an Integrative Health Care Environment*.

Significance The results of this research are intended to locate the use of complementary therapies by those living with cancer within the broader health care environment and provide a beginning theoretical construct to inform evidence-based health care practice, as well as contribute to the highly relevant and growing body of scientific

knowledge that focuses on increasing the quality of life for those living with cancer.

Alastair Gray

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&

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The Use of the Viva in Making Visible the Richness Hidden within Advanced Nursing Practice Portfolios

This presentation will explore the benefits of using the viva voce to assess advanced nursing practice students' course clinical portfolios.

Portfolios have been used in the United Kingdom extensively to demonstrate the achievement of practice competence. Unfortunately, at the lower end of the scale, they are put together with limited imagination, as a collection of disconnected pieces of evidence, more as a bureaucratic exercise and as a means to an end. However, at the other end of the scale they are really excellent examples of high quality, thoughtful and compassionate practice, with quality evidence, well signposted and imaginatively constructed. The latter provides the reader not just with good evidence but the confidence that here is a truly professional and caring practitioner, a role model and leader of nursing. Nowhere is this outcome more necessary than in advanced nursing practice.

Having used portfolios in the assessment of advanced nursing practice students' competence for the last eight years, the course designers felt sure there was a way of making portfolios work more effectively to make visible the students' achievement of both advanced practice skills, but more importantly the critical thinking, decision making and judgments made to inform their practice. A new approach of adding a viva to the review process was introduced. It was felt that this would allow the students to self-select the best examples of evidence taken from their portfolios, in response to a series of questions, designed to explore all areas of the first year of the masters' curriculum.

The results, arising from a small group of fifteen students were remarkable. It was clear the students 'knew' their portfolios. More importantly they spoke of the journey they had undertaken throughout the course and how the pathway had enabled enhanced critical thinking and how this impacted their practice, their perception of the role and how they could influence the practice environment. What was pleasing was how they saw their roles were wider than purely clinical and embraced leadership and innovation.

On the basis of our findings we would urge colleagues to consider this approach.

Julia Greenawalt

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Charting in a New World

The purpose of this presentation is to present one project from conception to inception of how a simulated environment for undergraduate nursing students was developed applying contemporary documentation technologies. There will be discussion on the integration in one clinical course using simulation and an academic electronic health record. Numerous challenges were surmounted to bring this project to fruition. One challenge was the funding and procurement of these highly complex technologies, and most noteworthy was the facilitation of a team to help bring this dream to reality. An exploration of the path that was taken towards implementation will be shared using these technologies.

The Electronic Health Record (EHR) is a longitudinal electronic record of patient health information generated by one or more encounters in any care delivery setting. Included in this information are patient demographics, progress notes, problems, medications, vital signs, past medical history, immunizations, laboratory data and radiology reports. The EHR automates and streamlines the clinician's workflow. Thus, this critical thinking application fosters quality care by standardizing input from any level of health care provider.

The application of an EHR has the potential to not only standardize patient outcomes, but archive input, data and responses for all providers. This streamlining of thought processes decreases the potential for error from numerous aspects. It validates providers input by being a peer-reviewed type of document; it lessens the number of input events, and communicates the same information to numerous and varied providers. By using this technology in a simulated environment experienced nurses are able to assist fledgling nurses in their application of skills, knowledge, communication and critical thinking in a zero fault environment thus, providing a safer novice nurse who is not only highly marketable, but also valued for skills and expertise at the onset of employment.

Pierrette Guimond

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Preceptor's Attitude toward the Development of Nursing Student's Critical Thinking in Clinical Practice

Purpose. The quality of the interaction between educator and student is a core element in developing clinical judgment. This study examined the verbal interventions of the preceptor during the clinical teaching learning interaction with a view to developing nursing students' critical thinking. **Methods.** The interactions of 27 preceptors/students were videotaped during the application of the nursing process. **Findings.** Data analysis of 8 810 preceptors' verbal interventions showed that the pedagogical approach used by the preceptor barely promotes student critical thinking. The attitude manifested by the preceptors demonstrated that they take ownership of the clinical teaching situation just as much as they foster student ownership. Most preceptors (92%) have showed some interest in empowering the student. The preceptor's manifested attitude is not congruent with the expressed attitude of fostering student ownership. No preceptor has expressed a strong commitment to encourage student ownership. **Conclusion.** The need to study the teaching/learning process during the interaction is stressed.

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&

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Balance and Affecting Factors in the elderly who are Hospitalized in Internal Medicine Clinics

Aim: This study was conducted in order to examine the fluid balance in the elderly hospitalized in internal medicine clinics, as a descriptive and cross-sectional type.

Method: The universe of the research is consisted of hospitalized patients in Dokuz Eylül University Internal Medicine clinics.

Patients (100 patients) were selected using simple random sampling.

who have the ability of cognitive competence, literate, voluntary and more than 0.5-1 ml/kg/h urine output. Research data were collected between 01.07.2013-30.09.2013 in Dokuz Eylül University Internal Medicine clinics, using questionnaires through face to face interviews. Data were assessed by chi-square, Mann Whitney U test and correlation analysis. It was determined a positive and medium power correlation between parameters (body weight, blood pressure, pulse, respiration, body temperature, skin turgor tone, 24-hour urine output, urine pH, urine osmolarity) related with fluid balance and fluid balance in patients.

Results: When the fluid balance of patients, participating the study were examined, 48% were found in balance, 52% were found in imbalance. Average of the daily total fluid (IV + oral), taken by patients were found 1290.55 ± 374.03 ml. It was found a positive and medium power correlation between fluid balance situation and total fluids (IV, oral) ($p < 0,05$) and IV fluids ($p < 0,05$) taken by patients.

Conclusion and suggestions: Fluid imbalance is frequently encountered in the elderly who are hospitalized in internal medicine clinics. According to these results in elderly patients information should be given concerning the fluid balance, health care workers must be renewed in knowledge and increased awareness level; training programs planned for both health workers and patients, their relatives.

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&

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Sexually Dimorphic Effects of Genistein in Various Murine Diabetic Models

Immune dysregulation not only serves as a hallmark of type 1 diabetes (T1D), but also directly contributes to the pathogenesis of type 2 diabetes (T2D). The isoflavone genistein (GEN; 4,7,4'-trihydroxyisoflavone), which is known to interact with the estrogen receptors and act as an antioxidant to modulate immune responses, is a phytoestrogen found at high levels in soy products. The exact role of estrogen in diabetes is unknown. The objective of this study was to determine the effects of GEN on the time of onset and/or the incidence of diabetes in various murine diabetic models, when administered by gavage once every day at physiologically relevant doses. In female non-obese diabetic (NOD) mice (T1D), oral dosing of GEN reduced the incidence and increased the time to onset of T1D when fed a soy- and alfalfa-free (SOF) diet. However, administration of GEN by gavage increased the incidence of cyclophosphamide-accelerated T1D in male NOD mice. In streptozotocin (STZ)-induced diabetes, GEN exposure increased blood glucose levels (BGLs) in female B6C3F1 mice. In STZ-induced diabetic male B6C3F1 mice fed the SOF diet, although the BGLs in GEN-treated mice were numerically lower than vehicle mice following the third injection of STZ, none of the changes reached the levels of statistical significance. In the T2D db/db mice, GEN exposure decreased the body weights when compared to the vehicle control group in both male and female mice. However, in the 19-week study period, changes in BGLs were only observed at one time point with a decrease in females and an increase in males in week 3 and 17, respectively. The differential effects of GEN on blood glucose levels in male and female mice suggest that the estrogenic properties of this compound may contribute to its modulation of diabetes (supported in part by the NIH R21ES24487 and by NIEHS contract NO1-ES-05454).

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Prevalence and Incidence of Pressure Ulcer in Jordanian Paediatric Population

Background: There is a paucity of research related to the problem of pressure ulcer in paediatrics. Variable incidence and prevalence rates have been reported, although, critically ill paediatric patients have proved to be at higher risk than those in general wards.

Objectives: Two separate studies were conducted as part of this research. A prevalence study aimed to measure the prevalence, location and categories of pressure ulcer in general inpatient paediatric wards. An incidence study was set up to measure the incidence, most affected locations, and categories of pressure ulcer, in critically ill children and neonates.

Design: One point prevalence study with a descriptive cross-sectional design and one observational cohort incidence study with longitudinal prospective design were conducted.

Setting: All paediatric in-patient wards for the prevalence survey, and four paediatric critical care units (PICU, NICU, GIMU, and GICU) were surveyed in one university-affiliated hospital in Jordan. Paediatric patients in burn, isolation, and psychiatric wards were excluded.

Sample: A total of 107 paediatric patients aged from birth up to 18 years old for the prevalence survey, and a total of 212 critically ill paediatric patients without pre-existing pressure ulcer for the incidence study, were recruited.

Methods: All patients who met the inclusion criteria were included and assessed for pressure ulcer existence in one day for the prevalence study. Patients eligible for the incidence study were observed up to three times a week for two weeks, then once a week until critical care unit discharge, death, or when the eight week follow-up period ended. In both studies, data was collected by the primary investigator.

Results: All identified pressure ulcers in both studies were categorised according to the European Pressure Ulcer Advisory Panel classification system. Eight patients (7.5%) had 13 PUs in the prevalence study and, of these, the majority were inpatients in critical units (87.5%, n= 7), were female (62.5%, n= 5), younger than one year old (62.5%, n= 5). Most of the ulcers seen were of partial thickness (category I and II) (n=6, 75%). The sites most frequently affected by pressure ulcer were the face (38.5%, n= 5). In the incidence study, 19 patients (9%) developed 29 ulcers, and as low as 5.2% when category I ulcers were excluded. Forty one per cent of pressure ulcers were category I. The 'chest and shoulders' were the most affected areas with ulcers (20.7%, n= 6).

Conclusion: Pressure ulcers do exist in Jordanian paediatric patients, and with higher rates among those who are critically ill, thus would have its impact on changing the practice of Jordanian nurses to prevent or reduce its occurrence.

Elaine Haycock-Stuart

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Evaluation of Current Practices to Involve Service Users and Carers in Nursing Students' Practice Assessments in the 11 Higher Educational Institutions (HEI's) in Scotland

Background: In 2010 the UK Nursing and Midwifery Council (NMC) recommended that Higher Educational Institutions (HEIs) providing pre-registration nursing programmes: "must make it clear how service users and carers contribute to practice assessment".

Aim: To evaluate current practices on how service users and carers contribute to practice assessment in the 11 HEI's in Scotland providing pre-registration nursing programmes.

Design: A qualitative approach to data collection and thematic analysis involving 15 semi structured interviews with academic staff and 5 focus groups with 51 undergraduate nurses from the 11 HEIs. Ethical approval was obtained for the study. Data was collected in 2013/14.

Setting & Participants: 15 key informants from the pre-registration programmes and 51 student nurses from from the 11 Universities in Scotland.

Results: Following the 2010 NMC recommendation, recent published literature has drawn attention to the challenges of introducing the above recommendation that were not present or not as challenging when addressing service user and carer involvement in student selection, curriculum design and research. Key informants raised concerns about protecting unwell or distressed patients; concern was expressed about the lack of guidance for developing appropriate and functional measurement tools to quantify service user and carer views on nursing students' practice skills; the key informants also noted that given power relations in the assessment process, can assessment be genuinely meaningful?

Conclusions: Caution is needed as (a) the level of evidence and the rationale for introducing this recommendation is limited; (b) exactly how to introduce, and robustly evaluate the recommendation needs clarification and (c) the terminology of the process – the term assessment should be changed to mean that of review or comment. Guidance to operationalize and reliably evaluate nursing student practice by service users and carers in a meaningful way, and to the benefit of all key stakeholders involved, requires greater consideration.

Joannie Hebert

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Advancing Interprofessional Collaboration in Nursing Education

Assessment of current nursing education pedagogies is necessary to evaluate how nursing faculty prepare future nurses for today's interprofessional collaborative healthcare practice settings. Increased complexity of patient care requires registered nurses to practice interprofessional collaborative care once in the practice setting. The purpose of this qualitative case study was to describe and understand the process of nurse educators teaching interprofessional collaboration to student nurses in a Louisiana pre-licensure baccalaureate-nursing program. Integrating interprofessional concepts and competencies in the classroom and clinical practice settings is vital in teaching students to perform successfully in current complex, bureaucratic, interprofessional care environments. Components of the theoretical framework for the study included Ray's theory of bureaucratic caring, complexity theory, and transformational learning theory. Interrelated concepts, assumptions, and generalizations of the blended theories appropriately supported the study's foundation and efficacy of findings. As interprofessional collaboration is gaining momentum in the healthcare environment, nurse educators can be key players in a teaching-learning dynamic that encourages positive patient outcomes and a changing healthcare paradigm. This study gathered perspectives about preparing competent students for interprofessional collaborative practice from nurse educators in a Louisiana prelicensure, baccalaureate-nursing program. Triangulating evidence from multiple data sources led to converging lines of inquiry. Findings indicated the majority of nurse educators describe their role in preparing students for interprofessional collaborative practice using classroom, clinical and simulation teaching strategies. Clinical environments were most often described as settings in which students gain the most knowledge through actual participation with the interprofessional team. Findings from this study indicate a need for curriculum changes and enhanced faculty development programs on interprofessional collaboration in nursing education. Educators and nursing programs can learn from this case study to develop teaching strategies to promote conducive interprofessional collaborative learning environments aiding students in the preparation for professional nursing practice.

Maude Hebert

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&

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Nursing Interventions Adapted to the Transition of Women's Perceptions of Health Status when Diagnosed with Breast Cancer

The purpose of this Ph.D. research is to explain how nurses can accompany women living with breast cancer according to their perception of health status transition process.

Purpose: We modeled the transition process of the perceptions of health and illness of women with breast cancer.

Methods: Grounded Theory is the perfect research design to study the process of becoming ill from breast cancer (Corbin & Strauss, 2008).

Summary of results: The 32 semi-structured interviews conducted with women suffering from a breast cancer revealed that they don't feel sick from breast cancer and that there is a illness perceptions shift between before their diagnosis and after the treatments which is influenced by the transition process they experience.

Conclusion: This research permits a better comprehension of women's breast cancer perceptions, the meaning they attribute to it, their help seeking behaviors and their health care system appreciation. These findings add to the knowledge on women's experience with breast cancer and offer guidelines to incorporate patient-centered care along the chronic illness trajectory. Based on these findings, nurses can develop specific intervention to facilitate nurses through the health-illness transition.

The target audience of this presentation is all health professionals in contact with women living with breast cancer.

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&

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The Outcome of a Home Total Parenteral Nutrition Patient Teaching Program in a Medical Center from 1989 to 2014

Aims. Patients need parenteral nutrition support which might be resulted from malabsorption, short bowel syndrome or occlusion from cancer. Home total parenteral nutrition (HTPN) is an effective way to reduced hospitalization costs and increase quality of life for them. The purpose of this article is to evaluate the outcome of a HTPN teaching program in a medical center from 1989 to 2014.

Methods. Patients who need HTPN were transferred and enrolled to HTPN team from September 1989 to September 2014. The nurse specialist from Nutrition Support team provided HTPN teaching program for patients and their caregivers, including trace element addition, setting pump equipment and infection control. Feedback demonstration also adopted to make sure the effect of learning. The medical charts and service records of the patients were evaluated by the researcher. The demographic data and the clinical characteristics related to the outcome of patients were examined. In addition to prescriptive analysis, chi-square test was also adopted to compare the outcome of patients with or without cancer.

Results. A total of 456 HTPN patients, including 251 male and 205 female, were included in the study. The mean ages of HTPN patients were 58.4 ± 14.2 . Most of the HTPN patients were cancer patients ($n=393$), among which 323 patients were with gastrointestinal related cancer. Short bowel syndrome ($n=42$) was the major diagnosis among non-cancer HTPN patients. The averaged days of using HTPN were 76.1 ± 269.6 in cancer patients and 323.4 ± 542.4 in patients without cancer. It shows significant difference of the days of using HTPN between patients with or without cancer ($P < 0.00001$).

Conclusions. With the increasing demand for HTPN, it is important that HTPN patients and their caregivers receive adequate education on HTPN self-care skills. Cancer patients' HTPN program might get interrupted because of their cancer progress. With well-educated self-care skills, non-cancer patients could implement self-care at home for one year in average.

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&

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The Predictors of Health Status in Mothers of Premature Infants

Purpose: To explore postpartum stress, depression, social support, health status, and predictors of health status in mothers of premature infants.

Design: This study employed a cross-sectional design. With convenience sampling, a total of 203 mothers of premature infants were recruited from two medical centers and four community teaching hospitals in southern Taiwan.

Methods: The Hung Postpartum Stress Scale, Social Support Scale, Beck Depression Inventory, and Chinese Health Questionnaire were used to assess the mothers' psychosocial features during the first six weeks postpartum.

Findings: Mothers' health status differed significantly according to levels of postpartum stress and depression. The important health status predictors were age, education, postpartum stress, and depression level.

Conclusions: The concerns and needs of mothers of premature infants differed from those of full-term mothers during the first six weeks postpartum; premature infants' health status was found to be a major perceived stressor for their mothers. In addition to age and education level, postpartum stress and depression levels predicted health status in mothers of premature infants. Future studies should explore postpartum stress, social support, depression, and health status each postpartum week, which could serve as a reference for nursing interventions.

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A Woman's Grief Experience for her Grandchild with α -Thalassemia

The prevalence of α -thalassemia in Taiwan is relatively high. The disorder results in a decreased production of α -hemoglobin, thus requiring regular blood transfusions, iron chelation therapy, and/or bone marrow transplantation. These treatments can have a lifelong impact on the sick children and their families, and result in a high risk of psychosocial issues on the families and sick child. This paper focuses on the caring for a neonatal baby with α -thalassemia who needed to be treated in an intensive care unit. The premature baby was born at the gestational age of about 32 weeks. The delivery method was caesarean section due to hydrops fetalis with severe respiratory distress. The grandmother of the baby experienced deep grief due to the illness of her grandchild. Interactions and interviews with the grandmother were recorded using the process recording method, and the data was analyzed using content analysis. Our findings included (1) experiencing a collapse of enjoying life (2) feelings of mental pain and uselessness when witnessing the suffering of the patient and the family (3) constant self-blaming and being unable to accept that it is an inherited disease (4) loss of daily routines and plans, and (5) facing an uncertain future with a high level of responsibility. For patients and their families, the best nurses can do is to be there for them, actively listen to them and recognize their suffering and pain. Helping the caregiver and the family to discover the meaning of their loss can improve the transition process from grieving to healing.

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Network of Maternal-Child Public Health Services in South of Brazil

This study aimed to report and discuss the technical, operational and structural strategies in the conformation of the network of care to pregnant women and children exposed to toxoplasmosis disease, in public health services in northwest of Paraná, south of Brazil. It was conducted qualitative case study focusing on the conformation of care in pregnancy and congenital toxoplasmosis toward to the model of health care networks according to Ministry of Health. The discussion was conducted focusing on the concept of network proposed by Rovere. The study revealed the strength of the establishment of interpersonal bonds in the configuration of network services, the importance of integrating them to ensure comprehensive care and the construction of ever more consistent networks. This work has innovative strategy with a high degree of reproducibility in health services and applicable to planning, management policies and actions aimed at maternal and child health.

Amanda Johnson

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Inherent Requirements in Nursing: An Enabling Student Support Strategy

Internationally, tensions exist on how to support students with disability accessing and participating in university based studies, especially those programs which are vocational in nature and inclusive of a placement experience. This tension is also coupled with the societal imperative to ensure that this group of people has the same opportunities to achieve educationally and pursue employment opportunities which are more likely to result from undertaking higher level studies. However making this a reality is tempered by the degree and commitment to which institutions have enabling student support strategies in place, that support students achieving success.

At a local level, the University of Western Sydney responded to this need by establishing the **Inherent Requirement of Nurse Education (IRoNE)** project. This project aimed to articulate the inherency of an undergraduate nursing program to enable potential and continuing students to be better informed in their decisions to undertake and continue in, a nursing degree. A five level framework articulating the inherent requirement statements (IRs) was developed. Further, the public dissemination of the IRs has facilitated dialogue between the student, disability advisor and academic in formulating an implementation plan incorporating adjustments for the disability. The application of the project outcomes has now been translated nationally, with 7 other Australian Schools of Nursing adopting the UWS model of IRs. A further four, are currently exploring the potential to adopt. Most recently an international School of Nursing has also adopted this work. This adoption further validates that a need exists to provide institutions and those charged with the responsibility of managing students with disability, a tool which seeks to enable student progression in a nursing program that is equitable, transparent and reasonable for all stakeholders. Additionally, the IRs has also demonstrated their applicability not only for students with disability but any student enrolled in a nursing program.

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&

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Men in Nursing: Issues of Recruitment and Retention

Males remain an elusive and untapped human health resource. In Canada, males represent approximately 6.4% of nurses indicating that nursing has yet to break the gender barriers that other professions have been successful in addressing. To better understand recruitment and retention issues related to men in nurses this mixed method study was designed. It included a qualitative component consisting of focus groups with male RNs (n=16) in clinical practice and male nursing students (n=18) in a baccalaureate program. The quantitative component consisted of a cross-sectional survey of male RNs (n=382) in acute care settings in the province of Ontario, Canada.

The quantitative component involved RNs completing the McCloskey/Mueller Satisfaction Scale (1990), the Intention to Leave Inventory (Meyer, Allen, & Smith, 1993), a demographic questionnaire and an open-ended section where participants were invited to provide additional comments. Correlations and multiple regressions indicated that nurses who were most satisfied with their career valued extrinsic rewards, control and responsibility and opportunities for professional development. RNs who indicated higher intentions to leave reported greater dissatisfaction with extrinsic rewards, scheduling and hospital support; they also experienced gender mistreatment.

Content analysis of the focus groups indicated findings similar to the survey results. Specifically, work stress, lack of full-time opportunities and gender-based stereotypes contributed to job dissatisfaction for male nurse working in acute care settings. Conversely, RNs voiced that providing care to patients and making a positive difference kept them in the profession. While students also experienced gender mistreatment overall they remained positive about being in a profession that provides a diverse range of professional opportunities.

In summary, both RNs and students were satisfied with their career choice. We do, however, have to be concerned about participants' intentions to leave the profession. The implications for nursing practice, education and research will be discussed.

Zekiye Karacam

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The Effectiveness of PLISSIT Model for Solving the Sexual Problems of Women's in the Postpartum Period

This study has been in half experimental the order with pre-test and post-test control group in order to evaluate the effectiveness of PLISSIT model in solving the sexual problems of women's in the postpartum period. The examples of the test were developed by choosing of 123 persons (study=61; control=62) and using the sistematic samples method of after birth 640 women (between 3-12 months) that live in the regions of Antalya Kepez No17 Family Health Center and Kültür Family Health Center No18. The researcher for data collecting used personal inquiry form, form about birth and after birth sexual life, Arizona Sexual Experiences Scale and Sexual Quality of Life Questionnaire. During the first home visit of the both groups of women was used personal inquiry form, birth and after birth sexual life questionnaire, Arizona Sexual Experiences Scale and Sexual Quality of Life Questionnaire. During this visit for the study group women and control group women in the different way we tried to find out the sexual problems and find the solution using the PLISSIT model interference plan. One month later after the first home visit during the second home visit for the both groups Arizona Sexual Experiences Scale and Sexual Qualite of Life Questionnaire were used. In data analysis SPSS 18 statistics analysis program was used. In data evaluation t-test, ki-kare test, Mann-Whitney U test and Wilcoxon Signed Ranks test was used. It was agreed that before the PLISSIT model plan practice 77% of women in study group and 71% of women in control group according to Arizona Sexual Experiences Scale had 12 points and more and sexual problems. Besides from the point of statistics there was analogy between the both groups. It was dertermined that after the PLISSIT model plan practice the study group women (60,7%) in comparison with control group women (77,4%) had less sexual problems and it was significant for the statistics evaluation (p 0,05). As a result we can say that use of the plissit model plan during after birth period diminishes sexual problems.

Pirjo Koski

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Experience of the Applicability of Participatory Action Research (PAR) to the Development of Birth and Parenthood Education Program (BPEP) for Somali Families Residing in Finland

Pregnancy, birth and early parenthood challenges for Somali women living in Finland have been documented, but few efforts to make a difference exist. In Finland it is recommended for municipalities to organize Birth- and Parenthood (BPE) for immigrant families, who are waiting for their first child in Finland as well as for multi-parturient families if they need for special support.

PAR combines systematic research and development of a practical intervention tailored to Somali parents. The first research aim was to map the views of public health nurses, midwives and Somali women regarding Somali families' BPE needs. The second research aim was to try out and evaluate PAR in developing BPE- program for Somali parents. The third research aim was to evaluate the new program.

Data offers insight in to the world of service providers, beneficiaries, and advocates for Somali families, who are waiting for their child in Finland. The most important training topics raised were: pregnancy, childbirth, breastfeeding and parenthood, especially father's role in childcare. Also circumcisions, birth control, healthier behavior for healthier lifestyle, social support, Finnish health care practices as well as migration-related problems were raised as important topics. The goals set for the new BPEP are: to increase knowledge and skills, to increase health awareness and to support parenthood. Topics included to the final BPE - program is: pregnancy, birth, postpartum, parenthood and family life. Dialogue and participatory teaching methods is recommended to use during BPE.

PAR is applicable to developing the BPEP for Somali women although a laborious process. Despite of encouraging piloting results, the new program as evaluated by external experts still relies too much on traditional Finnish birth and parenthood education and concepts of family and fathers role. It is important to continue to develop the program in future taking into account the challenges identified during this study.

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**Psychometric Properties of Thai Script Concordance Test
for Assessing Clinical Reasoning in Nursing Students**

Clinical reasoning is a core competence that should be improved in nursing students. Script Concordance Test (SCT) has been used for measuring clinical reasoning in various disciplines with reporting high degree of success. The instrument to measure clinical reasoning in Thai nursing student is rare. The purpose of this study was to test validity and reliability of the Thai version Script Concordance Test (Thai SCT) in assessing the clinical reasoning skills of Thai nursing students. The original French version of SCT from Deschenes, et al. (2011) was composed of 29 scenarios, 3 or 4 items in each scenario, with a total of 92 items. The French SCT was translated into Thai SCT by French's expert using back translation process. Content validity of the Thai SCT was judged by 5 experts in nursing education. Then, Thai SCT was administered to 30 third- year- nursing students in bachelor program at Boromarajonnani College of Nursing Bangkok and 15 nurse experts from several nursing specialties in Rachavithee hospital to test for the reliability. A scoring grid was developed using the aggregate scores method based on the modal responses of the expert. The reliability of the measurement was tested for Cronbach's alpha coefficient. The scores of the students and experts were compared using a *t*-test. The reliability of Thai SCT was reported at 0.79. The experts' score was higher than the students' scores with statistically significant at < 0.05 .

The Thai SCT demonstrated acceptable psychometric properties and cultural appropriateness for assessing clinical reasoning of nursing students.

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A Snapshot of Undergraduate and Master's Students' Information Literacy Skills at Each Level of their Nursing Program

Background: In today's health care environment nurses must develop information literacy (IL) skills to navigate the data-information-knowledge-critical wisdom pathway (Hunter et. al., 2013) in order to provide competent evidence-informed care. Information literacy competency standards have been developed to guide nursing education at the undergraduate and master's level (Phelps, 2013). However little research is available evaluating IL learning outcomes progressively during undergraduate and graduate nursing programs. Yet this information is required to guide nursing educators in curriculum development to ensure nurses' capacity to provide evidence informed nursing practice. This presentation will report the preliminary findings of our study examining nursing student IL at each level of the undergraduate and master's program at one Canadian university.

Methods: This study uses a cross-sectional survey design. A sample of 500 students, 100 recruited from each level of the undergraduate and 100 students from the master's nurse practitioner and MScN programs will complete either a paper or online Student Literacy Survey (Duncan et. al., 2013), a multidimensional tool which we adapted for Canadian nursing students. We will also collect student demographic data. Descriptive statistics will be used to describe the sample and IL at each level of the nursing program. Inferential statistics will be used to examine whether there is statistically significant progression of IL skills development throughout the trajectory of the nursing program.

Findings: We will present our preliminary findings on the students' IL skills at each level of the nursing program. In addition findings related to various components of IL will be presented including

student's search behavior related to identification of evidence need, search strategy, critical evaluation of evidence and application of findings.

Conclusions: Knowledge of students' IL skills at each level of their nursing program is vital to the development of effective and efficient educational strategies to ensure nurses have the capacity to provide competent high quality evidence-informed patient care.

Huei Ying Lee

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The Meaning of the Professional Interactions among Clinical Coworkers in Taiwan

Purpose. To obtain a comprehensive understanding of the cultural meaning of the professional interactions and of the lived experiences in the hospital situation in Taiwan.

Methods. An interpretive phenomenological design which consisted of narrative interviews, participant observations, and field notes was used. Sampling is performed ranging from new recruits with minimal experience to individual nurses of various seniority levels, relevant to the present research. Participants are totaling 43 informants, with an average age of 27.65 ± 7.92 and a mean seniority level of 5.46 ± 7.69 years.

Results. From primary meaning coding to thematic analysis, a hermeneutical circle analysis of data identified themes of participants' professional interaction experiences. In this study, we found that an unequal professional relationship is maintained between the nursing staff and medical doctors in Taiwan, who should have otherwise been inter-professional colleagues, with both professionally defining duties of each other as "order" and "by order". The professional interaction between the nursing staff and head nurses represents the individual as unit chief correspondence rather than the leadership by the expert of nursing. A pro-familial structure exists in the interactive relationship of nursing professionals, with the concept of subordination and responsibility: "my" senior or "my" junior colleagues. The core nursing value focuses on virtues such as coherence, solidarity, collaboration, interaction, alertness, self reflection and proactive management, subsequently demonstrating that the concept of conformity and subjugation is correspondent with the cultural as well as professional demand for social collectivism in Taiwan.

Conclusion. Our study brings insight to recognize the phenomenon of the meaning of interactive experience and professional placement within the organizational and cultural context. The findings provide administrators to gain a better understanding of what and how nurses' encounter in the professional interactions, to improve in-service training programs, and to provide good quality of nursing care.

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Women's Perceptions of Their Breast Cancer Journey by Viewing a Comic Others' Personal Narrative Story

Background The studies of early-stage breast cancer is still mainly focused on biological investigations and treatment in Taiwan; however, women who undergo a series of treatments are at high risk of emotional suffering because of uncertainty about the disease, the future prognosis, and deteriorating body image if having a mastectomy. There is limited understanding about influence of what personal stories related to breast cancer means to patients. Personal stories may provide illustrative examples of others' experiences and might be seen as a useful way to catharsis their inner emotional suffering and facilitate information communication about health and illness.

Objective To construct a comic of a narrative story of experiencing breast cancer. To explore the issues and meanings through which women relate their symptoms, treatments and effects as perceived by women with early-stage breast cancer.

Method Interviews with 30 breast cancer survivors were conducted and transcriptions of the interviews were analyzed using a thematic narrative approach. Then based on the thematic narrative and what a woman narrative her breast cancer journey, thus the comic story was designed and built by IT engineers and computer graphics designers.

Results and Conclusion Eight themes like: a lump was found, confirming medical diagnosis, uncertainty waiting, life-threatening, a desire of living, be brave to face treatment and take treatments, the choice of a breast surgery, and reborn was retrieving and filtering a comic personal story called. The comic story of "a woman's voice" is belonged to an important domain put in "The Adventures of Breast Country" website, which is expected be a useful way of supportive cancer care for women with early-stage breast cancer, and to assist patients in discovering ways to live with breast cancer as a more positive way instead of a death sentence.

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Sport and Rural Women's Health in Canada: A National Ethnographic Photovoice Exploration of Curling

Background: Sport and recreation play important roles in rural life in Canada. Yet, rural women have few opportunities to experience the social and health benefits of sport and recreation.

Purpose: 1) Explore effects of curling on the health and community life of rural women; 2) Determine how health, sport, and recreation can be understood within the contexts of rural gender and community change; and 3) Utilize photovoice, an innovative, participatory qualitative research method, to work with rural women in expressing their perspectives.

Methodology: Rural ethnography, in its exploration of ways in which the world is experienced and understood in the everyday lives of people, acknowledges the centrality of gender, power, process, and complexity in rural life. Photovoice, with its novel use of photographs and oral and written methods, elicits rich data about rural contexts and social and health-related experiences.

Sample and Setting: Fifty-two women and girls, ranging in age from 12 to 75 years with an average age range of 50-60 years, in seven rural communities in Nova Scotia, Manitoba, Ontario, and the Northwest Territories participated in the study.

Results: Study participants took 955 photographs, recorded in 52 log books, and participated in two group interviews. Results reveal that curling enhances physical and mental health and resiliency, facilitates vital social and community connections, and provides a valued and visible way for women to support rural community life. Photovoice was revealed as a significant enhancement to this research. Narrative and pictorial data will illustrate these findings.

Conclusions: This research significantly enhances understanding of how gender and recreation intersect to influence rural women's health, social capital, rural community change, and community development and sustainability. Photovoice methodology enriched recruitment, data collection, analysis, and dissemination activities. Further research is needed to enhance substantive and methodological understandings in other rural settings.

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Knowledge about Sexual Transmitted Diseases/Aids and Sexual Practices of Adolescents from Recife City – Brazil

Aiming to identify adoption of prevention actions against sexually transmissible diseases and acquired immune deficiency syndrome, on sexual practice of students of Basic II or Medium Scholarship from public schools at Recife city, Pernambuco, Brazil, a descriptive, cross sectional study with qualitative and quantitative approach was performed, including 1.235 adolescents. After estimating sample size by Sample X software, a stratified, randomized by schools localization and size at North and South city Regions, sample was adopted to investigate: prevention of STD/Aids, sexual life, as well as oral and anal sex. Data were analyzed by SPSS software version 13.0, using Chi-square and exact Fisher tests, at significance level of 0.05. Sexual practices beginning predominated at 13 to 16 years old, with condom use and four or more partners, associating vaginal sex to oral sex, without oral ejaculation, practiced sometimes, mainly by boys, and more rarely, to anal intercourse. About 85% of adolescents heard about STD, but 15.1% enunciated its correct concept. Concerning instructors, teachers oriented about STD/Aids and safe sex, friends about safe sex, and health professionals, about STD/Aids. Heterosexual orientation predominated. Among boys, homosexuality, beginning of precocious sexual life and four or more partners were more frequent; and, among girls, condom use and unique partner. Only adolescents aging 17 to 19 years presented: more frequent sexual life beginning, lesser condom use and greater number of partners. Conclusion: The education for the sexual life must be directed more to change behaviors than to simply give informations.

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**Transgenerationality Pregnancy in Adolescence:
A Reality College Hospital**

The study aims to discuss the context of the environment and ways of life of women who were teenage mothers and their mothers teenage daughters. This is a descriptive study with a qualitative approach, using the life history method. As subjects had three postpartum adolescents and their mothers who were adolescent mothers. The scenario was the rooming of a federal university hospital in Rio de Janeiro, Brazil. Data collection occurred between the months of May and June 2013 with a single research question. The statements were based on analysis of data ethnonursing with the construction of four major themes: Violence, Impact of Pregnancy, Pregnancy and Changes to Standards of Behavior. It is essential to know the culture of the subjects who use the health services by accessing the interpretation of the meaning of care and experience of diverse cultural groups, so that it is possible rapprochement between the professional and the person being cared for. The study showed screen the challenge of promoting a comprehensive health care for women and teens. And therefore, it is necessary that professionals recognize and understand the process by which these teenage mothers go through and experience and value the mothers who feel these teenage girls who have just given birth. Only when we seek to know the context in which mothers and daughters are inserted and sociocultural factors that influence your lifestyle, we can provide nursing care in a culturally consistent with their reality in order to assist them in preventing a pregnancy unplanned and the emergence of problems and questions. As professionals committed to the human

being in its entirety, we have a responsibility to broaden reflections that generate new ways of thinking, new attitudes and practices related to the care provided to these women, as well as appropriate public policies.

Anil Mandal

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**Diagnosis and Men-percent of Diabetes and Relationship
of d-Glucose to Preservation of Kidney Function**

Cheryl Mele

Professor, Drexel University and Pediatric Nurse Practitioner at
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**Pharmacogenomics and Individualized Drug Therapy in
Pediatrics**

In the era of advancements of healthcare, particularly in the area of genetics, personalized medicine denotes a promising opportunity for optimizing patient's outcomes and improving quality of life. The trial and error approach to prescribing medication currently used in practice is costly, puts patients at risk for adverse drug reactions, and poor drug responses. One of the current implementations to a personal approach to medication choice for our pediatric patients that allows for greater precision is pharmacogenomics. Pharmacogenomics is a useful means to determine individual differences in efficacy and toxicity of prescribed medications in pediatrics that result from identified inherited genetic variations in drug metabolism.

The presentation will provide an introduction to pharmacogenomics and the various genes that affect drug interactions in the most commonly drugs prescribed in the pediatric realm. Pertinent terminology for comprehending the practice of and topics surrounding medication choice by one's genome will be outlined. Additionally, various genetic tests and implications of screening a child's genome before prescribing medication will be explored. Future perspectives and ethical considerations in pediatric pharmacogenomics research will also be addressed.

Sally Michael

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When in Doubt, Feed! Encouraging Longer Term Breastfeeding

The WHO would like infants to be exclusively breastfed for 6 months and then have continued breastfeeding with other foods until 2 years and beyond. In Australia in 2010, 96% of women initiate breastfeeding! by 3 months, 39% exclusively bf, 15% at 5 months. 28% are having some breast milk at 12 months and only 5% at 2 years.

In Greece, JPaedGastroenterolNutr 2006 Sept reports exclusive breastfeeding at 40 days is 35% and any breastfeeding is 55%. In the UK, 17% of babies are exclusively breastfed at 3 months.

Many health professionals encourage the use of bottles, just in case, feeding to a schedule, not feeding at night. The general population also make disparaging remarks about breastfeeding, discouraging mothers to "breastfeed anytime, anywhere". Breastfeeding, while ostensibly encouraged, is "not meant to be seen".

Breastfeeding is the norm for babies and young children. Babies who are not breastfed have much higher rates of illness, especially GIT and respiratory disorder.

It is not valued economically or environmentally ADD Advertising agencies promote artificial baby milk in Australia for toddlers, in some parts of the world for infants. Governments seem loth to stop this advertising, and breastfeeding is barely promoted.

Medical students and general nurses are given very limited breastfeeding education, midwives more but also limited.

Many studies show detailed benefits of breastfeeding or disadvantages of not breastfeeding. Almost everyone knows it is the best way to feed a baby, less appreciate the advantages for toddlers. However, most women stop breastfeeding early.

If nurses were more aware, they would be more sympathetic and encouraging if a breastfeeding mother is hospitalised, for example.

More awareness in the vast community of nursing could make a difference and increase breastfeeding rates.

The title, "when in doubt, feed" means just that. Don't look at a clock or say "I've just fed" or worse still, "haven't you just fed?".

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**Development and Monitoring the Key Performance Index
of the Quality of Care for Patients with Cleft Lip/Palate in
Srinagarind Hospital**

Background: The Northeast of Thailand has patients with cleft lips and cleft palates about 2.49/1,000 newborn each year. Cleft lips and cleft palates can affect patients and families both physically and mentally. It takes long-term care and medical treatment starting from newborn until 19 years old. The process for cleft lip and palate care, requires continuity of care involving a multidisciplinary team; Nurses who work continuously and closely with the patients need to have ability to support patients needs by using nursing process. The informatics technology key performance indicator will help nurses to measure the quality of nursing care quicker and easier. **Objectives:** 1) to create the key performance index 2) to develop the index system by using information technology. **Material and Method:** This study is an action research divided into 3 phases Phase1 Situation review: In this phase we review by semi-structure interview nurses and parents of patients with cleft lip and cleft palate about outcome of care and thing they most concern. This phase study from October-December 2013 Phase2 To set the key performance index, announcement and implementation. This phase study from January-February 2014 Phase 3 Evaluation: study from March-June 2014. Content analysis and percentage were used in this study. **Result:** There were nine Nursing Department engaging in this study. Thirty-one key performance indexes were established and the research has been recording continuously for 4 months. There were sixteen key performance indexes which performed accomplishable. **Conclusion:** The study shown that

the key performance index were covered nine Department of Nursing Division in Srinagarind Hospital, applying thirty-one key performance indexes and it is found that sixteen key performance indexes has feasible implemented. The key performance indexes will be develop including improving the software to record the data and also analyzing automatically.

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Comparing Nursing Care Approaches on Health Outcomes and Quality of Life for People Living with HIV Infection in Kasarani Kenya

HIV/AIDS, a global health challenge, affects 1.2 million Kenyans. Antiretroviral therapy (ART) significantly reduces deaths, provided HIV patients remain in care and adhere to ART regimens. This study's objective was to investigate the impact of two different nursing care models (sponsoring a Peer Social Support group (N=103) or providing a comprehensive approach to treatment [N=90]) on weight, CD4 counts, Quality of Life, and retention among HIV infected people in Kasarani Kenya.

Peer Social Support group subjects met one a month, and shared their concerns about the disease process and their ways of coping. The Comprehensive Clinic Care group received all their care in one place. Nurses in the Peer Social Support group (PSS) gave health talks, provided group counseling, helped with life coping skills, handling domestic violence, and how to run small businesses. In the Comprehensive Clinic Center (CCC), clients were assessed, weighed, screened for comorbidities, provided with refills of medications, and given individual counselling related to their needs.

The CCC group had significantly higher means for 3 outcomes: physical quality of life, mental quality of life, and weight. The PSS group had significantly higher CD4 counts than those in CCC. Retention in treatment did not differ by group. While CCC appeared to have an advantage, both nursing approaches resulted in improved health outcomes. For example, mean score for PCS and MCS for CCC group were 52.5 and 51.4, while for SS group were 49.5 and 47.7, which were equal or better than those reported by previous researchers. Both approaches met holistic needs of patients and provided care that fostered continued treatment. In addition, both groups are consistent with WHO recommendations that health care providers deliver ART services in a flexible manner depending on the community they serve and according to the needs of the people with HIV infection.

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Evaluation of the Hypoglycaemic, Hypolipidemic and Antioxidant, Properties of a Cameroonian Polyherbal Formulation on Diabetic Rats

Diabetes mellitus (DM) is a group of metabolic diseases characterized by chronic hyperglycemia resulting from defects in insulin metabolism. This hyperglycaemia generates dyslipidemia and the production of reactive oxygen species (ROS), which can induce many complications in diabetes mellitus. The aim of this study was to investigate the hypoglycaemic, hypolipidemic and antioxidant properties of the mixture of extract from *Spilanthes africana* DC, *Portulaca oleracea* linx et *Sida rhombifolia* linx (1:1:1) on streptozotocin induced diabetic rats. We gave *per os* and during 21 days to five different groups of five rats each different doses of the mixture (50, 100, 200 mg/kg of body weight), normal (non diabetic) and diabetic control groups received distilled water. Parameters such as glycemia, lipid profile, total antioxidant status (TAOS), total protein, malondialdehyde (MDA), glutathione, as well as aspartate amino transferase (ASAT), alanine amino transferase (ALAT) and creatinin have been measured using standard recommended methods. The extract mixture significantly ($p < 0,05$) decreased in the dose dependent manner the levels of glycaemia, total and LDL cholesterol, triglycerides, MDA, ASAT, ALAT, creatinin of the treated groups .compared to the diabetic control. An increase of the concentration of HDL cholesterol, total protein, glutathione and TAOS was observed in the treated groups. The mixture of the extracts had a scavenging effect on DPPH and OH radicals. In conclusion, these results suggest that this mixture has

hypoglycemic, antioxidant and hypolipidemic properties and can be used for the management of diabetes mellitus.

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How to Recruit and Retain the Next Generation of Nurses in the UK: Young Peoples' Views on the Image of Nursing

Nursing in the UK has been shaped over the past century to promote a respected, worthwhile and aspirational career. Despite this ideal, the number of nurses and midwives working within the NHS has fallen by almost 6000 in two years (Health and Social Care Information Centre 2012) and furthermore, the profession has not addressed the predicted shortfall of school leavers in planning its recruitment strategies (RCN 2010).

Against the backdrop of a current nursing recruitment crisis and the continuing ramifications of the Francis report (2013) highlighting poor standards of care, this paper explores how the next generation of potential nurses view the profession and if nursing is something that they would consider as a career option.

The findings are presented from a study completed in 2013 which involved qualitative in-depth interviews with 40 young people in the West Midlands region of the UK.

Findings suggest that nursing continues to be viewed in stereotypical terms as a vocation, lacking status as a profession and unappealing as a career. Although nursing appears to be respected, evidenced in expressions of 'moral worth' in society, it is not perceived to be seen as producing the expected outcomes of financial reward, status and social credibility that young people are striving for. There was an apparent lack of knowledge and understanding of nursing roles, educational requirements and opportunities available within nursing, with few current terms of reference that could be drawn upon. Credible information was unavailable within the formal career advice sources that were accessible to these young people, with parents and family seen to have the biggest influence on perceptions of careers. Pupils who identified nurses within their families portrayed a negative image of nursing to participants which affected their decision not to consider nursing as a potential career option.

Conclusions suggest that collaborative strategies need to be formulated urgently to promote a realistic and informative image of the nursing profession to the next generation of potential nurses.

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&

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The Role of Physiotherapist and Nurse in a Complex Balneotherapy

Objective: Rheumatic diseases are the most common reasons of partial disability and the fourth leading reason of the full disability. The rheumatoid arthritis (RA) is a chronic autoimmune disease characterized by synovium inflammation with subsequent joints harming. The complex RA treatment has several objectives - symptomatic relief, suppression of active inflammation, prevention of tissue damage, improvement of physical function, self-reliance, and improvement of the quality of life. The integral part of the therapeutic approach to patients with chronic musculoskeletal disease is a spa treatment.. Physiotherapy is an integral part of RA complex treatment, and it participates in preventive measures with patients in the initial stage of disease without major disability, as well as it is a part of training with replacement movement patterns in patients with severe deformity and joint destruction.

The aim of the present work: The main objective of this work is the assessment of spa therapy effects on patients' quality of life with rheumatoid arthritis. 1. Based on the SF-36 questionnaire find out the changes of quality of life evaluation with RA patients who passed spa treatment. 2. Compare the results in quality of life assessment with men and women before and after the spa treatment.

Material and Methods: The investigation was created with 40 participants. The female and male ratio was balanced in the group 20: 20. The average age was in our complete investigated group 61.95. Patients diagnosed with rheumatoid arthritis completed Jáchymov Spa treatment with 21-day length. For the quality life assessment we used SF - 36 questionnaire, which assesses 8 domains.

Results and Conclusion: The quality of life index in the whole group of patients after completing the spa treatment reached higher values as before the spa treatment. Men gained in the quality of life evaluation better results both before and after the spa treatment completion in comparison with women. The result index of the quality of life with men before spa treatment was 51.6, and after the spa treatment was 63.1. With women was the result index of quality of life before spa treatment 48.7 and after the spa treatment it reached 60.4. This complex

care has proven effect on patients' quality of life that undergoes the spa treatment. Spa treatment positively affects the quality of life of patients with rheumatoid arthritis.

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**Educational Partnership Working in Nursing:
A Case Study in Social Capital**

Collaborative partnership working would appear to be highly valued by Higher Education Institutions in the United Kingdom. This paper is about one such educational partnership. It focuses on partnership working between one School of Nursing located within a University and the National Health Service (NHS) to deliver the practice learning elements of the nursing curriculum. Such partnership arrangements are historically quite young and worthy of investigation. There have been many iterations of the nursing curriculum in the UK but the central tenet that delivery is based on partnership remains. The aim of the study was to explore the experience of both academic and practice staff engaged in the partnership. The following questions were posed. How does such a partnership manifest itself? What are the structural relationships? What are the motivating factors for participants? What capabilities are required to work in this way? What are the benefits and risks for participants and organizations? What determines success? The literature yielded perspectives on both the concept and operation of partnerships. A case study of one partnership was undertaken. Data were collected through a qualitative research process underpinned by social phenomenology, including documentary analysis and semi structured interviews with staff. Data were analysed using a framework based on the work of Hycner (1999). A theoretical framework of social capital influenced the analysis. Findings illustrated elements of partnership working. The strongest of these were; partnership as a means of production, the importance of structured activity, equality, ambiguity of benefits, organizational advantage, leadership and professional imperative. Furthermore the following aspects of social capital were seen as relevant; trustworthiness, information, obligations, norms, networks and formal and informal relationships. The results add to nurse educators understanding of these partnerships and for partnership in the social sector more generally. A set of "lessons learned" was constructed and areas for future research identified.

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&

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Individual Breast Cancer Risk Factors and Regular Mammography Use in Women who has been Living in a City Center of West Anatolia: Retrospective Cohort Study

Background:Regular mammography screening is important early diagnosis of breast cancer. Most women are not maintaining regular mammography use over time. Little is know about why women do not maintain regular screening schedules.

The aim of this study is to assess the relationship between regular mammography use and breast cancer risk factors in women who has been living in a city center of West Anatolia in the retrospective cohort study.

Method:The recording results of the women (n=14027) applying to Early-Diagnosis, Screening and Education Center for Cancer for breast cancer screening in between the years of 2004-2011 were evaluated. The data were analysed with SPSS 22.0 statistical software, and relationships between the variables were evaluated by chi-square test, Kruskal Wallis. Logistic regression analyses was used to identify the relationship between regular mammography screening (get screening mammography every 2 years) behavior and breast cancer risk factors. The study was approved by an institutional review board.

Results:The participants ranged in age from 21 to 87 years with a mean age of 50.50 (SD: 8.17) years. A majority of women had primary school education (74.3%), early menarche (%74.5), (before age 12 years). Among all participants, 6.7 percent were non-breastfeeding women, 27.5 percent had used oral contraceptives and 12.7 percent of womens had family history of breast cancer. There is a significant relationship between regular use of mammography and age, education, working stituation. The breast cancer family history, hormone replacement therapy, menopause status, parity, and gynecological disorders was related to with getting a regular mammogram($p<0.001$). Logistic regression analyses revealed that predictors of a regular mammogram were age, education, parity, family history of breast cancer. Especially family history was an important indicator of regular mammography use (OR=1.617, 95% CI:1.38-1.89).

Conclusions: Results showed that mammography use was high among women with a family breast cancer history. Strategies to improve recent regulary mammography use should include assessment

of family breast cancer history, education reflecting currently recognized breast cancer risk factors, and discussion of the benefits of detecting breast cancer early through mammography screening.

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Evaluating the Results of Education with the Demonstration Method Given Patients with Copd Intended for the Use of Metered-Dose Inhaler

INTRODUCTION: Using a metered dose inhaler is very hard for COPD patients. The nursing role is to develop and reinforce the usage of MDI with repetitive education.

OBJECTIVE: This study was carried out to assess the effectiveness of the education given to the patients with COPD intended for the use of metered-dose inhaler.

METHOD: The research was performed with a hundred patients who are quasi-experimental control group with using pre-test and post-test. The sample size for the study was arranged with a total of 76 patients with COPD including 38 patients for experimental and control group as a result of the power analysis which has 95% of test power and 0.05 error levels. Despite of the withdrawal from studies 50 patients were assigned to each group in this study. The first and the second group of 50 patients were respectively included the control the intervention group. The research data was collected with face to face interviews by using the 'Patient Identification Form' and 'MDI Skill Evaluation Form'. The data were evaluated by being used chi-square percentile, mean and t-test.

FINDINGS: At the first measurement, the success of using MDI was at 'medium level' both control group (5.30 ± 1.69) and intervention group (5.32 ± 1.83). The average test scores at the first measurement have no significant difference between the groups, but it was significantly determined that the difference of 7th measurement among the mean scores was high in favor of the intervention group ($p < 0.001$). When the group's achievement levels of MDI use in the 7th measurement were compared, it was determined that the control group was at 'medium level' (5.64 ± 1.66) although the initiative group was 'good level' (8.60 ± 1.63).

Conclusion: Repetitive education in order to develop the skill of MDI use through demonstration had a positive effect to increase the skill of MDI use.

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&

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Factors Affecting the Unionization According to the Unionized Female Nurses: A Case Study of Public Hospital in Turkey

INTRODUCTION: Unions are one of the most important instruments, striving to help nurses --as in other workers-- in their struggle against difficulties, as well as defending the rights of nurses in their working- and social-lives. This fighting tool has a strong experience historically and has widespread effects on the working-lives and daily- or family-lives of nurses positively, as well as the care given by these nurses to patients and individuals. Unionization among nurses is decreasing in many countries rapidly, and it's almost nonexistent in the nurses working in the private sector in Turkey. However, it is increasing among nurses working in public sector in the last decade in Turkey. **PURPOSE:** This study was to determine the individual, social, working-life related factors affecting the unionization of the nurses who are members of any union and working in a State Hospital in a province in Turkey. **METHOD:** The population of the descriptive study consisted of the unionized (n=278) nurses working (N=348) in the Ordu State Hospital in the Province of Ordu, located in the Black Sea region of Turkey. Seventy-nine percent of nurses (n=275) are unionized in three unions such as Saglik-Sen, Turk Saglik-Sen and The Trade Union of Public Employees in Health and Social Services in January 2015. Sample of study are thirty one female nurses who accepted to participate in the study. A semi-structured questionnaire was developed based on the literatures with open and closed-ended questions on the socio-demographic and working-life characteristics of nurses, as well as the factors affecting their unionization. Three different groups were created from members of three different unions. Data were collected between 30 February and 28 March 2015, through the focus group discussions to be held once with each focus group. The interviews were recorded in a voice recorder with the permission of the nurses. The data will be analyzed through thematic content analysis.

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Impact of Specific Processing of Rice on Postprandial Glycemic and Insulinemic Responses in Individuals with Type 2 Diabetes Mellitus

Background: The present study aimed to understand the impact of food processing on the postprandial glycemic and insulinemic response in individuals with type 2 diabetes, using Glycemic Index_{food} (GI_{food}). Postprandial impact of test food is compared on equi quantity basis with standard food bread giving Glycemic Bread Equivalents (GBE).

Materials and Method: Blood samples of enrolled type 2 diabetic subjects without any other clinical complication and paired clinically healthy adults were collected at fasting, 30, 60, 90 and 120 min post consumption of selected quantity of standard (white bread) or test food (Boiled Rice [BR] and Rice Puff [RP]) on different occasions and their blood glucose and insulin was recorded. The incremental area under the curve (IAUC), GI_{food} and Insulinemic Index_{food} value were calculated. The results are expressed in Mean \pm SE and statistical analysis was performed using students paired *t* test.

Results: In the diabetic group, peak glycemic response of BR was significantly lower than both RP ($p < 0.005$) and white bread ($p < 0.05$). Similarly the glycemic IAUC for BR was also significantly lower than both RP ($p = 0.017$) and bread ($p = 0.012$). The insulinemic response (both peak response and IAUC) for BR was seen to be lower than RP and bread but was statistically insignificant. This could be attributed to the diminished insulin status observed in the diabetic group. In the normal group, no significant differences were observed between the glycemic responses of BR and RP, however, both peak and IAUC insulin response was significantly lower for BR as compared to RP ($p = 0.05$).

Conclusion: The study clearly shows that selected processing of rice increases its glycemic and insulinemic impact. Apart from the food composition, other factors such as structure or physical form of food also contribute in the alteration of postprandial responses. Insufficient insulin status coupled with consumption of hyperglycemic foods could be detrimental in case of people with diabetes.

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**Coping, Perceived Stress, Eating Patterns, and Sleep
Characteristics (CoPES) of Undergraduate Nursing and
Medical Laboratory Science Students in their Final
Practicum Experience**

Clinical education experiences are an integral component of undergraduate nursing (BScN) and other health profession educational programs in Ontario, Canada. The majority of clinical education experiences in undergraduate nursing typically involve students attending clinical placements on weekdays (between Monday and Friday) and usually for morning or afternoon shifts. Few nursing or other health professions students experience shift work and full-time practicum hours until they are in their final year of an undergraduate health professional degree. Although the benefits of clinical practice provide students the opportunity to apply knowledge as well as develop skills in their respective field of study, clinical practice can also be a great source of stress. Higher perceived stress levels have been associated with poor sleep quality, anxiety and depressive symptoms, irritability, attention and concentration difficulties, poor academic performance, and disordered eating. While some attention has begun to focus on these factors as they affect the health and practice of nurses, we have virtually no insight into the experiences of nursing students in their final practicum experience. Given the important implications of perceived stress and how it relates to eating patterns, sleep disturbances, self-efficacy, and coping mechanisms in undergraduate nursing and other health professions students in their final practicum, targeted interventions are warranted. However, before targeted interventions can be developed and tested with rigorous evaluative methods, an important first step is to create a snapshot of these patterns to gain insight into how they may interrelate. A cross-sectional study was undertaken to describe the coping mechanisms, perceived stress, eating behaviours, and sleep quality of 4th year undergraduate nursing (Collaborative BScN and Collaborative RPN-to-BScN) and Medical

Laboratory Science (MLS) students in their final year practicum placements. Findings and implications for future research will be discussed.

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&

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Development of Managerial Competencies of Nurses through Continuing Education Services

The development of managerial competencies of nurses through continuing education services requires institutional investment, services and actions to the needs of their managerial performance in work schedule. The purpose of this study is to develop a guideline for continuing education services in order to contribute with the development of managerial competencies, with members of the Center of Nursing Continuing Education of Paraná, Brazil (NEEP/PR). Qualitative approach by the method of action research with 16 nurses who were effective members of NEEP/PR. Data collection occurred in 2013, in three stages. Stage One was carried out to develop a concept map and semi-structured interviews were conducted, which provided a situational diagnostic and a summary report. Stage Two consisted of a seminar discussion. During Stage Three, three workshops on planning were conducted in order to achieve the collective development of the guideline. Data were analyzed according to the content analysis technique. From the categories, it was possible to discuss: demands of leadership and continuing education; difficulties when developing nurses' managerial competencies in hospital; challenge of structuring collectively a guideline; process of thinking over the challenges of its implementation. Action research has placed itself as an opportunity for reflection on the reality of the nurses' management processes, as long as it has facilitated the mobilization of the nurses' knowledge about this issue. It also enabled the development of a consensus guideline. The need of changes in the educational process and its evaluation, based on methodologies and tools for the development of professionals according to human resources policies and contemporary organizations was outlined. National and international policies in education and health must be the foundation of such programs. It is concluded that it is possible to develop a guideline for the development of nurses' managerial competencies within the logic of continuing education.

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Organelles Stress and Their Crosstalk within Diabetic Myocardium

Diabetes-associated cardiovascular dysfunction is characterized by homeostasis perturbation induced by systemic stressors, such as hyperglycemia, excess of ROS/RNS, shear-stress, and inflammatory environment. The recent data highlight the aggravating effect of local, organelles-related stress, manifest in mitochondria, endoplasmic reticulum (ER), lysosomes, proteasomes, inflammasomes. The occurrence of local stress might allow its alleviation inside the cell, at organelles level, a novel strategy potentially more efficient compared to current systemic therapeutic approaches. The aim of this disclosure is to link morphological evidence on organelles stress in diabetic coronary endothelium and cardiomyocytes (CMs) to the newly identified molecules/mechanisms beyond it. The issues examined are: (i) the oxidative stress linked to mitochondria dysfunction, as illustrated by the dynamic shape changes ensuing fusion or fission, generating elongated mitochondria or smaller size individual organelles, respectively; the opposing effects of fusion proteins (Mfn1, Mfn2, OPA-1) and fission proteins (Drp1, Fis1) are highlighted; (ii) the mitochondrial turnover, compromised autophagy (mitophagy), and inadequate mitochondrogenesis; the PINK1 recruitment of Parkin is underlined as key event; (iii) the molecular dialogue between mitochondria and cell nucleus, the lipid transport at mitochondrial membrane contact sites with sarcoplasmic reticulum (SR)/ER, lipid droplets (in myocardial steatosis), and peroxysomes; (iv) the SR/ER stress activation (related to fibrosis) and the functional crosstalk between fibroblasts and inflammatory cells within diabetic myocardium (by mechanisms involving released cytokines and growth factors). At the horizon, targeting mitochondrial dynamics mediators, deciphering the defects in mitochondrial cell signaling control, understanding mitochondria retrograde signaling, and manipulation of SR/ER stress-associated lipid droplets formation may conduct to novel drugs aimed to preserve CMs viability and to alleviate diabetes-induced cardiac damage.

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**Clinical outcomes of Primary Palatoplasty in Preschool-
aged Cleft Palate Children in Srinagarind Hospital:
Quality of Life**

Background: Cleft lips and cleft palates are common congenital anomalies, which affects facial appearance, speech, hearing, teeth alignment and other structures. Craniofacial anomalies and speech disorders are crucial problems in the preschool-aged children (5-6 years old), when they start attending school and become more engaged in the community. This condition, which differentiates them from other students, can lead to teasing or mocking which can cause low-self esteem, an inferiority complex, and foster bad relationships with friends. Missing class in order to receive treatment and other additional care can impact a student's learning, development and overall quality of life.

Objective: The purpose of this research was to study the quality of life in preschool-aged cleft palate children and satisfaction with their level of speech.

Material and Method: This was a retrospective, descriptive study. The data was collected by reviewing medical records of patients with cleft lip and cleft palate aged 5-6 years old who underwent operation and treatment with the Tawanchai Center at Srinagarind Hospital. There were 39 patients in this study. Data collection was conducted for 5 months (June to October, 2013). The research instruments were: 1) General Demographic Questionnaire 2) Quality of Life Questionnaire with 5 Domains and 3) the Satisfaction of Speech Questionnaire. The descriptive statistics, percentages and the standard deviation were analyzed in the present study.

Results: The findings revealed family information pertaining to CLP treatment and the impact it has on consumption, speech training, hearing test, development, dental treatment, communication skills, participation, referral treatment as well as the quality of coordination for advanced treatment. The study revealed that all of the aforementioned criteria were met at a high level. Moreover, the child's sickness had only a moderate impact on family life. In conclusion, the overall satisfaction was at a very high level.

Conclusion: It was concluded that the collaboration of the Tawanchai Cleft Center and the government, as well as with private and non-governmental organizations was exceptional, particularly in regard to providing proper and continuous treatment for patients with cleft lips and/or cleft palate. The findings reflect a good quality of life in the pre-schooled children with cleft lip and cleft palate that received treatment from the Tawanchai Cleft Centre at Srinagarind Hospital. Furthermore, the study showed that the problems associated with the condition, only affected the family's lives at a minimal level.

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&

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Nurse to Nurse Collaboration: How do we do it?

In the last two decades there have been many changes in the healthcare system that have contributed to the development of new models of healthcare delivery such as nurse-led teams. This has resulted in the increased opportunity for enhanced collaboration among registered nurses (RNs). The healthcare literature pertaining to collaboration has predominately been related to interprofessional interactions. There has been limited research of nurse-nurse or intraprofessional collaboration. Since nurses work so closely together in caring for clients it is important to understand how they collaborate. Two research questions were posed for this study: 1) how do nurses collaborate in practice? and 2) what factors influence collaboration among oncology nurses? Utilizing a descriptive exploratory case study method, fourteen oncology registered nurses working in a large Canadian urban cancer center were interviewed via telephone in 2013. Document analysis of RN position descriptions, competencies, and standards of care were also completed. An adapted version of Corser's Model of Collaborative Nurse-Physician Interactions (1998) guided this study. Thematic analysis of both the interviews and documents were conducted resulting in two themes: Art of dancing together and the stumbling block. This presentation will address the findings from the study and the facilitators and barriers to intraprofessional collaboration. Recommendations for practice and research will also be discussed.

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**Usage of Information Technology Systems by
Administrative Staff at a Large College of Nursing in South
Africa**

Background: All South Africans have the right to a basic education, including adult basic education and further education. According to the Bill of Rights of the country's Constitution, the state has an obligation, to progressively make this education available and accessible. South Africa has one of the highest rates of public investment in education in the world and is trying to transform itself into an Information Society.

Purpose: This research reviews the utilisation of Information Communications Technology (ICT) by administrative staff members at the college of Nursing in KwaZulu-Natal (KZNCN), South Africa.

Methodology: A total of 30 administrative staff members were randomly selected to participate in a quantitative descriptive, cross-sectional study. Participants completed a questionnaire that established their demographic data and ICT usage.

Results: A total of 28 administrative staff members (93%) responded. The findings showed low levels of access to ICT equipment, poor access and usage of the online library, reduced use of ICT for administrative functions both in urban and rural nursing colleges.

Conclusion: The study highlights the need for the KZNCN to be on par with higher education institutions globally in the access and usage of ICT.

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The Effects of Peer Learning through Blended Learning on Students' Thinking, Learning Achievement, and Critical Information Retrieval Skills: Evidence from Maternal and Newborn Nursing and Midwifery

The nursing curriculum aims to produce the nursing graduates with analytical thinking, information literacy and nursing knowledge to meet the need of human capital today and the future. Conversely, research findings indicate that student nurses and new graduates have inadequate thinking skills and information retrieval skills. The purpose of this study was to examine the effects of peer learning through blended learning on the level of students' thinking, learning achievement, and critical information retrieval skills. The College Ethics Committees reviewed and approved this study.

The one group pretest posttest design was employed in this study. The purposive participants were 107 third year nursing students who enrolled to the Maternal and Newborn Nursing and Midwifery I in the first semester of 2014. Students studied with the peer learning through blended learning model for 10 weeks. The research instruments were 1) lesson plan on the peer learning through blended learning, 2) the critical information retrieval questionnaire, 3) the thinking questionnaire, and 4) the achievement test questions. The instruments were validated the content validity and reliability. The internal consistency of the 2nd -the 4th tool was .88, .91, and .74 , respectively. The data were analyzed by using descriptive statistics as well as paired sample t-test to compare the results.

The research findings revealed that 1) the critical information retrieval skills scores of the student were significantly different at the 0.05 level, 2) there was no significant difference of the student's level of thinking, and 3) the achievement scores were significantly different at the 0.05 level.

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Perceptions of Menopause and Culture in Rural Villages of Vhembe District Limpopo Province, South Africa

The number of menopausal women all over the world is increasing, especially in the developing countries due to life style changes. Regardless of culture and country of origin, all women all over the world will experience menopause should they live to that point in their lives. However, there is a huge difference in the perception of menopause among individuals and across cultures, due to cultural beliefs and the manner in which they accept and perceive menopause.

The purpose of this study was to explore and describe the participants' perceptions of menopause and culture in rural villages of Vhembe District in Limpopo Province, South Africa. The study was a qualitative and explorative, using phenomenological approach. Purposive sampling was used to select the four villages and to select participants aged 45 years and above for the four focus groups. Data was collected through the focus group interviews guided by one central question which was "Please tell me your perception regarding menopause and culture in the villages" Sample size was determined by data saturation. Tesch's eight steps of qualitative data analysis were used. Measures to ensure trustworthiness and ethical issues were observed. The study findings revealed the following themes: Participants traditional understanding of the concept menopause, God's nature of doing things and cessation of menstruation a normal and natural transition. The recommendations were that interventions were required to empower rural women regarding adequate and reliable knowledge and information on menopause and menopausal issues.

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**Implementing Multi-Sensory Environments (MSE):
A Nursing Interventions for Patients with Dementia and
their Caregivers**

Environmental modification represents an effective approach in decreasing health related risk factors that are common among people with dementia living at home or in hospital settings. The Multisensory Environment (MSE) is a non-pharmacological environmental care modality that has been available for people with dementia for more than 20 years and has been shown to be influential in promoting a sense of well-being and reducing anxiety and agitation in these individuals. The purpose of this presentation is to present an in-depth understanding of how MSE can be used as a nursing intervention for people with dementia and agitation. Specifically, this presentation outlines a protocol for implementing MSE in patient care, as well as describes outcome criteria based on the findings from two empirically-based nursing research studies conducted in the Midwest region of the United States. Important aspects of MSE will also be discussed in terms of nursing education regarding; (1) developing an interpersonal relationship with the patient to determine the patient's multi-sensory preferences, (2) the type of visual, auditory, olfactory and tactile stimuli that are appropriate to use as multi-sensory stimulation for mild, moderate, and severe levels of cognitive impairment, and (3) the importance of staying with the patient to direct and assist their interaction with the MSE equipment.

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Pulmonary Neonatal Morbidity after Elective Cesarean Section Delivery at the UHOG "Mother Geraldine", Tirana, Albania

Background: Rates of cesarean sections before labor increase in many countries and concerns exist because of associated risks with maternal and neonatal morbidity and mortality.

Aim: To compare the respiratory complications in babies delivery by elective cesarean at the UHOG "Mother Geraldine", Tirana, Albania in 2014.

Methods: The study was performed at the UHOG "Mother Geraldine", Tirana, Albania in 2014 with 7095 births. We studied patients that underwent elective cesarean delivery (i.e., before the onset of labor and without any recognized indications for delivery before 39 weeks, but after 37 weeks of gestation). We analysed pulmonary neonatal outcome (the need for resuscitation in the delivery room, RDS, TTN) regarding the mode of delivery [CS versus vaginal delivery] and gestational age [<39w (but ≥37 weeks) versus ≥39w].

Results: Were selected 3857 vaginal delivery and 2168 CS delivery [gestational age ≥37 weeks].

There were 1050 patients that underwent elective cesarean delivery. There weren't statistically significant difference for pulmonary neonatal outcome, regarding the mode of delivery (CS versus VD) for the gestational age ≥39w. There were statistically significant difference for pulmonary neonatal outcome regarding the gestational age for CS delivery [CS <39 w (but ≥ 37 w) versus CS ≥ 39 w], the need for resuscitation in the delivery room: [odds ratio= 1.72; 95%CI=1.22-2.42], RDS: [odds ratio= 5.72; 95%CI=1.81-18.1], TTN: [odds ratio= 4.85; 95%CI=2.87-8.19]. There were statistically significant difference for pulmonary neonatal outcome regarding the mode of delivery: CS versus vaginal delivery, for the gestational age: <39 w (but ≥ 37 w), the need for resuscitation in the delivery room: [odds ratio= 1.61; 95%CI=1.31-1.97], RDS: [odds ratio= 2.01; 95%CI=1.47-2.76], TTN: [odds ratio= 2.24; 95%CI=1.13-4.43].

Conclusions: Delivery by elective CS done before the 39 weeks of gestation (but after 37 weeks), increased the rate of pulmonary complications and the need for primary resuscitation in delivery room.

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Exploring the Effects of Structural and Psychological Empowerment on Bachelor of Nursing Students' Academic Engagement

Aim: The purpose of the study was to examine the relationships between structural empowerment, psychological empowerment and student engagement among year 3 baccalaureate nursing students.

Background: Research has linked empowering work conditions to positive employee outcomes; however, there are limited studies examining the effects of structural and psychological empowerment among baccalaureate nursing students.

Methods: A cross-sectional survey design was used to examine the hypothesized relationships. The sample consisted of 209 year 3 baccalaureate nursing students who met the inclusion criteria of being enrolled in the in the 3rd year of the baccalaureate nursing at a large urban academic institution in Canada. Data were collected during a class visit conducted by the School of Health Sciences Research Assistant in the spring semester (April, May) of 2014.

Results: Simple linear regression revealed 33% of the variance in year 3 baccalaureate nursing student academic engagement was explained by structural and psychological empowerment ($R^2=.33$, $p<.01$). Furthermore, a partially mediated model was found in which structural empowerment explained student engagement through psychological empowerment ($\beta=.25$, $p<.05$).

Conclusion: Learning environments which promote structurally empowering structures enhance student engagement. By creating learning environments which facilitate students' access to resources, opportunity, information, and power (structural empowerment), student's psychological empowerment (meaning, confidence, self-determination, and impact), and student engagement can be strengthened.

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The Viewpoints of A Group of Nursing Students on Nursing Informatics

Nursing informatics appeared in consequence of utilization of information technologies on accumulation of specific knowledge of nursing and its utilization in nursing applications. Utilization of information systems to ensure promotion of knowledge in nursing education and applications is extremely important. This study aims to determine thoughts of nursing students on nursing informatics and it is a descriptive research.

The population of the study consisted of 580 students who were studying nursing department in Adnan Menderes University Aydın Health School in the academical year of 2013 and 2014. It was planned to reach 232 students in 95% confidence interval by using sampling method with certain population. But when missing or wrongly filled questionnaires were taken into account, 0.1 pattern effect was calculated and 253 students were reached. Required institution consents and verbal consents from students were taken before the application. The data were gathered by using a questionnaire form prepared by researchers in the direction of literature. This form consisted of 22 questions including students' descriptive features and viewpoints about nursing informatics. The data were evaluated by using SPSS 15.0 and percentage tests, arithmetic mean and chi-square tests were used in analysing the data.

69% of students were female, 30.8% were male, the mean age was 20.81 ± 1.72 . Of the students, 39.5% were in first class, 66.4% had their own computers, 59.7% had internet connection.

Of the students, 37.5% spent their time by using internet for 1-3 hours per day. 89.7% used computer and information technology

sources for their lectures, 92.1% thought that computer and internet use are essential for their professions.

First class students stated them more than other class students that "computer use promotes nursing care quality ($\chi^2=12.542$; $p=0.05$)"; "computer use decreases autonomy of nurses ($\chi^2=24.135$; $p=0.000$); "technology use is necessary in nursing applications ($\chi^2=16.839$; $p=0.010$); and "information technologies must be used in nursing applications and assessments ($\chi^2=13.086$; $p=0.042$)". 4th class nursing students find computer use in health care system insufficient more than other class students ($\chi^2=12.563$; $p=0.051$).

In the direction of the obtained data, it was concluded that classes of nursing students effect their thoughts about nursing informatics.

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Health Improvement Science (HIS): Some Results of Italian Participation in ISTEW (Improvement Science Training for Health Care Workers) European Project

Background/Purpose: The two years project, founded by the European Union, with the final aim to develop shared programs of education for health professionals on "Healthcare Improvement Science" (HIS) in different health care settings, is ongoing. Participating partners are: UK and Scotland, Slovenia, Romania, Poland, Spain and Italy. Collaboration and trust between partners in developing the 12 modules, is the base for the success of the project. Each Country is leader of one or more modules but all participants are involved in all process.

Materials and Methods: a two rounds Delphi study and a Focus Group have been conducted. Different Experts have been involved in respective participating Countries. A shared definition of Health Improvement Science has been accorded and used for the project.

A narrative review of the literature was also carried out using the keywords established within the project. Main database, as well as a free inquiry in general search engines, websites of national scientific societies involved in the HIS have been consulted. In the case of Italy, inclusion criteria were: the literature of the last five years (2009/2013) in Italian language or by Italian Authors.

Results: The items excluded have been 449; those considered where 347. Of these, 39 have been retained and grouped into four areas: organization and organizational appropriateness, patient safety, communication in its various forms (including professionals, with the patients, with family members), training/education of professionals.

Discussion and conclusion: in Italy HIS is considered a generic and not specific theme. The main aim of the majority of studies is not to develop a theory or the application of new methodology. In general, studies focus on specific problems.

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Nurses' Levels of Innovativeness

INTRODUCTION: One needs to be innovative in order to maintain individual, organizational and professional life and orient herself/himself to change. Today, nurses are expected to be both innovative and adopt change while giving service, and to make innovations. For that reason, it is important for nurses to be innovative.

OBJECTIVE: The study has been carried out as a descriptive research in order to determine nurses' levels of innovativeness.

METHODS: The study has been carried out on 273 nurses working in 3 hospitals of Erzurum city center in Turkey who accepted to take part in the research. Ethics committee approval, permissions of institutions have been taken for the study and 'Personal Information Form' and 'Individual Innovativeness Scale' were used for the collection of the data. Collected data have been evaluated by an expert of statistics.

FINDINGS: As a result of the evaluation of the data, nurses have been found to be 26 years old, 83.9% of them are female, 59,3% are single, 50,5% have bachelor's degree and 72,9% have been working as a nurse for 0-5 years. It has been determined that the highest point average in the sub-dimension of nurses' individual innovativeness scale belongs to 'Opinion Leadership' ($M=25.46\pm3.92$), and the lowest point average belongs to the sub-dimension of 'Taking Risks' ($M=16.35\pm2.15$), and the total point average is $M=66.14\pm8.09$. Besides, most of the nurses have been found to be questioning (39,9%) according to the total point average they took from the scale, although they found innovations necessary and useful (88,6%) and evaluate themselves as innovative (51,6%) and open to innovations (75,1%).

CONCLUSIONS: As a result of the study, it has been found out that nurses' levels of innovativeness was not very high and they were 'questioning' about innovations.

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Relative Glycemic and Insulinemic Response of Staple Indian Foods in Type 2 Diabetic Patients

Background: Dietary management of diabetes largely focuses to maintain blood sugar levels close to normal. Rice and Wheat are the most common carbohydrate (CHO) based foods in the staple Indian diet. Rice is classified as a high GI product [GI - 60-110] in comparison with white bread (GI=100) and therefore commonly restricted for a person with diabetes. Unleavened Indian flat bread chapati made from whole wheat flour is favorably consumed by Indians for its higher nutrient density and low GI Value (GI=45.1). GI compares foods on equi-carbohydrate basis. The amount of food that would be needed to provide equal amount of available CHO would vary tremendously. The concept of glycemic index food (GI_{food}) was based on glycemic impact of equi-quantity consumption. The present study compares the glycemic and insulinemic impact, based on GI_{food} of rice and chapatti in diabetic and normal individuals to facilitate the selection of food.

Materials and Method: Blood samples of enrolled type 2 diabetic subjects without any other clinical complication and paired clinically healthy adults were collected at fasting, 30, 60, 90 and 120 min post consumption of selected quantity of standard (white bread) or test food (Boiled Rice [BR] and wheat chapati on different occasions and blood glucose and insulin was recorded. The incremental area under the curve (IAUC), GI_{food} and Insulinemic Index_{food} value were calculated. The results are expressed in Mean \pm SE and statistical analysis was performed using students paired *t* test.

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Exploring the Relationship between Perceived Stress and Academic Achievement among Critical Care Nursing Students in King Saud Ben Abdulaziz University for Health Sciences

The critical care nursing students are more prone to a wide variety of stressors during their academic and clinical experience which may interfere with their learning process. Also despite the growing literature on stress among nursing student internationally, apparently little can be found on the literature highlighting experiences of Saudi student nurses. Therefore, the current study **aimed** to explore the stress level and stressors as perceived by critical care nursing students in King Saud Ben Abdulaziz University for Health Sciences, and to pinpoint the relationship between stress and academic achievement.

Methods: Participants of this descriptive correlation exploratory study was 60 nursing students selected conveniently from the students enrolled in Critical Care Nursing course in the academic year 2013-2014 in King Saud Ben Abdulaziz University for Health Sciences. A self-reported questionnaire namely; "Critical Care Nursing Students' Stress" developed by the researchers after reviewing related literatures was used to explore the relationship between perceived stress and academic achievement among critical care nursing students.

Results: Sixty five percent of the respondents had low stress level compared to only 6.7% had high stress level. Also 68.3% of the studied sample had multiple health problems during the critical care nursing course. The total mean of stress level was 20.40 ± 3.98 , while the mean of perceived stressors was 61.23 ± 17.84 . Finally there was statistical significant difference between the stress level and perceived stressors where $p=0.000$ and there was no significant correlation between students' perceived stressors and their academic achievement.

Conclusion: Critical care nurses students experienced low to moderate stress level with no impact on their academic achievement. Therefore replication of the current study using qualitative design on a longitudinal base to identify their specific stressors and coping strategies related to critical care nursing course.

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Exploring Importance of Professional Attributes of Nurse Students as Prior Indicators of Preparedness for Successful Clinical Education

Introduction

Clinical education provides nursing students with an opportunity to develop the competency and skill sets to function within dynamic and complex settings (Killam & Heerschap, 2013). The unpredicted nature of clinical practice requires students who are well equipped and prepared to face the challenges of clinical learning environment. Little or no researches however addressed the issue of nurse students' professional attributes as elements of readiness for clinical learning experiences.

Objective

1. To identify range of characteristics perceived by faculties' and clinical teaching staffs as important indicators of nurse students' preparedness for clinical education.

Methods

Study design: A cross-sectional approach was used to collecting data for current study.

Setting: This study was conducted at King Saud bin Abdulaziz University for Health Sciences -College of Nursing- Jeddah.

Study sample: Study participants consisted of fifty-four nursing faculties as well as clinical teaching assistants. Convenient sampling technique was used.

Results

The mean range for the different dimensions of students' pre-clinical readiness was 5.92 to 5.65 on the scale of 1 to 7 (1= not important; 7= extremely important). Among which; willingness, professionalism, and personal attributes; had been highly reported as the most important pre-clinical readiness requirements for nursing students.

Results have shown a significant relation between each of years of experience in teaching nursing, academic position and the perception of students' communication and interaction as important prior factor that affect students' clinical success. Faculties and staff members with experience exceeding 31 years showed the highest belief on the important quality of students' communication and interaction exceeding that of others with lesser years of experience. Clinical

teaching assistants hold the point of view as those among people with experience exceeding 31 years.

Perception of knowledge and understanding significantly differed among different nursing specialties. Both medical/surgical and critical care specialties showed the highest belief on the importance of prior knowledge base. A matter that could be attributed to the nature of both subjects.

Conclusion

Willingness, professionalism, and personal attributes; had been highly reported as the most important pre-clinical readiness requirements for nursing students. Consequently, it is recommended that curriculum developers should incorporate and emphasize the development of such traits in students before embarking into their first clinical exposure, as well as to use them to the process of designing new educational curricula.

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Student Nurses' Thinking during Medication Administration

Background: Few studies have focused on the thinking processes of nursing students during medication administration. Nursing students may be focused more on the rules and procedures rather than anticipatory problem solving, concurrent patient teaching, etc. that occurs with practicing nurses.

Methods: This qualitative study examined student nurses' reported thinking during medication administration in a simulated experience involving care of a post-operative patient reporting pain. Forty-eight students from 5 baccalaureate nursing programs participated in a video recorded simulation with a standardized patient. Students independently completed a patient assessment and administered pain medication from a variety of options. Following the simulation, semi-structured debriefing interviews containing 9 open-ended questions were conducted and audiotaped.

Results: Students administered a variety of pain medication during the simulation. Analysis of audiotaped transcriptions revealed six themes including 1) comfort with simulation, 2) safety, 3) limited clinical experience/lack of confidence, 4) need for validation, 5) clinical reasoning, and 6) clinical reflection. Safety was the most predominant theme that emerged from the data.

Conclusion: Students must be able to more fully understand the complexities of decision making around medication administration (e.g., best practice, individual experiences with pain, patient preferences, patient conditions, etc.). Findings will inform faculty relative to curricular design, pedagogy, and evaluation in educating nursing students to become safe and competent nurses.

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Causal Attributions on Ovarian Cancer

Background/Purpose: Family history is the strongest risk factor for ovarian cancer, yet only 5% of women with ovarian cancer have a family history. 95% of women face a diagnosis with no known cause.

Purpose/Aims: Little research has evaluated causal attributions (CA) for ovarian cancer and the impact of CAs on cancer-related distress. This study aims to a) identify the most common CAs for ovarian cancer; and b) explore the influence of CAs on cancer-related distress.

Methods - Design: Ancillary analysis of a cross-sectional national survey study. **Sample:** 676 members of the National Ovarian Cancer Coalition (NOCC) with a history of ovarian cancer. Mean (SD) age was 53.14(11.41) years and women were 56.52(43.49) months since diagnosis. **Setting:** Mailed surveys to NOCC member's homes. **Measures:** Two subscales of the Illness Perception Questionnaire: Emotional (cancer-related distress) and Causal Attributions (CA). The CA subscale included 18 possible causes of ovarian cancer. Women rated *each* cause on a 0 (strongly disagree) to 4 (strongly agree) scale. **Covariates** were assessed using validated instruments: MDASI (Symptom Interference), LOT-R (Optimism), Trait Anxiety (POMS), and Disease, Treatment and Sociodemographic Surveys. **Analysis:** Descriptive analyses followed by multivariate regression to evaluate the influence of CAs on cancer-related distress.

Results: 43.6% (n=302) agreed or strongly agreed that heredity was a cause of their ovarian cancer. The five highest scoring CAs were stress, pollution, heredity, altered immunity, and bad luck. In regression analyses, bad luck and altered immunity were significant independent predictors of cancer-related distress. Trait anxiety, symptom

interference, and age were also significant predictors. CAs and covariates explained 32.5% of the variance in cancer-related distress.

Conclusions & Implications: Women may over-estimate the influence of heredity on ovarian cancer. Further research should explore whether the attribution of bad luck may signify lack of control and put women at risk for higher distress

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Social Disconnection: An Important Factor to Understand in Recruiting Nurses?

Background: Emotional Intelligence (EI) is a potentially useful construct in the investigation of recruitment and retention in nursing. This study examined the construct validity of the Trait Emotional Intelligence Questionnaire Short form (TEIQue-SF) by concurrent use of item response theory and confirmatory factor analysis .

Method: First year undergraduate nursing students completed TEIQue-SF. Responses were analysed by synthesising results of Rasch analysis and confirmatory factor analysis.

Results: 938 participants completed TEIQue-SF (83.7% female, 66% under 26 years). Mean (SD) TEIQue-SF values for females were 5.32 (0.61) and 5.00 (0.73) for males. Rasch analysis showed the majority of the TEIQue-SF items made a unique contribution to the latent trait of emotional intelligence. Five items did not fit the model and differential item functioning (gender) accounted for this misfit. Confirmatory factor analysis revealed a four-factor structure consisting of: self-confidence, empathy, uncertainty and social disconnection. All five misfitting items from the Rasch analysis belonged to the 'social disconnection' factor.

Conclusions: The concurrent use of Rasch and factor analysis allowed for novel interpretation of TEIQue-SF. Much of the response variation in TEIQue-SF can be accounted for by gender bias within the social disconnection factor. Implications for practice are discussed.

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The Quality of Life of the Patients with Rheumatoid Arthritis before and after Balneotherapy

Objective: Rheumatic diseases are the most common reasons of partial disability and the fourth leading reason of the full disability. The rheumatoid arthritis (RA) is a chronic autoimmune disease characterized by synovium inflammation with subsequent joints harming. The complex RA treatment has several objectives - symptomatic relief, suppression of active inflammation, prevention of tissue damage, improvement of physical function, self-reliance, and improvement of the quality of life. The integral part of the therapeutic approach to patients with chronic musculoskeletal disease is a spa treatment.. Physiotherapy is an integral part of RA complex treatment, and it participates in preventive measures with patients in the initial stage of disease without major disability, as well as it is a part of training with replacement movement patterns in patients with severe deformity and joint destruction.

The aim of the present work: The main objective of this work is the assessment of spa therapy effects on patients' quality of life with rheumatoid arthritis. 1. Based on the SF-36 questionnaire find out the changes of quality of life evaluation with RA patients who passed spa treatment. 2. Compare the results in quality of life assessment with men and women before and after the spa treatment.

Material and Methods: The investigation was created with 40 participants. The female and male ratio was balanced in the group 20:20. The average age was in our complete investigated group 61.95. Patients diagnosed with rheumatoid arthritis completed Jáchymov Spa treatment with 21-day length. For the quality life assessment we used SF - 36 questionnaire, which assesses 8 domains.

Results and Conclusion: The quality of life index in the whole group of patients after completing the spa treatment reached higher values as before the spa treatment. Men gained in the quality of life evaluation better results both before and after the spa treatment completion in comparison with women. The result index of the quality of life with men before spa treatment was 51.6, and after the spa treatment was 63.1. With women was the result index of quality of life before spa treatment 48.7 and after the spa treatment it reached 60.4.

This complex care has proven effect on patients' quality of life that undergoes the spa treatment. **Spa treatment positively affects the quality of life of patients with rheumatoid arthritis.**

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Effectiveness of Self-Management Program on Health Beliefs, Health Behaviors, and Health Indicators of Supporting Staffs

The purpose of this quasi-experimental study was to study the effects of Self-management Program on health beliefs, health behaviors and health indicators, which included the body weight, body mass index, waist circumference, fasting blood sugar, and lipid profiles of 40 supporting staffs at the Boromarajonani College of Nursing, Bangkok. All health beliefs, health behaviors and health indicators were measured twice as a baseline at the first and twelfth week. The Self-management Program including eating, exercise, and stress management was implemented for 8 weeks. After that, the participants were reevaluated using the same instrument. Data were analyzed using descriptive statistics and repeated measure one-way ANOVA.

The results showed that the health beliefs and health behaviors at 1 and 5 weeks after the implementation were statistically significantly different higher than at 1 and 12 weeks before the implementation ($p < .001$). The health indicators, including body weight, body mass index and waist circumference after the implementation at 1 week and 5 weeks were significantly lower than those of before the implementation ($p < .01$). Other health indicators, including blood sugar, total cholesterol, and LDL after the implementation at 1 week and 5 weeks were also significantly lower ($p < .01$).

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Coordinating Care and Managing Transitions across the Health-Illness Continuum

The need for coordinating care and managing transitions between outpatient providers and community settings is often overlooked, episodic, and accountability for coordinating care or managing transitions between providers and services, and across settings is lacking. Responding to this gap, the American Academy of Ambulatory Care Nursing (AAACN) convened four expert panels. The objectives for this session are to identify the dimensions of RN care coordination and transition management, describe the associated competencies including knowledge, skills, and attitudes, and discuss strategies to educate nurses and health care providers in support of developing team-based collaborative practice environments that deliver quality and safe care that is person and population centric. The first expert panel completed a systematic review of the evidence related to care coordination and transition management. The second panel identified nine dimensions and associated activities of care coordination and transition management and competencies required to perform each dimension. In this project, the Quality and Safety in Education in Nursing (QSEN) format was used for each care coordination and transition management dimension identified. The third expert panel used the nine dimensions to build a Registered Nurse-Care Coordination and Transition Management Model (RN-CCTM). This expert panel also determined methods to be used to enhance teamwork and interprofessional collaboration in outpatient settings. Nationally recognized core competencies for interprofessional collaborative practice, quality and safety in nursing education (QSEN) competencies, overlap with the dimensions and competencies needed for ambulatory care RN care coordination and transition management. The fourth expert panel wrote a text on core competencies for RNs performing care coordination and transition management in ambulatory care/outpatient settings. Coordinating care and managing transitions across multiple providers and settings requires patient-centered interprofessional collaborative (IPC) practice teams and RNs are ideally positioned to serve in the care coordinator/transition manager role.

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CYR61 as a Factor Involved in the Pathogenesis of Impaired Wound Healing in Type 2 Diabetes Mellitus

Multiple factors are expected to contribute the impaired healing in diabetic patients including alterations in apoptosis by decreasing the number of cells specifically fibroblast that resulted into poor quality of collagen. Specific mechanism for the excessive apoptosis of the fibroblasts during wound healing process in diabetic foot ulcer is not yet fully understood. Hence, to get a better insight for the fibroblast cell apoptosis, it was considered significant to study the intensity of Cysteine-rich 61 (Cyr61) expression, apoptotic signaling molecules Fas and Caspase3, and anti-apoptotic signaling molecule Bcl-2.

For this study 90 subjects were enrolled and evaluated for fasting blood sugar, post prandial blood sugar and Glycated Haemoglobin %, further divided into three groups, 30 controlled diabetic patients without wound(G1); 30 non-diabetic patients having wound (G2) and 30 diabetic patients having impaired wound healing (G3). Biochemical tests were analyzed by Synchron CX5 auto analyzer. Expression of Cyr61, Fas Caspase3 and Bcl-2 at wound site had been studied by immunohistochemical staining method using RTU Vectastain Universal Elite ABC Kit (Vector laboratories) as per the manufacturer's protocol and the intensity of immunoreactivity was evaluated according to a scale of zero no expression, 1 faint, 2 moderate and 3 strong expression.

The fibroblast cells of the group G1 had shown zero expression of caspase3, minimal expression of Fas and Cyr61, and high expression of Bcl-2. Group G2 had shown strong expression of Bcl-2, moderate expression of Cyr61 and minimal expression of Fas and caspase3 in the fibroblast cells. Cyr61 was highly expressed in the fibroblast cells amongst the group G3. Expression Fas and caspase3 were also high in G3, whereas Bcl-2 was very weak.

Thus, the results obtained suggest that in the group G3 fibroblast cells undergo non-regulated apoptosis triggered by Cyr61 and leads to the impaired wound healing.

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The Influential Factors to the Effectiveness of a Non-Computer-Based Multi-Domain Cognitive Training in Improving Cognitive Function, Depression and Quality of Life for Institutionalized Older Residents

Aims. This study explored the influential factors to the effectiveness of a non-computer-based multi-domain cognitive training (NCBMD-CT) in improving cognitive function, depression and quality of life for institutionalized older residents.

Methods. A secondary data analysis using 98 institutionalized older residents from 12 institutions in Taiwan accepted 8-week NCBMD-CT with double-blind assessments at baseline, immediate and 8-week follow-up after training completion executed from February 2012 to April 2013. Twelve centers were randomly assigned into wait-list control, treatment I or treatment II groups. Treatment I and II group underwent 30-minute sessions of NCBMD-CT with twice a week and 5 days per week respectively for 8 weeks. Outcome indicators included global cognitive function (Cognitive Assessment Screening Instrument, CASI), depression (the 15-item Geriatric Depression Scale, GDS15), quality of life (the Short Form 12-item Health Survey, SF12). Demographic data, health status and social support information were used to assess the impacts of these factors to the intervention effectiveness by generalized estimating equations (GEE).

Results. The results indicated: (1) As for the effects of demographic data, health status and social support information, CASI score at baseline and getting sick during the study were significant factors influenced cognitive function. (2) Four identified factors, GDS15 score at baseline, getting sick during the study, had suffered from myocardial infarction, and cerebrovascular disease without sequelae, did influence depression. (3) SF12 score at baseline, getting sick during the study, and frequency of visits of friends and relatives were significant factors influenced quality of life. (4) Getting sick during the study was a significant common factor influenced the effectiveness of NCBMD-CT on 3 outcome indicators.

Conclusions. According to the results, health care personnel should pay more attention to protect older residents from getting sick. It is beneficial to maintain cognitive function, improve depression and

quality of life of institutionalized older residents.

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Prevalence and Prevention of Pressure Ulcer in Acute Care Settings

Background: Pressure ulcers (PUs) are most common problem for hospitalised patients. Several prevalence studies were conducted in many countries. Nothing is known about pressure ulcer prevalence rate in the Arab world in general and in Jordan specifically.

Objective: This study has two main aims. The first one was to determine the prevalence rate of PU in Jordan, and to compare it with the prevalence studies conducted using the same method. The second aim was to measure the adequacy of preventive measures provided to patients who are at risk for developing PUs.

Design: A cross-sectional survey design was used.

Setting and Sample: All inpatients in wards, 18 years and above, in three hospitals in Jordan, with the exception to emergency, day care and maternity wards. A total of 295 patients were included.

Instruments: European Pressure Ulcer Advisory Panel (EPUAP) data collection form.

Methods: Survey carried out by the primary researcher who inspects the skin of each patient included, if PU noted it was classified according EPUAP grading system. The risk status for developing PU was assessed using Braden scale and the use of preventive strategies was also recorded.

Results: Prevalence rate was 16.3% (grade 1 excluded: 8.8%). Grade one was the most common grade of PU (45.8%, n=22). The heels were the most commonly affected sites (48.9%, n=23). Regarding the prevention, only 18.9% of patients in need for prevention actually received proper adequate prevention, and 61% of patients who are at risk of developing PU received no prevention at all.

Conclusion: PUs prevalence rate is lower than published rates in the studies utilised the same methodology. The young age and wellness for the Jordanian sample could be the best explanation. Large percent of risky patients receive no prevention. This should raise the awareness for PU prevention in Jordan, and scrutinizing the provision of prevention guidelines and protocols.

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Reflection as a Student Support Strategy: Do we Know How?

Reflection is widely used to explore experiences that lead to new understandings and appreciation and has become a key component of teaching and learning. Supporting students to use reflective activities as learning activities requires knowledge and skills from the nurse educator.

A quantitative, explorative, descriptive study was conducted in nursing education institutions in South Africa among nurse educators. The nurse educators agreed with the importance of reflective practices in the teaching and learning environment but did not see reflection as a formal learning approach in the programmes they offered. Their inability to create innovative opportunities and develop reflective activities that could serve as student support strategies became evident in the lack of emphasis on creating a teaching and learning environment that will enhance reflection in a non-threatening context. All educators as the facilitators of reflective activities become the link between the student and learning in that they expand student support strategies. Hence, nurse educators should be taught how to facilitate reflective learning activities and how to create an environment conducive to reflection. Activities such as mind mapping, role play, storytelling, critical incidents and experiential learning activities could be used to stimulate reflection. Innovation and creativity in reflective teaching and learning practices could enhance student support and develop critical thinkers and should be a formal teaching and learning approach in nursing curricula.

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Educating Next-Generation Nurses: The Practice-Ready Scholar Practitioner

This presentation will describe how one Canadian University prepares student nurses to lead through the always shifting (r)evolutionary changes in health care and academia. The presenters will provide a narrative from the perspectives of academia and practice describing the experience and success-to-date developing a new and unique practice-based nursing baccalaureate program. The program is a two-year, experiential, second degree University program where students are fully immersed as apprentices in academic practice settings. The program was originally by leading nurses developed by re-thinking the use of current and new resources (time, space, energy, place and money). This innovative program will provide students with unique, rich and diverse learning environments along a continuum of academic health care experiences. Students are embedded full-time in select Academic Health Science Centres (rather than on a University campus), supported by a clinically based faculty and distributed and connected by current learning technologies and systems. The aim of the program is to graduate next-generation nurses; *practice-ready scholar-practitioners*. Graduates learn to be insightful, curious, technology-competent, knowledgeable, courageous leaders who are expected to nurse to the full scope of practice, across the continuum of care; within the shifting and evolving complex health care landscape. To date, two cohorts of students have graduated from this fully accredited program. This program's story has the potential to re-set our thinking and practice of curriculum-making within nursing education in terms of why, how, and where students learn to be nurses.

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&

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Incidence and Predictors of Postoperative Pain in Children Undergoing Outpatient Surgeries in Brazil: A Cohort Prospective

Introduction: Currently, there are few evidences about the risk factors for developing postoperative pain in children submitted to outpatient surgeries. Therefore, this study aims to investigate the incidence, characteristics and predictor factors of postoperative pain in children submitted to outpatient surgeries. **Methods:** The authors evaluated prospectively a cohort of 306 children (189 male and 117 female), within an age range of 5 to 12 years old, ASA<III, after outpatient surgeries (herniorrhaphy, orchiopexy and postectomy), between April/2013 and February/2014. The postoperative pain was assessed by the Revised Face Scale and the Pain Quality Card, in first, fourth and seventh postoperative days, at home, by telephone calls. The incidence of postoperative pain was estimated and presented with IC (95%). The predictor factors were investigated through regression analysis of Cox. The significance for the tests were $p=0.05$. **Results:** The accumulated incidence of postoperative pain was 78.6% (71.6-81.1), of low intensity, frequently described as sore, tugging, burning, pricking and sickening. Since the first day of postoperative surgery the pain's incidence has reduced. The preoperative pain was a risk factor ($HR=3.02$; $p=0.018$) to the report of presence of postoperative pain on the seventh day at home. **Conclusion:** Postoperative pain is still very frequent in children submitted to outpatient surgeries, especially after hospital discharge. The assessment of the pain during the preoperative period can help identify children with major risk of postoperative pain and consequently decrease of unnecessary suffering.

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The Impact of Nurse-to-Nurse Bedside Communication on Patient Satisfaction and Resources Use

Introduction: Ineffective communication among care professionals has been demonstrated to be associated with the occurrence of adverse events, including higher readmission rates and costs. The bedside shift handover is a unique way of nurse-to-nurse communication between shift changes. The main aim is to transfer essential patient information to ensure high quality care as well as to enhance patient satisfaction and empowerment.

Objectives: The aim of this pilot study was to assess the impact of bedside shift handovers on patient and nurse satisfaction, and costs.

Methods: The study was performed at the department of Thoracic, Vascular and Plastic Surgery of Ghent University Hospital, a tertiary care referral centre with 1,062 beds, in Belgium. Bedside shift handovers used the SBAR (Situation Background Assessment Recommendation)- method and was organised in two parts. First, all patients were briefly discussed among staff members (i.e. nurses with morning and evening shift). Second, patients were visited by the individual nurses particularly the nurse who was responsible for a specific patient during the morning shift, provided all necessary information about this patients, bedside to the nurse responsible during the evening shift. Confidential issues were discussed outside the room; inside the room there's a handover with the patient and essential visitors. In this way, privacy is ensured.

Design: A qualitative design including semi-structured interviews was developed of 31 patients and 26 nurses. The semi-structured interviews included questions which were validated (content and face validity) using the Delphi approach.

Results: In total, 31 patients and 26 nurses participated to the survey. Patients mention to feel safer when hearing the kind of information that is shared among nurses being responsible for them. Also nurses mention to feel safer when having seen the patient already at the beginning of their shift, as they feel themselves better and sooner involved in the care process. Participating nurses reported that this type of shift handover is perceived as a more professional way of sharing information. It was estimated that bedside shift handovers could save the hospital ward, (capacity of 31 surgical patients), about 260 hours of nurse working time annually, corresponding to an amount of \$ 7,290. When extrapolating this numbers to the entire hospital this would mean a potential cost saving of about \$ 241,000.

Conclusion: Bedside patient handover among nurses led to increased patient and nurse satisfaction, and potential calculated cost

savings. The results of this study led to practical changes in the organisation of information transfer between nurses. Further research is, however, needed to evaluate the true impact of bedside patient handover.

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What Interactions and Influences Mediate the Development of Key Concepts, Professional Identity, Attitudes and Values amongst Mental Health Student Nurses?

Introduction: This paper describes a small phenomenological research study, which set out to explore the effect of social interaction upon mental health nurse student learning. Central to this study are ideas about Communities of Practice as described by Wenger et al (2014)

Teaching approaches that focus upon individual student learning dominate higher education pedagogy. However, others emphasise the importance of socio-cultural interactions to the development of learning.

Nursing students progress through the university within cohort groups and spend practice time as part of clinical teams and upon qualifying, they will work within a clinical team. Ability to negotiate entry into these social groups is important to the student's development as nurses and arguably, understanding of individual learning is incomplete without considering these social factors.

Objective: This study is a reflective attempt to identify the influence of social learning processes and to begin consideration of how such understanding might influence learning design within nurse education.

Methods: Two focus groups involving a total of six students and four semi-structured interviews were completed with mental health nurse students at various stages of their training. Data were analysed using a process of interpretive phenomenological analysis as described by Smith et al (1999).

Findings: The study found that students understand personal progress by comparison with others and that there is a relationship between peer group membership and learning outcomes. Students interpret academic studies and theoretical knowledge in a dynamic relationship with clinical practice where successful learning depends upon careful negotiation of social boundaries.

Conclusion: Whilst acknowledging study limitations this paper concludes by tentatively suggesting some implications for nurse education practice, which recognises the socially mediated nature of learning.

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Health Care Professionals' Views and Interactions with Cancer Patients who Use Complementary and Alternative Medicine in Taiwan

The majority of cancer patients receive some form of complementary and alternative medicine (CAM), and the demand for CAM is growing among this patient population. This study explored how health care professionals (HCPs) view and interact with people with cancer who use CAM. A qualitative approach was employed to analyze the data from 15 in-depth interviews with HCPs. Data analysis was based on the grounded theory (GT) process, which includes the levels of open, axial, and selective coding. The results showed four categories of interaction between HCPs and cancer patients who use CAM. These were as follows: "personal experiences of using CAM," "outcome determination to use CAM", "family attitude toward CAM" and "the role of CAM in the ward." The core category identified in this study was "respect patient's autonomy to use CAM." In this paper, we discuss the interactions between HCPs and patients who use CAM, and the factors that influence HCPs' views and responses to CAM. The development of skills to enable HCPs to understand patients' perspectives and assess the usefulness of CAM should be encouraged. The implications of our findings may thus benefit nursing education and nursing practice.

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A Study on the Factors Associated with Nurses' Job Rotation Acceptance and Turnover Intention

Background: Nurses play a key role in providing care to patients in hospitals, so developing diversified nursing knowledge and skills to meet patients' needs is important in a competitive healthcare environment. Job rotation system was considered as a method to promote nurses' clinical knowledge and skills, yet it may also have impact on nursing staffs' lives and professional career. Therefore, this study investigated the relations among the willingness of nursing staff to accept job rotation, improvement of knowledge and skills, and their intention to resign.

Materials and Methods: This study was conducted in a medical center in Taiwan from September 1st, 2009 to September 1st, 2012. One hundred and thirty five nurses who had work experience of more than 2 years and had ever joined job rotation program were invited to participate in this study. Statistical methods included descriptive and regression analysis.

Results: A total of 122 (90.4%) nurses filled out the questionnaires. Recognizing the importance of job rotation program ($\beta=0.314$, $p<0.001$) and improvement of knowledge and skills during rotation program ($\beta=0.106$, $p=0.002$) both had positive effects while department support had no significant effect on nursing staffs' willingness to accomplish job rotation. Furthermore, perceived improvement of skills during rotation program ($\beta=-0.209$, $p=0.02$) also shows a negative association with their intention to leave their jobs. In contrast, willingness of nursing staff to accept job rotation and department support had no association with their intention to resign.

Conclusions: The findings suggested that nurses' perception that job rotation can lead to knowledge and skills improvement was more likely to accomplish a successful job rotation program. Based on the framework and evidence results, the study intends to propose a few suggestions for continual research and management practice.

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&

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The Nursing Dean's World: Juggling Professional and Personal Lives

Background: Juggling professional and personal lives is difficult for people in many professions. For deans of nursing, who are mostly female, they must juggle in a unique, complex way. They work in environments where they need to lead and develop their faculties with vision and passion whilst simultaneously being a role model and a good manager of diverse programs. Moreover, they must promote nursing internally to their institution and externally to the broader health and education community. This paper reports how the professional and personal lives of a group of deans exist in their worlds.

Aim: To describe the ways a group of deans of nursing integrate their professional and personal lives in their world.

Method: Oral narratives were gathered from 30 nursing deans in three countries between June 2011 and March 2012. Narratives were transcribed and subject to thematic analysis.

Results: The major themes to emerge from the analysed data were: work demands, dual career partnerships, children come first, obtaining educational qualifications, other professional activities, out of work pleasure activities.

Discussion: The deans tended to have work as the centre of their world with their personal lives floating around and either being interwoven into the web of their work life or sitting side by side. Children, family and recreation are essential.

Conclusion: While accepting that integrating professional and personal life is not easy, if done well it can provide deans of nursing with more emotional strength in their busy world. Health and academic organisations must provide ways to enable better support for nurses in executive roles such as deans.

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Using Action Research to Build a Breast Cancer Surgery Decision Aid Website

BACKGROUND: Patients with early-stage breast cancer have more options to the method of breast surgery method, leading to the same long-term survival rate, but significant differences in appearance, function, cost, recurrence rate and other considerations. However, time for detailed communication is often limited in clinics, putting these women through great psychological stress, hindering their decision-making for surgery.

OBJECTIVE: To develop a multi-purpose breast cancer surgery decision-aide website that provides medical information, psychological healing and decisional training for women in breast cancer surgery decision-making.

METHODS: Using three steps of action research: (1) search, analyze and evaluate health websites to establish consensus and major infrastructure, (2) conduct patient interviews, expert interviews and intensive group discussions to facilitate the reliability, creativity, and availability of the site, (3)gather IT engineers and computer graphics designer to design and build a breast cancer surgery decision aid website to meet the local patient's needs. Softwares including Builder 4.5, Eclipse Java EE IDE for Web Developers, Apache Tomcat 7, and GIMP 2.8 are used.

RESULTS AND CONCLUSION: Through action research, we completed "The Adventures of Breast Country" theme website construction, which includes : (1) Woman's voice - playing a comic animation of a breast cancer woman's story with interspersing questions for users to better empathize with the experience, (2) Cancer Information Database - providing breast cancer surgery-related information through text, tables, pictures and a presentation video with narration, (3) Decision Games - helping the the patients think through and check the pros and cons amongst different surgical options through visual-based interactions via the «Stairs Climbing» and «Fruit of Hope» games, and (4) Related Links - providing reliable sites for further

reference. It is expected that this website could meet patient's and health provider' needs, becoming a practical decision aid for breast cancer patient during surgical decision-making.

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Evaluation of Gender Roles Attitude at Teacher Candidates by Nursing

This study is descriptive and cross-sectional in character and is based on a survey applied to education faculties' elementary school teacher candidates' enrolled at university of Adıyaman aiming to evaluate their attitudes towards gender roles and the factors causing differentiation in these attitudes by women health nursing. The universe as well as the sample of the study consisted of a total 205 fourth year students enrolled at Adıyaman University Department of Elementary Education. As the medium of data collection a questionnaire and a "Gender Roles Attitude Scale" (GRAS) developed by the Zeyneloğlu has been used (Cronbach Alpha Reliability Coefficient 0,92). The questionnaire and the GRAS were applied to fourth students May 16-31 in 2011.

The collected data was processed in SPSS 17 and was analyzed examining levels of means, standard deviation, minimum and maximum values and percentage points utilizing statistical tests like t-test, Anova test. The results of the study reveal egalitarian attitudes among students for the sub-dimensions named "egalitarian gender roles" (the score means of 4th students is 29,05), "female gender roles" (the score means of 4th students is 24,37), "marriage gender roles" (the score means of 4th students is 19,67), "traditional gender roles" (the score means of 4th students is 23,41) and "male gender roles" (the score means of 4th students is 17,24). Average and median GRAS scores of respondent students were found to differ (statistical significance level $p < 0,05$) according to department of faculty, graduate from high school, efficient person for choosing department of students. In general, students are found to have egalitarian attitudes towards gender roles (means GRAS score $113,77 \pm 21,23$ points). Based on the results of the study suggestions for the promotion of egalitarian attitudes towards gender roles were developed.

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&
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The Correlation between Self-Management Skills and Quality of Life among Chinese Community Dwelling Adults with Hypertension

Objective: Elevated blood pressure can lead to serious patient morbidity and mortality. The aim of the study was to evaluate the ability of self-management and quality of life among Chinese community- dwelling adults with hypertension, and to examine the correlation between self-management skills and quality of life.

Method: Convenient sampling was used to recruit a total of 221 hypertension patients from two community hospitals in two districts in Chengdu city, Sichuan province, China. The hypertension patients were investigated with the Chinese versions of Self-management of Hypertension Scale and the MOS 36 item short form health survey (SF-36). The t test, analysis of variance, spearman correlation were used to test the investigate results.

Results: The level of the self-management of Chinese community-dwelling adults with hypertension was at moderate level. The scores were 77.22 ± 8.52 for the total of the self-management, 77.82 ± 10.07 for medication compliance, 79.06 ± 17.69 for diet, 73.58 ± 23.53 for daily activities, 69.26 ± 12.53 for life style, 91.29 ± 15.63 for risk factors. The level of the sf-36 of Chinese community-dwelling hypertension patients was at moderate level, the scores were 73.39 ± 14.14 . We also found that the total score of SF-36 of patients with better self-management skills was higher than those with worse self-management skills ($P < 0.05$). The therapy management, catering management, psychosocial management, sports management and overall quality of self-management of patients with hypertension were positively correlated with survival quality.

Conclusions: The overall level of self-management and quality of life among community-dwelling hypertension patients in Chengdu were in the middle level and affected by various factors. Therefore, we should provide the effective interventions to improve their health and management according to their own characteristics, to control of the complications of emergence and development and to improve the quality of life.

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&

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The Mental Health of Psychiatric Nurse in Opening Wards

Objective: To investigate the mental health level of psychiatric nurses in opening wards. Methods: A total of 78 psychiatric nurses were tested by the Symptom Checklist (SCL-90). Results: Psychiatric nurses' SCL-90 scores were lower than the norm. The compulsion, interpersonal relationship, depression, anxiety, paranoia and psychotic symptoms six factors were significantly different ($P < 0.05$), somatization, hostility, phobic symptoms three factors had no significant difference ($P \geq 0.05$). Conclusions: The mental health level is better of psychiatric nurses in opening wards.

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**Interprofessional Education through University-Hospital
Collaboration**

Interprofessional education (IPE) is becoming increasingly significant in health care curricula as a precursor to patient safety and quality of care mandates. IPE provides health care students with the opportunity to learn with, from, and about each other to both promote effective collaboration and improve health outcomes (Meakim et al., 2013). Historically, health care students have typically learned in “professional silos”, a model known to contribute to poor communication skills, teamwork failures, and compromised patient safety (Palaganas, 2014). Within the Canadian context, few opportunities exist for students to engage in interprofessional practice, resulting in gaps in student preparation for the real-world practice environment. This presentation will provide an overview of the early results of an educational initiative that builds upon strong collaborative ties between a university and a community teaching hospital. By teaching about interprofessional practice, in a setting which promotes and supports interprofessional practice, students were invited into both real-world and simulated learning that extended theoretical knowledge into the practice setting. Student perceptions of learning through large-group simulations will be discussed. Lessons learned from the student experience will be shared. Finally, faculty perceptions of barriers and facilitators to large group interprofessional, simulation-based education for nursing and health sciences students will be explored.