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Preventative Health Outcomes Measurements in a Faculty Practice Site

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Presentation Preference: SNRS Poster Presentation

Abstract Categories:
Interest Group: Academic Nurse Managed Centers
Thematic Areas: Child & Adolescent Health

Purpose/Aims: The learner will be able to demonstrate an understanding of outcomes measurements in an academic nursing center. The learner will be able to demonstrate understanding of the relationship between the services advanced practice nurses provide and adherence to preventative health care services guidelines.

Research Questions/Hypotheses:
To what degree does an academic health center adheres to the preventative health guidelines for clients? How does this adherence rate compare to the established norms?

Significance: UNACARE provides a unique national model for improving the health outcomes of an undeserved urban African-American community.

Methods: This is a descriptive study of the implementation of an outcome measurement process for a faculty practice primary health clinic over a two-year period. Investigator designed tools were utilized to measure age appropriate variables i.e.: H/W, b/p, screening procedures such as colonoscopy, developmental, cognitive assessments and physical examinations.

Findings: Results of the preliminary data collection to date will be presented at the meeting.

Discussion: Improving the health status of clients by providing assertive ongoing preventive health care services is the hallmark of nurse practitioner practice.

Research Completed: No

Abstract History:

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes

Submitted By: jbrewer@son.umsmed.edu
Abstract ID: 76

Lessons Learned While Studying Quality Home Health Care

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Abstract Information
Presentation Preference:
SNRS Symposium

Willing To Submit Podium?
No
Willing To Submit Poster?
No
Abstract Categories:
Interest Group: Administration
Thematic Areas: Health System

Purpose/Aims:
Home health care is not only the fastest growing segment of health care in the United States, it is the fastest growing of all service industries in the United States. One of every 15 patients discharged from hospitals now receives home health services. While the overall amount spent on home health is relatively small in comparison to other health services, its phenomenal increase (3000%) is noteworthy and establishes home health as a significant component of the US health care system. While we must be able to assure patients that the care exchange between nurse and patient is of the highest quality possible, evaluation of the quality of home health care has historically been idiosyncratic or unstandardized and, in many agencies, it was simply ignored until the 1990s. The overall aim of the CLOUT-HH study was to test a proposed model as a basis for understanding how its components evaluate quality of care in the home health environment.
The papers in this symposium address some of the early lessons learned in the CLOUT-HH project. Included in this symposium will be papers addressing the qualitative work that launched the study (Lynn), measures developed and tested in the study (Lynn), obstacles faced in a multi-site study (Farrar).
and preliminary results (Morgan).

Research Questions/Hypotheses :
Overview

Significance :
Overview

Methods :
Overview

Findings :
Overview

Discussion :
Overview

Research Completed :
Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

Grants/Research Support :
Y
NINR

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Speaker's Bureau :

Other Financial or Material Support :

FDA Disclosure:

Non-Exclusive License:
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The Lived Experience of Staff Nurse Response to Job Strain

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Abstract Information
Presentation Preference: SNRS Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Administration
Thematic Areas: Workforce Issues
Purpose/Aims: Research has demonstrated that individuals who experience job strain are subject to diminished health status. This study’s purpose is to evaluate the impact of health status upon propensity to leave one’s job.
Research Questions/Hypotheses: What is the response of individual nurses to the lived experience of job strain and the influence of that experience upon propensity to leave?
Significance: Study outcomes may direct health promoting interventions and reduce voluntary job turnover.
Methods: As part of a larger study, a survey of 1235 staff nurses measured health status via the SF12v2™ as well as job satisfaction, intent to leave, autonomy, collaboration, decentralization and coping. Data were analyzed using descriptive techniques, EFA, CFA and SEM. Written anecdotal comments from study participants were then evaluated in light of the quantitative findings.

Findings:
Structural analysis of the data obtained from 308 surveys determined that the measurement of job strain as a function of self-assessed health status was significantly predictive of propensity to leave. Social functioning explained 52% of the variability associated with job strain, and all measures of mental health status were more predictive of job strain than measures associated with physical health status. Further analysis of subscales directly measuring physical and mental health status demonstrated that only mental health status was significantly predictive of propensity to leave.

Discussion:
Mental health status, and particularly social functioning, was the principal predictor of propensity to leave. However, the anecdotal comments provided by the participants provided far greater specificity as to the physical health consequences of job strain, sharing explicit details regarding back and joint pain, chronic health problems and excessive weight gain due to poor dietary habits. This dichotomy suggests that those most vulnerable to consequences of job strain may have the greatest difficulty verbalizing the impact of that strain. Additional research is necessary to support early intervention and reduce propensity to leave.

Research Completed: Yes

Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
Grants/Research Support: Y
SNRS/Small Grant 2005
STTI/Theta Epsilon/Research Award
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Other Financial or Material Support:

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:

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Abstract ID: 97

Report of Minority New Licensees: Trends and Issues

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Abstract Information
Presentation Preference:
SNRS Poster Presentation

Abstract Categories:
Interest Group: Administration
Thematic Areas: Workforce Issues

Purpose/Aims:
The purpose of the research was to analyze the representation of minority groups in Alabama's nursing population.

Research Questions/Hypotheses:
The research question was "How has the representation of minority groups in Alabama's nursing population changed over time?"

Significance:
Health disparities in the public cannot be dispelled until the nursing workforce is representative of the population that it serves.

Methods:
A records review of the initial licensure of minorities to practice nursing in Alabama on a year-by-year basis from 1990-2005 was performed in order to determine the numbers of minorities who were newly licensed each year.

Findings:
A decrease was noted in the initial licensure of members of every racial or ethnic minority since 1990 except for those licensees who count themselves to be multi-racial. Licensure of African-Americans saw the greatest decrease,
The ethnic origin of all nurses who have received approval to practice as Advanced Practice Nurses since 1990 was reviewed. It was found that only 9.49% of all Advanced Practice Nurses in the State are African-American. Finally, the licensure of males to practice nursing in Alabama from 1990-2005 was reviewed. Although numbers of male LPNs are increasing, numbers of male RNs are decreasing. In 2005, the numbers of male RNs made up only 6.98% of the total RN population, the lowest percentage in the entire 15-year period reviewed.

Discussion:

The findings have implications for recruiters who are attempting to draw minorities and males into the profession of nursing as well as administrators who are investigating ways to retain the staff members already in place. Although Alabama’s Hispanic population has increased greatly in the last decade, the numbers of Hispanic nurses practicing in the State are by no means representative of the population receiving health care.

Research Completed: Yes

Abstract History: Yes

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

Grants/Research Support:

Consultant:

Stock/Shareholder:

Speaker’s Bureau:

Other Financial or Material Support: Y

Alabama Board of Nursing

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

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Abstract ID: 104

this is my symposium title

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Presentation Preference: SNRS  Student Poster Presentation

Abstract Categories: Interest Group: Administration
Thematic Areas: Acute illness

Purpose/Aims: fda

Research Questions/Hypotheses: fda

Significance: fds

Methods: fdsa

Findings: fda

Discussion: fds

Research Completed: Yes

Abstract History: Yes

Financial Disclosure:
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research test 1
res test 2
res test 3

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Speaker's Bureau : Y
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FDA Disclosure:

Cleared: No not cleared one not cleared two not cleared three

Non-Exclusive License:

Accepted Terms: Yes

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Submitted By: shannon@owpm.com
Abstract ID: 111

Medication Usage By RNs Employed at the Bedside

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Abstract Information
Presentation Preference:
SNRS Poster Presentation

Abstract Categories:
Interest Group: Administration
Thematic Areas: Workforce Issues

Purpose/Aims:
Many medications have side effects, however little information exists on the medications being used by RNs. The purpose of this study was to describe the specific medications being used by RNs employed at the bedside

Research Questions/Hypotheses:
What percentage of RNs employed at the bedside regularly use medications? What medications are most often used by RNs employed at the bedside?

Significance:
Recent reports show that 81% of adults in the US take at least one prescription or nonprescription drug. Medication use increases with age. Medications, including anti-hypertensives and mood enhancing drugs, are known to have side effects which may affect cognitive ability and job performance. An aging workforce and increasingly demanding work environments require an understanding of what medications nurses are using.

Methods:
A cross-sectional survey design was conducted. All direct care nurses employed at three hospitals in North Carolina were invited to participate. Survey items included demographic and workplace variables and open ended questions about
health problems and medications used.

Findings:
Surveys were returned by 323 RNs (21.3% response rate). The mean age was 40.15 and most worked full time (87%) on a medical-surgical (47.4%) or intensive care unit (16%). Twenty-two percent reported a health problem, the most frequent being headaches (23.8%), back pain (21.4%), joint pain (16.7%), anxiety (15.8%), stomach problems (14.9%), hypertension (13.9%), depression (12.4%) and insomnia (12.1%). The majority (79%) reported regular use of medications, most frequently anti-inflammatory agents (19%), vitamins (19%), cardiovascular medications (15%) and mood enhancers (12%).

Discussion:
RNs employed at the bedside have similar medication usage patterns to the adult US population. However, the medications being used are known to have side effects which may impact nurse and patient safety. Further research is warranted on how medications being used by RNs may impact their safety and job productivity as well as quality of care.

Research Completed: Yes
Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
FDA Disclosure:
Cleared: Yes
Non-Exclusive License:
Accepted Terms: Yes
Submitted By:
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Impact of Implementation of a New Professional Practice Model on Pediatric Nurse Job Satisfaction

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Student Level:
The purpose of this study is to examine the impact of implementation of a professional practice model, incorporating shared governance, on pediatric nurse job satisfaction.

Research questions are 1) What is the level of job satisfaction of pediatric hospital nurses prior to implementation of a professional practice model? 2) What changes occur in pediatric nurse job satisfaction during and after implementation of a new professional practice model?

Nurse satisfaction has been linked to retention and recruitment of professional nurses. Hospitals desiring Magnet recognition may experience turbulence and changes in job satisfaction as they restructure organizational practices and models during their Magnet journey. No studies were found in the literature describing changes in pediatric nurse satisfaction during implementation of a new professional practice model.

A comparative descriptive survey design was used. The non-random sample was composed of professional nurses providing direct care to patients in a 288 bed pediatric medical center. Power analysis identified a sample size of 252 was needed to detect medium effect at 0.05 alpha. The Index of Work Satisfaction (IWS) (Stamps & Piedmonte, 1986) was used to measure job satisfaction before, one year, and 2 years post implementation of the new practice model. Reliability of the IWS ranged from .82-.91 in previous studies. Range of possible scores for the total IWS is 9-37. Surveys were sent to 868 nurses.

Baseline return rate was 40.3% (n=350) and 38% (n=331) at year 1 post with 2nd year results pending. Mean scores for satisfaction were highest at both measurement periods for Professional Status (5.85, 4.93); Interaction (5.16, 5.05) and Autonomy (4.97, 4.02). Lowest mean scores were for Task Requirements (3.9, 4.02), Organizational Policies (3.16, 3.72) and Pay (3.58, 3.56).

Satisfaction of pediatric nurses in this sample remained stable from baseline during the first year following implementation of the professional practice model.
Abstract ID: 238

ANTECEDENTS AND CONSEQUENCES OF WORK-RELATED NURSE FATIGUE: A PRELIMINARY EVIDENCE-BASED MODEL

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Student Level:

Abstract Information

Presentation Preference: 
SNRS  Podium Presentation

Willing To Submit Poster?
No

Abstract Categories:
Interest Group: Administration
Thematic Areas: Workforce Issues

Purpose/Aims : This study investigated the antecedents and consequences of perceived fatigue in nurses and developed a statistical model for examining the contribution of variables to work-related perceived nurse fatigue.

Research Questions/Hypotheses : Hypotheses:  1. As work environment antecedents increase, perceived fatigue increases with control for personal, social and sleep-related antecedents. 2. As perceived fatigue increases, the consequences of fatigue increase.

Significance : The impact of sleep loss and fatigue among nurses has not been well-studied. There are little data regarding levels of fatigue in nurses and the role fatigue plays in errors and delivery of patient care. A theoretical framework that can serve as a basis for future research is essential.

Methods :
The study design was cross-sectional multivariate with Registered Nurses (n = 809) working in a southeastern United States academic medical center. A web-based administered Nurse Fatigue Questionnaire that includes the standardized Piper Fatigue Scale and the standardized Occupational Fatigue Exhaustion/Recovery Scale was used. Structural equation modeling was used to determine the antecedents and consequences of fatigue in nurses in a hospital setting.

Findings:

The Schaffner Fatigue Model confirms the hypothesized antecedents and consequences of perceived nurse fatigue. Antecedents have a direct effect ($\beta = .42$, $p = .001$) on perceived nurse fatigue. Perceived fatigue has a direct effect on both individual ($\beta = .46$, $p = .001$) and interpersonal ($\beta = .31$) consequences of fatigue. The most compelling finding is the significant negative effect of perceived nurse fatigue on quality of interactions with peers, physicians and patients that ultimately impacts clinical errors and the ability to respond quickly to a patient who is becoming acutely ill.

Discussion:

Findings advance knowledge about antecedents and consequences of work related nurse fatigue and provide an evidence-based practice and research model that can be tested in future studies to reduce nurse fatigue and improve patient outcomes.

Research Completed:

Yes

Abstract History:

- This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

- Details: Society of Gastroenterology Nurses and Associates Annual Conference in Baltimore Maryland, 5/21/07

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

Grants/Research Support: Y
Funding from New Researchers award from Gamma Omicron Sigma Theta Tau
Consultant:
Stock/Shareholder:
Speaker's Bureau:
Other Financial or Material Support:

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

Submitted By:
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Asian Nurses’ Perceptions of Their Current Nursing Practice Environment in U.S. Hospitals

Abstract Information

Presentation Preference: SNRS Poster Presentation

Abstract Categories:
- Interest Group: Administration
- Thematic Areas: Health System

Purpose/Aims:
To understand Asian nurses’ perception of current practice environment in U.S. hospitals.

Research Questions/Hypotheses:
What is Asian nurses’ level of perception of practice environment and how it correlates with demographic variables?

Significance:
International nurses working in the U.S. were predominately from Asian countries, where share collectivistic cultures. These Asian nurses may have different cultural values than that of nurses from U.S. and Europe where share individualistic cultures. These differences may contribute to differences in needs and satisfaction with practice environment.

Methods:
This study was a descriptive survey. 120 Asian RNs, who worked in U.S. hospitals in non-management positions and practiced at least 6 months at current positions, were recruited using snowball sampling via email and paper surveys. The Practice Environment Scale of the Nursing Work Index (with 5 subscales) was used.
Participants were from 6 states. Most of them worked full time (81.7%) in ICU (46.7%) or Med/Surg (25.0%) units. 89.2% were females and 70.8% had a bachelor’s degree. Their mean age was 39.55. They practiced nursing in the U.S. in an average of 10.42 years and at current jobs for 6.79 years. Their mean score of perception of practice environment was 109.90. The mean score for the “nurse participation in hospital affairs” subscale was 29.94, and was 37.86 for “nursing foundation for quality of care” subscale, 17.78 for “nurse manager ability, leadership, and support of nurses” subscale, 13.44 for “staffing and resource adequacy” subscale, and 10.87 for “collegial nurse-physician relations” subscale. Participants’ perception of practice environment did not relate to age, years practicing in the U.S., or years in current position.

Discussion:
Asian nurses were generally satisfied with their practice environment. They much satisfied with nursing foundations for quality of care, however; were not very satisfied with their participation in hospital affairs. Strategies that encourage Asian nurses’ participation in hospital activities may need to be developed.

Research Completed: Yes
Abstract History: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Financial Disclosure: Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
Submitted By: srliou5022@gmail.com
Wisdom at Work: Retaining Experienced Nurses at the Bedside

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**Abstract Information**

Presentation Preference: SNRS  Poster Presentation

Abstract Categories:
- Interest Group: Administration
- Thematic Areas: Workforce Issues

Purpose/Aims:
This pilot study is to acquire information regarding bedside RNs satisfaction with current minimal lift equipment (MLE) usage and program, and to maintain/increase the retention of experienced nurses at the bedside by reducing patient movement related (PMR) injuries.  

Specific Aim (SA) 1: Determine the nurse’s satisfaction towards the use of the in-house minimal lift program (Smooth Moves).  

SA2: Determine the frequency of MLE usage by the nursing staff/barriers to daily use at the bedside.  

SA3: Determine the efficacy of a hands-on bedside SM facilitator for increasing usage of the MLE.

Research Questions/Hypotheses:

Research question (RQ): What is the association between the nurse’s usage of Smooth Moves (SM) equipment/years of experience/age/work area?  

RQ: What has been the frequency with which the nursing staff uses the SM equipment?  

RQ: What barriers exist that prevent nurses from using the SM equipment?  

RQ: What is the association between the presence of a hands-on SM facilitator and the decrease in nursing PMR injuries/retention of bedside nursing staff?

Significance:
By determining the relationship between the nurse’s satisfaction with and usage of the SM equipment, and years of experience of the nurse, facilitated initiatives can be developed to decrease the number of PMR injuries to bedside nurses. These initiatives will assist in improving the retention of experienced nurses at the bedside for the target hospital or any facility undertaking minimal lift programs. Results of this research may lay the foundation for future interventional studies related to decreasing PMR using MLE.

Methods:
A descriptive, exploratory pilot study will be used to describe bedside nurse’s satisfaction with and level of PMR usage of SM equipment pre- and post intervention.

Findings:
Preliminary findings: There is a positive reaction to having MLE; however, more training/encouragement is needed to increase efficiency/capability of MLE use; and, areas for educational opportunities will be identified.

Discussion:
Study in-progress, for completion in December 2007.

Research Completed: Yes

Abstract History:
- This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
- Details: Research Symposium/Atlanta, September 2007

Financial Disclosure:
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Yes
Grants/Research Support: Y  
Robert Wood Johnson Foundation
Consultant:
Stock/Shareholder:
Speaker’s Bureau:
Other Financial or Material Support: Y
Saint Joseph's Hospital of Atlanta

FDA Disclosure:

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Lessons Learned While Studying Quality Home Health Care

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Presentation Preference: SNRS Symposium

Willing To Submit Podium? No
Willing To Submit Poster? No

Abstract Categories:
Interest Group: Administration
Thematic Areas: Health System

Purpose/Aims:
Understanding the linkages between Donabedian’s structure, process and outcome elements in home health care is essential to improve the quality of care. This paper seeks to use a new measure of process, patient’s evaluations of the care received (PAQS-HHV), to assess the link between process and changes in patient health status between baseline and discharge from home health care.

Research Questions/Hypotheses:
see above

Significance:
see above

Methods:
The process subscales were originally developed using qualitative instrument development strategies and have acceptable reliability estimates in this patient population (.68 to .83). Data were gathered from patients using in-home interviews at three points in time --- admission, discharge and 1 month after discharge with 430 patients being in the multivariate analytic sample.

Findings:
Between baseline and discharge, substantial positive change was seen on the following SF-36 subscales: physical functioning, role limitations due to physical health, social functioning, and pain. Minimal to no change was seen on measures of role limitations due to emotional problems, energy/fatigue, emotional well-being, and general health. Controlling for patient characteristics including demographic characteristics, presence of informal caregiving, and insurance status, it was found that patient’s perceptions of care was significantly negatively related to change in social functioning, energy/fatigue, role limitations due to emotional problems, and physical functioning. The structure measure that measured intensity of effort and concern on the nurse’s behalf was the most consistently related to change.

Discussion:
The intensity of nurse effort is likely related to severity of the patient’s illness; this relationship will be further explored in this paper. In order to understand the mechanisms by which structure and process influence outcomes such as nursing care quality, measures need to be developed that adequately operationalize the complexity of the nurse-patient interaction. The PAQS-HHV appears to be able to perform in this role. Implications for further research in this area will also be discussed.

Research Completed:
Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

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Developing A Collaborative Intervention Science

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Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Administration
Thematic Areas: Methods

Purpose/Aims: To review processes and outcomes of a Johns Hopkins University School of Nursing NIH-funded Center focused on developing science and scholarship related to collaborative intervention research strategies.

Research Questions/Hypotheses:
The Center for Collaborative Intervention Research (CCIR) examines the effectiveness of promoting and supporting interdisciplinary collaborations to facilitate development, testing, and evaluation of cost-effective interventions. Training, education, mentoring, and research resources are tailored to promote collaborative opportunities for faculty at all levels.

Significance: The Center is based on a conceptual model adapted from Pender’s Model of Health Promotion and the ANA conceptualization of collaboration (interdisciplinary/interagency/community). Collaborative partnerships are essential in both clinical and academic settings.
to bridge the gap between research and practice and achieve quality health care.

Methods:

Center processes promoting research collaborations include: monthly interdisciplinary seminars, intervention-focused workshops cosponsored with other disciplines, and sophisticated web-based technology which allows Center resources to be accessed by faculty across disciplines. These efforts facilitate knowledge-sharing and close collaborations across disciplines and foster appreciation for the unique contribution of nursing to developing intervention science. Research assistance, biostatistical and editing services are provided to developing and experienced researchers. Educational resources (texts, software) are also available to faculty and students.

Findings:

Outcomes include pilot funding for 12 multidisciplinary research teams to date. Projects must demonstrate collaborative research partnerships to receive funding. Funded studies contribute to intervention science in the following two areas: (1) interventions to improve health services for disadvantaged or marginalized populations (immigrants, victims of abuse, mentally ill) and (2) to improve health outcomes (chronic illness, treatment adherence). Completed CCIR pilot grants have resulted in subsequent successful RO3, R21, and 2 ROI submissions.

Discussion:

Center faculty have established knowledge-sharing relationships with local, national and international research Centers to further develop science surrounding the development of interventions. These relationships have provided opportunities for interdisciplinary faculty to share resources and enhance research scholarship.

Research Completed: Yes

Abstract History: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Financial Disclosure: Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

Submitted By: jwenzel@son.jhmi.edu
Lessons Learned While Studying Quality Home Health Care

Abstract Information

Presentation Preference: SNRS Symposium

Willing To Submit Podium? No
Willing To Submit Poster? No

Abstract Categories:
- Interest Group: Administration
- Thematic Areas: Health System

Purpose/Aims:
Despite home health care being the fastest growing segment of health care, quality monitoring has been slow to develop there. No aspect of quality monitoring has been slower to develop than assessment of the process of care. To address this a qualitative study of the process of care in home health care was undertaken.

Research Questions/Hypotheses:
n/a

Significance:
see purpose

Methods:
Interviews started with a single grand tour question --- “How do you describe or define good home health care?” Questioning proceeded until there were no further areas to explore. Each interview was taped and transcribed. Interviews...
continued until data saturation occurred. Nine patients and seven nurses were interviewed. The central theme identified was “negotiated care.” This differs markedly from the care process in acute care settings where the nurse is largely in control. In the home, the nurse is the “guest”. While she/he has the “authority” in the care exchange, the patient and family are empowered by their familiar surroundings and their ability to “do or not do” as they choose. Therefore, the nurse must help patients decide what care regimen is best for them and how to enact it. Additionally, the nurse must be able to work effectively with the family or other caregivers.

Findings:
The components of negotiated care identified were advocacy, tailoring, “doing with,” and mutual goal setting. Details of these components follow with a quote from an interview: Advocacy - Prodding the health care system when needed. Tailoring - Being flexible. Doing With - Doing with is when patient and nurse work together. Mutual Goal Setting - Having to work with the patient where he/she and the family are with the illness and/or patient’s response to the illness.

Discussion:
The data bits from the interviews were the basis for two subsequent instruments. The paper will include more detailed description of the interviews/results.

Research Completed:
Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

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Lessons Learned While Studying Quality Home Health Care

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Abstract Information

Presentation Preference:
SNRS Symposium

Willing To Submit Podium?
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Willing To Submit Poster?
No

Abstract Categories:
Interest Group: Administration
Thematic Areas: Health System

Purpose/Aims :
No more is known about how to measure the process of care in home health care than is known for other venues of health care. This paper will report on the development and testing of the scales developed from the qualitative work included in this symposium.

Research Questions/Hypotheses :
n/a

Significance :
see above

Methods :
A total of 71 items were generated for the Patients’ Assessment of Quality Scale – Home Health Version (PAQS-HHV) and 81 items for the Nurses’ Assessment of Quality Scale - Home Health Version (NPQS-HHV). Content validity of each scale was assessed by experts. The scales were then used in a large-scale study.
Each PAQS-HHV item has three response options—Never, Sometimes, and Always. The reading level of the PAQS-HHV was Grade 6. The PAQS-HHV was administered to 706 home health patients. The typical patient was a 69 year old white (65%) female (64%) who completed the 12th grade. The instrument was subjected to principal axis factoring with direct oblimin rotation. Twenty six items remained on four factors which accounted for 63% of the variance in the total scores. Reliability of the factors ranged from .68 to .83. The NAQS-HHV items have four response options, “Strongly Disagree” to “Strongly Agree” and was completed by 1,066 home health nurses. The typical participant was a 45 year old, white, female, baccalaureate-prepared nurse who had worked in home health for 7 years. PAF (direct oblimin rotation) resulted in 48 items comprising five factors accounting for 64% of the variance in the total scores. Reliability of the factors ranged from .78 to .97.

Findings:
see above

Discussion:
The paper will include a full discussion of the derived factors and how each of these instruments can be used in the evaluation of the process of care in the home health care arena.

Research Completed:
Yes

Abstract History:

Financial Disclosure:
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FDA Disclosure:
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Non-Exclusive License:

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Student Level:
Presented Preference: SNRS Symposium
Willing To Submit Podium? No
Willing To Submit Poster? No
Abstract Categories: Interest Group: Administration
Thematic Areas: Health System
Purpose/Aims: When HCFA mandated the use of OASIS in home health agencies, there was a promise of home health data collection that was both inclusive and standardized. However, there it is questionable as to whether the use of the OASIS adequately addresses the elements needed to assert that quality home health care was delivered. The purpose of this paper is to explore the challenges involved in using OASIS-B1 for research purposes.
Research Questions/Hypotheses: see above
Significance: OASIS-B1 is mandated for use in these agencies for Medicare and Medicaid patients. It contains sections that address safety and adequacy of the patient’s home, the severity of primary and other diagnoses, knowledge about medications and needed equipment, activities of daily living (ADLs), and instrumental activities of daily living (IADLS).
Methods: n/a
Findings: During the course of the CLOUT-HH study, several challenges have arisen using OASIS-B1. First, the form has undergone several revisions over the last eight years. For longitudinal studies like CLOUT-HH, data gathered in the early years of the study will not be consistent with data gathered in subsequent years. Second, the OASIS-B1 forms vary across agencies. HCFA only provides guidelines as to what information home health agencies are to gather from patients, i.e. each agency has the right to adapt OASIS-B1 in a way that is relevant and useful for their particular agency. For a study based in multiple agencies, the use of different forms creates problems in standardizing data across patients, data entry and analysis. Lastly, home health agencies are only required to report OASIS information for patients who receive Medicare or Medicaid insurance. Therefore, data is often unavailable for patients with other types of insurance.
Discussion: Because OASIS was not developed with research use in mind, researchers hoping to use OASIS in home health research should be mindful of the aforementioned difficulties and adjust their methodology accordingly.
Research Completed: Yes
Abstract History: Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
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Associations among Nurse Characteristics, Perceived Collaboration, and Rates of Compliance with Quality Indicators for Cardiac Patients:

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Abstract Categories: Interest Group: Administration
Thematic Areas: Workforce Issues

Purpose/Aims:
Investigate: (1) the feasibility and reliability of the Collaboration and Satisfaction About Care Decisions (CSACD) instrument with nurses and physicians from an intermediate care unit and (2) relationships between collaboration and both provider characteristics and indicators of care quality.

Research Questions/Hypotheses:
1. Are the instruments feasible to utilize in intermediate care units at the time of discharge? 2. Is the internal consistency reliability of the CSACD adequate for intermediate unit professional caregivers? 3. Are there any relationships between personal characteristics and collaboration? 4. Are there any relationships between collaboration and compliance with indicators of care quality?

Significance:
Today’s healthcare environment includes a shortage of nurses, higher patient acuity, and frequent use of temporary staff. Preliminary data about measures of collaboration, personal characteristics, and relationships with outcomes of care need to be investigated for today’s healthcare environment.

Methods:
A descriptive, correlational design was used with a convenience sample of nurse-physician dyads from 37 discharge episodes. Measures of collaboration were obtained using the CSACD. Measures of care quality were rates of compliance with discharge therapies suggested by the Centers for Medicare and Medicaid Services. Limitations are recognized as a small, convenience sample and use of a self-reported survey tool.

Findings:
There were five key findings from analyses of data: (1) Feasibility of the instrument was supported for nurses (75%). (2) Feasibility was not supported for physicians (30%). (3) Power analyses revealed that 68 nurses are needed in future studies. (4) Internal consistency reliability of the CSACD was supported ($\alpha = .98$) among intermediate care unit nurses. (5) No significant relationships were found between collaboration and personal characteristics or compliance with quality indicators.

Discussion:
This study generates questions for future research related to other characteristics or interventions that might influence collaboration as well as other outcomes of care that might be related to collaboration.

Research Completed: Yes
Abstract History: Yes
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
FDA Disclosure:
Cleared: Yes
Non-Exclusive License:
Accepted Terms: Yes
Submitted By: sclutter024@hughes.net
Abstract ID: 730

Staffing Prototype: Electronic Workload Assignment

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The purpose of this study was to create a balanced electronic workload assignment.

The prototype was created to assist nurses in making equitable workload patient assignments in the acute care inpatient setting.

One of the major problems in the United States healthcare system is a shortage of nurses. Nurse turnover is significantly related to an unbalanced workload.

The GREEDY method was used in creating the prototype.

The prototype was created with shift, nurse, and patient data which was entered into an optimization and simulation model. The simulation projects an equitable workload based on patient acuity and diagnosis, room location and admission/discharge times along with nurse qualifications.

On average, Medical-Surgical nurses do feel they would use the prototype to make patient assignments. They report this technology is user-friendly and quicker than the manual method currently utilized in making assignments. They also perceive the prototype provides a fair and equitable workload based on objective criteria.
Sensemaking of Staff and Managers: Preliminary Results of a Study on Practice Change in a Tertiary Care Hospital

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Presentation Preference:
SNRS Student Poster Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Administration
Thematic Areas: Health System

Purpose/Aims:
This study explores sensemaking by the members of a large team tasked with facilitating an organizational change project: implementation of a new information technology in nursing units of a tertiary care hospital.

Research Questions/Hypotheses:
What are the sensemaking patterns of front-line staff and managers who are members of an information technology system implementation project team during an organizational change project?

Significance:
Creating changes in care practices is slow and inconsistent as shown in research studies conducted by the Institute of Medicine and others. Implementing information technology is often difficult due to the associated disruption of the highly coordinated, interdependent processes of providing care on nursing units, primarily information exchange, communication and relationships. Sensemaking, defined as the search for answers and meaning which drive action, leads to unified understanding, learning and effective problem solving; strategies which studies
have linked to successful change. Sensemaking therefore is a critical organizational function for establishing meaning and taking action during change.

Methods:
Direct observation was used to collect data during regularly scheduled meetings of 112 staff representing multiple disciplines, functions, and organizational levels. Over the course of the first six months of the change project, 35 hours of rich data on sensemaking were recorded through field notes and jottings. Data were coded and analyzed for recurrent themes.

Findings:
Sensemaking patterns of “framing” and “defining” predominated amongst management while front-line staff primarily engaged in “clarifying,” “comparing” and “questioning” during the first 6 months of observation.

Discussion:
Exploring the interplay between managers’ and front-line staff’s sensemaking, and the ways in which this creates and maintains unified understanding and coordinated action during a planned change project may provide new insight into change processes in hospitals and lead to new methods of facilitating successful change with positive outcomes for patients.

Research Completed: Yes

Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
Grants/Research Support: Y
National Institute of Health Roadmap Clinical Translation Science Award (Califf PI, 1TL1RR024126-01)
Consultant:
Stock/Shareholder:
Speaker’s Bureau:
Other Financial or Material Support:

FDA Disclosure:
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Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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Abstract ID: 825

Exploring a Model of Skillful Engagement in Nursing Practice

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Abstract Information
Presentation Preference:
SNRS Student Poster Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Administration
Thematic Areas: Workforce Issues

Purpose/Aims:
The purpose of this study is to explore relationships among the variables of the investigator constructed, theoretical model of Skillful Engagement in Nursing Practice.

Research Questions/Hypotheses:
Specific aims are to examine the relationships among organizational structures thought to foster the clinical development of the nurse, indicators of the development of clinical expertise, and outcomes of job attitudes and job effectiveness.

Significance:
Prominent challenges facing nursing leaders are the growing shortage of nurses and the increasingly complex care required by acutely ill patients. In organizations the shortage is exacerbated by turnover and intent to leave. Unsatisfactory working conditions are cited when nurses leave their current jobs. Disengagement from the job leads to plateaued performance, decreased organizational commitment, and increased turnover. Solutions to these challenges include methods both to retain and increase the effectiveness of each nurse.

Methods:
The setting is a tertiary care center with a convenience sample of 8-10 inpatient nurse managers and 150-300 nurses. Three activities are completed in this cross-sectional study: 1) nurse managers complete a group of three surveys for each staff nurse; 2) staff nurses complete demographics and a collection of nine survey tools, and 3) a voluntary subset of staff nurses participate in focus groups describing work situations where they felt engaged with or disengaged from their practice. Descriptive statistics are computed for demographic variables and each tool scored. The model is analyzed using hierarchical linear modeling, limited to one organization. The number of variables makes it difficult to determine an effect size; therefore, the results will provide only initial evidence of the empirical model’s structure.

Findings:
In the pilot study, descriptive statistics were calculated for the demographic variables and individual instruments scored. Results included a Cronbach alpha of .70 or higher for all multi-question instruments.

Discussion:
N/A

Research Completed:
No

Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
-Details: the theoretical basis was presented at the 2005 Magnet conference

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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Documentation of fatal gunshot wound physical forensic evidence collected by registered nurses: Recommendations for policy and practice.

Abstract Information

Presentation Preference: SNRS  Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Administration
Thematic Areas: Health System

Purpose/Aims:
The aim of the study is to discover the percentage of fatal gunshot wound physical forensic evidence documented in the medical examiner record that was collected by the RN and admissible in legal proceedings.

Research Questions/Hypotheses:

Significance:
As healthcare providers in emergency departments focus on saving lives, vital forensic physical evidence from gunshot wound victims may not be collected or may be collected inadequately. To address this, the 2005 Texas Legislation 79th Regular Session passed SB 39, which mandates emergency department healthcare providers complete continuing education related to the collection of forensic evidence. The registered nurse (RN) is in a perfect position to collect and document evidence. A review of the literature shows numerous guidelines on how to collect and document evidence, however it is not known to what extent these guidelines are implemented by the RN.

Methods:
To ascertain current practice of RNs documenting evidence in hospital records, a review of medical examiner records at a large forensic center was undertaken. As the study is a pilot, 10 medical examiner records from 2004-2006 were randomly selected for review. Evidence focused on was clothing, artifact retrieval, such as bullet, slug, wadding or pellets and preservation of gunshot residue from fatal gunshot wound patients. Medical examiner records included hospital records, autopsy and police reports and death certificates.

Findings :

Discussion :
The overarching goal of this research is to grasp an understanding of the current RN practice of collecting evidence and offer guidelines that will lead to standardization of evidence collection from all trauma victims.

Research Completed : Yes
Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
FDA Disclosure:
Cleared: Yes
Non-Exclusive License:
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A State of the Science: Psychological Empowerment in Nurses

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Abstract Categories:
Interest Group: Administration
Thematic Areas: Workforce Issues

Purpose/Aims:
Nurses’ psychological reactions to their work environments could be mediated by multiple intrinsic or personal factors such as psychological empowerment. The purpose of this presentation is to provide a state of the science of psychological empowerment.

Research Questions/Hypotheses:
What are the conceptual, methodological, and empirical dimensions of psychological empowerment in nurses?

Significance:
The retention of nurses continues to be a priority for hospital administrators, as experienced and satisfied nurses enhance the quality of patient care and decrease organizational costs. The average estimated cost for replacing a registered nurse is reportedly $15,825. With a recent turnover rate at 20% in the United States, the financial burden on organizations to train new nurses is substantial.

Methods:
A systematic search was conducted using the following databases: CINAHL, Pub Med, and Psych INFO. The inclusion criteria were publication date (2000 or
Findings:
Psychological empowerment is a process in which the qualities, values, and endeavors inherent in the individual, as well as the environment, are key factors to nurse perceived satisfaction. Evidence supports a relationship between structural empowerment, client empowerment, and psychological empowerment. However, the relationship is not clearly delineated in the literature. Much of the nurse empowerment is focused on measuring structural empowerment as it relates to nurse satisfaction. Meaning has been linked with improved psychological empowerment although the factor influencing the nurses’ perspectives and ability to find meaning in a situation has not been identified. Psychological antecedents such as values need further investigation.

Discussion:
Understanding nurses’ psychological empowerment may be beneficial in creating interventions that promote nurses’ job satisfaction. Striving to understand the complexity and wonder associated with the nurse/client interaction is to study the essence of nursing.

Research Completed: Yes
Abstract History: 
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
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Abstract ID: 947

**Enthusiasm or Exhaustion: nurses’ motivations and experiences of burnout in two comparison countries**

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Student Level:
The purpose of this study was to compare data collected from nurses working in two hospitals in the Southeast United States with data collected from nurses working in Honduras describing levels of burnout and personal motivations.

Research Questions/Hypotheses:
What are the levels of burnout and motivations to work in nursing for first year and experienced nurses? Do the levels of burnout and personal motivations differ cross-culturally?

Significance:
Nursing burnout is a significant problem globally. Burnout is defined as a state of emotional exhaustion often due to unexpected realities or cumulative stress. Because nurses are experiencing burnout around the world, and because burnout may aggravate the growing nursing shortage, it is important to design projects that explore burnout.

Methods:
A descriptive approach was used with convenience samples from USA and Honduras. Participants completed the Maslach Burnout Inventory and the Little Motivations for Nursing Questionnaire. IRB approval was obtained and Spanish translations were used in Honduras.

Findings:
Nurses of mixed experience (n = 55) reported moderate to low emotional exhaustion, low to very low depersonalization score, and high personal achievement. Through content analysis, several motivations emerged including societal value, economic benefits, high achievement, and previous nurse interaction. The main motivation for nursing in both countries was personal willingness to help and serve others. Preliminary findings demonstrated a significantly lower score in emotional exhaustion in Honduran nurses (p<.001).

Discussion:
Nurses in both countries identified similar findings in motivation for nursing, with highest reasons being service, compassion and personal achievement. US nurses report significantly more emotional exhaustion than nurses in Honduras but both reported high personal achievement in nursing. Intervention strategies which support motivations for entering nursing and coping with emotional exhaustion are needed. The cross-cultural approach can help to address different factors affecting nurses in their careers.

Research Completed:
Yes

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

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FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

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Abstract ID: 68

Exploring the Health and Functioning of Older Persons Volunteering for Habitat for Humanity

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Presentation Preference: SNRS Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Aging/Gerontology
Thematic Areas: Adult Health

Purpose/Aims: The purpose of this paper is to describe the health and functioning of 40 older persons ages 57-88 years old, participating in a Habitat for Humanity Blitz Build

Research Questions/Hypotheses: What is the health and functioning of older persons who volunteer for Habitat for Humanity?

Significance: As our population continues to age, elders will represent a larger portion of potential volunteers for numerous needs of communities. No studies describe elder volunteer activities that are physically or emotionally taxing. It is also not clearly known whether volunteering contributes to better health for elders or if only healthier elders volunteer

Methods: This mixed method study used qualitative interviewing, the updated version of the Short Form-12 Health Survey (SF-12v2TM), participant observation, and health questions on a demographic survey form.

Findings: The older participants were no more physically healthy than their community dwelling counterparts with many having coexisting conditions of hypertension, arthritis, heart disease, cancer or diabetes. Despite these conditions, 95% self-rated their health as good to excellent. When participant SF-12 scores were compared with corresponding age norms, participant scores were not significantly different in areas of physical functioning, role performance, bodily pain, or general health. However these older persons scored significantly higher in vitality, social functioning, mental health, and role energy. They completed such tasks as raising walls, putting on siding and roofing, painting rooms, and other physically strenuous tasks. These older persons discussed accommodations for age related changes, but saw themselves as able to do much of what they wanted to do.

Discussion: Implications are that perceived health is a better indicator of functioning than presence of disease and that older persons can provide valuable services beyond “traditional” volunteering activities. This knowledge can help identify ways to support this role in elders. Health care professionals may use this knowledge to plan, implement, and support organized volunteering among elders.

Research Completed: Yes

Abstract History: -This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose
Yes

Grants/Research Support: Y
The University of Tennessee, Knoxville
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Speaker's Bureau:
Other Financial or Material Support:

FDA Disclosure:
Cleared: Yes

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Accepted Terms: Yes

Submitted By:
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Abstract ID: 143

**NURSING CURRICULUM: CHANGING STUDENTS’ KNOWLEDGE AND BIASES TOWARDS OLDER ADULTS**

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**Abstract Information**

Presentation Preference:
SNRS  Poster Presentation

Abstract Categories:
Interest Group: Aging/Gerontology
Thematic Areas: Adult Health

Purpose/Aims:
(1) Describe normal aging
(2) Discuss nursing implications related to normal aging changes
(3) The information obtained from the study to be used to suggest modification of the curriculum.

Research Questions/Hypotheses:
1: Nursing students who participate in the class segment on the effects of aging that involved lecture, discussion and interaction with an older adult as well as participation in exercises simulating aging changes will demonstrate a change in knowledge about older adults. 2: Nursing students who participate in the class segment on aging involving lecture, discussion and interaction with an older adults as well as participation in exercises simulating aging changes will demonstrate a change in biases towards older adults.

Significance:
The U.S. population age 65 and over is expected to double in size within the next 25 years. By 2030, almost 1-out-of-5 Americans — some 72 million people — will be 65 years or older. Florida had the highest proportions of its total population in the 65 and older age group (National and State Population estimate 2004)

Methods:
Students given the Palmore FAQ as a pretest and posttest. Experimental group participated in a class on aging which involved discussion, lecture, simulation exercises, and dialogue with an elderly gentleman. Students were given the opportunity to experience some of the limitations of aging through simulation exercises (decrease in eyesight, hearing and movement.) The control group did not participate in this class segment. Both groups completed the posttest after the completion of the clinical rotation. The class on aging was presented to the control group after completion of the posttest.

Findings:
Class resulted in an increase in the knowledge level of the students and changes of biases toward the older adult.

Discussion:
When negative biases persist after completing a nursing program, and the lack in knowledge about the elderly is not corrected, nursing care will be adversely affected.

Research Completed: Yes
Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
FDA Disclosure:
Cleared: Yes
Non-Exclusive License:
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Relationships Among Anger, Perceived Stress, Religiousness, and Symptoms of Infection in Well Elderly

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Abstract Information

Presentation Preference: SNRS Poster Presentation

Abstract Categories: Interest Group: Aging/Gerontology
Thematic Areas: Adult Health

Purpose/Aims: The interrelationships among anger, stress, spirituality and infectious illness have seldom been examined in well elderly.

Research Questions/Hypotheses: The research question for this study was, What are the relationships between anger, infection, stress and spirituality in community dwelling elders?

Significance: Unhealthy ways of managing anger have been linked to diverse morbidity in younger samples (from colds to elevated BP and cardiac disease).

Methods: A sample of 82 well elderly completed 4 assessments: (1) Carr Infection Symptom Checklist (SCL); (2) Cohen’s Perceived Stress Scale (PSS); (3) Deffenbacher’s
Anger scale; and (4) Fetzer Multidimensional Measurement of Religiosity/Spirituality (MMRS).

Findings:

Mean age: 74 (range 65 - 91) and (67%): female. Half (51%) were married and had an annual income of $30,000 or more. Stress scores ranged from 15 - 45 (mean = 29.6). Mean SCL score was 5.0 (range 0 – 29). Those who were unable to forgive themselves, others or feel forgiven by God were more likely to have an infection in the previous month. Increased infections also occurred when older adults did not feel they had religious support from their congregations. There was a significant correlation between stress and SCL scores ($r=25$, $p=.03$). As age increased, these elders meditated, read the Bible, attended and participated in church activities more than younger participants. Age was negatively correlated with two subscales for anger.

Discussion:

This is one of the first studies to demonstrate a relationship between anger management and infection in the elderly. Findings indicate that even well elders need assistance with healthy management of anger and stress. As in younger samples, there is an increased risk for infection with higher stress and/or failure to control anger effectively. This study also suggests that the spiritual dimensions of forgiveness and perceived level of congregational support may be influential in decreasing the risk of infection in well elders.

Research Completed: Yes

Abstract History: -This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

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Mexican American Elders and Nursing Home Transition

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Student Level:
This study explores subjective perceptions of factors influencing Mexican American elders and their families during the process of transition from independent living to nursing homes.

Research Questions/Hypotheses:
1. What is the nature of transitions and the transition conditions that lead to decision making regarding nursing home placement for Mexican American elders?
2. What are the facilitators and inhibitors that influence the transition process of Mexican Americans as they move from independent living to a nursing home?
3. What patterns of response characterize the transition of Mexican American elders to life in a nursing home?

Significance:
The Mexican American population is now the largest minority ethnic group in the United States. If demographic trends proceed as projected, the number of ethnic minorities entering nursing homes in the next 20 to 30 years will greatly increase as will the need for more culturally sensitive care.

Methods:
This study used a naturalistic inquiry approach and ethnographic methods to learn from ten Mexican-American dyads (elder and a family member) about the transition to life in a nursing home and how the decision for admission was made.

Findings:
Using the transition theory typology as categories, interview data revealed two types of transitions: situational and health/illness related. One pattern of response that did emerge specific to this population was the concept of aguantando which was used to describe their outcomes as withstanding or tolerating the situation but not necessarily accepting it.

Discussion:
These findings have implications for education, practice, and policy making. Findings can be used to help educate those healthcare providers working in nursing homes, especially those with large populations of Mexican American residents to be aware of the cultural attitudes and beliefs that may lead to a better understanding of residents and their behaviors.

Research Completed:
Yes

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Abstract ID: 216

**Storytelling: Bridging Relationships Between Homecare Workers and Elder Clients**

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Abstract Information

Presentation Preference:
SNRS Podium Presentation

Willing To Submit Poster?
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Abstract Categories:
Interest Group: Aging/Gerontology
Thematic Areas: Methods

Purpose/Aims:
The purpose of this qualitative descriptive study was to learn about spontaneous storytelling in routine care provided by home care workers to community dwelling elders.

Research Questions/Hypotheses:
1) Does storytelling by elder clients occur during the usual care provided by home care workers? 2) When does storytelling occur during usual care and how do home care workers engage older clients in storytelling? 3) How do home care workers respond to the stories told by clients? 4) Does storytelling by older clients change the relationship between the client and home care worker?

Significance:
The fastest growing segment of today's US population are those over 65 comprising a group predicted by the Census Bureau to reach 80 million by mid-century.
Desiring to live at home, community dwelling elders who need more help than family members or friends can provide, often seek assistance from home care workers who provide housekeeping and personal care services including bathing, dressing, and meals. Storytelling, as a form of life review, may take place spontaneously in this care setting. Telling life stories helps elders define how they see the world and creates order for the storyteller, perhaps supporting the transition to integrity as opposed to despair.

Methods:
During a home care agency training day, two focus groups sessions (10 each) were conducted to access perceptions of home care workers regarding their experiences with storytelling. Analysis by the interdisciplinary researchers included use of a coding matrix to identify major concepts, categories, and themes.

Findings:
Themes relating to the client (Loss, aloneness and loneliness), the worker (Strategies used), storytelling (The Bridge) and the relationship (Reciprocal and Family-Like) emerged from analysis.

Discussion:
Storytelling serves as a bridge between the care provider and client. Clients are affirmed, providers gain insight into the life experiences of the client thus enriching their experience and enhancing the relationship between the individuals.

Research Completed: Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
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Non-Exclusive License:
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Sleep-disordered breathing and nocturnal bladder symptoms in older Americans

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Presentation Preference:
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Willing To Submit Poster?
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Abstract Categories:
Interest Group: Aging/Gerontology
Thematic Areas: Adult Health

Purpose/Aims:
The purpose of this study is to explore the relationship between sleep-disordered breathing (SDB) and nocturia in older adults.

Research Questions/Hypotheses:
Elders with greater SDB will exhibit more frequent nocturia episodes. SDB and nocturia symptoms will differ depending on elder age. Diuretic use will lessen nocturia episodes in elders.

Significance:
The relationship between sleep-disordered breathing (SDB) and nocturia among elders is poorly understood.

Methods:
SDB and bladder symptoms (BSx) were examined in a random telephone survey of 585 (35% men, n=202) community dwelling elders. SDB symptoms included loud snoring, snorting or gasping, or stopped breathing or struggles for breath during sleep. All of these symptoms were summed to create an indexed sleep score (SDBI). BSx included nocturia, bladder emptying problems, urinary frequency, difficulty postponing urination and weak urinary stream. These were also summed to create an indexed bladder score (BSxI). A SDBI of 21 or more reflected SDB and BSxI score of 20 or more reflects bladder dysfunction.

Findings:
Comparison by gender and age group (using median age - 72 years) showed no differences in BSxI. Those subjects over 72 yrs had more significantly more hours of sleep per night and more SDB symptoms than those under 72 years. Half (49.7%) of the sample reported 3 or more episodes per night, 31.5% had 1-2 events and only 18.8% reported no nocturia. Most diuretic users (53% n=161) experienced 3 or more nocturia episodes a night and a greater proportion of diuretic users were women (32%). Over one-third of subjects (35%, n=106, male-14%, females-21%) reported difficulty in returning to sleep after nocturia episodes.

Discussion:
Nocturia is a major contributor to sleep disruption in elders but is no more severe in the oldest old or among men or women. Further, diuretics do not seem to offer any advantage in reducing nocturia in men or women over age 60 years.

Research Completed:
Yes

Abstract History:
This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Details: Sleep 2007, Minneapolis, MN (poster)

Financial Disclosure:
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Yes

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EXPLORING CAREGIVER'S EXPERIENCE OF NURSING HOME PLACEMENT OF A RELATIVE WITH DEMENTIA

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Abstract Information
Presentation Preference: SNRS Poster Presentation
Abstract Categories: Interest Group: Aging/Gerontology
Thematic Areas: Family Health
Purpose/Aims: The purpose of this phenomenological pilot study was to seek understanding of the family caregiver’s perception of the experience of NH placement for a relative with dementia. The specific aims were to identify: 1) barriers in the placement process, 2) coping strategies, 3) factors that led to the decision of placement, and 4) caregiver’s concerns and needs.

Research Questions/Hypotheses: Open-ended interviews began with a grand tour question “What has it been like placing your loved one in a nursing home?”

Significance: Caregivers who face placement of a loved one in a nursing home (NH) experience emotional turmoil. Yet little is known about this event from the caregiver’s perspective.

Methods: In-depth interviews were used to collect data from a purposive sample of 3 women who had experienced NH placement of their husbands in the past 6 to 12 months. Interviews were audio taped, transcribed verbatim and entered into Ethnograph
software to extract coded raw data and facilitate content analysis. Using constant comparison and content analysis, themes emerged from data clusters.

Findings:

The researcher identified 3 themes: Guilt, Facing reality, and Reconnecting with life. Three data clusters were identified in each theme.

Discussion:

Variations in levels of stress seem to follow phases. Support was a mediating factor. This is consistent with Pearlin, Mullan, Semple & Skaff’s model of caregiving and stress. Further research is needed to determine if these phases exist in larger samples. Longitudinal studies are needed to determine if stress levels vary with time. Results of this pilot study suggest that nursing interventions need to be developed that can ease the burden of NH placement for family caregivers, particularly during the placement process. This pilot study challenges nurses to increase their awareness and acknowledgment of family caregiver’s needs when faced with NH placement of a family member with dementia.

Research Completed:
Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

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EXPLORING CAREGIVER’S EXPERIENCE OF NURSING HOME PLACEMENT OF A RELATIVE WITH DEMENTIA

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Abstract Information
Presentation Preference: SNRS Poster Presentation
Abstract Categories: Interest Group: Aging/Gerontology
Thematic Areas: Health Disparities
Purpose/Aims:
The purpose of this phenomenological pilot study was to seek understanding of the family caregiver’s perception of the experience of NH placement for a relative with dementia. The specific aims were to identify: 1) barriers in the placement process, 2) coping strategies, 3) factors that led to the decision of placement, and 4) caregiver’s concerns and needs.
Research Questions/Hypotheses:
Open-ended interviews began with a grand tour question “What has it been like placing your loved one in a nursing home?”
Significance:
Caregivers who face placement of a loved one in a nursing home (NH) experience emotional turmoil. Yet, little is known about this event from the caregiver’s perspective.
Methods:
In-depth interviews were used to collect data from a purposive sample of 3 women who had experienced NH placement of their husbands in the past 6 to 12 months. Interviews were audio taped, transcribed verbatim and entered into Ethnograph INDEX FIRST PREVIOUS NEXT LAST
software to extract coded raw data and facilitate content analysis. Using constant comparison and content analysis, themes emerged from data clusters.

Findings:
The researcher identified 3 themes: Guilt, Facing reality, and Reconnecting with life. Nine subthemes were identified: feelings of abandonment, failure, inadequacy, decision factors, placement process, dealing with loss sharing time, support groups, faith & coping. All the participants emphasized the need for more direct support, particularly in the placement process in which the burden of selecting a NH fell solely on the caregiver.

Discussion:
Variations in levels of stress seem to follow phases. Support was a mediating factor. This is consistent with Pearlin, Mullan, Semple & Skaff’s model of caregiving and stress. Further research is needed to determine if these phases exist in larger samples. This pilot study challenges nurses to increase their awareness and acknowledgment of family caregiver’s needs when faced with NH placement of a family member with dementia.

Research Completed:
Yes

Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

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Abstract ID: 272

Health Disparities related to Obesity among Hospitalized Patients with COPD

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Abstract Information

Presentation Preference: SNRS Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories:
  - Interest Group: Aging/Gerontology
  - Thematic Areas: Health Disparities

Purpose/Aims:
  - Purpose: Explore relationships of patient characteristics, body mass index (BMI), a measure of obesity, and rehospitalization or death among patients with COPD.

Research Questions/Hypotheses:
  - Research Questions: 1-Were there differences in patient characteristics of gender, race, age and marital status related to classes of BMI? 2-Was there a significant relationship among patient characteristics, BMI and cost of care? 3-Was there a significant relationship among patient characteristics, BMI and rehospitalization? 4- Was there a significant relationship among patient characteristics, BMI and death?

Significance:
  - Significance: Obesity is escalating in the southeastern (SE) USA and is associated with multiple disease risks. Characteristics of gender, race, age and marital status in patients with COPD may differ by BMI classifications; risk for rehospitalization and death may be increased.

Methods:
  - Methods: Descriptive, comparative, retrospective record analysis of all hospitalized patients with COPD discharged in 2004 from an academic health science center in the SE USA. BMI>25kg/m2= overweight; BMI>30kg/m2=obese.

Findings:
  - Findings: 34/83(41%) had opportunity for readmission and information to calculate BMI. Females 53%(n=18); mean age 66.5 years (SD 8.2, Range 55-85); 35%(n=12) African American(AA); 29% (n=10) married. Over 76% were overweight/obese. Obese patients had a higher percentage of diagnosed diabetes, heart failure, hypertension, and psychiatric illness. Mean BMI by AA race(37.8kg/m2) vs. non-As(28.5kg/m2) was significant (p=.047). Annual cost: non-overweight/obese $10,191/patient; overweight/obese $40,027/patient. Rehospitalized group had mean BMI= 34.9kg/m2 vs. non-rehospitalized patients=27.9kg/m2 (p=.072). Rehospitalization for AAs(60%) vs. non-AAs(34%) was significant (p=.051). BMI and ranks of annual cost had significant positive relationships (SLR, F=4.59 p=.04). Median BMI for those who died during the study year =40.6 kg/m2 vs. lived=28.9 kg/m2. Odds of death increased by 1.52 (1.019, 2.267) times for every 5 kg/m2 increase in BMI.

Discussion:
  - Conclusions: Nurses need to document height and weight (BMI). BMI interacting with race (AA) should be further studied as a potential predictor of cost, readmission, and death.

Research Completed: Yes

Abstract History:
  - This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
  - Details: Early analysis presented at SNRS 2006 in poster form.

Financial Disclosure:
  - Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
  - Yes
  - Grants/Research Support: Y
  - Medical College of Georgia
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A Friendly Dog as Potential Moderator of Cardiovascular Response to Speech in Older Hypertensives

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Presentation Preference: SNRS Poster Presentation

Abstract Categories: Interest Group: Aging/Gerontology
Thematic Areas: Chronic illness

Purpose/Aims:
The current study was designed as a preliminary study to evaluate whether dogs may be an effective intervention for moderating cardiovascular response in older hypertensives.

Research Questions/Hypotheses:
Does the presence of a friendly dog reduce the cardiovascular response of talking in older hypertensives?

Significance:
As the population ages, the number of older hypertensives is rising dramatically. Reducing blood pressure (BP) lowers cardiovascular, cerebrovascular, and renal morbidity and mortality. Cardiovascular reactivity, defined as exaggerated cardiovascular response to various stressors, is associated with the development and progression of HTN. Speaking is a social stressor, occurring frequently in daily life that is accompanied by significant surges in BP.

Methods:
Cognitively intact community living older adults (N=11) with resting BPs in the pre- to mild hypertensive range (120-150/80-100 mmHg) participated in the study. The quiet-talk-quiet (QTQ) protocol was used to assess BP responses to speaking. The QTQ protocol consisting of six minute protocol divided into two minute segments of sitting silently, talking, and sitting silently; was repeated twice, once with an unfamiliar dog in the room, once without the dog. The dog was randomly assigned to be present either for the first or the second QTQ.

Findings:

An ANOVA or ANCOVA with repeated measures 3 way interaction between dog presence (dog in, dog not in), activity (quiet, talk), and order (dog in first, no dog in first) was used to examine the moderating effect of the presence of the dog on cardiovascular reactivity; it was significant for diastolic BP \( F(1,9) = 12.8, p=.006 \), and tended to be significant for systolic BP \( F(1,8) = 4.4, p=.12 \). During speech, BP was (7/2 mmHg) lower when the dog was present.

Discussion:

BP while sitting quietly did not differ according to the presence of a dog. Pets might provide a viable means of decreasing BP surges during stressful activities in older hypertensives.

Research Completed: Yes
Abstract History: -This material has been published or accepted for publication.
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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Non-Exclusive License: Accepted Terms: Yes
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Abstract ID: 286

Dyspnea Assessment by Family Caregivers of Elders with COPD

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Abstract Information
Presentation Preference:
SNRS Podium Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Aging/Gerontology
Thematic Areas: Chronic illness

Purpose/Aims:
To examine the relationship between patient self assessments of dyspnea symptom severity in elders with COPD compared to the assessments of their symptom severity by their family caregiver.

Research Questions/Hypotheses:
There is agreement between patients with COPD and their family caregiver's assessments of the patient’s dyspnea symptom severity.

Significance:
Incongruence in dyspnea severity assessment between COPD patients’ reported symptom perceptions and the perceptions of their nurse have been reported in the literature. Incongruent assessments may lead nurses to select dyspnea management strategies that are not appropriate or effective, leading to poor patient outcomes.

Methods:
Power analysis indicated that a minimum sample of 30 patient-caregiver dyads, would be adequate based on a formulation of 80% power. A descriptive correlational
design was utilized with selected subjects (n=30 dyads) from a cross-sectional sample of COPD patient-caregiver dyads at a health science center pulmonary medicine clinic. Elderly COPD patients living with a family caregiver, with diagnoses of moderate (n = 6) or severe/very severe (n=24) COPD classifications along with their family caregiver were the study participants. The Dyspnea Severity Index (DSI), consisting of 4 visual analog scale items to measure recollection of dyspnea severity over the past week in 3 areas and one current dyspnea measurement, was the study instrument. DSI has reported test-retest reliability (0.95-0.99) and criterion validity (0.76-0.96) in COPD populations. Data were collected separately during a clinic visit; dyad members were blinded to DSI responses provided by their dyad partner. Descriptive statistics were used for data analysis.

Findings:
No significant differences were found between family caregivers’ and patients’ ratings of the patient’s dyspnea symptom severity (p=0.216).

Discussion:
Family caregivers may be helpful to nurses in the assessment of COPD patient’s dyspnea severity as proxies for the patient during acute COPD exacerbations when patients cannot speak for themselves. Additional research is needed with more diverse and larger samples.

Research Completed: Yes
Abstract History: Yes
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
FDA Disclosure:
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Abstract ID: 287

Quality of Life in Older Breast Cancer Survivors in the First Year of Post-treatment Survivorship

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The purpose of this research was to examine Quality of Life (QoL) in women, age 65 and older, with early stage breast cancer, in the first year of post-treatment survivorship.

Research questions include: 1) Describe changes that occur over time in overall QoL and QoL domains of Physical, Psychological, Social, and Spiritual well-being; 2) Examine the effects of a psychoeducational support intervention on QoL outcomes.

Significance: Although there is an abundance of research concerning QoL after treatment for breast cancer, little attention has been paid to older women.

Methods: This secondary analysis used a descriptive, longitudinal design. Fifty older
women, assigned to an Experimental (EX) Group or a Wait-Control (WC) Group were included. The Quality of Life-Breast Cancer tool measured QoL. Data were analyzed using descriptive statistics, t-tests, and Generalized Estimating Equation (GEE) methods at three time points.

Findings:
Overall QoL and within the QoL domains was reported as good at baseline. However, overall QoL, Physical, and Psychological well-being declined from Time 1 to Time 3. Social well-being improved at Time 2, then declined at Time 3. Spiritual well-being declined at Time 2, then improved at Time 3. T-tests indicated no differences between groups over time. GEE analysis indicated that there was no treatment effect over time. Both groups reported a decline in QoL. However, the EX Group reported less of a decline in QoL over time compared to the WC Group.

Discussion:
Changes in QoL occur in older breast cancer survivors after treatment. Although the sample size was small and differences between groups were not detected, it is possible the intervention attenuated the decline of QoL in the EX Group. Researchers may consider that although most intervention studies strive to improve QoL, slowing the decline of QoL may be a desirable outcome. More research is needed with larger samples to determine intervention effects.

Research Completed: Yes
Abstract History: 
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
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An Intervention to Increase Accuracy of Risk Perceptions and Knowledge of Myocardial Infarction Symptoms Among Older, Black and White High-Risk Women

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Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Aging/Gerontology
- Thematic Areas: Adult Health

Purpose/Aims:
To increase accuracy of older Black and White women’s perception of personal risk for myocardial infarction (MI), identification of cardiovascular risk factors, and knowledge of MI symptoms.

Research Questions/Hypotheses:
Will a small group, nurse-led educational intervention improve knowledge of CHD risks and symptoms?

Significance:
Older women continue to believe coronary heart disease (CHD) is a “man’s disease” and discount their MI risks. Subsequently, they often misattribute symptoms to aging and various ailments. Since CHD is women’s leading cause of death, it is vital to develop interventions to increase understanding of CHD.

Methods:
Using the Health Belief Model as framework, we conducted a quasi-experimental intervention study with equal numbers of Black and White, older (> 60) women at high-risk for CHD. Through faith-based recruiting methods, a convenience sample (N=90) using seven churches was stratified by race, then randomized into 3 control and 4 intervention groups. The experimental groups received a modified Act in Time intervention developed by the National Heart, Lung, and Blood Institute, purposely tailored for gender, age, and race. Pre- and posttest measures of perceived MI risk, risk factor identification, and knowledge of MI symptoms were administered.

Findings:
Group analysis of covariance indicated women underestimated their baseline personal MI risks, with lower perceived risk among Black women when compared to Whites (p < .001). Overall knowledge of risk factors and symptoms was limited at baseline; Black women were less able to identify risk factors and symptoms when compared to Whites (p<.001). Posttest measures indicated improved accuracy of personal risk beliefs (p<.001), risk factor identification (p=.004), and knowledge of symptoms (p<.001) in the intervention groups with stable control group scores. Interaction effects were not demonstrated, as racial groups improved similarly.

Discussion:
Tailored educational interventions for high-risk older women can increase accuracy of personal risk perceptions, risk identification, and knowledge of MI symptoms, ultimately promoting early CHD medical treatment.

Research Completed: Yes

Abstract History:

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

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How Do Older Men Cope with Relocation to Independent Living Communities?

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Abstract Categories: Interest Group: Aging/Gerontology
Thematic Areas: Adult Health

Purpose/Aims: Although elders prefer independent community living, they face serious challenges to maintaining independence—such as poor health and physical limitations. Men are increasingly relocating to independent living communities (ILC) where they receive support to remain independent and outside of institutions. The purpose of this study was to identify how older men cope with relocation.

Research Questions/Hypotheses: How do older men cope with relocation?

Significance: The seniors’ housing market is expected to triple from $126 billion in 2005 to $490 billion by 2030. It is essential to understand how men cope with relocation since few relocation studies focus on men who will increasingly be moving. Nurses associated with such transitions can then better help men formulate strategies to alleviate stress surrounding relocation.

Methods: This cross-sectional study on 30 men’s methods of coping used two structured measures – demographic form (age, marital status, race, income, education, self-rated health) and Jalowiec Coping Scale (JCS) (8 subscales measured use and effectiveness of 60 coping strategies). Both were administered within six months post move. Descriptive and correlational statistics were used. Subscales were analyzed by demographic variables.

Findings: The sample was primarily Caucasian (98%), aged 75 years or older, mostly married (53.5%) educated, with 76% reporting incomes between 20K and 60K and 73% rated health as good or excellent. The Optimistic, Confrontive, Supportant, and Self-reliant coping styles were most frequently used and effective. There were no significant differences between the groups based on demographic characteristics.

Discussion: The favored coping styles in this sample are similar to those obtained by other researchers. Once older men decided to move to an ILC, they primarily approached the move with confidence (Optimistic), chose to be proactive (Confrontive), relied on trusted support systems (Supportant), and regarded themselves Self-reliant. Nurses must develop health promotion interventions targeted to assist these elders cope positively with relocation to maintain independence and quality of life.

Research Completed: Yes

Abstract History: Financial Disclosure:

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Yes

Grants/Research Support: Y
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Speaker’s Bureau:
Other Financial or Material Support:

FDA Disclosure: Cleared: Yes
Abstract ID: 316

The Mitigating Effects of Physical Activity and Depressive Symptomatology on Cognition in Older Adults

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This study examined the combined role of physical activity and depressive symptomatology on cognition in older adults with and without Mild Cognitive Impairment (MCI).

Research Questions/Hypotheses:
Research suggests physical activity and sedentary behavior can impact cognitive functioning; however, depression and social networks may mitigate these effects as suggested by the Depression-reduction Hypothesis and the Social Stimulation Hypothesis. This study investigated these hypotheses simultaneously by including all of these variables in a structural equation model.

Significance:
By understanding the contributing factors of cognition, interventions can be developed to improve cognitive health in this growing number of older adults.

Methods:
For 86 older adults with and without MCI, cross-sectional data were collected. Time engaged in physical activity, sedentary behavior, and sleeping were garnered from the Physical Activity Questionnaire. Depressive symptomatology and social networks were measured from the Geriatric Depression Scale and the Lubben Social Networks Scale, respectively. Three measures of cognition related to visual processing were used to assess speed of processing (Useful Field of View), executive functioning (CLOX), and spatial attention and working memory (WMS III Spatial Memory Span). A structural equation model was specified whereby paths from age, time in physical activity, time in sedentary behavior, and time sleeping had direct and indirect effects on depressive symptomatology and cognition.

Findings:
The model revealed that time in physical activity predicted lower depressive symptomatology while more time sleeping predicted high levels of depressive symptomatology. Higher levels of depressive symptomatology predicted poorer cognitive functioning. Social networks did not have a relationship to the hypothesize variables. This model fit the data covariance matrix well (GFI = .94; AGFI = .94).

Discussion:
These results suggest depressive symptomatology is a moderating factor between physical exercise and cognitive functioning. Interventions designed to improve cognition in older adults should consider ways to abate depressive symptomatology.
Abstract ID: 319

Comparison of African American and Afro-Caribbean Older Adults’ Self-Reported Health, Function and Health-Related Behaviors

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Abstract Information

Presentation Preference:  
SNRS Podium Presentation

Willing To Submit Poster?  
Yes

Abstract Categories:  
Interest Group: Aging/Gerontology  
Thematic Areas: Health Disparities

Purpose/Aims:  
To describe patterns of self-reported health, health habits and functional abilities among two groups of older Blacks in the U.S.

Research Questions/Hypotheses:  
There will be no differences between African American and Afro-Caribbean elders' self-reported health, health habits and functional abilities.

Significance:  
Black Americans represent diverse populations with vastly different histories and culture. Most researchers treat Americans of the Black race as a homogeneous group. Understanding health-related intra-racial differences may lead to strategies to reduce health disparities.

Methods:  
Participants were community-dwelling, low income individuals age 55 and older. Data collection took place at their homes or another location chosen by the participant.

Findings:  
The two groups differed on several sociodemographic characteristics. Eighty-eight African American and 106 Afro-Caribbean participants were interviewed. The majority of African Americans were fourth or fifth generation Americans, mean 4.64 (SD .82) while the Afro-Caribbean were all first generation, F (1,183) = 826.76 p=.0001. The African Americans had lower incomes, chi square (2, N = 191) = 17.5234, p=.0006 and were more likely to be widowed than the Afro-Caribbean participants, chi square (2, N = 191) = 40.1843, p <.0001. The two groups did not differ on education or cognitive status and, when age was controlled, they did not differ on reported functional abilities. When asked about alcohol use, 13 (15%) African Americans answered affirmatively vs 32 Afro-Caribbeans (30%) chi square (2, N = 191) = 6.77, p=.0093. For tobacco use, 25 (28%) African Americans answered affirmatively vs only 5 (5%) Afro-Caribbeans, chi square (2, N = 191) = 20.06, p<.0001. There was no significant difference in the two groups’ responses to the individual self-rating of health question. On the SF-8, African-Americans rated negative effects of their health higher than did Afro-Caribbeans F (2,190) 14.00 p=.0002 (adjusted for age).

Discussion:  
The discussion will center on similarities and differences between groups and possible relationships to cultural influences.

Research Completed:  
Yes

Abstract History:  

Financial Disclosure:  
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?  
Yes

FDA Disclosure:  
Cleared: Yes

Non-Exclusive License:  
Accepted Terms: Yes
Knowledge of Elder Abuse in Nurses

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Presentation Preference: SNRS Poster Presentation

Abstract Categories:
- Interest Group: Aging/Gerontology
- Thematic Areas: Adult Health

Purpose/Aims:
Determine relationship of RNs' knowledge of elder abuse, years of RN experience, level advancement status, and effect of an education intervention.

Research Questions/Hypotheses:
- What is the association between the RNs knowledge of elder abuse and years of experience? What is the association between the RNs knowledge of elder abuse and clinical level advancement status? What are the characteristics of RNs caring for patients at risk for elder abuse? What is the association of an education intervention on elder abuse and knowledge of elder abuse of RNs?

Significance:
Elder abuse is a serious and prevalent problem estimated to affect 700,000 to 1.2 million adults annually. A serious underreporting exists by clinical professionals; estimated 1 in 10 cases of elder abuse reported. Nurses have a responsibility to identify victims of elder abuse. The RN needs to use their knowledge and clinical decision-making skills to make accurate clinical decisions regarding patients at risk for elder abuse.

Methods:
Descriptive, correlational design. Nonrandom convenience sample of 60 RNs employed in an ED. RNs were surveyed during staff meetings with presentation of the Education Intervention. Administration of the Elder Abuse Knowledge Survey as a pre-test; Demographic Information Form; The Education Intervention and quiz presented and developed by the journal RN.com. The article is titled, “Domestic Violence: Elder Abuse What Healthcare Providers Need to Know”. 6 to 8 weeks after the Education Intervention is completed, the Elder Abuse Knowledge Survey (post-test) will be re-administered. Limitations: Number of RNs in the ED may decrease during the months the study is implemented; response time of the RN to submit the educational quiz/survey may be prolonged or none at all. Preliminary Statistics: Descriptive statistics; Bivariate Analysis: paired t-test, correlations.

Findings:
Study-in-progress. There is a lack of knowledge regarding elder abuse in nurses; gaps of knowledge and their existence will be identified.

Discussion:
Study-in-progress

Research Completed:
Yes

Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure:
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Enhancing Cancer Caregiver Self-Efficacy in Symptom Management and Home Care

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Presentation Preference:
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Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Aging/Gerontology
Thematic Areas: Chronic illness

Purpose/Aims:
To determine if an individualized, experiential training prior to hospital discharge will increase the level of cancer caregiver’s self-efficacy in home care and symptom management.

Research Questions/Hypotheses:
An individualized and experiential training will increase family caregiver self-efficacy in home care and cancer symptom management.

Significance:
In 2007, approximately 1.5 million people will be diagnosed with cancer where majority will be 55 and older. Attributed to early detection and effective treatments, more will survive the disease. Concomitantly therefore, a growing number of family caregivers will provide care to their cancer-stricken loved ones at home. Symptom management is an essential component of effective home caregiving. However, most caregivers do not feel confident of the knowledge and skills to care for their cancer care-recipients.

Methods:
Pilot study (N = 20) at Duke University Medical Center. One-to-one training was provided to caregivers of older cancer patients before hospital discharge. The Cancer Caregiver Self-efficacy (CCSE) scale was collected before and after the training, and at 1 and 2 weeks of hospital discharge.

Findings:
Total CCSE increased significantly following the intervention in all time points. The largest increase was immediately after the training: the mean total score increased by 41.1 points (Z=4.49, p <.01). This increase was sustained at 1 and 2 weeks of hospital discharge of older cancer patients (31.7 points, Z=3.22, p <.01 and 39.4 points, Z=3.74, p<.01 respectively).

Discussion:
An individualized and experiential approach to caregiver training was associated with a significant improvement in self-efficacy in home care and symptom management among family caregivers. As the provision care of care shifts from acute settings to home settings, the impetus for nurses is on how to better prepare family members for their role as caregivers. In addition, through this training, we have the potential to improve patient outcomes through better care from their family caregivers.

Research Completed:
Yes

Abstract History:
Financial Disclosure:
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Grants/Research Support : Y
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Predicting Individual Physical Activities in Community-dwelling Older Adults

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Purpose/Aims:
The purpose of this paper was to examine what factors predict participation in different types of activities in older adults.

Research Questions/Hypotheses:
Conceptualization of the factors that correlated with less physical activity may be used for developing interventions that promote such activity in older adults.

Significance:
Despite the advantages of physical activity for facilitating successful aging, numerous factors are known to reduce such engagement with age being the most pronounced factor. Older adults typically experience profound declines in physical activity (Norman, Bellocco, Vaida, & Wolk, 2002; Westerterp & Meijer, 2001); however, age-related medical diagnoses and accompanying physical declines and various psychosocial variables may account for this decline.

Methods:
The current investigation used data from 158 community-dwelling older adults from the Accelerate study, who were administered several cognitive, health, and lifestyle measures, including a physical activity questionnaire. Participants indicated how often they engaged in ten distinct physical activities (i.e., household chores, yard work or gardening, walking for exercise, jogging, riding a bike, exercise cycle, dancing, bowling, golf, exercise calisthenics, and swimming) along with an indicator of sedentary activity. Exploratory step-wise regressions were used to determine which factors (e.g., age, Mini-mental Status Exam score, education (yrs), far visual acuity, number of falls, alcohol use, activity limiting pain, Geriatric Depression Scale score, Lubben Social Networks Score, number of medical conditions) were associated with activity participation levels.

Findings:
Factors that repeatedly emerged were age, social networks, alcohol use, and number of medical conditions. However, it was also found that no one set of factors were consistently associated with involvement in all the physical activities.

Discussion:
These findings indicate that interventions designed to increase physical activity levels in older adults should consider both the type of activity and the indices of activities to be employed in order for an exercise program to be effective.

Research Completed:
Yes

Abstract History:

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Relief of Symptoms of Breast Cancer and Treatment in Rural Older Women Survivors

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Abstract Information
Presentation Preference: SNRS Poster Presentation

Abstract Categories:
Interest Group: Aging/Gerontology
Thematic Areas: Chronic illness

Purpose/Aims:
Provide information for future health care of rural older women breast cancer survivors. S.A: 1. Describe complementary/alternative therapies used by rural older women breast cancer survivors to relieve symptoms of breast cancer and treatment; 2. Describe beliefs about health care availability by rural older women breast cancer survivors.

Research Questions/Hypotheses:
1. What complementary/alternative therapies do older rural women breast cancer survivors use to alleviate symptoms attributed to breast cancer and treatment? 2. Who/what do older rural women breast cancer survivors identify as their health care source? 3. What do older women breast cancer survivors identify as useful/deterrents to receiving health care?

Significance:
Older women surviving breast cancer will increase as baby boomers age and breast cancer treatment options improve. These survivors may have symptoms attributed to breast cancer years after diagnosis. Many also live in rural areas of Florida below the poverty level, miles from health care providers, and at risk of not having adequate health care. They may use other methods to relieve symptoms associated with breast cancer and treatments which may or may not be appropriate.
and effective. However, little is known about symptoms attributed to breast cancer in this population, alternative and collaborative therapies used to treat these symptoms, nor access to health care.

Methods:
Descriptive, one-time-only design with structured open-ended interview questionnaires. Researchers will recruit participants from rural Florida, four-county area using hematology/oncology and radiation oncology databases. Potential participants will be mailed a brief description of the study, demographic and interview questionnaires, and self-addressed stamped envelop. Agreeing participants will return the questionnaire in the envelop. The researchers will send two more letters to those who do not respond to the initial mailing for further recruitment.

Findings:
Data will be analyzed using descriptive statistics and narrative analysis of interview questionnaires

Discussion:
Findings will provide direction for future intervention studies improving health care for this population.

Research Completed:
Yes

Abstract History:
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Spirituality, Health and Quality of Life in Elders Volunteering for Habitat for Humanity

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Willing To Submit Poster?  
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Abstract Categories:  
Interest Group: Aging/Gerontology  
Thematic Areas: Adult Health  
Purpose/Aims :  
The purpose of this study is to describe the spirituality, health and quality of life in a sample of community dwelling elder adults volunteering on a Habitat for Humanity blitz build.  
Research Questions/Hypotheses :  
What are the levels of spirituality, physical health, mental/emotional health and quality of life in these elder volunteers?  
Significance :  
The available literature on elder volunteering focuses primarily on volunteer activities that are not physically demanding. Little is known about the health and individual characteristics of elders who volunteer to participate in physically demanding activities or whether participation in these types of volunteer activities
contributes to higher levels of health and well-being.

Methods:
This is a mixed methods study, combining the analysis of qualitative interviews with the analysis of validated quantitative measurement instruments. The quantitative measures used were the Daily Spiritual Experiences Scale (DSES), the SF-12 scales for physical health (PCS) and mental/emotional health (MCS) and a self-report of Quality of Life (QOL). This sample was a convenience sample of 40 adults ranging from 57 to 88 years of age.

Findings:
Findings from analyses of quantitative measures are reported here; findings from analyses of qualitative data will be presented elsewhere. The studied elder volunteers had higher levels of spiritual well-being (as measured by the DSES and reflected in the qualitative interviews). Although these volunteers had a higher level of mental/emotional well-being (MCS) than the national norm, their physical health (PCS) was not different than the national norm. Statistically significant positive relationships were noted between the QOL and DSES scores. As this sample also had higher DSES scores than the national norm, we propose that our sample may also have a higher QOL than the norm.

Discussion:
Further research is indicated to determine whether interventions to increase volunteering and improve spiritual well-being are effective in improving both mental/emotional health and quality of life in community dwelling elders.

Research Completed: Yes
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
FDA Disclosure:
Cleared: Yes
Non-Exclusive License:
Accepted Terms: Yes
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Voices of Residents with Cognitive Impairment

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Purpose/Aims: This presentation will include an examination of themes that emerged from conversations between nurses and nursing home residents with dementia.

Research Questions/Hypotheses: What themes emerge in therapeutic conversations between nurses and nursing home residents with moderate to advanced Alzheimer’s disease?

Significance: Residents with dementia have long been ignored and misunderstood. They have been characterized as disruptive, burdensome, and problematic but they are rarely given the opportunity to share their perspective. Although declining communication abilities present a barrier to developing therapeutic relationships, cognitively impaired residents can benefit from the opportunity to express their emotions and concerns.

Methods: The study was a qualitative analysis using conversation analysis (Holsten & Gubrium, 1994) based on three premises: 1) interaction exhibits identifiable patterns, 2) interaction is contextually oriented 3) no details in interactions can be dismissed as accidental or irrelevant. Advanced practice nurses met with cognitively impaired residents at the nursing home over a twelve week period (three times per week up to 30 minutes per session). Conversations were taped recorded and transcribed verbatim.

Findings: Awareness of self, environment and cognitive limitations were evident in the themes that emerged from conversations.

Discussion: Conversation with elders who have dementia is often avoided and verbalizations are commonly dismissed as devoid of meaning. This analysis reveals that residents did express awareness and insight about themselves, their condition and their environment. Implications for nursing will be discussed.

Research Completed: Yes

Abstract History: -This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

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Cognitive Impairment and Everyday Functioning in Older Adults with HIV

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Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Aging/Gerontology
Thematic Areas: Chronic illness

Purpose/Aims: The purpose of this study was to examine cognitive and everyday functioning in older and younger adults with and without HIV.

Research Questions/Hypotheses: Based on prior research and extrapolation of findings, it was hypothesized that older adults with HIV would experience cognitive and everyday deficits compared to younger adults with HIV and older adults without HIV.

Significance: This study is important because it shows what cognitive abilities are particularly compromised in this growing population of older adults with HIV. By finding what cognitive deficits impact everyday functioning, specific cognitive remediation therapies can then be applied.

Methods: HIV positive (N = 87) and HIV negative (N = 58) adults were assessed on a number of neuropsychological tests that measure a variety of cognitive domains (e.g., speed of processing, memory/attention, executive functioning, psychomotor ability) and everyday functioning measures (e.g., looking up phone numbers, finding items on a shelf). A 2x2 multivariate analysis of covariance (MANCOVA) was conducted. The two independent variables were HIV status and age (below 50 years old, 50 and older). The covariate was premorbid intelligence.

Findings: Results indicated that age and HIV were independent predictors of cognitive deficits; however an age x HIV interaction was found for memory/attention and executive functioning. Specifically, older adults with HIV experienced significantly more deficits in this area. A hierarchical linear regression found that adults with HIV who were having difficulty with laboratory measures of everyday functioning had more deficits in speed of processing ability.

Discussion: Because of speed of processing deficits are found to be related to poorer performance in everyday functioning, speed of processing training should be attempted to improve functioning in this growing number of adults. Further study and interventions are posited.

Research Completed: Yes

Abstract History:

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

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Abstract ID: 362

Stigmatization and Health-outcomes in Older Lesbians

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Presentation Preference: SNRS Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Aging/Gerontology
Thematic Areas: Health Disparities

Purpose/Aims:
Most research in the United States focuses on adults in the age range of 50-69. Older Lesbians over 65 remain under-represented in the literature concerning health-outcomes. This study aims to rectify this dearth of information.

Research Questions/Hypotheses:
There are two hypotheses: 1. Older lesbians (50 years of age or older) are hardier than younger lesbians (40 years of age or younger) and 2. Elderly lesbians with internalized homophobia will be less likely to seek mental health services.

Significance:
To date, there has been no research that focuses upon health disparities in older lesbians living in the south.

Methods:
Participants consisted of self-identified lesbians (n=81) from two states in the southeastern part of the U.S.; one group aged fifty years (35) and older and a second group aged 40 years or younger (46). Instruments included several scales, among them the Lesbian Internalized Homophobia Scale (Szymanski and Chung, 2001), the Proactive Coping Inventory, a demographic and a health survey. Statistics: ANOVA was performed to analyze the data collected for the first hypothesis. A multiple regression was performed to accept or reject the second hypothesis, with breakdowns for race and partial correlation controlling for age.

Findings: Analysis revealed that there was no statistically significant difference between older and younger Lesbians in hardiness. There was also no statistical relationship between internalized homophobia and mental health seeking behavior.

Discussion: These findings indicate that health disparities between older and younger lesbians may not exist when considering mental health seeking behavior. Implications for nursing practice and research are provided.

Research Completed: Yes
Abstract History: Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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A Theory-Derived Intervention to Decrease Depression of Home-Dwelling, Older Women: A Qualitative Analysis

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Presentation Preference: SNRS Podium Presentation

Abstract Categories:
- Interest Group: Aging/Gerontology
- Thematic Areas: Women's Health

Purpose/Aims:
To elicit the participant’s experience of reviewing her life with her home care worker as part of testing the efficacy of a Therapeutic Life Review (TLR) intervention.

Research Questions/Hypotheses:
What was it like to have a planned time to share stories about your life? How do you think sharing life stories might affect depression or loneliness among older women?

Significance:
Approximately 24 percent of the home care population experiences depression. Depression worsens symptoms of pain and immobility and may increase health care costs. The goal of Therapeutic Life Review (TRL), based on Erikson’s model of human development, is integration and involves reflecting on and telling stories about one’s entire life. Facilitation of TLR by home care workers is an innovative model offering a cost-effective and accessible means of improving mental health for older women.

Methods:
A semi-structured, taped interview was used to record each woman’s (N=14) impressions of the experience. The interviews were transcribed verbatim, individually coded and analyzed by a team of interdisciplinary researchers using constant comparison techniques, to identify categories and themes.

Findings:
Five themes: ‘someone was there to listen to my story’, ‘it was a special time’, ‘a valued interaction with the home care worker developed’, ‘remembering was meaningful and pleasurable’, and ‘integration with one’s lived experiences was healing’.

Discussion:
Two benefits of the intervention emerged from the perspectives of the participants: Valued interaction between the older client and the home care worker and a demonstrated heightened ego integrity and lessened depression of the clients. As society confronts an increasing population of older persons with chronic health care needs, the importance of cost-effective, community-applied, effective interventions is evident. TRL offers a promising intervention to enhance the quality of life of older Americans. Because the older women participants were primarily ethnically homogeneous, from one agency, and private pay, future research should include greater diversity among participants.

Research Completed: Yes

Abstract History:
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Financial Disclosure:
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Yes

Grants/Research Support: Y
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Depression in Older Women after Myocardial Infarction

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The purpose of this study was to describe depression in older women 6 to 12 months after MI and to examine the relationships of comorbidities, fatigue, BMI, and age to depression. 

Research Questions/Hypotheses:
1). What proportion of older women have scores suggestive of depression 6 to 12 months after MI?  
2). Do the number of comorbidities, the presence of fatigue, BMI, and age influence depression scores?

Significance:
Examining depression is important in myocardial infarction (MI) patients because those identified as having mild to major depression report a lower adherence to risk reduction behaviors and have higher mortality. Examining depression in women is especially important post MI because 35% of women compared to 18% of men will have a recurrent MI within 6 years.

Methods:
A cross-sectional design was used to examine depression in 127 women (ages >65) 6-12 months post discharge with a diagnosis of MI by ICD-9 code. All women completed a demographic health form, the Geriatric Depression Scale, the Revised Piper Fatigue Scale, and had their height and weight measured.

Findings:
Women ranged in age from 65-91 (M=75.4, SD=5.99). The majority were white (82%), married (52%) with a high school education or below (68%). Most had a history of hypertension (75%) and high cholesterol (61%). Only 12% currently smoked, and 33% had diabetes. Most were overweight (38.6%) or obese/extremely obese (34.6%). Almost a third of the women (32.3%) scored >5 on the GDS suggesting depression. A multiple linear regression model to examine the influence of comorbidities, fatigue, BMI, and age to depression was not significant (F=1.577 (4, 122); p=.185).

Discussion:
Almost one third of older women report symptoms suggesting depression after MI. Comorbidities, fatigue, BMI, and age do not explain depression in older women post MI. Further studies are needed to explore these and other factors that may influence depression after MI in older women.
Abstract ID: 375

**Pain Intensity among Older Adults: Does it Vary more Within or Between People?**

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Purpose/Aims: This study (a) investigated the extent of intra-individual and inter-individual variability in pain intensity and (b) examined demographic, cognitive, and psychological correlates of daily pain among older adults.

Research Questions/Hypotheses:
1. What is the extent of intra-individual variability in pain intensity, and how does it compare to between-person variability in pain reports among older adults? 2. Is intra-individual variability in daily pain related to demographic, cognitive, and psychological variables?

Significance: Approximately 50% of community-dwelling older adults live with persistent pain. Few studies have investigated the extent to which pain varies within the day or across the weeks, despite its potential clinical relevance. Factors that may influence this variability, such as mood or cognitive status, have not been previously investigated.

Methods: This study was conducted in 45 community-dwelling older adults (mean age = 74 years; 34 women). Data were collected twice per day for 60 consecutive days. Pain intensity was assessed on a numerical rating scale.

Findings: The results indicate high rates of within-subject and between-subject variability; there was approximately 80% as much within-subjects variance in pain intensity as there was between-subjects. Using mixed-effects regression models, no significant between-person associations were found between pain level and demographic characteristics (age, education, sex, income, or race) or cognitive indicators (speed, reasoning, or memory). Within-persons, significant associations were noted with negative affect and perceived competence; on those days when individuals’ negative affect was high or perceived competence was low, pain intensity was reported as worse. Furthermore, significant random effects indicated that these within-person associations varied between individuals.

Discussion: These findings highlight the magnitude of intra-individual variability in subjective pain intensity, and offer insights into psychological variables that covary with pain. The findings suggest that static pain measurement may miss important within-person fluctuations, and that it is important to account for other psychosocial variables when assessing pain.
Dose Adjustment of Prescribed Medications Related to Smoking Cessation: Is It Necessary?

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Purpose/Aims:
The purposes of this study are to identify prescription medications that require dosage adjustment or monitoring in patients who stop smoking and to provide necessary recommendations for dosage adjustment based on available evidence.

Research Questions/Hypotheses:
Would smoking cessation affect therapeutic regimen of the prescribed medications in patients, particularly older adults?

Significance:
One of goals of the Healthy People 2010 in the US is to decrease smoking prevalence from 24 to 12 percent by the year 2010. Healthcare providers strongly recommend tobacco cessation and usually prescribe nicotine replacement or bupropion to help patients quit smoking. However, it is not well recognized that the metabolism of many prescribed drugs are affected by tobacco smoking, and that smoking cessation may necessitate dosage adjustment for these drugs. It is particular concern in older adults, who are generally more susceptible to drug effects, with adverse drug reactions. Given the pharmacodynamic and pharmacokinetic changes, the high prevalence of comorbidities, and use of multiple prescribed drugs in older adults, prediction of drug safety and efficacy after smoking cessation becomes complex.

Methods:
A comprehensive literature review was conducted in 2007 using a computerized drug interaction program and multiple PubMed searches to identify prescription drugs with clinically significant pharmacokinetic or pharmacodynamic changes caused by smoking cessation.

Findings:
Although most of the evidence is case report, dosage adjustments are clearly indicated for warfarin, olanzapine, clozapine and theophylline. Careful monitoring is recommended for other drugs, including those for diabetes and Alzheimer’s disease. For many of the affected drugs, smoking cessation reverses smoking-induced P450 hepatic enzyme levels to normal, increasing plasma concentrations in patients whose dose was established while smoking.

Discussion:
Smoking cessation may alter plasma levels of some drugs to potentially toxic levels. This effect should be concerned in care of older adults whose drug metabolism is affected by aging and who are more likely to take multiple drugs.

Research Completed:
Yes

Abstract History:
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Factors Associated with Parenting Stress among African American Grandmothers Rearing Grandchildren

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Purpose/Aims: This paper describes the relationship between parenting attitudes, parenting stress, and emotional distress faced by African American custodial grandmothers/kin.

Research Questions/Hypotheses: What is the relationship between parenting attitudes, parenting stress and emotional distress in African American custodial grandmothers/kin? What do these grandparents/kin view as specific challenges that increase their stress?

Significance: Since the mid 1980’s, the number of children being raised by grandmothers in African American families has grown rapidly. Grandmothers experience many stresses and challenges in their parenting role. Efforts are needed to better understand the parenting stress of custodial grandparents and develop interventions to reduce their stress and to facilitate their new parenting role.

Methods: This was a descriptive correlational study of custodial grandmothers involved in a community-based case management intervention. Data were collected using questionnaires focused on parenting attitudes (Adult Adolescent Parenting Index; AAPI), parenting stress (Parenting Stress Index; PSI), and emotional distress (Brief Symptom Inventory; PSI). Focus group methodology was used with 18 grandmothers to elicit their views regarding specific parenting challenges they face.

Findings: Preliminary findings based on data from 29 grandmothers indicate moderate but significant correlations between parenting stress (PSI) and the AAPI subscales of power (r = .42) and independence (r = .46). Relationships between parenting stress and the somatic subscale (r = .38) and total score (r = .41) on the BSI were also significant. These findings establish a relationship between parental attitudes, parenting stress, and custodial grandmothers’ caregiver distress. In focus group analysis, we identified five major challenges encountered by grandmothers in parenting their grandchildren: (a) the complex needs of the children; (b) establishing an effective parenting style; (c) dealing with adult children; (d) advocating for the children; and (e) meeting their own personal needs.

Discussion: Clearly there is a need to develop interventions for custodial grandparents that helps reduce their stress and improve their parenting skills.

Research Completed: Yes

Abstract History: -This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
-Details: Gerontological Conference in Dallas Texas, November, 2006 (in part)

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FDA Disclosure: Cleared: Yes

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Abstract ID: 472

Improvements in End-of-Life Care in Nursing Homes: 2004-2006

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Purpose/Aims:
Over 25% of U.S. deaths occur in nursing homes. Yet, very few nursing home residents receive optimal end-of-life (EOL) care. The purpose of this study was to document trends in EOL care in nursing homes from 2004 through 2006.

Research Questions/Hypotheses:
In light of recent public initiatives to highlight and enhance EOL care, have EOL practices in nursing homes changed from 2004 to 2006? Specifically, were there significant increases in: the number of residents identified as end-stage prior to death, the use of “Do Not Resuscitate” (DNR) orders, and the use of hospice interventions?

Significance:
Nursing home residents who receive hospice interventions tend to have superior pain assessments, less invasive procedures, and enhanced satisfaction with care.

Methods:
We conducted a secondary analysis of minimum data set (MDS) assessment data collected by 103 nursing homes. Assessment data were linked with mortality data for individuals residing in these facilities. The sample sizes exceeded 20,000 residents for each of our 6 month cohorts (x 6).

Findings:
Our findings demonstrated a progressively increasing incidence of residents who were identified as end-stage prior to death, from 15.3% of the residents who died during the first 6 months of 2004 to 17.8% of those who died in late 2006. The portion of dying residents who had “Do Not Resuscitate” orders increased dramatically from 46.9% in the first half of 2004 to 77.6% of those who died during the last 6 months of 2006. Hospice usage among the residents who died increased from 8.3% to 13.5%. The proportion of decedents who received tube feedings during their last 3 months of life decreased from 9.6% to 7.7%.

Discussion:
While these recent findings demonstrate improvements in EOL care, they also support the belief that the dying trajectory is frequently undocumented and many residents who could benefit from hospice care do not receive it.

Research Completed:
Yes

Submitted By:
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Examining Falls in the Elderly

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Abstract

Presentation Preference: SNRS  Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Aging/Gerontology
- Thematic Areas: End of life issues

Purpose/Aims:
The purpose of this project was to determine if using assistive devices can predict falls in elders. Findings have implications for patient safety and efficient use of resources.

Research Questions/Hypotheses:
- What is the use of assistive devices for ambulation by elders six months prior to death? Are elders who use assistive devices more or less likely to fall?

Significance:
Approximately 30-50% of elders fall annually. Falling is the fifth leading cause of death among those older than 65 years. Hospitalizations are more complicated and lengthy for fall survivors. A rapidly aging population mandates the need for increased understanding of falls and the use of assistive devices.

Methods:
Secondary analysis of the 2nd Longitudinal Study of Aging Wave Three data set was performed. This data represents the US aging population consisting of 8,478 eligible subjects with 906 in a decedent subset.

Findings:
There was a 68.4% overall response rate. 55.5% were women. 68.7% were over 75 years. Age (p = .003) and residence (p < .001) were significant for those using special equipment walking. Age (p < .001) and residence (p < .001) were also significant for those who fell since last interview. In both instances the odds of falling increased with those who were older and those who lived independently.

Discussion:
These results can be used to improve patient safety through effective screening and education programs. Additional implications for nursing and health policy will be discussed.

Research Completed: Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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Spreading the Word: Teaching Caregivers to Support Meals at Home

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Aging/Gerontology
- Thematic Areas: End of life issues

Purpose/Aims:
This study supports the testing of a dissemination method for a mealtime intervention for caregivers of persons with late-stage dementia.

Research Questions/Hypotheses:
1) Develop and pre-test standardized trainer educational materials including:
   (a) information about the progressive nature of dementia; (b) the need for mealtime supervision; (c) ways to modify the environment and caregiver behavior; (d) methods to increase nutritional intake; and (e) ways to identify signs that the person with dementia may need to be referred to a healthcare provider. 2) Establish resource staff’s capacity for guiding caregivers in developing a mealtime plan of care based on the DVD and brochure, and trainer educational materials.

Significance:
The 2006 Report of the South Carolina Alzheimer’s Disease Registry estimates that by 2030 the number of persons in SC affected by dementia will be 90,000; furthermore, currently of the 52,741 persons enrolled in the Registry, 56% of live in the community. Most family members and caregivers must assume increased responsibility for assisting with meals and often do so with little preparation for the task they assume.

Methods:
This study will use a modified focus group methodology using the three groups of interest – homecare/hospice nurses, adult daycare workers, and support group leaders. Each focus group will meet twice to assess members’ knowledge, perceptions, and prior training about mealtimes. A pre post-test, developed with health literacy and racial/ethnic sensitivity, will be administered. Members will be given a training manual. At the second meeting, the contents of the manual will be reviewed, and members will be asked to apply the content to representative vignettes with feedback from the group. Finally, select members will teach family caregivers.

Findings:
Pending - Will be discussed at the conference.

Discussion:
This train-the-trainer model may be an appropriate method to disseminate a mealtime intervention for families.

Research Completed: No

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes
Grants/Research Support: Y
South Carolina Nutrition Research Consortium
Consultant:
Stock/Shareholder:
Speaker’s Bureau:
Other Financial or Material Support:

FDA Disclosure:

INDEX FIRST PREVIOUS NEXT LAST
Potentially Inappropriate Medication Prescribing for Elders in the ED

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Willing To Submit Poster?
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Abstract Categories:
Interest Group: Aging/Gerontology
Thematic Areas: Adult Health

Purpose/Aims:
To describe potentially inappropriate medication prescribing for elder patients during visits to the emergency department in the US in 2004 and 2005.

Research Questions/Hypotheses:
What is the prevalence of potentially inappropriate prescribing for patients 65 and older in the emergency department in the US?

Significance:
Drug prescribing in the elderly is potentially one of the riskiest interventions providers may recommend for elderly patients. Thirty percent of hospital admissions may be related to drug problems or toxicity. Older persons generally have more chronic diseases and take more prescription and nonprescription medications than any other segment of the population in the United States. At the same time, physiologically, elderly persons have declining renal and hepatic function as well as changes in the proportions of lean body mass and adipose tissue, thus increasing risk for drug to drug interaction and adverse effects.

Methods:
This is a secondary analysis of the National Hospital Ambulatory Medical Care Survey (NHAMCS)- Emergency Department (ED) - for 2004 and 2005 of patient visits who were aged 65 years and older. From these visits the prevalence of potentially inappropriate prescribing as defined by 2003 Beers criteria are identified.

Findings:
In 2004, 28% of prescriptions written in the ED for patients 65 and older were potentially inappropriate. In 2005 23% of prescriptions written in the ED for patients 65 and older were potentially inappropriate. The most commonly prescribed medication classes (potentially inappropriate) were anticholinergics/antihistamines, followed by analgesics, narcotics and NSAIDs, then sedatives, hypnotics and anxiolytics. The most four most commonly prescribed (potentially inappropriate) medications were promethazine, ketorolac, meperidine and lorazepam.

Discussion:
Although the percentage of potentially inappropriate medications prescribed declined over the 2 year study period, this phenomena should continue to be monitored. Strategies for decreasing potentially inappropriate drug prescription are identified.

Research Completed:
Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
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Non-Exclusive License:
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Influence of Computer Mediated Communication on Life Satisfaction in the Elderly: A Pilot Study

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Presentation Preference:
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Willing To Submit Poster?
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Abstract Categories:
Interest Group: Aging/Gerontology
Thematic Areas: Adult Health

Purpose/Aims:
To describe how computer mediated communication (CMC) influences life satisfaction in community dwelling older adults.

Research Questions/Hypotheses:
How does CMC influence life satisfaction in older adults? Objectives: 1) to describe the overall effects of CMC on life satisfaction and 2) to describe changes CMC makes in life satisfaction.

Significance:
Growing older often means adjusting to losses such as declining physical health, decreased social networks, isolation, and decreased social mobility. Loss of independence and not wanting to burden others leads to self-imposed isolation, which can cause loneliness, depression, and decreased life satisfaction. Older adults define life satisfaction not only in terms of health but include family relationships, social contacts, and activities. CMC allows access to a social network of supportive relationships. Older adults are using CMC at an increasing rate, so it is important to gain a better understanding of them in this context.
Methods:
This qualitative, exploratory-descriptive method utilized in-depth face-to-face interviews using open-ended questions, the Six-Item Screener cognitive screening tool, computer use and social activities questionnaire, and a demographic data survey. The researcher used content analysis for data analysis. A detailed audit trail ensured trustworthiness. The small sample size was a limitation.

Findings:
The purposive sample consisted of a 77-year-old, white male, wheelchair bound from progressive MS, a 75-year-old, white female with severe COPD, and a 70-year-old healthy, Philippine female. Four themes emerged: Access, Expendable necessity, Achievement, and Reciprocity. Access to information and connection with others were themes mentioned by all participants. These older adults felt the computer was a valuable but dispensable tool. Overcoming challenges and finding fulfillment resulted from success in using computer technology. Reciprocal support (helping and giving help) brought the most satisfaction.

Discussion:
The description of how CMC affects life satisfaction can guide future research with other groups where social isolation is health related.

Research Completed: Yes
Abstract History: Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
FDA Disclosure:
Cleared: Yes
Non-Exclusive License:
Accepted Terms: Yes
Submitted By: susang@uca.edu
Fatigue and Physical Activity in Older Men and Women after Myocardial Infarction

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Student Level:
Purpose/Aims:
The purpose of this study was to describe physical activity in older men and women who report fatigue after MI and to examine the influence of fatigue on participation in physical activity.

Research Questions/Hypotheses:
The research questions were: (a) Is there a difference in physical activity between older men and women 6-8 months after a MI? and (b) When controlling for age, do the subscales of the Revised Piper Fatigue Scale (RPFS) (behavioral/severity, sensory, affective, cognitive/mood) explain the variance in moderate physical activity 6 to 8 months after MI?

Significance:
Fatigue is prevalent after a myocardial infarction (MI) and a common barrier to participation in physical activity. Strong scientific evidence supports physical activity as an important secondary prevention strategy for reduction of cardiac risk factors associated with subsequent MIs.

Methods:
The sample was drawn from the parent study of 98 men and women, ages 65 and older, who were 6-8 months post MI. Using a cross-sectional descriptive design, participants identified if they had fatigue that was different than fatigue prior to MI. All those indicating fatigue after MI (N=74) were included in this study and completed demographic and health information, the RPFS (0-220), and the CHAMPS Activities Questionnaire for Older Adults.

Findings:
The mean age of the sample was 76.5 (SD 6.59) with 34 men and 40 women reporting fatigue post MI (range 13-202; M=87; SD=47.6). More women (43%) than men (27%) did not reach minimal kcal/week recommendations. Men had significantly higher moderate intensity physical activity than women (t=2.65; p=.011). When controlling for age, the fatigue subscales significantly explained 23% of the variance in moderate physical activity (F=4.150 (5, 68); p=.002). The behavioral/severity subscale was the only significant predictor of physical activity.

Discussion:
Fatigue influences participation in physical activity after MI. Although men and women had no significant differences in fatigue, men reported significantly higher physical activity.

Research Completed:
Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

Submitted By:
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A Concept Analysis of Personhood...among Residents Living with Dementia in the Nursing Home Setting

Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Aging/Gerontology
Thematic Areas: Chronic illness

Purpose/Aims:
To generate a greater understanding of the concept of “personhood” among residents living with dementia (RLWD) in the nursing home (NH) setting.

Research Questions/Hypotheses:
1) What is the meaning of personhood and how does it relate to RLWD in the NH setting? 2) How does the concept relate to the nursing role of caring for RLWD in this setting?

Significance:
Personhood is a “standing or status that is bestowed upon one human being, by others, in the context of social being. It implies recognition, respect and trust” (Kitwood, 1997). Considering the attributes of personhood discovered in the literature, there is a great amount of controversy surrounding whether RLWD have meaningful personhood.

Methods:
The “personhood” concept was analyzed using the evolutionary concept analysis
method (Rodgers & Knafl, 2000). A multidisciplinary approach to the analysis provides a current consensus and foundation for further development.

Findings:

According to the literature, personhood consists of three levels: biologic personhood, individual personhood, and sociologic personhood. Caregiving activities directly correlate to the establishment and maintenance of personhood at each level. Antecedents to personhood include efforts to: 1) know the resident, and 2) use this information, and skills attained through continuing education, to establish relationship and a supportive environment. Consequences of not preserving personhood include resident: 1) suffering through depersonalization, 2) loss of self/depression, and 3) increased disruptive behaviors.

Discussion:

Activities typically associated with caregiving in the NH setting (i.e. medication administration, bathing, toileting, etc.) may reflect an unbalanced focus on biological personhood. When caregiving activities associated with higher level personhood (individual and sociological) are ignored, RLWD may actually lose personhood status in the eyes of caregivers, leading to objectification and paternalistic approaches to care. Further research is needed to develop effective strategies to support personhood among RLWD in the NH setting.

Research Completed: Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

Submitted By:

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An Exploration of the Concept of Pain Perception in Elders with Dementia

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Student Level: Doctoral

Abstract Information
Presentation Preference:
SNRS Student Poster Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Aging/Gerontology
Thematic Areas: Health Disparities

Purpose/Aims:
The purpose of this paper is to a) describe the concept of pain perception in the context of the elder with dementia; b) apply Morse's Method of Critical Analysis of the Literature to pain perception in elders with dementia; c) explore the application of the findings to increase the pragmatic utility of the concept of pain perception in elders with dementia for further research and concept advancement

Research Questions/Hypotheses:
Does the concept of 'pain perception' in the context of elders with dementia needs further clarification?

Significance:
Elders with dementia are often treated for agitation and anxiety when they may be experiencing unrecognized pain. Nursing needs to take the lead in researching and applying effective strategies for the recognition and treatment of pain in this vulnerable population.

Methods:
Morse's Method of critical appraisal of the literature was used. Data was retrieved from CINHAL, AgeLine, Blackwell Synergy, ERIC, and online dictionaries.

Findings:

The inquiry into the concept of pain perception revealed some confusion in the context of the cognitively impaired population and those who care for them. Often, the terms pain and pain perception were used interchangeably which may add to the confusion. An interdisciplinary understanding of the concept of pain perception in elders with dementia is essential in order to guide the research to identify strategies to provide comfort to all experience pain, regardless of their cognitive status.

Discussion:

Concept analysis of the perception of pain in the elder with dementia is necessary to clarify the confusion that ensued as a result of the phenomena of the "parallel concept" of pain and pain perception in various disciplines. In order to understand and advance the concept in the context of dementia, it is essential to merge the most coherent commonalities from each discipline in order to expand the interdisciplinary conceptual definition and guide the course of further inquiry.

Research Completed: Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:

Cleared: Yes

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Abstract ID: 625

A Conceptual Analysis of Cost-Effectiveness in the Management of Medications for the Elderly

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Abstract Categories: Interest Group: Aging/Gerontology
Thematic Areas: Health Disparities

Purpose/Aims: To explain and delineate conceptualizations of cost-effectiveness (CE) in the context of medication management for the elderly

Research Questions/Hypotheses: N/A Conceptual Analysis Literature Review


Methods: A review of the literature was conducted from a search of Business Source Premier, Blackwell Synergy, CINHAL, and OVID Databases through February 2007. Key words used in the search were concept analysis, cost-effective*, health*, medic*, prescript*, geriatric, gerontology, old, elderly or older. An integrative review of prior literature, concept summaries and original research are included
in the concept analysis. Walker and Avant’s method of concept analysis was used to identify definitions and uses of cost-effective medication management for the elderly. Analytical questions were used to highlight main attributes and model cases of the concept. Antecedents and consequences of CE are discussed.

Findings:
This concept analysis offers conceptual definitions and unique perspectives that nursing, medicine, pharmacoconomics, health services administration and economics contribute. Well-established tools from disciplines outside of nursing are available to measure the economic impact of CE, but fail to capture the complete patient experience.

Discussion:
The elderly are especially vulnerable to health disparities. Nursing research can further identify what constitutes a meaningful experience in healthcare outcomes and cost monitored medication reviews for the elderly. Multi-phase and simultaneous concept analysis would further describe additional concepts that influence CE patient outcomes. Additional research that substantiates models to lower cost sharing burden as the severity of the disease increases, offers a solution for CE interventions for those most at risk for health disparities.

Research Completed: No

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
Grants/Research Support: Y
University of Central Florida, Provost Fellowship
Consultant:
Stock/Shareholder:
Speaker's Bureau:
Other Financial or Material Support:

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:

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Can I really google? Bringing technology to the underserved community

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Presentation Preference: SNRS Student Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Aging/Gerontology
Thematic Areas: Healthy People 2010
Purpose/Aims: The study aims to measure the psychosocial influence of computer anxiety, computer confidence and computer self-efficacy among older adults, 65 and above, who participate and complete a 5-week education intervention in health information retrieval on the Internet.

Research Questions/Hypotheses:
Older adults, ages 65 and above who complete a 5-week education intervention in online health information retrieval at congregate meal sites will report lower computer anxiety, higher computer confidence and computer self-efficacy towards computer use at the end of the 5-week intervention and 6 weeks after the completion of the intervention as compared to older adults who do not participate in the program.

Significance:
The intervention, based on Bandura’s self-efficacy framework, is designed to assist older adults to gain the skills and competence to take advantage of the wealth of consumer health information on the Internet and effectively narrowing the gap of digital divide and unequal distribution of technology and technical skills in the society.

Methods:
Based on an effect size of .50, 130 participants will be recruited and randomized to a controlled, 2-group, pre-post, repeated measure design. 65 participants in the study group will be given a 2-hour session, once a week for 5 weeks. The computer confidence and computer anxiety subscale of the Computer Attitude Scale and the computer self-efficacy measure (SEM) will be administered to both groups and data will be analyzed using repeated measures ANOVA.

Findings:
Preliminary findings showed a reduction in computer anxiety (p=.003), and increase in computer confidence (p=.02), and computer self-efficacy (p=.01) in older
adults (N=6) after completion of intervention as compared to older adults not in the program (N=6).

Discussion:
An important methodological conclusion of this study will be the positive results obtained by testing the causal model in predicting computer anxiety, computer confidence and computer self-efficacy through a structured computer training program.

Research Completed: Yes

Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
-Details: NGNA, FL (10/18-21/07); STTI Biennial, MD (11/2-7/07)

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

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Grants/Research Support: Y
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Other Financial or Material Support:

FDA Disclosure:
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Non-Exclusive License:

Accepted Terms: Yes

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Abstract ID: 646

A Description of Community Resource Use by Rural Elders

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Abstract Information
Presentation Preference: SNRS Student Poster Presentation

Abstract Categories:
Interest Group: Aging/Gerontology
Thematic Areas: Chronic illness

Purpose/Aims:
The purpose of the study was to explore how recently discharged rural elders with heart failure (CHF) and activities of daily living/instrumental activities of daily living (ADL/IADL).

Research Questions/Hypotheses:
Who provides assistance to community dwelling elders with heart failure (CHF) who have ADL/IADL needs?

Significance:
Individuals over 65 years of age are prone to chronic illnesses, such as CHF that limit their ADLs/IADLs. Over the last ten years, many elders requiring assistance with ADLs/IADLs have left their homes for congregate living arrangements. Rural elders have higher rates of institutionalization than their urban counterparts. The community's contribution to rural elders with ADL/IADL needs is not clear especially in regard to the ability for them to remain in their home.

Methods:
This mixed methods study identifies elders with CHF during hospitalization. Participants had one home visit after discharge, are monitored for readmission 30 days after discharge. The 30 targeted participants are over 64 years old,
have CHF, ADL/IADL needs, a Mini Mental Status Exam (MMSE) over 21, were community
dwelling and lived alone or with others. Participants scoring between 21-25
have a caregiver participate in the interview; participants scoring greater
than 25 have a choice of a family member or friend’s participation during the
interview. Recruitment occurred from the two hospitals in the five county,
one city community. A semi-structured interview guide based on the elder-friendly
community model and ADLs/IADLs organizes the home visit. Analysis includes
content analysis of the interview, medical and community service record reviews
with Chi Square analysis of categorical variables.

Findings:
Presentation of the findings include, descriptive data based on participant
interviews and medical/community records.

Discussion:
The discussion concludes with recommendations based on the findings. Support
for this study was provided in part by the Rural Health Care Research Center,
School of Nursing, University of Virginia.

Research Completed: No

Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose
products may be mentioned in this material?
Yes
Grants/Research Support: Y
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Other Financial or Material Support:

FDA Disclosure:
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Non-Exclusive License:
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La Diferencia: Hispanic/Latina Daughter and Spouse Alzheimer’s Caregivers

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SNRS member? No
Abstract  Information

Presentation Preference:  SNRS   Student Poster Presentation

Willing To Submit Poster?  Yes

Abstract Categories:
  Interest Group: Aging/Gerontology
  Thematic Areas: Health Disparities

Purpose/Aims:  To compare perceived health and quality of life of Hispanic/Latina daughter and spouse caregivers of patients with Alzheimer’s disease.

Research Questions/Hypotheses:
  • Are there differences in emotional and physical health and quality of life between Hispanic/Latina daughter and spouse caregivers of Alzheimer’s patients?

Significance:  Hispanic/Latina women provide extensive care for parents and husbands with Alzheimer’s disease. Although they perform an incredibly valuable service, they do so at a significant physical and psychological cost. Findings will increase the understanding of the emotional impact of caregiving in Hispanic/Latina daughter and spouse caregivers. Ultimately this will result in better interventions to improve the quality of life of Hispanic/Latina caregivers of Alzheimer’s patients.

Methods:  Hispanic/Latina daughter (n=31, mean age = 52.7), and spouse (n=14, mean age = 64.43) caregivers of husbands or parents with Alzheimer’s disease were enrolled in the study. Instruments used to collect quality of life data included Sense of Coherence, Perceived Stress, Personal Resource Questionnaire, Kellner Symptom Questionnaire, Screen for Caregiver Burden, Depression Index, Coping Resources Inventory, and SF- 36 Health Survey.

Findings:  There were no statistical differences between the Hispanic/Latina daughter and spouse caregiver groups in depression, social support, sense of coherence, perceived stress, coping resources, or symptom scores. Hispanic/Latina spouse caregivers had significantly higher (p<0.05) subjective caregiver burden. They also had significantly lower scores in physical role functioning (p<0.001), mental health (p<0.02), emotional role functioning (p<0.001), and social functioning (p<0.02).

Discussion:  Hispanic/Latina spouse caregivers have a lower quality of life and greater subjective burden as compared to daughters. Regardless of common cultural values, being older, less educated, and providing care longer appear to have a stronger negative effect for the spouse caregivers. Cultural and generational issues must be considered when strategies are implemented to assist the increasing number of Hispanic/Latino family caregivers as our society ages.

Research Completed:  Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

Grants/Research Support:  Y
  John A. Hartford Foundation Building Academic Geriatric Nursing Capacity Scholarship
  NIH Diversity in Research Suplement

Consultant:

Stock/Shareholder:

Speaker's Bureau:

Other Financial or Material Support:

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

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The Influence of Memory, Reasoning, and Speed of Processing

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Abstract Information
Presentation Preference: SNRS Student Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories:
Interest Group: Aging/Gerontology
Thematic Areas: Adult Health
Purpose/Aims:
This study longitudinally examines unique predictors of fall risk such as cognitive
composites (reasoning, memory, speed of processing) along with traditional predictors.

Research Questions/Hypotheses:
Do memory, reasoning, or speed of processing influence falls in older community dwelling adults?

Significance:
Falls contribute to a great number of health care dollars spent each year on older adults. The effects of these falls on the person can be severe with broken bones, hospital stays, and decreased mobility.

Methods:
Data on falling behavior, cognition, objective functional tests, visual acuity, and demographics were collected on community-dwelling older adults at baseline (N = 698) and two year assessment (n = 550).

Findings:
Hierarchical multiple regression analyses were used to predict what factors are important in predicting the number of falls reported during the past two months after 2 years in this sample. The model shows that increasing age, being female, being a non-minority, being older and female, performing poorly on Turn 360, and having a better memory composite at baseline predicted more falling in the past two months at the two year annual assessment.

Discussion:
Older age, being female and Caucasian, performing poorly on a measure of lower limb dexterity, and having a better memory were associated with a higher prevalence of falling over 2 years. It was surprising that having better memory performance was associated with more falls; however, this may be because those who can remember better were also better able to recall falling within the past two months. This finding suggests that reliance on self-reported falls may obfuscate the literature.

Research Completed:
Yes

Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes
Grants/Research Support:
Consultant:
Stock/Shareholder: Y
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FDA Disclosure:
Cleared: Yes

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Aging/Gerontology Thematic Areas: Chronic illness

Purpose/Aims: The purpose of this study was to test a model of sociodemographic and health related risks for and outcomes of loneliness with a large sample of community-dwelling U.S. elderly.

Research Questions/Hypotheses: The study answered two research questions: 1. Which sociodemographic and health-related factors are predictive of loneliness for community-dwelling U.S. elderly? 2. Is there a difference between those who are never lonely, briefly lonely, or chronically lonely in specified health outcomes?

Significance: The study results identify factors that contribute to loneliness in a large sample of U.S. elderly. Additionally, the results delineate that those who are chronically lonely have negative health outcomes when compared to those who are never lonely.

Methods:
Data analysis was performed using Health and Retirement Study Data from Wave 6 (2002) and Wave 7 (2004). SPSS was used to complete univariate and bivariate testing, followed by logistic regression analysis to evaluate risks. One-way ANOVAs, comparative means testing and independent ANCOVAs were used to evaluate differences in outcomes for the three loneliness groups.

Findings:
Over 16% of the sample reported loneliness and 8.8% reported loneliness at both collection times. Marital status was the primary predictor of self-report of loneliness, followed by poorer self-report of health, lower educational level, functional impairment, increasing number of chronic diseases, and lower income. Those with advancing age and more people in the home were less likely to report loneliness. Respondents who were chronically lonely reported less exercise, more tobacco use, less alcohol use, higher depression scores, greater increase in number of chronic illnesses, and more nursing home stays.

Discussion:
Loneliness is a prevalent problem for U.S. elderly with its own unique health-related risks and outcomes. Considering screening for those adults aged 50 and over would be prudent. Future research should focus on evaluating both preventive and treatment interventions so that there is a broader evidence base for the treatment of loneliness.

Research Completed: Yes
Abstract History:
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
FDA Disclosure:
Cleared: Yes
Non-Exclusive License:
Accepted Terms: Yes
Submitted By: laurietheeke@yahoo.com
Making a Life in the Nursing Home

Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Abstract Categories: Interest Group: Aging/Gerontology
Thematic Areas: Adult Health

Purpose/Aims: The aim of this grounded theory study is to develop a theory of residential adjustment to the nursing home.

Research Questions/Hypotheses: What are the processes used by older people that contribute to successful adjustment to nursing home life?

Significance: Moving into a nursing home can be a monumental transition for older adults and research studies report that many have difficulty adapting to this new environment. Difficulty adapting to the nursing home as a place to live has been associated with poor quality of life. Research in the area of older adult transition and adaptation to the nursing home has largely been exploratory and descriptive in nature. There is a paucity of research studies on the actual processes used by older adults as they adjust to nursing home life. An understanding of these processes would illuminate how older adults make this life transition and provide the foundation for a theory of residential adjustment to the nursing home.

Methods:
The research design for this study will be grounded theory. To be eligible for inclusion in the study, potential participants must be age 65 years or older, be a resident of a nursing home, obtain a score of 4 or less on the Short Portable Mental Status Questionnaire, and be English speaking. Participants are chosen based on their contribution to the emerging theory. Data collection entails conducting semi-structured interviews lasting approximately 1-hour that will be audio tape recorded and transcribed verbatim. Sampling will be conducted until data saturation is reached.

Findings:
This pilot research study is currently in progress.

Discussion:
Data analysis will begin with data collection. Each transcript will be read, analyzed and coded as they are completed. Using the constant comparative technique, codes will be clustered into themes and themes will then be clustered into categories. The emerging themes and categories will be validated with each participant.

Research Completed:
Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

Grants/Research Support: Y
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FDA Disclosure:
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Non-Exclusive License:

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Pressure Ulcers: Risk Factors and Co-morbidities

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Abstract Information

Presentation Preference: SNRS  Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Aging/Gerontology
- Thematic Areas: Chronic illness

Purpose/Aims: This study seeks to identify different risk factors that are associated with pressure ulcers in do-not-resuscitate patients as opposed to "full code" patients, and to determine if there is any difference in quality-of-care indicators between these two groups. Findings from this study can be utilized by practicing nurses to identify at-risk patients and develop interventions to promote wound healing or prevent further tissue breakdown.

Research Questions/Hypotheses:
- Our research questions are 1) What risk factors and co-morbid conditions (length of stay, nutritional status, etc.) are associated with do-not-resuscitate patients compared to full code patients? 2) What quality-of-care indicators (turning schedule, ET consults, etc.) are associated with each of these populations?

Significance: Pressure ulcers are a major health problem in the United States costing over 2.2 billion dollars each year. Previous research has identified a number of risk factors that contribute to the development of pressure ulcers, including the influence of moisture, activity, mobility, nutrition, friction, and shear. To date, only one study has reported a specific relationship between pressure ulcers and do-not-resuscitate status, as an incidental finding.

Methods: Data will be collected through a retrospective chart audit, using pre-existing data maintained in the medical records, under an IRB-approved protocol. The study will examine records from hospitalized patients who were admitted to University of Mississippi Medical Center Hospital and diagnosed with a pressure ulcer between January 1, 2006, and December 31, 2006. Variables will be recorded using a data collection tool developed by the investigators based on risk factors identified in the research literature. Data will be collected upon admission and at discharge. The do-not-resuscitate patients will be compared to the "full code" patients using parametric and nonparametric analysis to identify differences in the risk factors and co-morbid conditions.

Findings: Data collection is currently in progress.

Discussion: It is anticipated that preliminary findings will be presented.

Research Completed: No

Abstract History: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Financial Disclosure: Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

Submitted By: ecfowler@umsmed.edu
MINDFULNESS MEDITATION FOR PAIN IN OLDER ADULTS: A PILOT STUDY

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The purpose of this study is to investigate effectiveness of mindfulness meditation for managing a cluster of symptoms (e.g., pain, sleep disturbance, decreased physical functioning, limited social functioning) related to osteoarthritis in African American older adults.

Research Questions/Hypotheses:
Mindfulness meditation (MM) will improve a cluster of symptoms related to osteoarthritis in older adults.

Significance:
Chronic pain is prevalent among older adults and causes limited physical and social functioning, depression, and sleep disturbance, which results in lower quality of life. Although pharmacological management of pain is relatively well established, it can frequently result in serious side effects, particularly in older adults. In addition to pharmacological treatment of pain, nonpharmacological interventions may be beneficial to manage chronic pain. However, professionally provided complementary therapies (e.g., acupuncture, massage) are costly for many older adults who experience financial constraints. Meditation, especially mindfulness meditation has received increased attention in US to manage various symptoms such as stress, pain, depression, sleep disturbance, and anxiety in patients with chronic problems. However, very few studies focused on older adults with under-representation of African American older adults, and often a single outcome was measured.

Methods:
A convenient sample of 20 African American adults aged 65 and over with osteoarthritis will be recruited. MM will be taught and practiced as a group of 10 subjects at a time once a week for four weeks. Subjects will be asked to practice MM two times a day (10-15 minutes each time in the morning and before bedtime). Demographic information and data on pain, sleep, physical functioning, and social functioning will be collected at baseline, at the end of 4-week intervention, and on week 8 (follow-up).

Findings:
Findings will be available in February 2008.

Discussion:
This study will provide information on feasibility of mindfulness meditation and preliminary findings of potential benefit of MM for older adults with osteoarthritis to manage clusters of symptoms.
Abstract ID: 802

Resilience in Older Women: Evolutionary Concept Analysis

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Abstract Information

Presentation Preference:
SNRS Student Poster Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Aging/Gerontology
Thematic Areas: Women’s Health

Purpose/Aims:
The purpose of this paper is to describe the concept of resilience as it relates to older women; apply the Evolutionary Model of Concept Analysis to resilience in older women; and explore the application of the concept to a program of qualitative research.

Research Questions/Hypotheses:
Is the trait of resilience found in older women who adapt to stressors in life in spite of adversity?

Significance:
Older women are the fastest growing population group projected to be major recipients of health care in the future.

Methods:
Methodology used in this paper is based on Rodger’s Evolutionary Method of Concept Analysis. This method emphasizes the dynamic nature of the concept evolving over time. A literature search of the concept of resilience in older women was conducted using multiple health data bases. Articles were narrowed
to the search terms, with final selection of 34 articles reviewed. Maturity of the concept of resilience was noted from extensive multidisciplinary references. Resilience in older women has been partially defined with limited research available.

Findings:
An integrative review of the literature identified a common definition of resilience as an adaptive stress-resistant quality, developed in early years, persisting throughout life as a process whereby people bounce back from adversity and go on with their lives. Resilience is based on prosocial forces developed from adjusting to major ups and downs in life, including major losses and setbacks. Underlying themes constituting resilience included: equanimity, self-reliance, existential aloneness, perseverance, and meaningfulness.

Discussion:
Concept analysis of resilience in older women is needed to identify the common traits seen in older women successfully embracing life in spite of adversity. By noting themes of resilience in this vulnerable population, the researcher can develop methodologies to improve frailty and assist in adaptation of older women to their stressors, enabling better coping and healthier living.

Research Completed: Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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Evaluation of Palliative Care Knowledge in Intensive Care Nurses

Abstract Information

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Presentation Preference: SNRS  Student Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Aging/Gerontology
Thematic Areas: End of life issues

Purpose/Aims:
The purpose of this study was to survey ICU nurses knowledge as described by attitudes/beliefs and competency, with in the seven palliative care domains for intensive care nursing. The seven domains are defined as 1) patient/family centered decision making, 2) communication within medical team/patient/families, 3) continuity of care, 4) emotional/practical support, 5) symptom management/comfort care, 6) spiritual support for patient/family, and 7) emotional/organizational support for clinicians (Clarke et al., 2003).

Research Questions/Hypotheses:
1. What is the knowledge level of ICU nurses as decribed by attitudes/beliefs and competency, concerning the 7 palliative EOL care domains? 2)What is the relationship between the demographic variables and the competency of palliative EOL care delivered by ICU nurses? 3) What are the barriers that impact delivery of palliative EOL care in ICU?

Significance:
Palliative/EOL care receives little attention in nursing curricula or in critical careorientation programs, and a cure versus a care culture exists in ICU\'s, thus ICU nurses often feel unprepared to deal with palliative EOL issues (Ferrell,
Methods:
A descriptive design utilizing a convenience sample of 91 ICU RN's completed the "End of Life Care- Educational Needs Survey Tool".

Findings:
Results revealed palliative EOL care educational needs in ICU nurses included 1) medicare/hospice benefits and local EOL laws; 2) continuity /coordination of EOL care; 3) EOL professional issues for nurses. 64% of all nurses, regardless of experience or knowledge levels, found it difficult to transition from a cure culture to a care environment in ICU.

Discussion:
Years of experience working in ICU influence knowledge/competency levels of palliative EOL care delivery. Identified barriers that impede delivery of palliative EOL care include scheduling conflicts, availability of education, physician resistance to EOL care and difficulty in nurses transitioning from cure to care culture. Continued evaluation, needs to be considered to identify methods to assist ICU nurses in delivery of palliative care.

Research Completed:
Yes

Abstract History:
-This material has been submitted previously.
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
-Details: Galveston, Texas, in 2007, but due to illness in my family was unable to attend/present poster

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

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Abstract ID: 819

**Transitions in Older Adulthood: A Dimensional Analysis of the Concept**

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**Abstract Information**

Presentation Preference:
SNRS Student Poster Presentation

Willing To Submit Poster?
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Abstract Categories:
Interest Group: Aging/Gerontology
Thematic Areas: Chronic illness

Purpose/Aims:
Older adulthood is a time of life when elders and their families experience a myriad of developmental, situational, and health/illness transitions. The purpose of this research was to utilize dimensional analysis techniques to clarify the concept of transitions in older adulthood and to identify gaps in current understanding of the concept.

Research Questions/Hypotheses:
What are dimensions of the concept of transition within the context of older adulthood? Are there relationships among the various dimensions within the concept of transitions in older adulthood?

Significance:
As the number of older adults increases, nurses will encounter more elders and families in the process of significant life transitions. Nurses provide an integral role in facilitating healthy transitions during this time of heightened vulnerability.

Methods:
As a topic that has been explored by a variety of disciplines within multiple contexts and perspectives, transitions in older adulthood lends itself well to concept clarification using dimensional analysis methodologies. A two-phase dimensional analysis was conducted. Twenty-one references that specifically addressed transition in older adulthood were first reviewed to identify dimensions of the concept. A dimensional matrix was then constructed to explore relationships among various dimensions within the concept.

Findings:
Role change, relocation, and health/illness transitions experienced by older adults were most frequently described in the literature from the perspective of elders, family systems, and health care providers. Six dimensions of healthy transitions in older adulthood were identified during the analysis. These included (1) effective communication; (2) transition planning; (3) mastery; (4) role redefinition; (5) support structures; and (6) connectedness.

Discussion:
As the population ages and more elders access the geriatric continuum, there is opportunity for nursing to study the experiences of older adults and caregivers as they proceed through this complex system. The needs of those who experience multiple transitions during health changes including hospitalization and temporary skilled placement are in need of future study.

Research Completed: Yes
Abstract History: Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
FDA Disclosure:
Cleared: Yes
Non-Exclusive License:
Accepted Terms: Yes
Submitted By: jlamanna@mail.ucf.edu
THE HEALTH OF SPOUSE CAREGIVERS IN DEMENTIA: FINDING MEANING AS A MEDIATOR OF BURDEN

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Abstract Information

Presentation Preference:  
SNRS  Student Poster Presentation

Willing To Submit Poster? 
Yes

Abstract Categories:  
Interest Group: Aging/Gerontology
Thematic Areas: Chronic illness

Purpose/Aims:  
The purpose of this study was to test whether finding meaning in caregiving functioned as a coping strategy for caregivers of spouses with dementia. The Alzheimers Caregiver Stress Model guided the research questions.

Research Questions/Hypotheses:  
Does finding meaning in caregiving mediate the effect of burden on physical and mental health in spouse caregivers in dementia?

Significance:  
The stress of caring for a person with dementia has been found to negatively affect caregivers’ health, including an increased risk of death. Successful coping strategies have been linked with better health outcomes. Caregiver health declines are a common reason for institutionalization a spouse. Finding meaning has been described as a way that caregivers have sought to find a broader view from which to understand their situation, have changed their ways of thinking and feeling, and have coped with stress.

Methods:  
Cross-sectional, correlational design. Measures included the Zarit Burden Scale, Finding Meaning Through Caregiving Scale, and Medical Outcomes Health Survey (SF-36, V-2). A convenience sample of spouse caregivers were recruited from north-central Florida. Data were analyzed using descriptive and multiple regression techniques.

Findings:  
The sample consisted of 84 spouse caregivers, 50 women and 34 men. They were Caucasian (76%), African American (17%) and Hispanic/Latino (5%) with a mean age of 76.8 (R = 49 - 96). Greater caregiver burden predicted poorer caregiver mental health ($B = -.635, p = .000$) but not physical health ($B = .020, p = .811$). When finding meaning was entered into the regression equation for the dependent variable of mental health, burden was reduced ($B = -.489, p = .000$) indicating that finding meaning was a partial mediator of burden on mental health.

Discussion:  
Dementia caregivers have been found to be at greater risk for adverse health outcomes, including death. The identification of effective coping strategies to assist this vulnerable group is essential.

Research Completed:  
Yes

Abstract History:  
Financial Disclosure:  
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?  
Yes

FDA Disclosure:  
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Non-Exclusive License:  
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The relationship of self-transcendence and death anxiety to older adult's performance of health promotion behavior.

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Abstract Information
Presentation Preference:
SNRS Student Poster Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Aging/Gerontology
Thematic Areas: Adult Health

Purpose/Aims:
Investigate the relationship of self-transcendence (ST), death anxiety (DA), to community dwelling older adult’s performance of health promotion behavior (HPB).

Research Questions/Hypotheses:
What is the relationship of ST and DA to community dwelling older adult’s performance of HPB? It is hypothesized that people with increased ST will have lower DA and increased HPB.

Significance:
Health promotion behaviors are important in order to prevent disease, disability, detect disease at an early stage, and self-manage chronic disease.

Methods:
Descriptive/correlational pilot study using 33 community dwelling older adults who completed the Self-transcendence Scale (STS), Revised Death Anxiety Scale (RDAS), Health promotion activities of older adults measure (HPAOAM), depression
Findings:
The participants were female (72%), widowed (57%), in the age range of 76-85 (51%), and African-American (91%), were highly functional and not depressed. The educational levels of the group were 6th grade or lower (45%) or graduated from high school (36%). The older adults in this pilot scored high on the STS (3.6), low on the RDAS (35.7) and high on HPAOAM (136). This finding is consistent with other studies in which older adults typically have high scores of ST and HPB. DA scores are lower in this pilot. Self-transcendence was positively correlated with age and HPB. Age is positively correlated with HPB. DA is negatively correlated with ST. DA did not have a significant correlation with HPB.

Discussion:
The mean of RDAS is slightly lower than in other published studies. However these studies did not report the ethnicity and this population was 91% African-American. The hypothesis for this research study has not been fully explored with this pilot study. However DA is negatively correlated with ST and ST is positively correlated with HBP therefore it is expected the hypothesis will be supported in the larger study.

Research Completed: Yes
Abstract History: Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
FDA Disclosure: Cleared: Yes
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Abstract ID: 914

Factors influencing functional status among elders: a secondary analysis from PRISM study

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**Abstract Information**

**Presentation Preference:** SNRS  Student Poster Presentation

**Willing To Submit Poster?** Yes

**Abstract Categories:**
- Interest Group: Aging/Gerontology
- Thematic Areas: Adult Health

**Purpose/Aims:** To determine the complexity effects of gender, depressive symptoms, and sleep quality on functional status in elders, age 70 and older.

**Research Questions/Hypotheses:** Are there interactions between gender, depressive symptoms, and/or sleep quality on functional status of community dwelling elders?

**Significance:** Gender, depressive symptoms, and sleep quality are found associated with functional status among elders. However, whether or not there are interactions between gender, depressive symptoms, and sleep quality on function status is unclear.

**Methods:** A secondary data analysis was conducted on 110 community dwelling elders (64.6% females) participating in the PRISM study. Functional status was measured using the Duke Older Americans Resources and Service ADL Questionnaire (OARS ADL), which ranges from 0-28 points. Depressive symptoms were measured with the Geriatric Depression Scale; scores > 5 points indicate significant depressive symptoms. Sleep quality was measured with the Pittsburgh Sleep Quality Index (PSQI); scores > 5 points indicate poor sleep quality. ANOVAs were used to test the effects of all 3 variables on functional status of elders.

**Findings:** Functional status (OARS ADL) scores ranged from 14 – 28 points, (mean =26.74, SD=3.08). Approximately 7% of subjects had significant depressive symptoms. Nearly 40% had poor sleep. All 3 variables affected functional status (gender x depressive symptom x sleep: F(1,89)=4.47, p=.04). In those with normal sleep, both males and females with depressive symptoms had lower functional status than those without symptoms (F(1,89)=6.24, p=.02). For those with poor sleep, males with depressive symptoms had lower functional status than males without symptoms (F(1,89)=31.66, p<.0001), while depressive symptoms did not have any effect on functional status in women (F(1,89)=1.43, p>.05).

**Discussion:** This study revealed that gender, depression, and sleep interact to influence functional status in elders, suggesting that interventions that decreases or manages depression and enhance sleep quality are likely to be necessary to promote and maintain their functional status for elderly people.

**Research Completed:** Yes

**Abstract History:**

**Financial Disclosure:** Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

**FDA Disclosure:** Cleared: Yes

**Non-Exclusive License:** Accepted Terms: Yes

**Submitted By:** suksatit@email.unc.edu
Abstract ID: 925

Examining the Health and Well-being of Grandparents Raising Grandchildren participating in a Case Management Program

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This study examined the quality of life of 70 custodial grandparents who received assessment and one year of case management services.

What is the perception of quality of life among custodial grandparents, as measured by the SF-12?

Grandparents are responsible for most of the basic needs of their grandchildren in more than 2.4 million homes. Custodial caregiving can compromise the health and well-being of grandparents. The stresses associated with custodial parenting may place them at risk for health problems such as cardiovascular disease. It is important to understand the impact of caregiving on the health of grandparents in order to develop effective interventions to minimize this impact.

Data on caregivers were collected using questionnaires (SF-12, Health Risk Appraisal, Brief Symptom Inventory, Family Support and Resource Scale, Adult and Adolescent Parenting Index, Parenting Stress Index, and Cultural Justification Scale) and a semi-structured interview.

Grandparents reported lower physical health functioning than mental health functioning. Preliminary results of the study indicate that scores on quality of life for grandparent caregivers reflect a lower perception of health and well-being than scores from national samples.

Researchers need to further understand the health needs of custodial grandparents in order to develop effective interventions.
Abstract ID: 965

Cross-Cultural Exploration of the Concept Self-Efficacy as it Relates to Chronic Disease Management in the Elderly

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Purpose/Aims:
This poster presents a critical review of the literature on self-efficacy among older adults of varied ethnicity with chronic illnesses to determine if any cultural differences exist.

Significance:
As the older adult population in the United States increases, the number of older adults from distinct ethnic groups grows as well. Ethnic minority elders suffer disproportionately from chronic conditions compared to white elders. Self-care management is fundamental to promoting good outcomes among persons with chronic conditions. A key element that contributes to participating in self-care management is self-efficacy. Self-efficacy is a significant predictor of health outcomes for persons living with chronic illnesses.

Methods:
A systematic review of the literature was conducted. Multiple electronic searches of Medline and CINAHL databases were done. Search criteria included the following: adults 50 years or older experiencing at least one chronic illness; outcome measures included measurement of some form of self-efficacy; the ethnicity of the population clearly described; articles limited to English only and written between 1995 and 2006.

Findings:
Fifteen quantitative studies were found that met inclusion criteria. Ethnicities included African Americans, Chinese, Hong Kong, Koreans, Taiwanese, Caucasians and Mexican Americans. Findings from the review of the literature reported feelings of self-efficacy are significant predictors of health promotion among varied ethnic groups of older adults. Most studies linked self-efficacy with themes of individualism across cultures. However one study suggested that among Mexican Americans feelings of self-efficacy were enhanced by higher levels of perceived family support resulting in stronger self-care measures.

Discussion:
Discussion will focus on: 1) implications for nursing practice and further research; 2) developing effective strategies aimed at promoting culturally appropriate interventions to increase feelings of self-efficacy.

Research Completed:
No

Abstract History:
Financial Disclosure:
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Non-Exclusive License:
Accepted Terms: Yes

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Abstract ID: 66

Attenuation of LPS induced down regulation of eNOS in HUVEC’s by drotrecogin alfa (activated) employing quantitative real-time PCR

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Presentation Preference:
SNRS   Podium Presentation

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Abstract Categories:
Interest Group: Biobehavioral
Thematic Areas: Chronic illness

Purpose/Aims:
The purpose was to use an in vitro model to study the effects of drotrecogin alfa (activated) on cells treated with LPS.

Research Questions/Hypotheses:
To further the understanding of the mechanism by which drotrecogin alfa (activated) impacts sepsis especially eNOS.

Significance:
Sepsis is the clinical condition of inflammation and coagulation in response to an infection. LPS stimulates a response of the immune system and the production of nitric oxide via nitric oxide synthases (NOS) which is thought to contribute to the propagation of sepsis. The only drug available to treat this condition is drotrecogin alfa (activated).

Methods:
Male HUVEC’s were cultured and subcultured in twelve wells. The control cells were treated with LPS at various concentrations and incubated for 24 hours. The first set of experimental cells were treated with drotrecogin alfa (activated) at a final concentration of 1000 ng/mL, incubated for 24 hours, then treated with LPS and allowed to incubate for additional 24 hours. The second set of experimental were treated with LPS, incubated for 24 hours, then treated with drotrecogin alfa (activated) and incubated additional 24 hours. eNOS expression was quantified using a one-step qRT-PCR system.

Findings:
LPS treated cells down regulated eNOS expression. Post treatment with drotrecogin alfa (activated) attenuated the eNOS LPS induced down regulation, as did the pre treatment with drotrecogin alfa (activated).

Discussion:
Drotrecogin alfa (activated) has beneficial effect on LPS treated cells. Whether the cells are pre treated or post treated, drotrecogin alfa (activated) attenuated the LPS induced down regulation of eNOS.

Research Completed:
Yes

Abstract History:
Financial Disclosure:
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Yes

FDA Disclosure:
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Effect of Maternal Stress on Neurobehavioral Outcomes in Preterm Infants

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Abstract Information
Presentation Preference: SNRS Poster Presentation

Abstract Categories: Interest Group: Biobehavioral
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims: The purpose of this study is to determine if preterm infants whose mothers experience high levels of physiologic stress during pregnancy exhibit early risk of poor neurobehavioral outcomes.

Research Questions/Hypotheses:
The research question is: Do preterm infants who are exposed in utero to placenta changes associated with high levels of stress have higher levels of pro-inflammatory cytokines associated with brain injury in their serum and cerebral spinal fluid resulting in lower scores on neurobehavioral assessments than preterm infants not exposed to these conditions?

Significance: The rate of preterm birth continues to rise. Maternal stress is implicated in the incidence of preterm birth and fetal growth restriction. However, the effects of fetal exposure to maternal stress is only beginning to be studied, particularly the risk that this exposure poses for the infant’s neurobehavioral development.

Methods: The study has been approved by the institutional review board. The study will
include 100 women who present for preterm labor and their infants. Mothers complete a stress inventory and demographic assessment. As part of routine obstetric examination, whole blood for cytokines are collected. Cord blood for cytokines is collected following delivery. Data collected from infants includes serum and cerebrospinal fluid for cytokines collected as part of routine septic work-up shortly after birth, results of routine head ultrasound at 2 weeks postnatal age and before discharge, and neurobehavioral exams at 2 weeks post-natal age and at discharge. Data will be analyzed with logistic regression.

Findings:

Based on preliminary analysis we expect to find strong relationships among maternal stress and cytokine levels and infant cytokine levels. We expect a moderate effect of these on neurobehavioral outcomes.

Discussion:

This study provides an opportunity to examine the effect of maternal inflammation and stress on preterm infant development and to begin to examine the mechanism by which that effect may occur.

Research Completed: Yes

Abstract History:

Financial Disclosure:

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FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

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Neurobehavioral Development during Preterm Infant Feedings

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Abstract Information

Presentation Preference: SNRS Podium Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Biobehavioral
Thematic Areas: Perinatal/Neonatal/Infancy
Purpose/Aims: The purposes of this analysis were to examine changes in two components of neurobehavioral development in preterm infants during feedings – the autonomic nervous system (ANS) as assessed by heart rate variability and oxygenation and the central nervous system (CNS) as measured by characteristics of nutritive sucking, and to examine the relationship of those changes.

Research Questions/Hypotheses: 1) How do measures of autonomic and central nervous system development change over time in during preterm infant feedings? And 2) How do these changes relate to each other?

Significance: Little is known about how preterm infant neurobehavioral functions change over time or how these functions may be related to each other or to other measures of maturity. This is one of the first analyses conducted that examines neurobehavioral measures from two systems over time and compares them for evidence of maturation.

Methods: 

INDEX FIRST PREVIOUS NEXT LAST
The study was approved by an institutional review board. The sample included 95 preterm infants who were observed feeding daily for 14 days beginning at 32 weeks post-conceptional age (PCA). Data were collected electronically for all measures and analyzed using correlation and regression analyses while controlling for specific infant characteristics.

Findings:

Measures of both ANS and CNS function were found to mature over the 14 day observation period, although only CNS changes as measured by sucking characteristics were significant. Changes in specific ANS measures (i.e. high frequency heart rate variability) were strongly correlated with sucking characteristics (i.e. number of sucks, sucks per burst).

Discussion:

The relationship between ANS and CNS developmental changes in preterm infants has received little attention. Further understanding how these vital systems change over time and relate to each other may lead to improved caregiving interventions in this neurobehaviorally at-risk population.

Research Completed: Yes

Abstract History:

Financial Disclosure:

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Yes

FDA Disclosure:

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Accepted Terms: Yes

Submitted By:
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Abstract ID: 134

Differential Gene Expression in the Blood of Posttransplant Diabetes in Liver Transplant Recipients

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Hepatitis C (HCV) is a risk factor for the development of posttransplant diabetes (PTDM) after liver transplantation. Little is known about biological mechanisms involved with this risk. We investigated gene expression differences in the blood as a potential explanation.

Research Questions/Hypotheses:
What genes are differentially expressed in HCV+ liver transplant recipients with PTDM? To which functional categories do these genes belong? Can these differentially expressed genes predict the presence or absence of PTDM in other liver transplant recipients?

Significance:
PTDM in HCV+ liver transplant recipients is associated with downregulated expression of many genes. The expression profile of a gene subset was useful in predicting PTDM in HCV negative subjects. Very few diabetes related genes were identified; most were associated with apoptosis and immune function suggesting a possible autoimmune component to PTDM.

Methods:
Gene expression profiles of blood from 6 HCV+ liver transplant recipients were determined using Affymetrix U133 Plus2.0 microarray chips. Differential gene expression was assessed between HCV+ subjects with PTDM (n=3) and no-PTDM (n=3) using GeneSpring 7.3. Welch’s t-test was used to identify significant (p<0.05) differences between groups. Gene expression profiles for 6 HCV-liver transplant recipients (PTDM=3, no-PTDM=3) were used as a blind test set to evaluate a subset of genes to predict PTDM.

Findings:
Expression levels of 347 genes were significantly different between individuals with and without PTDM: 74 upregulated; 270 downregulated in PTDM. Using textmining approaches, genes were categorized into functional classes: apoptosis (n=69 genes), immune function (n=110), diabetes (n=17), hepatitis c (n=12), and liver transplant (n=69). The expression profile of a subset of genes with > 2fold
difference could predict PTDM in 6 HCV- subjects. We accurately predicted the presence or absence of PTDM in 5/6 subjects.

Discussion:

HCV may act as a primer by affecting a group of genes involved in developing diabetes and may allow us to identify patients at risk for developing PTDM.

Research Completed:

Abstract History:

-This material has been published or accepted for publication.
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

-Details: World Transplant Congress-poster presentation

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

Grants/Research Support: Y

University of Tennessee
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International Transplant Nurses Society and NATCO (North American Transplant Organization)

Consultant:

Stock/Shareholder:

Speaker's Bureau:

Other Financial or Material Support:

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

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Submitted By:

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Abstract ID: 135

Weight-Bearing Activity and Foot Parameters in Native Americans With Diabetes and With and Without Sensate Feet

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Purpose/Aims:
This study piloted the feasibility of measurement procedures for a future larger study that will include the evaluation of leisure-time weight-bearing activity (WBA), plantar skin hardness (PSH), static barefoot plantar pressure (PP) and known salient variables in Native Americans with diabetes mellitus.

Research Questions/Hypotheses:
Do those who engage in WBA and who have insensate feet differ in PSH and PP from those who engage in no WBA and have insensate/sensate feet and who engage in WBA and have sensate feet?

Significance:
While the stress of regular aerobic WBA can control glycemia and slow progression of neuropathy, it may also contribute to plantar foot ulceration (PFU) by causing subtle physical changes of the tissue. Although inadequately tested, the American Diabetes Association (ADA) recommends that WBA be discouraged when severe neuropathy is present because of the higher risk for tissue injury. Little is known about WBA and PFU, but higher PSH and PP have been known to be precursors to PFU. Nurses should be concerned with helping their patients prevent the initial PFU because of healing difficulties of these injuries in this population that may lead to amputations.

Methods:
In this descriptive study, 80 volunteers were chosen, conveniently, from the Choctaw Nation Health Care Center and by an interview, were categorized as those who engage in regular WBA or non WBA/no activity. Afterwards, their feet were examined for sensation status with a monofilament, PP with a footprint mat and PSH with a durometer.

Findings:
Preliminary analysis by T-test and Mann-Whitney revealed that exercisers (n = 53) with insensate feet, possess higher PSH and PP than those with sensate feet and these differences were found at sites normally prone to injury from WBA. For nonexercisers (n = 27), there were no differences between the two groups.

Discussion:
From these initial findings, it appears that ADA recommendations should continue to be followed.

Research Completed:
Yes

Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
-Details: 20th Ann. Pacific Nursing research Conference, 3/22/07; Nation National Alaska Native American

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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Perceived Barriers to Prostate Cancer Screening Among Homeless African American Men

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Purpose/Aims: The purpose of this study was to determine what homeless African American men know about screening for prostate cancer, as well as their perceived barriers to screening.

Research Questions/Hypotheses: The research question was: What do homeless African American men know about screening for prostate cancer? What barriers to screening do they identify?

Significance: The most glaring health disparity among persons at risk for cancer is prostate cancer, with an extremely high incidence and mortality among African American men in the US. AA men are often diagnosed with more advanced cancer and at an earlier age than white men.

Methods: A focus group was held at a city clinic which serves homeless men. Ten African American men were recruited to participate; each was given a meal and food and toiletries as a way of thanking them for their participation in the one hour group session.

Findings: Homeless African American men identify the same knowledge of risk and perceived barriers to prostate cancer screening that other AA men report. The use of the rectal digital exam by primary care providers is seen by the men as a specific barrier to screening.

Discussion: Providing homeless AA men with access to PSA screening and followup was identified as removing the most significant barriers to prostate cancer screening.

Research Completed: Yes

Submitted By: abelche2@son.jhmi.edu
Abstract ID: 151

Does Intensive Therapy to Improve Physical Function affect Memory and Behavior Changes of Stroke Survivors?

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Stroke survivors (SS) memory and behavior changes (MBC) can be distressing to both the SS and their family caregivers (CG). Little is known about CG perspectives of SS MBC over time or if new intensive physical therapies affect MBC. The purpose of this study is to examine CGs’ perceptions of MBC over time in SS enrolled in a clinical trial designed to improve arm function.

Methods:
SS MBC were measured using a modified Memory and Behavior questionnaire. SS were randomized to receive constraint-induced movement therapy (CIMT) or usual care (UC) 3-9 months post-stroke. CG were interviewed at baseline, 4 months (4M) and 8 months (8M). MANOVA was used to examine the effects of group controlling for SS education and baseline MBC. SS (n =132) had a mean age of 62.2 (+12.6), were male (64%), White (74%), and well educated (63%). CG had a mean age of 56.7 (+ 13.7), were female (74%) and spouses (80%).

Findings:
In the multivariate model there were no significant differences between groups (p = .271) in MBC over time. The intensive task practice required in CIMT sometimes results in repeated failure to complete tasks, therefore, specific MBC of anger and irritability were examined. CG’s of SS in the CIMT group reported more SS anger at 4M (F = 3.89, p = .051; CIMT adj. M = 1.07, SE .141 versus UC M = .691, SE .126) and 8M (F = 8.08, p = .005; CIMT adj. M = 1.35, SE .180 versus UC M = .638, SE .170) controlling for baseline anger. Groups did not differ on irritability.

Discussion:
Although CIMT has been reported to improve physical function, it doesn’t appear to have extended benefits with improvement in overall MBC. SS may experience more anger when trying to regain function of their affected arm with intensive practice.
Abstract ID: 152

**Influence of Perceived Support from Health Care Providers and Family on Depressive Symptoms in Patients with Heart Failure**

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Abstract Information

Presentation Preference: SNRS Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories:
Interest Group: Biobehavioral
Thematic Areas: Chronic illness
Purpose/Aims:
Depression is associated with poor outcomes, increased hospitalization and worse quality of life in persons with heart failure (HF). Limited evidence suggests that support from family members is associated with better self-management. Positive supportive communication that fosters patient autonomy in health care decisions has been associated with improved self-management. The purpose of this study was to explore the association of patient perception of family member and health care provider support with depressive symptoms in NYHA class II - III patients.

Research Questions/Hypotheses:

Significance:

Methods:
Baseline data from a study testing a supportive partnership intervention were used. The sample (n = 77) of HF patients was primarily male (64 %), Black (65 %), and NYHA class II (77 %) with a mean age of 55 yrs (±10). Instruments included the Beck Depression Inventory (BDI-II) for depressive symptoms, Family Care Climate Questionnaire (FCCQ) and Health Care Climate Questionnaire (HCCQ) for positive support, and HF patients’ perception of family criticism using the perceived criticism (PC) subscale of the Family Emotional Involvement and Perceived Criticism Scale (FEICS).

Findings:
Mean BDI-II scores were 12.40 (±10.04). A hierarchical multiple regression model was used to predict BDI-II scores by FCCQ, PC and HCCQ scores after controlling for relevant patient characteristics (overall health, gender, marital status, antidepressant use). The full model had an R2 of .42 (F (7, 69) =7.17, p<.001; adj. R2 =.36). Further, being female (p=.04), on antidepressants (p=.03) and higher PC (p = .05) were associated with higher depressive symptom scores.
Higher ratings of overall health (p=.01), and provider support (p=.03) were associated with lower depressive symptom scores.

Discussion:
Health care providers who use positive supportive communication (empathetic, problem solving, non-controlling, choice) may have a positive influence on the mental health of HF patients. Family members helping the HF patient may benefit from interventions emphasizing communication strategies that reduce criticism.

Research Completed: Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

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Family Variables in Early Recovery Predict Stroke Survivor Quality of Life in 12 months

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Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Biobehavioral
Thematic Areas: Chronic illness

Purpose/Aims:
Quality of life (QOL) may be influenced by the family context and stroke survivor (SS) physical ability. The purpose of this study was to determine whether caregiver (CG) and family characteristics predict SS QOL at 1 year.

Research Questions/Hypotheses:
-

Significance:
-

Methods:
Data were collected on 132 SS-CG dyads. SSs were 3-9 months post stroke (88% ischemic), mean age 62.2 (± 12.6) years, male (64%), and Caucasian (74 %). CGs were mean age 56.7 (+13.7) years, female (74 %), spouses (80 %) enrolled in a caregiving study related to a clinical trial testing constraint-induced movement therapy in SSs. Measures included CG physical function (SF-36), CG depressive symptoms (CES-D), family communication (McMaster Family Assessment Device), and SS QOL (Stroke Impact Scale). Pearson’s correlations and hierarchal multiple regression (n = 107) controlling for SS gender, intervention group, and SS functional level were conducted.

Findings:
Baseline CG depressive symptoms were negatively related to SS mood (r = -.24, p = .01) and social activities (r = -.26, p < .01) at 1 year. Better family communication was related to higher SS memory/thinking (r = -.24, p = .01). CG age and physical function were not associated with any SS QOL domains. In regressions, CGs with more baseline depressive symptoms (&#946; = - .28, p = .007) predicted poorer SS mood (F = 2.56, p = .02; R² = .13) and worse social participation (F = - .27, p = .01; F = 1.61, p = .15; R² = .09). Although the overall model was not significant, (F = 1.20, p = .31; R² = .07) worse family communication (F = - .22; p = .04) predicted poorer SS memory/thinking at 1 year. No CG or family characteristics were associated with SS physical or communication QOL domains.

Discussion:
Early intervention of CG depressive symptoms may reduce effects on both CG and SS QOL.

Research Completed: Yes
Abstract History: Yes
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
FDA Disclosure: Yes
Non-Exclusive License: Cleared: Yes
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The relationship between hot flashes and body mass index

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Presentation Preference:  
SNRS  Podium Presentation

Willing To Submit Poster?  
Yes

Abstract Categories:  
Interest Group: Biobehavioral  
Thematic Areas: Women's Health

Purpose/Aims:  
Evidence from preliminary studies framed by The Impaired Glucose Model of Menopausal Hot Flashes suggests that hot flashes (HF) are related to diminished up-regulation of brain glucose delivery. But, our samples lacked ethnic diversity and did not include obese women. Evidence in the literature is contradictory regarding HF prevalence and BMI. Therefore, the purpose of this study is to examine the relationship between blood glucose and HF in a symptomatic sample of women with varying BMI.

Research Questions/Hypotheses:  
1. Is there a relationship between BMI and HF frequency when blood glucose is maintained at fasting levels?  
2. Is there a relationship between HF frequency and BMI when blood glucose is experimentally increased?

Significance:  
This study is designed to determine if there are body mass index differences in HF frequency during experimental manipulations of blood glucose.

Methods:  
The final sample will consist of 45 healthy, symptomatic postmenopausal women ages 45-60, selected according to equal BMI and ethnic strata. Participants provide three days of HF self report as screening data. Then, a time series design provides data to examine the aims of this experimental study. After health screening procedures, participants complete 120-minute sequential infusions of normal saline and 20% glucose. Skin conductance records HF. Blood glucose level is assessed according to protocol.

Findings:  
When data are complete, we will use a generalized linear model to fit a regression of HF frequency on BMI during both experimental conditions. We will explore different models using BMI in its original form, as transformed, and as a polynomial to determine which model best characterizes the relationship. We will also analyze differences in self-reported HF between BMI groups using paired-t tests.

Discussion:  
Ultimately, if HF can be controlled through regulation of blood glucose regardless of BMI, non-pharmacologic interventions focused on regulation of blood glucose through diet and exercise may be developed for HF management.

Research Completed:  
Yes

Abstract History:  
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Gender differences in depressive symptoms among New York Heart Association Class II and III heart failure patients.

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Presentation Preference: SNRS Poster Presentation
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Abstract Categories:
- Interest Group: Biobehavioral
- Thematic Areas: Chronic illness

Purpose/Aims:
The purpose of this study was to evaluate gender differences in depression rates and depression symptom severity among 138 men and women with New York Heart Association (NYHA) class II and III heart failure (HF).

Research Questions/Hypotheses:
Women with HF have higher rates of depression and greater depression severity than men with HF.

Significance:
Female gender is an established risk factor for higher depression rates, more severe depression and relapse, but few studies have reported gender differences among HF patients.

Methods:
Sixty-four men (mean age 63.2 ± 12.9) and 74 women (mean age 63.9 ± 12.6) were compared using sociodemographic characteristics, depression rate and symptom severity (Beck Depression Inventory II), clinical characteristics, perceived social support (Enriched Social Support Scale [ESSI]) and quality of life (QOL) (Minnesota Living with HF Questionnaire [MLHFQ]). Descriptive statistics and independent sample t-tests were used to analyze the data.

Findings:
There were no gender differences in relation to sociodemographic characteristics, NYHA class, comorbidity, perceived social support or QOL. There was a trend for women to experience greater depressive symptoms (BDI-II score 10 or higher) (N=59, 79% vs N=45, 71%, p=0.26), and the mean BDI-II score was significantly higher among women than men (17.6 ± 8.6 vs. 14.4 ± 8.6, p<0.034). The somatic subscale scores on the BDI-II were also significantly higher among women than men (11.8 ± 4.9 vs. 9.8 ± 4.7, p<0.016), but there were no differences on the BDI-II cognitive subscale (p=0.15). Women (23%) were more likely than men (3%) to be living alone (p<0.015), but perceptions of social support (ESSI) were not significantly different.

Discussion:
Women with HF are more likely to experience depressive symptoms and have greater depression severity than their male counterparts. Somatic symptomatology is also higher among women than men which suggests that targeting physical symptoms in women may be an important area for future research.

Research Completed: Yes
Abstract History:
- This material has been published or accepted for publication.
- This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure:
- Details: Heart Failure Society of America, Washington DC, September 2007

FDA Disclosure:
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Hemodynamic response to postural change in women with multiple chemical sensitivities

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Abstract Information

Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Biobehavioral
- Thematic Areas: Chronic illness

Purpose/Aims:
Aims: To describe the HR and BP response to postural shift in women with MCS. To assess the hemodynamic mechanisms underlying the BP response using impedance cardiography.

Research Questions/Hypotheses:
What is the hemodynamic response to postural change in women with MCS?

Significance:
Multiple chemical sensitivities (MCS) is a chronic condition prevalent in women in which the symptoms are reproducible with repeated low level chemical exposure. Evidence gathered through clinical observations suggests that women with MCS may be at risk for autonomic dysfunction as evidenced by abnormal heart rate (HR) and blood pressure (BP) responses to postural shift.

Methods:
Using a pre-post design, HR, BP, stroke volume (SV), left ventricular ejection time (LVET) and systemic vascular resistance (SVR) were measured in 17 women with MCS while sitting and immediately upon standing. Variables were measured by the LifeSource oscillometric BP monitor and the Ambulatory Impedance Cardiograph (AIM).

Findings:
The AIM-BP monitoring system detected a normal hemodynamic pattern in response to postural shift: increased HR (p<0.001), increased diastolic BP (p<0.01), decreased SV (p<0.01), decreased LVET (p<0.001) and increased SVR (P<0.01). However, the magnitude of the responses was blunted and comparable to that observed in our laboratory in medicated hypertensives.

Discussion:
Women with MCS exhibit a blunted cardiovascular response to postural change and may be at risk for autonomic dysfunction. The AIM is sensitive to hemodynamic changes in this population and may be suitable for ambulatory assessment. Ambulatory assessment in MCS will permit the evaluation of hemodynamic responses to interventions during the activities of daily living.

Research Completed: Yes

Abstract History:
Financial Disclosure:
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Abstract ID: 210

**Hour-to-Hour and Day-to-Day Temperature Variability of Skin Affected by Chronic Venous Disorders**

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Presentation Preference: SNRS Poster Presentation

Willing To Submit Poster? No

Abstract Categories: Interest Group: Biobehavioral
Thematic Areas: Chronic illness

Purpose/Aims: The purpose of this study was to measure hour-to-hour (48 hours) and day-to-day (30 days) skin temperature (Tsk) variations of chronically-inflamed lower extremity skin of 15 individuals with chronic venous disorders (CVD), ages 45 and above, to determine whether the skin exhibits rhythmic patterns during daily activities such as sleeping or eating.

Research Questions/Hypotheses:
Does skin inflamed by CVD exhibit rhythmic patterns during daily activities such as bathing, eating, walking, and sleeping?

Significance: Previous studies conducted by the investigator show that temperature is elevated in lower leg skin affected by CVD; however, the significance of elevation to skin damage and subsequent ulceration is unknown, and an ulcer prediction/prevention model that incorporates objective measures is lacking. Temperature variation, particularly elevation, may be an early warning signal of an impending ulcer. This study sought to examine Tsk patterns so that prediction is based on trends outside an individual baseline.

Methods: Two sites per leg were identified as at risk for ulceration based on previous location of ulcers and from thermal imaging with an infrared camera. Hourly Tsk measurements were carried out with a wireless temperature data logger worn by the individual at home during the 48-hour monitoring period while daily temperatures during the 30-day monitoring period were measured with a hand-held infrared thermometer over two sites per leg and recorded by the individual.

Findings: The annotated time courses of hourly measurements did not contain consistent, visually detectable effects due to either caffeine use, eating, or activity. However, sleeping resulted in a consistent increase in Tsk, accompanied by decreased variability. The 30-day time courses (daily measurements) did not reveal any consistent trends.

Discussion: Data suggest Tsk increases at night, but show no discernable rhythmic patterns during activity, rest, or eating. An increase over baseline Tsk could be indicative of sub-clinical pathology or an early warning sign of venous ulceration.

Research Completed: Yes

Abstract History: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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Financial Disclosure:
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FDA Disclosure:
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**Persistent Anxiety Predicts Subsequent Acute Cardiac Events and Death in Patients with Coronary Artery Disease**

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Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? No

Abstract Categories: Interest Group: Biobehavioral
Thematic Areas: Chronic illness

Purpose/Aims: The purpose of this study was to examine the impact of persistent anxiety on development of acute cardiac events (including cardiac mortality) in a cohort of coronary artery disease (CAD) patients followed for 3 years.

Research Questions/Hypotheses: Persistent anxiety in CAD patients is independently predictive of acute cardiac events and cardiac mortality.

Significance: Psychosocial factors affect morbidity and mortality in individuals with coronary artery disease (CAD). The prevalence of anxiety is high in CAD patients, but the effect of anxiety on cardiac events and mortality has not been well characterized and current evidence is equivocal. A major reason for conflicting findings is measurement of anxiety at only one time point.

Methods: Participants in a multicenter, randomized trial of an intervention to decrease patient delay in seeking treatment for CAD symptoms who had baseline and 3 month anxiety data were studied (n=3048). Anxiety was measured using the anxiety subscale of the Brief Symptom Inventory. The combined end-point included hospitalization for myocardial infarction, unstable or stable angina and all-cause mortality. These events were assessed using patient/family interview, hospital databases, and death records. Groups (persistent anxiety [anxiety at both time points] vs all others [no anxiety at either time point or anxiety only at one time point]) were compared using Kaplan-Meier survival curves and the log rank test.

Findings: Persistent anxiety was associated with shorter time to adverse outcome when compared to no anxiety, or anxiety at either time point only (p=.001). In Cox regression, persistent anxiety remained an independent predictor of adverse outcome after controlling for age, gender, previous AMI, diabetes, smoking, group assignment, education, income, body mass index, sedentary life-style and marital status (odds ratio 1.3 [1.04-1.6], p=.02).

Discussion: Persistent anxiety is a strong, independent predictor of event-free survival. As such, it is important that healthcare providers assess and manage anxiety in their CAD patients.

Research Completed: Yes

Abstract History:
Financial Disclosure:
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Grants/Research Support : Y
NIH NINR
Consultant :
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Speaker's Bureau :
Other Financial or Material Support :

FDA Disclosure:
Non-Exclusive License: Cleared: Yes
Abstract ID: 239
Depression, physical function and quality of life in heart failure patients.

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SNRS member? Yes
Student Level:
The purpose of this study was to evaluate the association between depressive symptoms, physical function and quality of life in heart failure patients.

Research Questions/Hypotheses:

What is the relationship between depressive symptoms, physical function and quality of life in heart failure patients?

Significance:

Depression has been associated with decline in physical function, worsening symptoms, poorer quality of life (QOL) in HF. Despite the fact that depression is associated with substantial morbidity and mortality, few studies have evaluated the association between depressive symptoms, physical function and QOL in this population.

Methods:

The sample included 74 NYHA II-III HF patients enrolled in an intervention study (mean 15.9 ± 4.3) at baseline. The mean age was 65.8 ± 13.5, 57% were NYHA class III, 72% (N=53) were Caucasian, and 57% were female. Depression (HAM-D), physical function (six-minute walk test [6MWT]), quality of life (QOL) (Minnesota Living with Heart Failure Questionnaire [MLHFQ], SF-36 and TNF- alpha were evaluated. Descriptive statistics and Pearson’s r correlation coefficients were used to analyze baseline data.

Findings:

Significant negative relationships were found between the HAM-D and SF-36 physical function ($r=-.28, p<.05$), general health ($r=-.29, p<0.05$), vitality ($r=-.37, p<0.01$), social functioning ($r=-.35, p<0.01$), and role emotional ($r=-.32, p<0.01$) subscales. There was also significant relationships between the MLHF total score ($r=.40, p<0.01$), physical subscale ($r=.38, p<0.01$) and emotional subscale ($r=.33, p<.01$). Finally, TNF-alpha was also significantly correlated with baseline HAM-D ($r=.27, p<0.05$).

Discussion:

Depression is associated with increased physical symptoms, lower vitality, and impaired social function that adversely influences QOL in HF patients. In addition, cytokines are elevated in patients with HF that may facilitate disease progression and worsening symptom severity. Studies addressing the underlying pathophysiological changes in depression are needed to better determine which interventions may be most effective for alleviating physical and psychological symptoms in this population.

Research Completed:

Yes

Abstract History:

Financial Disclosure:

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Is Exercise a Danger Signal to the Maternal Immune System?

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Abstract Information
Presentation Preference: SNRS Podium Presentation

Abstract Categories: Interest Group: Biobehavioral
Thematic Areas: Women's Health

Purpose/Aims: This study explored relationships between stress, immunity and exercise in postpartum women.

Research Questions/Hypotheses:
The research question for the study was "What are the characteristics of postpartum women who engage in intensive exercise?" and "What is the relationship between levels of intensive maternal exercise, stress, infection and immunity in postpartum mothers?"

Significance: Maternal postpartum health is essential for the wellbeing of mother and newborn.

Methods:
Data were collected at 4-6 weeks postpartum. Mothers were exclusively breast or formula feeding. They completed demographic, mood and stress instruments, and infection symptom check lists. Serum, milk and saliva samples were collected and brought to the lab. ELISAs were performed for hormones and cytokines in sera and saliva, and a multiplex assay was performed for milk cytokines. Maternal exercise was coded into categories of 0 (no exercise) through 4 (90-120 minutes...
Findings:

Exercise data were available on 192 women. Forty six percent reported no exercise, 18% reported 0-30 minutes, 18% reported 30-60 minutes, 8 percent reported 60-90, and 10% reported 90-120 minutes. Exercisers were older, married, of higher income, lower BMI, and primiparous. The women in the highest exercise group had more symptoms of infection. Their infants had fewer symptoms than the non-exercisers. Stress and mood scores were not different. There was significantly lower salivary Immunoglobulin A (sIgA) in highest exercise compared to the no exercise group. Proinflammatory milk cytokines were progressively higher as exercise levels increased. Primaparity and infections were also associated with higher proinflammatory milk cytokines.

Discussion:

This study suggests that postpartum women who exercise intensively may have some immune decrements and more infectious illnesses. They seem to produce milk which has higher levels of proinflammatory cytokines. This suggests that exercise presents some health risks to the mother and is a danger signal producing alterations in milk immune factors to protect the nursing infant.

Research Completed: Yes

Abstract History:

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- Yes

FDA Disclosure:

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Effect of Chemo on Markers of Inflammation in Women with Breast CA

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Circulating levels of inflammatory markers are being used in biobehavioral research to denote response to clinical interventions targeting symptoms such as depression and fatigue. However, there is little known about the levels of inflammatory markers in patients with cancer, particularly over the course of multiple cycles of chemotherapy.

The purpose of this analysis is to describe the levels of pro-inflammatory cytokines (TNF-α, IL-1β, and IL-6) in women with breast cancer over three cycles of chemotherapy and to examine if there are significant changes over the course of chemotherapy.

Further understanding the effects of chemotherapy on inflammatory and immune markers is important for developing the science related to biobehavioral markers in patients with cancer.

This is a secondary-analysis of biomarker data from a clinical trial examining the feasibility of a complementary modality for symptom management in women receiving chemotherapy for breast cancer. Data were collected from 35 women diagnosed with breast cancer who were scheduled to receive an anthracycline-containing chemotherapeutic regimen. The sample included 31 women recruited prior to their initial adjuvant chemotherapy (chemotherapy after surgery) and 4 women were recruited prior to receiving neoadjuvant chemotherapy (chemotherapy before surgery). Levels of TNF-α, IL-1β, and IL-6 were measured using the Bio-Plex® (Bio-Rad) multiplex assay system. Data were analyzed using JMP 7.

The distributions of cytokines levels were skewed. In general, levels of pro-inflammatory cytokines were quite high and remained so over three cycles of chemotherapy. Small decreases were noted in the mean levels over three cycles, with IL-1β showing a greater decrease than TNF-α or IL-6.

Information from this study may serve as a basis for further developing an understanding of the patterns of inflammatory markers over time in women with breast cancer receiving chemotherapy.
Biobehavioral Correlates of Dietary Sodium Intake in Heart Failure Patients

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Nonadherence of a low sodium diet in persons with heart failure (HF) has been associated with male gender, poor awareness of the recommendations, low label-reading ability, and little knowledge of high and low sodium foods. This study examined biobehavioral characteristics associated with dietary sodium intake in HF patients.

Research Questions/Hypotheses:
- Do sociodemographic (age, gender, race, education); clinical (ejection fraction, serum creatinine, BMI, BNP, distance walked during 6 minute walk test, or Charlson Morbidity Index), behavioral (depression, self-regulation, and self efficacy) variables, and knowledge of HF predict dietary sodium intake?

Significance:
Sodium restriction is an important treatment strategy in HF yet has poor patient adherence. Greater understanding of other biobehavioral factors is important to influence self-management.

Methods:
87 NYHA Class II & III HF patients [age 37-78 years, mean EF 26.63 (SD14.25), 64.4% male, 64.7% black] participating in a family intervention study completed baseline clinical assessments and measures of depression with the Beck Depression Inventory (BDI), self-regulation with the Treatment Self-Regulation Questionnaire for Diet, and self-efficacy with the Perceived Competence with Diet. Descriptive statistics and regression analysis were used to identify univariate correlates of sodium intake as measured by 24-hour urinary sodium excretion (Urine NA). Because caloric intake is a strong correlate in sodium intake, Urine NA values were corrected by self-reported caloric intake for the urine collection period.

Findings:
Dietary sodium intake ranged from 437 to 9627 mg/day, mean 3734.9 (SD 1897.4). No sociodemographic, clinical or HF knowledge variables were related to sodium
intake. Depression was the only behavioral characteristic predictive of sodium intake (F 6.46, p=.01, R2=.09).

Discussion:
Sodium intake was not related to sociodemographic, knowledge, or clinical characteristics. Gender differences in dietary sodium reported in other studies may be due to gender differences in calorie consumption. Depression may be an important factor that could be targeted through interventions to improve dietary sodium adherence.

Research Completed: Yes

Abstract History:

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Examination of the Mediators of Smoking in a National Sample of Lesbian, Gay, Bisexual College Students

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Presentation Preference: SNRS Podium Presentation

Abstract Categories: Interest Group: Biobehavioral
Thematic Areas: Adult Health

Purpose/Aims: To date, no study has examined the mediating factors between smoking, psychological factors and sexual identity. Therefore, the purpose of this study is to explore the impact of psychological factors on smoking among lesbian, gay, and bisexual (LGB) and heterosexual college students.

Research Questions/Hypotheses:
1. Examine the differences in smoking rates, alcohol and other drug use, depression, and anxiety among LGB and heterosexual college students.
2. Determine the factors that mediate the relationship between sexual identity and smoking among college students.
3. Explore other factors that mediate the relationship between sexual identity and smoking.

Significance:
A recent population based survey showed that compared to heterosexuals, smoking among lesbian women and gay men was significantly higher -- 70% and 55% respectively. Increased levels of smoking also have been documented in studies with LGB college students. These discrepancies in smoking rates among the LGB population resulted in the group being identified as one distinct segment of the U.S. population that experienced health disparities in Healthy People 2010.

Methods:
This study employed a non-experimental cross-sectional design using secondary data collected from students at 117 college campuses. The American College Health Association National College Health Assessment (NCHA) was completed by 94,806 randomly selected college students in the spring of 2006.

Findings:

Preliminary data analyses show that LGB college students are more likely to report anxiety, depression, alcohol and drug use, and smoking. Additional analysis strategies including predictive modeling and data mining are underway. These approaches will aid in developing a model that accurately predict outcomes and identify the mediators of smoking among LGB college students.

Discussion:

In order to design effective interventions to reduce the prevalence of smoking among this group, a better understanding of the factors that contribute to these behaviors is essential.

Research Completed: Yes

Abstract History:

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COPD and Smoking Status

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Abstract Information
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Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Biobehavioral
Thematic Areas: Chronic illness
Purpose/Aims: The purpose of these secondary analyses was to examine for differences between currently-smoking COPD patients and former smokers with COPD on physiologic, well-being, and coping resource variables.
Research Questions/Hypotheses: Are there differences between current smokers and former smokers on the variables age, pulmonary function, functional performance, anxiety, depression, mastery, and perceived social support?
Significance: Cigarette smoking is the primary risk factor for COPD. Smoking cessation is the only intervention known to slow the advance of COPD.

Methods: Data come from a cross-sectional study of community-dwelling people with COPD. Analyses are restricted to those participants who reported that they were current smokers (n = 20) or former smokers (n = 94). Participants in the original study were recruited in person, and submitted study instruments by mail. Study instruments
included the Functional Performance Inventory-Short Form, the Hospital Anxiety and Depression Scale (both subscales), the Mastery Scale, and the Personal Resources Questionnaire 85-Part II. Pulmonary function test results were obtained through chart review.

Findings:
Participants in the current study had a mean age of 68.3 (8.5), and were about equally divided by gender (53.5% male). Mean FEV1 % pred indicated severe pulmonary disease. Examination of subgroup means showed that former smokers were older than current smokers, and reported better functional performance, lower anxiety and depression, and greater mastery and perceived social support. Mann-Whitney U analyses demonstrated that none of these differences were statistically significant. Current smokers had a higher mean FEV1 value (p < .05). Mean FEV1 % pred values indicated that current smokers had moderate COPD and former smokers had severe COPD; the difference between groups was not statistically significant.

Discussion:
These findings are somewhat surprising, and may be attributable to clinical differences between subgroups. Future studies may include stratified sampling to achieve equal subgroup sizes.

Research Completed: Yes
Financial Disclosure:
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The Effect of A Community Health Worker Intervention to Promote Health Behavior Change in Low Socioeconomic African American Women

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Abstract Information

Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Biobehavioral
Thematic Areas: Health Disparities

Purpose/Aims: To test the effectiveness of two community health worker (CHW) interventions on cessation outcomes among tobacco dependent African American women living in public housing.

Research Questions/Hypotheses:
Women receiving the tailored, intensive CHW intervention will have higher cessation outcomes than women receiving the brief CHW intervention.

Significance: African American women in public housing have high rates of smoking, alarming tobacco related health disparities, and a complex host of factors that make quitting difficult. Based on the literature and previous pilot studies, a socio-culturally tailored cessation intervention led by indigenous CHWs shows promise for promoting behavior change in this population.

Methods: A quasi-experimental, repeated measures design with comparison group was used. Four housing developments were matched according to demographic data and randomized to intervention (2) or comparison (2) neighborhoods. Women in the intervention neighborhoods (n=75) received literacy and socio-culturally tailored written materials, behavioral counseling in group format weekly for 12 weeks, and 1:1 personal contact by CHWs. Women in the comparison neighborhoods (n=75) received standard written smoking cessation materials and two brief 1:1 counseling sessions with CHWs. Women in both groups were offered an 8-week supply of nicotine patches. Cessation outcomes were validated by salivary cotinine.

Findings: Point prevalence outcomes at weeks 12 and 24 were 22% and 18% (intervention group) vs. 10% and 12% (comparison group) (p>.05). Mean daily cigarette consumption at baseline, weeks 12 and 24 were 13.2, 5.3 and 5.4 (intervention group) vs. 15.7, 7.9 and 7.1 (comparison group).

Discussion:
As compared to results from an earlier study of a nurse-led intervention in this setting (24 week point prevalence of 39%), CHWs were not as effective in delivering behavioral interventions as trained health professionals. However, CHWs are cost effective, can promote behavior change, and are well received by the community. We recommend a bundled intervention of CHWs and health professionals in this setting.

Research Completed: Yes

Abstract History:

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

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Non-Exclusive License:

Accepted Terms: Yes

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Relationships Among Spiritual Perspectives, Spiritual Well-being, and the Provision of Spiritual Care by RNs

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Presentation Preference: SNRS Poster Presentation

Abstract Categories:
- Interest Group: Biobehavioral
- Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims:
The purpose is to investigate relationships between spiritual well-being, spiritual perspectives and provision of spiritual care of nurses in a perinatal unit.

Research Questions/Hypotheses:
What are the spiritual perspectives and level of spiritual well-being of Perinatal RNs? How often do perinatal RNs assess spiritual needs of patients? What interventions do RNs implement in providing spiritual care? What relationships exist between variables?

Significance:
Providing spiritual care is not an option; rather a professional expectation supported by International Council of Nurses Code for Nurses and the American Nurses Association. Additionally, the Joint Commission on the Accreditation of Healthcare Organizations requires health care providers to address spiritual needs of patients. Although the history of nursing has a rich religious foundation that recognized the tripartite dimensions (body, mind & spirit) of human beings, the spiritual dimension became overshadowed by both science and the medical model (Sawatzky & Pesut, 2005). Nurses may be reluctant to provide spiritual care due to inadequate educational preparation, lack of time, inability to differentiate religion from spirituality, lack of personal spiritual awareness; and discomfort in providing spiritual care (Stranahan, 2001). Spiritual well-being has been shown to correlate with health (McCoubie & Davies, 2006; Narayanasamy, 2006).

Methods:
Consenting perinatal RNs will complete three questionnaires: Demographic Data and Spiritual Care, Reed’s Spiritual Perspective Scale, and Ellison’s Spiritual Well-being Scale.

Findings:
Descriptive and correlational statistical analysis will be used to describe the spiritual well-being, spiritual perspectives and the provision of spiritual care by the RNs. Relationships between variables will also be presented. Spiritual care interventions by nurses will be compiled from the Demographic Data and Spiritual Care Form.

Discussion:
A summary of findings and information related to spiritual well-being and the provision of spiritual care will be presented at a follow-up workshop for RNs. This study has been funded by the Epsilon Omega Chapter of Sigma Theta Tau.

Research Completed:
Yes

Abstract History:
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Breast cancer risk and immune responses in healthy women

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Abstract Categories:
Interest Group: Biobehavioral
Thematic Areas: Women's Health

Purpose/Aims:
To determine associations of Gail’s breast cancer risk assessment and risk factors with immune responses, including natural killer cell activity (NKCA) and interferon-gamma (IFN-γ), in healthy women.

Research Questions/Hypotheses:
1. What associations of Gail’s risk assessment are with immune responses? 2. What are individual contributions of risk factors for the Gail’s risk assessment to immune responses?

Significance:
Breast cancer is a complex disorder, development of which is influenced by multiple risk factors. Breast risk assessment models, such as the Gail model, have been developed based on known risk factors, including older age, Caucasian, early menarche, late first live birth or no birth, and family history of breast cancer in first-degree relatives (FDRs). However, it is difficult to ensure clinical significance of such models, partly because their associations with cancer-relevant biological mechanisms, such as immune response, have rarely been tested. NKCA and IFN-γ are the most important immune parameters in breast cancer immunosurveillance.

Methods:
A convenience sample of 117 healthy women (mean age = 36.5) completed questionnaires and gave a blood sample for immune measurement. A chromium-51 release cytotoxicity assay determined NKCA, whereas enzyme-linked immunosorbant assay (ELISA) determined IFN-γ production.

Findings:
Regression analyses revealed that higher breast cancer risk was associated with lower NKCA at 12.5:1 effector-to-target ratio (NKCA 12.5) (p=.01) and IFN-γ (p=.005). Although the combination of risk factors showed significant associations with NKCA 12.5 (p=.004) and IFN-γ (p=.005), each risk factor showed different individual contributions to each immune parameter: race, age at first live birth, and number of FDRs with breast cancer for NKCA 12.5; and only race for IFN-γ. Current age and age at menarche were not associated with any immune parameter.

Discussion:
The findings of this study may provide details useful in developing breast cancer prevention strategies such as early identification of at-risk individuals before its clinical expression. Further investigation is warranted in this area.

Research Completed: Yes

Abstract History:
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Significant delay in immune recovery post-breast cancer adjuvant therapy

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Willing To Submit Poster? No

Abstract Categories: Interest Group: Biobehavioral
Thematic Areas: Women’s Health

Purpose/Aims: (1) To determine the probability of immune recovery post-adjuvant therapy in women diagnosed with breast cancer over one year, and (2) to assess the effects of the type of cancer adjuvant therapy and cancer stage on immune recovery.

Research Questions/Hypotheses: (1) Immune recovery from cancer adjuvant therapy will be significantly delayed over a long period, and (2) the type of cancer adjuvant therapy and cancer stage will influence immune recovery.

Significance: A psychoneuroimmunology framework indicates that prolonged immunosuppression from cancer adjuvant therapy may increase susceptibility to infections and negative health outcomes. Surprisingly, immune recovery over time has not been adequately investigated.

Methods:
Breast cancer-relevant selective immune responses were measured 4 times: prior to, and at 2, 6, and 12 months from the start of cancer adjuvant therapy in 80 patients with early stage breast cancer.

Findings:
Probability of immune recovery to baseline or greater values varied from 17.6% to 77.3% of patients at all timepoints across multiple measures. Probability of immune recovery was lower for IFN-γ, IL-2, IL-4 and natural killer cell activity (18.5 – 33.0%) than CD subsets and IL-6 (61.5 – 77.3%). IL-2 and lymphocyte proliferation showed the lowest probability of recovery at 12 months suggesting a delayed impact of cancer adjuvant therapy. The type of cancer adjuvant therapy, not cancer stage, influenced immune recovery on selected measures: Chemotherapy or combination therapy (both chemo- and radiotherapy) significantly suppressed IL-2 recovery, whereas radiotherapy significantly suppressed IL-4 recovery.

Discussion:
Immune recovery in breast cancer patients is significantly delayed and variable post cancer adjuvant therapy. Protective immune responses tended to recover more slowly, whereas cell numbers and proinflammatory cytokine recovered more rapidly. The type of cancer adjuvant therapy had selective influence on immune recovery. Clinical significance of delayed immune recovery as well as factors contributing to variability of immune recovery need to be investigated in future studies.

Research Completed:
Yes

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Financial Disclosure:
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Decision making is associated with brain dopamine and subjective responses to amphetamine: a pilot study

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In the present study, we will evaluate whether risk taking behavior is associated with brain dopamine or subjective responses to amphetamine in humans.

Impulsive personality traits, such as risk taking, have been associated with increased vulnerability for substance abuse in clinical studies. Preclinical evidence suggests that alterations in brain dopamine activity may underlie some forms of impulsivity in rodents. We hypothesize that similar mechanisms may mediate associations between impulsivity and drug abuse in humans.

A question that continues to baffle both the general public and addictions researchers alike is what makes some individuals more vulnerable for addiction than others. Alterations in brain dopamine neurotransmission have been observed in cocaine, heroin, methylphenidate, and alcohol abusers. However, an important issue that remains to be clarified is whether these alterations represent vulnerability factors or consequences of addiction.
Nine healthy M, F, ages 18-29 years, completed the Iowa Gambling Task (IGT), which is a laboratory performance measure of ‘risk taking’ or ‘decision making’ traits. On another day, subjects underwent two consecutive 90-min PET studies with [11C]raclopride. The first scan was preceded by i.v saline; the second by 0.3 mg/kg AMPH. Amphetamine-induced dopamine release was determined by changes in [11C]raclopride binding between scans.

Findings:

Findings showed that individuals who made more disadvantageous card choices or who won less money on the IGT tended to have less DA release in the ventral striatum following AMPH administration than those with better decision making skills. These individuals also reported more positive subjective effects of AMPH.

Discussion:

These findings suggest that risk taking traits may be associated with altered sensitivity to drugs of abuse. Knowledge of these mechanisms is fundamental for understanding of individual differences in risks for addiction and continued development of prevention/treatment alternatives that optimally target key neurotransmitter systems involved in drug abuse.

Research Completed: Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

Submitted By:
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Stress, John Henryism and Cortisol Responses in Black Women

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Abstract Information

Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Biobehavioral
Thematic Areas: Health Disparities

Purpose/Aims: The purpose of this pilot study was to determine relationships among stress, emotions, coping and cortisol responses in Black women.

Research Questions/Hypotheses: What are the relationships between perceived stress, positive emotions, negative emotions, chronic active coping and cortisol?

Significance: The stress process is believed to explain in part the health status of Black American women. Long-term exposure to stress with frequent and prolonged SNS activation contributes to the development and progression of chronic disease. Some coping strategies such as John Henryism or high-effort coping may provide mental relief but may have long-term negative physical consequences. Cortisol, a biological indicator of stress level, enhances activities of the SNS, stimulates the release of glucose and fats, and suppresses immune functions.

Methods: A convenience sample of 31 Black women, ages of 25 to 55, were recruited. Data collection occurred in their homes. During the evening subjects completed three questionnaires measuring daily hassles, positive and negative emotions, and John Henryism. Next, height, weight, and a salivary cortisol samples were obtained. The next morning, three separate cortisol samples were obtained within one hour of awakening. Cortisol levels were assessed by high sensitivity enzyme immunoassay. We determined correlations including age and BMI.

Findings: We found that 77% of women exhibited the typical pattern of cortisol (evening levels < morning levels, expected early morning rise and fall). 13% of women showed little change and low cortisol levels. 10% showed little change but their cortisol levels were within normal limits. Cortisol levels were not correlated with perceived stress, emotions, John Henryism, age or BMI. However, we found a strong correlation between daily hassles and negative emotions.

Discussion: More research is needed to understand cortisol and stress particularly because cortisol responses appear to be biphasic in Blacks. Cortisol secretion may increase with chronic stress but may become low with prolonged exposure resulting from dysregulation of cortisol output.

Research Completed: Yes

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Abstract ID: 530

**Relationships of Pain with Sleep Disturbance and Depressive Symptoms in**

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Abstract Categories:
- Interest Group: Biobehavioral
- Thematic Areas: Adult Health

Purpose/Aims:
To describe the pain experience of outpatients with cancer and explore the relationships of pain with sleep disturbance, depression and patient’s functioning.

Research Questions/Hypotheses:
- What is the level of pain intensity and pain distress in cancer patients?
- What is the pain experience of cancer patients with pain including duration, descriptors, pain relief goal of patient, pain control satisfaction, and interference with activities? Are there significant relationships between pain intensity, distress and intensity or distress from sleep disturbance? Are there significant relationships between pain intensity, distress, or pain interference scores and depressive symptoms?

Significance:
Pain is one of the most common and distressing symptoms that cancer patients experience and can interfere with sleep and contribute to depression (Walsh & Ribicki, 2006; Mystakidou, Parpa, Tsilika et al., 2007; Reyes-Gibby, Aday, Anderson, et al., 2006). The relationships between pain, sleep, and depressive symptoms require further exploration.

Methods:
Baseline data from NIH interventional study (5R01 008270) using descriptive analysis of 85 outpatients at a comprehensive cancer center in the southeast. The BPI, MSAS, and CES-D were utilized.

Findings:
There was a strong positive correlation between pain intensity and pain distress. More than 63% of patients reported a problem with sleep disturbance. Distress from sleep disturbance was significantly correlated with both pain intensity and pain distress. Pain Interference also was correlated with sleep disturbance intensity and sleep disturbance distress. Pain severity, pain distress, pain right now and pain interference scores were all significantly correlated with depressive symptom.

Discussion:
Cancer patients continue to have problems with pain, and with sleep and depressive symptoms related to that pain. Improvements are needed in the clinical setting to address unrelieved pain and the problems that accompany it. Nurses need to assess pain regularly, plan for its relief, and advocate with physicians to seek better ways to relieve it.

Research Completed: Yes

Financial Disclosure:
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Dietary energy density: A potential mediator of disease risk in overweight adults

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Purpose/Aims: Abdominal obesity, the central distribution of adipose, is more closely related to insulin resistance than generalized obesity and associated with cardiometabolic disease. In 2003-2004, more than 50% of adults had abdominal obesity. A conceptual model that accounts for environmental demands predisposing individuals to psychological distress is proposed. Depending on the individual’s coping behaviors and resources, these demands may contribute to psychological distress which may increase disease risk (abdominal obesity). Increased dietary energy density (DED), the ratio of kilocalories per gram of food, may represent an important risk factor for abdominal fat deposition due to excess intake of energy, total and saturated fats. DED is a potential biobehavioral mediator between psychological distress and abdominal obesity.

Research Questions/Hypotheses: To examine associations among perceived stress and depressive symptoms, biobehavioral response (dietary energy density), and disease risk (abdominal obesity) in sedentary, overweight adults.

Significance: Clarifying these associations may lead to the development and testing of clinical assessment tools and tailored interventions aimed at weight control.

Methods: 91 sedentary adults (18-65 years old) will be recruited for this cross sectional, correlation study. Inclusion: BMI ≥ 25.0 kg/m2. Exclusion: Pregnant, currently breastfeeding, engaged in weight loss activities, treated with steroids, valproic acid, phenothiazines, or antidepressants, history of diabetes, abdominal surgery. Variables & measures: Waist circumference (WC) an indicator of abdominal obesity; weighed three-day food record to calculate dietary energy density (DED); Beck Depression Inventory II (BDI-II) assesses depressive symptoms; Perceived Stress Scale (PSS) assesses the degree to which participants find their lives to be uncontrollable.

Findings: Pearsons correlations will test univariate relationships and hierarchical regression will test DED as a mediator between PSS and BDI-II with WC. Preliminary findings (n=10; 40% men, 50% minorities, age 37-57 years, BMI 25-46 kg/m2) will be reported.

Discussion: Calculating DED is an evolving science. Challenges are under/over reporting, number of days required, and inclusion/exclusion of beverages.
Abstract ID: 578

Comparison of Perceived Stress, Allostatic Load and Racial Discrimination in Different Cultural Groups of Pregnant Black Women

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Willing To Submit Poster?
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Abstract Categories:
Interest Group: Biobehavioral
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims:
The purpose of this observational-predictive pilot study is to compare racial discrimination and different measurements of stress, including perceived stress and allostatic load score, in two different cultural groups of African American women.

Research Questions/Hypotheses:
The research questions that will be investigated include: 1.) examining the relationships between racial discrimination, perceived stress, age, income, number of hours worked weekly, gestational age, total allostatic load score and measures of allostatic load (total allostatic load score, CRH, BMI, systolic and diastolic blood pressure) in a sample of pregnant African American women; 2.) determine the best model from the study variable set (perceived stress, individual measurements of allostatic load, total allostatic load score and racial discrimination) and extraneous variables (age, years in the United States, income, number of hours worked per week and gestational age) that predicts each of the study variables; 3.) determine if differences exist between the African American women born in the United States and those who are foreign.
born in perceived stress, measures of allostatic load (total allostatic load score, CRH, BMI, systolic and diastolic blood pressure) and racial discrimination.

Significance:
Over 26 billion healthcare dollars are spent annually in the United States on the management of pre-term labor and the care of infants born prematurely. Several researchers have found that elevated levels of stress and anxiety during a woman’s pregnancy significantly increase her risks for poor perinatal outcomes.

Methods:
After informed consent is obtained, the woman’s blood pressure will be taken, height and weight measured and then blood sample drawn according to the protocol to sample for corticotrophin releasing hormone (CRH). The women will complete the demographic questionnaire and psychometric instruments, including the Perceived Stress Scale (PSS) and Krieger’s Racial Discrimination Scale (RDS).

Findings:
Research findings will be presented at the SNRS conference.

Discussion:
Discussion section will be presented at the SNRS conference.

Research Completed:
Yes

Abstract History:
Financial Disclosure:
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Yes

FDA Disclosure:
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Submitted By:
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Stress and Physiological Responses in Black American Adult Female Siblings

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The purpose of this study was to describe and compare stress levels and selected physiological responses of Black American adult female sisters without known cardiovascular disease.

Do these sisters differ from each other on environmental contextual factors, psychological factors and physiological responses?

Understanding of difference in siblings will guide health providers to better assess cardiovascular disease risk and help providers to develop and modify primary prevention strategies.

Data are from the study of ‘Perceived Stress, Cortisol, and Cardiovascular Responses in Black Women’. Three sets of sibling were studied from the original convenience sample of 31 Black women who were recruited from the community. Environmental contextual factors (age, body mass index, income, and marital status), psychological factors (perceived stress, negative emotions, and chronic active coping), and physiological stress responses (cortisol levels and blood pressure) were explored. Since the sample size was small, Wilcoxon matched pairs signed-rank test was conducted.

There was no significant difference on environmental contextual factors, psychological factors, and physiological stress responses in these sisters. However, this very important finding indicates that screening relatives, particularly sibling of those with CVD risk could help to identify more at risk individuals since they share similar degree of risk.

This case study of Black women demonstrates that siblings share similar cardiovascular risk. This is consistent with several larger studies confirming the importance of family history, particularly sibling history, in determining risk for CVD. However, few studies have evaluated psychological and physiological factors such as cortisol in determining sibling risk. Therefore, a future study with a population based sample should be conducted to identify differences in psychological risk factor and other physiological indicators of stress such as cortisol in siblings.

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes
The Development and Outcomes of a Co-Created Diabetes Self-Management Intervention: A Pilot Study

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Presentation Preference: SNRS Student Poster Presentation

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Abstract Categories: Interest Group: Biobehavioral
Thematic Areas: Chronic illness

Purpose/Aims: Develop a co-created DSME intervention that would facilitate adaptation to DM therapeutic regimens with a naturally occurring group of adults with type 2 diabetes mellitus in Arkansas.

Research Questions/Hypotheses:
1. What diabetic self-management education experiences are desired or needed by adults with type 2 diabetes mellitus in Arkansas?
2. Do participants in a co-created diabetic self-management program have better learning, self-management activities, adaptation, and program satisfaction than those in a structured program?

Significance: Von Korff, Gruman, Schaefer, Curry, & Wagner (1997) stated that efficacy evaluations of DSME interventions have provided information about success under ideal circumstances with patients who are ready to change. Unfortunately, this research does not tell us what appeals to patients, providers, and healthcare systems; is practical; and produces replicable results in real-world conditions with limited resources and highly diverse and less motivated patient groups. Studies in such real-world situations are necessary if DSME program recommendations are going to be applicable to the general population.

Methods: This study was a quasi-experimental design with pre- and post intervention collection points and two groups. Qualitative data were used to design and evaluate the experimental DSME intervention. Quantitative measures included: diabetes knowledge test, diabetes empowerment scale, ATT-19 measure of psychosocial adaptation, diabetes self-care activities summary, and diabetes management and evaluation tool.

Findings: Focus groups identified eight topic areas for the experimental intervention. These were: diabetes pathophysiology, diet, complications prevention, psychological issues, social issues, exercise, medications, and costs of care. Analysis of covariance with race, previous formal classes, and pre-intervention scores controlled. There were no differences between groups for diabetes knowledge, adaptation, or program satisfaction. The experimental group demonstrated a statistically significant increase in diabetes self-care activities over the comparison group (p=.020).

Discussion: Diabetes self-management education programs as delivered have mediocre success. The use of a co-created method may meet the needs of the participants and lead to improvements in self-care activities.

Research Completed: Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

Grants/Research Support: Y
Kappa Rho-at-large Chapter of Sigma Theta Tau, International University of Central Arkansas Foundation-Friends of Nursing.
Abstract ID: 664

Red as a Beet, Mad as a Hatter: Does Anger Really Matter?

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Abstract Information
Presentation Preference:
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Willing To Submit Poster?
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Abstract Categories:
Interest Group: Biobehavioral
Thematic Areas: Women's Health
Purpose/Aims:
The purpose of this study is to examine differences in physiological, biobehavioral, and sociocultural variables in healthy post-menopausal women who are classified as high and low in trait anger and anger expression. The study aims to explore differences in serum levels of high sensitivity C-reactive protein (CRP), in high and low anger groups.

Research Questions/Hypotheses:
RQ1) Are there significant differences in mean levels of CRP in women who are classified as high trait anger vs. those classified as low trait anger when depression, stress, blood pressure, waist circumference, and anger expression are statistically controlled? RQ2) Are there significant differences in mean levels of CRP in women who are classified as high in anger expression vs. those classified as low in anger expression when depression, stress, blood pressure, waist circumference, and anger trait are statistically controlled?

Significance:
One third of women over the age of forty will develop coronary heart disease (CHD) in their lifetime, however, little is known about how strong emotions
like anger are associated with proinflammatory processes leading to CHD. CRP is a proinflammatory cytokine and an independent CHD risk factor. Anger and CRP relationships have been studied in men, but less so in women. Identification of at-risk women and appropriate anger management strategies may reduce CHD risk.

Methods:
A quantitative, cross-sectional correlational design using serum CRP levels (DV) and Spielberger’s Trait Anger Expression Inventory2 (IV) will be analyzed through ANCOVA with Beck Depression Inventory, Perceived Stress Scale scores, blood pressure, and waist measurements as covariates. At least 84 community-dwelling post-menopausal women between the ages of 45 and 65 will be recruited and assessed for inclusion in high and low anger groups (minimum n=20/group, alpha .05, beta .80, large effect size).

Findings:
Study-in-Progress. Anticipated findings are that high trait anger women and high anger expression women will have higher CRP levels and therefore greater CHD risk.

Discussion:
In progress.

Research Completed: No

Abstract History:
Financial Disclosure:
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FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

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Abstract ID: 665

**Biomarker Circadian Rhythm Profiles in Critically Ill Mechanically Ventilated Patients: A Pilot Study**

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Specific aims for this pilot study are to test the feasibility of data collection methods for characterizing the natural trajectory of circadian rhythm biomarkers in mechanically ventilated intensive care unit (ICU) patients, and to analyze the statistical power from data of three to five patients to estimate sample size for the full study.

The hypothesis for this pilot study is that the methods will be sufficient for measuring biologic circadian rhythm cycles and that the data will be adequate for estimating sample size for a subsequent clinical study. The hypothesis for the dissertation research is that circadian rhythm core body temperature, cortisol, and melatonin biomarker profile cycles will adapt (re-entrain) over time in mechanically ventilated ICU patients.

The ICU represents the intersection of acute illness and abnormal environmental conditions for an estimated 55,000 patients cared for each day in approximately 6,000 American ICUs. Some investigators have demonstrated severe circadian rhythm profile disruption in such patients. In a clear majority of studies, however, circadian rhythm profiles were measured for only 24 hours, leaving many unanswered questions about stability and change in circadian parameters over time.

Urine and blood specimens will be collected in 1-hour and 2-hour intervals, respectively, and continuous core body temperature data will be electronically captured from an ICU monitor. Environmental meters will continuously measure and log sound, light, and ambient temperature and relative humidity. Data will be analyzed using cosinor models; parameters include height (amplitude), width (period), mean (midline-estimating statistic of rhythm), and daily cycle peak time (acrophase).

To be determined by December 2007; final stage of IRB approval currently pending.

The objective of this work is to describe biomarker profiles over time in order to lay the ground work for informing future ICU environmental care protocols that can eventually be designed, tested and individualized to improve ICU patient outcomes.

Yes

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Cleared: Yes
Abstract ID: 700

Acoustic Parameters of Voice: A Measure of Emotion Expression with Chronic Pain?

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Student Level:
The purpose of this exploratory study is to develop a method that analyzes voice to ascertain emotional responses to chronic pain using measures of physiological arousal (change in heart rate) and sustained vowel phonation in persons with chronic knee pain.

Research Questions/Hypotheses:
1. Does physiological arousal differ between women with and without knee pain upon standing? 2. Can arousal be detected in acoustic parameters of voice during sustained vowel phonation in persons with chronic knee pain?

Significance:
Lack of real-time, non-intrusive measures of affective or emotional response to pain limit the assessment of contributing factors of chronic pain. Emotion can be detected in voice by speech rate, loudness, and pitch, and paralinguistic content of voice is less subject to speaker's voluntary control.

Methods:
Women 45+ years of age with knee pain of 6+ months duration (n=30) and without knee pain (n=30) were recruited from community settings. Sustained vowel tokens were obtained before and after standing. Voice samples were collected using a head-mounted microphone and digitally recorded (sampling rate = 44.1 kHz) via the Computerized Speech Laboratory. Heart rate was collected via pulse oximetry to quantify arousal response to standing. Visual documentation of movement was used to code differences in physical disability. Instruments with established validity and reliability included the Beck Depression Inventory II, Spielberger State-Trait Anxiety Inventory, Spielberger State-Trait Anger Expression Inventory 2, Arthritis Self-Efficacy Scale, Brief Pain Inventory, and Survey of Pain Attitudes-35. Visual analog scales of pain intensity and pain unpleasantness were obtained.

Findings:
Acoustic recordings were analyzed using Multi-Dimensional Voice Program. Interim analysis demonstrates that jitter, shimmer, noise-to-harmonic ratio, and low fundamental frequency differ between groups. Correlation data will be used to assess relationships between acoustic parameters, pain ratings, personality and pain-specific instruments.

Discussion:
Identification of within-subjects and between group differences could provide a tool for comprehensive pain assessment and management with reduced subject burden.
Predictors of tumor necrosis factor-α in depressed heart failure patients

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SNRS member? No

**Abstract Information**

**Presentation Preference:**
- SNRS Student Poster Presentation

**Willing To Submit Poster?**
- Yes

**Abstract Categories:**
- Interest Group: Biobehavioral
- Thematic Areas: Chronic illness

**Purpose/Aims:**
The purpose of this study was to evaluate sociodemographic and clinical factors that predict TNF-α in a sample of depressed HF patients.

**Research Questions/Hypotheses:**
Little is known about the sociodemographic and clinical factors associated with TNF-α in HF patients experiencing depression.

**Significance:**
Increased tumor necrosis factor-α (TNF-α) is correlated with the greater symptom severity and mortality among HF patients. Patients with HF who are depressed have higher levels of TNF-α compared to those who are not depressed, placing them at higher risk for poor outcomes.

**Methods:**
New York Heart Association (NYHA) class II and III HF patients (n=67) were screened for depressive symptoms using the Beck Depression Inventory-II (BDI-II). Those who had a score of 10 or higher were included and administered the Hamilton Rating Scale for Depression (HAM-D). TNF-α level was measured using an Enzyme-Linked ImmunoSorbent Assay (ELISA). Square Root transformations were used to normalize the TNF-α distribution. Sociodemographic variables (age, gender, ethnicity, and income) and clinical variables (NYHA class, body mass index (BMI), and ejection fraction) were entered into a stepwise multiple regression model.

**Findings:**
The mean age was 66±13, 42% were male and 58% were female, 37% were NYHA class II and 63% were class III, and 73% Caucasian. Most (n=61, 92.9%) were high school graduates and more than 50% made less than $15,000 per year. Means for TNF-α was 5.45 ± 4.59, BDI-II 21.13 ± 7.50 and HAM-D 16.25 ± 4.31 respectively. There were no sociodemographic or clinical predictors of TNF-α. However, higher HAM-D scores were a significant predictor for TNF-α level (p = 0.016).

**Discussion:**
The findings from this study support previous research that depression severity is a significant predictor of TNF-α level among depressed HF patients. Further study in larger and more diverse HF population may provide a greater understanding of the factors linking HF, depression and clinical outcomes.

**Research Completed:**
- Yes

**Abstract History:**

**Financial Disclosure:**
- Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
- Yes

**FDA Disclosure:**
- Cleared: Yes

**Non-Exclusive License:**

**Submitted By:**
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Abstract ID: 766

Facial Expression to Discriminate Between Pain and Absence of Pain in Critically Ill Intubated Adults during Painful Procedures

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Student Level:
Abstract Information

Presentation Preference: SNRS  Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Biobehavioral
- Thematic Areas: Methods

Purpose/Aims:
To describe the evidence related to the relationship between facial expression and pain in the critically ill non-communicative patients. To describe the effect of age, gender, race/ethnicity, diagnosis, intubation status, and severity of Illness, level of sedation/pain and sedative/analgesic use on facial expression during pain.

Research Questions/Hypotheses:
What is the empiric evidence of the relationship of facial expressions to the experience of pain in the critically ill?

Significance:
The need for optimal pain assessment in adult critical care settings is essential since it has been reported that nurses underrate and treat patient’s pain during painful procedures. Unconscious/sedated patients cannot communicate their level of pain using 0-to-10 scale and are risk for being inadequately medicated for pain. At present there is no universally accepted pain scale for use in the non-communicative patient. When patients cannot express themselves, observable indicators have been labeled as ‘pain behaviors’. One of the most frequently used pain behaviors incorporated in a pain scales for the non-communicative patient is facial expression.

Methods:
Comprehensive literature review on the relationship of facial expressions and pain and its use in pain assessment in the critically ill.

Findings:
Facial expression has been measured by Facial Action Coding System (FACS) which identifies several facial actions that correlated with pain. The results demonstrate FACS not only discriminates between pain and absence of pain but can also provide information about the variability of the pain experience. The face reveals a wealth of information about human behavior. Research indicates that regardless of age, gender, and race/ethnicity, facial expressions are evidence of universals expressions across culture with variation due expression itself, and in what the expression signifies to the person showing the expression and to others.

Discussion:
Use of facial expression is an important behavioral measure of pain intensity, but precise and accurate methods for interpreting facial expressions of pain in non-communicative patient has not been identified.

Research Completed: No

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes
Grants/Research Support: Y
NRSA - NIH Grant Number F31NR010433
Consultant: Y
VCU School of Nursing
Stock/Shareholder: 
Speaker’s Bureau: 
Other Financial or Material Support: 

FDA Disclosure:
Cleared: Yes
Abstract ID: 777

Heart Rate Variability and Glucose Tolerance Groups

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Biobehavioral
- Thematic Areas: Child & Adolescent Health

Purpose/Aims:
To examine differences in heart rate variability (HRV) parasympathetic and circadian function in overweight adolescents with impaired glucose tolerance (IGT) and normal glucose tolerance (NGT).

Research Questions/Hypotheses:
Is there a difference between HRV measures between IGT groups and NGT groups with physical fitness and systolic blood pressure as covariants.

Significance:
It is unclear whether non-diabetic, overweight adolescents with (IGT) exhibit poorer HRV than overweight peers with NGT.

Methods:
Adolescents (n=107) aged 11-18 years of age completed a physical exam with measurement of height, weight, and calculation of body mass index (BMI), the oral glucose tolerance test was completed to determine IGT, maximal treadmill exercise test for measurement of peak ventilatory oxygen (VO2peak) to determine physical fitness and 24-hour Holter monitor was applied and analyzed using MARS PC Workstation with manual verification for measures of circadian fluctuation (SDNN) and parasympathetic function (high frequency; HF). Analysis of covariance was used to compare HRV measures between IGT and NGT groups with physical fitness and systolic blood pressure as covariants.

Findings:
IGT was present in 26% (n=28). The IGT group was similar in age (14.1 yrs vs. 14.3 yrs, p=0.56), gender (42% male vs. 40% male, p=0.82), and race (64% AA vs. 57% AA, p=0.50), and VO2peak (44.7 ml/kg/min vs. 47.1 ml/kg/min, p=0.35) to the NGT group. Elevated blood pressure was common (55%) with the IGT group having a higher incidence (82% vs. 46%) than the NGT group. After controlling for systolic blood pressure, the IGT group exhibited lower measures of circadian fluctuation (SDNN: 132 vs. 150, p=0.05) and similar measures of parasympathetic function (HF: 6.94 vs. 6.24, p=0.21) compared to the NGT group.

Discussion:
In the cohort of relatively low fit, overweight adolescents, impaired glucose tolerance, in conjunction with elevated blood pressure, is associated with diminished measures of circadian fluctuation. Assessment of HRV may provide additional risk stratification in overweight youth.

Research Completed: Yes
Abstract History:
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
Submitted By: slee57@utmem.edu
Modulation of Dendritic Cell Maturation by Cigarette Smoke Condensate

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Abstract

Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Biobehavioral
Thematic Areas: Basic science

Purpose/Aims: To investigate the role of cigarette smoke condensate (CSC) induced phenotypic and functional changes in dendritic cells (DC) co-cultured with bronchial epithelial cells (EC).

Research Questions/Hypotheses: It was hypothesized that CSC would reduce dendritic cell function.

Significance: Smokers are more susceptible to respiratory infections and pulmonary disease exacerbations. In addition, lung sections of smokers contain fewer mature dendritic cells than non-smoking controls. Since DC are important in immune regulation, it was reasoned that studying EC-DC in vitro would provide insight into the mechanism of cigarette smoke-induced immune changes.

Methods: Confluent, monolayer, normal human bronchial EC were cultured in the presence or absence of 10 & 50 μg/ml (low) or 50 μg/ml (high) CSC for 12 hours and poly I:C stimulated. Human monocyte-derived immature dendritic cells (iDC) were then added to the EC culture or cultured alone in the presence or absence of CSC and Poly I:C for 24 hours. CSC-exposed iDC were stained for viability, surface maturation markers and analyzed by flow cytometry. In order to assess DC function, endocytosis was evaluated by FITC-dextran uptake. Cytokine levels were examined by a 14-plex bead array.

Findings: CSC treatment in EC-DC cultures revealed minimal effects on viability. Both doses of CSC treatment appear to reduce CD80, CD83, CD86 maturation markers including CD54 (ICAM-1). DC cultures revealed an increase in endocytosis while the EC-DC exhibited a decrease in endocytosis. Analysis of cytokine profiles revealed in EC-DC co-cultures stimulated with poly I:C, CSC enhanced expression of IL-10, IL-12p40 and decreased expression of IL-13.

Discussion:
These data taken together demonstrate that cigarette smoke plays an important role in immune modulation of DC maturation and function.

Research Completed: Yes
Abstract History: Yes
Financial Disclosure: Yes
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Grants/Research Support: Y
NIH NRSA F31 NR009598
Joy McCann Culverhouse Endowment
Consultant:
Stock/Shareholder:
Speaker's Bureau:
Other Financial or Material Support:

FDA Disclosure: Yes
Non-Exclusive License: Yes

Submitted By: ajones@health.usf.edu
Feedback actigraphy and sleep in long-haul truck drivers

Abstract Information

Presentation Preference: SNRS Student Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Biobehavioral
Thematic Areas: Adult Health
Purpose/Aims: The purpose of this study was to determine the effects of feedback actigraphy on sleep and sleep indicators in long-haul truck drivers
Research Questions/Hypotheses: Exposure to feedback actigraphy will increase sleep quantity and quality, decrease subjective sleepiness and improve perceived control of sleep behavior and attitude toward sleep.
Significance: Long-haul truckers experience chronic sleep restriction and fragmentation that put them at risk for impaired driving skills. A feedback intervention to cue truck drivers to modify their sleep behavior may decrease occupational motor vehicle fatalities in this group.
Methods: Twenty-five long-haul truck drivers were recruited and enrolled. Subjects were randomly assigned to treatment condition feedback actigraphy (FB) vs. no-feedback (NFB) actigraphy after informed consent was obtained and a baseline survey...
was completed. A final sample of $N = 17$ subjects completed the study protocol. For the first 10 day study phase, subjects wore the initial actigraph (FB/NFB) and completed daily sleep logs and questions to determine sleep quality and subjective sleepiness. Subjects were then switched to the opposite actigraph (NFB/FB) and continued with the exact same daily procedure for a second 10 day period. On day 10 of each period, questions were asked regarding sleep behavior control and attitude toward sleep.

Findings:
Sleep time in the no feedback condition was higher than that in the feedback condition. There were no significant differences in any of the other dependent variables in the feedback condition, compared to the no feedback condition. Difference in the magnitude of change by feedback sequence group in the feedback vs. no feedback conditions was seen only in subjective sleepiness.

Discussion:
Limitations of the study include small sample size and inconsistencies in time intervals between study phases. Replication of the study in a larger sample is planned. A qualitative component will be added to the larger study to determine truck drivers’ intention to change sleep behavior.

Research Completed: Yes
Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
Grants/Research Support: Y
National Institute of Nursing Research
Consultant: Y
Nightingale Express, Inc.
Stock/Shareholder:
Speaker's Bureau:
Other Financial or Material Support:
FDA Disclosure:
Cleared: Yes
Non-Exclusive License:
Accepted Terms: Yes
Submitted By:
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Abstract ID: 924

Identifying Risks for Hospital Readmission and Death among Older Patients with Lung Cancer

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**Abstract Information**

**Presentation Preference:**
SNRS   Student Poster Presentation

**Willing To Submit Poster?**
Yes

**Abstract Categories:**
Interest Group: Biobehavioral  
Thematic Areas: Chronic illness

**Purpose/Aims :**
The study purpose was to identify patient characteristics/comorbidities associated with hospital readmission and death in a sample population of adults diagnosed with lung cancer.

**Research Questions/Hypotheses :**
What patient characteristics/comorbidities are associated with hospital readmission and death in older adult patients with lung cancer?

**Significance :**
Patients with lung cancer confounded by comorbidities such as cardiovascular disease, psychiatric disorders/depression, and diabetes(DM) may be at increased risk for hospital readmission and death.

**Methods :**
Descriptive/comparative analysis of medical records from patients hospitalized in 2004 with lung cancer.

**Findings :**
Total sample: n=93 patients; mean age 66 years; 51% female; 40% African-American; 55% Caucasian. 24 of 93 patients had a secondary cardiology diagnosis, 54.2% (13/24) of whom died during the study year. 30.4% (21/69) of those who died did not have a cardiology diagnosis (Fisher’s Exact, p = 0.0498). For patients diagnosed with diabetes, 34.8% (8/23) died during the study year. Patients diagnosed with Diabetes Mellitus(DM) had a higher median number of hospital/emergent care episodes than those without recorded DM(Wilcoxon-Mann-Whitney, p = 0.0017). Patients admitted with DM medication had significantly higher median number of total visits compared with those who were not admitted with DM medication(Wilcoxon-Mann-Whitney, p = 0.0114). Among those with a secondary psychiatric diagnosis, 37.5% (9/24) were readmitted compared with 14.5% (9/62) readmitted without a psychiatric diagnosis/depression (Fisher’s Exact, p = 0.0355).

**Discussion :**
The presence of comorbidities among patients with lung cancer is clear. High death rates for cardiac and DM comorbidity identifies significantly related risk factors. Psychiatric problems/depression, while not having significantly higher death rates, was significantly related to readmission. The high rate of death, in addition to readmission/use of emergent care services, places patients with DM at risk for multiple adverse outcomes. Comorbidities may be a way to identify patients at higher risk for readmission or death, who are appropriate for increased surveillance following hospital discharge such as provided by homecare services. Further research is needed to evaluate the impact of comorbidities on outcomes among older patients with lung cancer and methods to optimize treatment.

**Research Completed :**
Yes

**Abstract History:**

**Financial Disclosure:**
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
Abstract ID: 948

The Effect of C-reactive Protein, Lp-PLA2 and Depression on Health Outcomes in Patients Experiencing a First-Time Stroke

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Biobehavioral
Thematic Areas: Acute illness

Purpose/Aims: The purpose of this study is to examine the interactive effects of CRP, Lp-PLA2 and depression on health outcomes in first-time stroke patients.

Research Questions/Hypotheses:
1. Stroke patients with higher CRP and Lp-PLA2 levels at hospital admission will have poorer health outcomes at month 3.
2. Stroke patients with higher levels of depression will have poorer health outcomes at month 3.
3. Stroke patients with both higher CRP and Lp-PLA2 levels and higher depression will have the poorest health outcomes at month 3.

Significance: Strokes trigger an acute inflammatory response prompted by brain tissue injury at the infarct site or ischemic prenumbra. CRP is an acute-phase inflammatory marker, and its level has been significantly correlated with infarct size and post-stroke complications in patients experiencing an acute stroke. The findings of recent studies suggest that liproprotein-associated phospholipase A2 (Lp-PLA2) is another potential biomarker, that can predict long-term cardiovascular risk in the stroke population. Furthermore, up to 60% of all stroke survivors are known to experience depression, which may contribute to decreased physical and cognitive functioning, decreased health-related quality of life, and deterioration of mobility after stroke.

Methods: Using a repeated-measures study design, data will be collected at hospital admission, discharge, and 3 months post-stroke because most complications and recovery are evident within the first 3 months post-stroke. Health outcomes will include neurological impairment, functionality, quality of life, and recurrence of a stroke. Neurological impairment will be assessed using the National Institute of Health Stroke Scale; functionality will be determined with the Rankin Scale; quality of life will be measured with the SF 36; depression with the Beck Depression Inventory; and recurrent stroke will be determined by patient report with imaging correlation when available.

Findings: Data will be analyzed with a repeated measures ANOVA.

Discussion: Although these factors have been studied individually, interactive effects have not been explored.

Research Completed: No

Abstract History:

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

Submitted By: mbrethour@comcast.net
Abstract ID: 963

Stress in New Army Nurses

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Student Level: Doctoral

Abstract Information

Presentation Preference: SNRS   Student Poster Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Biobehavioral
Thematic Areas: Adult Health

Purpose/Aims :
To examine the stress experienced by Army nurses throughout their Army nursing careers. The specific aim is to describe the relationships among demographic indicators and environmental, psychological, and biological factors of stress in new Army nurses during the Officer Basic Leadership Course (OBLC), where most new Army nurses begin their Army nursing careers.

Research Questions/Hypotheses :
What are the relationships among demographic indicators and environmental, psychological, and biological factors of stress in new Army nurses over time?

Significance :
The effects of exposure to combat have been shown to have biological and psychological consequences including posttraumatic stress disorder (PTSD), depression, and anxiety. While overall stress in the military has been studied, stress and readjustment related to military nursing in the combat zone have been limited to retrospective studies of military nurses who served in Vietnam. There is no known research on the relationships of biological markers of stress and perceived stress in military nurses.

Methods :
The study design will be a prospective, correlational design with longitudinal measures. Using a convenience sample of all Army nurses enrolled in one OBLC increment (n = 100), the following will be administered: 1) a demographic questionnaire administered at the beginning of OBLC to include nursing and military experience; 2) an environmental life events inventory and a perceived stress scale administered at the beginning of OBLC; and 3) an impact-of-event scale administered immediately before and following a 3-week austere field training exercise and again at the end of OBLC. Salivary cortisol, a biological marker of stress, will be collected at multiple points throughout the OBLC course. Data analysis will include descriptive statistics of all variables; Pearson correlations and paired sample t-tests between variables; regression statistics to predict changes in stress (pre- and post-OBLC); and repeated measures testing of variables. Statistical analysis should detect correlational relationships and trends among variables during OBLC.

Findings:  
n/a

Discussion:  
n/a

Research Completed:  
No

Abstract History:  

Financial Disclosure:  
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:  
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Submitted By:  
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Risks of Bacteremia in the ICU: Does Oral Care Matter?

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Presentation Preference:  
SNRS  Student Poster Presentation

Willing To Submit Poster?  
Yes

Abstract Categories:  
Interest Group: Biobehavioral
Thematic Areas: Adult Health

Purpose/Aims:  
To describe the effect of toothbrushing on the incidence of transient bacteremia in ventilated critically ill patients; investigate the relationship of dental plaque score and describe the clinical significance of transient bacteremia related to toothbrushing in critical care for length of stay and systemic inflammatory response syndrome (SIRS).

Research Questions/Hypotheses:  
Does toothbrushing lead to transient bacteremia in mechanically ventilated adults and what is the clinical significance of this occurrence?

Significance:  
Bacteremia, a leading cause of mortality, is responsible for about 15% of nosocomial infections. Critically ill patients are vulnerable and susceptible to infections that increase their length of stay, hospital costs and mortality. Substantial
evidence exists in healthy populations that transient bacteremia occurs with manipulation of the oral mucosa; however, the relationship of toothbrushing to transient bacteremia and the clinical significance in critically ill patients has not been explored.

Methods:
N = 30 mechanically ventilated patients enrolled within 24 hours of intubation. All subjects received a toothbrushing intervention twice a day for 48 hours. Oral microbial cultures and dental assessment were collected prior to the first intervention. Three blood samples were collected at 1 minute prior to, 1 minute following and 30 minutes post toothbrushing on days 1 & 3. DNA strains isolated from positive blood cultures post intervention or in the presence of SIRS will be compared by multilocus sequence typing (MLST) to the blood cultures drawn during the study period and to oral cultures collected at study initiation for a diagnosis of transient bacteremia from toothbrushing.

Findings:
Mean age = 46 years, 50% Black, 47% White and 3% Hispanic; 63% male, 37% female. Findings will be reported following data analysis.

Discussion:
Understanding the incidence and clinical relevance of transient bacteremia of oral origin in the ICU is important for assessing the potential risks and benefits of oral care and guiding standardization of oral care in this population.

Research Completed: Yes
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
Submitted By: djones@vcu.edu
Abstract ID: 73

Intimate Partner Homicide: Identifying Predictors from a 20-Year Panel Study

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Abstract Information
Presentation Preference: SNRS Podium Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Community/Public Health
Thematic Areas: Women's Health
Purpose/Aims:
This study will identify sociodemographic, geographic, and temporal trends to predict intimate partner homicide (IPH) of women.

Research Questions/Hypotheses:
1. IPH rates will vary in a similar seasonal distribution to suicide rates.  
2. IPH rates will vary inversely to population.  
3. IPH rates will be higher in the north and east.  
4. IPH rates will vary directly with concentrations of white women.  
5. Since VAWA, IPH rates have decreased more among male victims.

Significance:
IPH accounts for 7% of US homicides; therefore, many consider it a minor problem. In 2004, nearly 700 more Americans died from IPH than died in the Iraq War. Also, many believe IPH is the same as non-intimate homicide. However, IPH is different in many ways: 1) IPH is primarily a male on female crime - in 2004 1,159 female homicides (about 1/3); 2) Male IPH perpetrators are more likely to commit suicide after the crime, which speaks to the toll IPH can have on the perpetrator and surviving children, family, and community. Because of the lack of priority given to this crime, social scientists know little about
its predictors. What they do know comes largely from a small cross-sectional or larger, geographically limited, time-series studies.

Methods:
In this study, the researcher used 62 public datasets from the FBI, BLS, US Census, and ARDA to create a 20-year county panel of rich national data. Using a variety of models, the researcher described the phenomenon and identified several predictive trends.

Findings:
The IPH rate is decreasing, but proportion of female victims is increasing; geographical and temporal trends of IPH are more like that of suicide than of homicide; religious congregation density strongly affects IPH.

Discussion:
Many still treat IPH like criminal homicide, but its trends indicate that it is much different. Successful public policies regarding IPH might consider this evidence.

Research Completed:
No

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

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FDA Disclosure:
Cleared: Yes

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Abstract ID: 92

Risk correlations among Thai LGBT youth participating in a Thai Youth Risk Behavior Survey in Bangkok, Thailand

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Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Community/Public Health
Thematic Areas: Child & Adolescent Health

Purpose/Aims: To determine risk behavior differences among Thai youth who identify as homosexual or bisexual (HB), and heterosexual (HET) using a modified and translated Youth Risk Behavior Survey (YRBS) in Bangkok.

Research Questions/Hypotheses: Thai youth who identify as HB engage in higher risk behavior than those who identify as HET.

Significance: This is the first youth survey that incorporated questions regarding sexual orientation and same sex behavior in a YRBS format in Thailand.

Methods: Over 1,400 students enrolled in six schools in six grades in Bangkok were surveyed using a modified self-administered YRBS after parental permission and youth assent were obtained. Schools and classrooms were selected to achieve a representative sample of secondary schools in Bangkok.

Findings: Of the participants, 20.3% reported either identifying as HB, or being unsure of their sexual orientation. The authors omitted the data from the “unsure” students and compared the behavior of the HB students (n=189) to those who identified as HET. Significantly more females (19.2%) identified as HB than males (9.2%). Compared to HET students, almost twice as many HB students had attempted suicide in the past 12 months; HB students were more likely to engage in binge drinking; and HB students were significantly more likely to report using marijuana, ecstasy, heroin, cocaine, methamphetamines, and glue. No significant differences were seen between HB and HET students in history of having sexual intercourse, use of a condom during last sexual intercourse, number of sexual partners, drinking before having sex, cigarette use, or pregnancy. Significantly more HB students describe themselves as overweight and report using laxatives or vomiting to lose weight.

Discussion: Thai HB youth engage in higher risk behavior related to drug use, attempted suicide, and weight loss practices. The authors will discuss the findings, significance and implications of this study in more detail.

Research Completed: Yes

Abstract History: Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

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Abstract Information

Presentation Preference:
- SNRS Poster Presentation

Willing To Submit Poster?
- Yes

Abstract Categories:
- Interest Group: Community/Public Health
- Thematic Areas: Child & Adolescent Health

Purpose/Aims:
To assess relationships among BMI, school outcomes and student characteristics in low-income adolescents.

Research Questions/Hypotheses:
To what extent is BMI related to student characteristics (i.e., gender, perceived appearance, and perceived standard of living) and perceived school outcomes (i.e., achievement, attendance, and behavior)?

Significance:
Adolescent obesity is epidemic and represents a complex integration of social, psychological, and physical factors that exacerbate the turbulent years of adolescence. Adolescents are at risk for negative health, social and school related outcomes.

Methods:
A cross-sectional convenience sample of 64 middle school students from one low income public school was administered a survey. Students self reported...
height and weight, perceptions of weight, appearance and school outcomes. Mean age was 12.3 years, 72% were females.

Findings:

The average BMI was 20.29, SD = 4.20. The majority of students rated their weight as being (M=2.98). They also rated highly perceived overall appearance (M=3.78), standard of living (M=4.02), academic performance (M=4.09) and good grades (M=4.41). There were few reported attendance and behavior problems. There were no statistically significant relationships among BMI and student characteristics (gender, perceived height, or perceived standard of living) or BMI and school outcomes (performance in school, grades, absences, being sent to the office and suspensions). A high BMI was significantly associated with perceived overall appearance $r = 0.41$, $p < 0.05$. Only 14% of participants perceived themselves as overweight when BMIs demonstrated that 36% were at risk for overweight or overweight.

Discussion:

The findings suggest that overweight adolescents may experience adverse self-esteem issues related to being dissatisfied with their overall appearance. Interestingly, there was a discrepancy in weight perception as compared to reported BMI suggesting that the prevalence of obesity could be underestimated in this sample. Although 60% of the students in the school receive free or reduced lunch assistance, 70% reported a good or very good standard of living.

Research Completed: Yes
Abstract History: Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
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Stopping the Spread of Hepatitis C among Hispanics

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Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Community/Public Health
- Thematic Areas: Health Disparities

Purpose/Aims:
The purpose of this study is to determine the knowledge level concerning Hepatitis C virus (HCV) among Hispanic residents of a rural/suburban southeast Texas county.

Research Questions/Hypotheses:
The overall objectives of this study are to: 1) identify barriers and facilitators to HCV screening and treatment and 2) develop an HCV community awareness intervention among the Hispanic community of Galveston County.

Significance:
Study findings have the potential to increase understanding of the barriers and facilitators to HCV screening and treatment among this understudied population. A HCV awareness/prevention intervention which integrates community norms, insights, and engagement, has the potential to reduce the HCV associated morbidity and mortality among Hispanic populations.

Methods:
This study uses a community based participatory research (CBPR) methodology. Data collection is through the use of focus groups and a self-administered HCV knowledge questionnaire. The focus groups are conducted in the group’s language of choice, English or Spanish. A HCV questionnaire is completed by group participants prior to the audiotaped group discussions to assess baseline community HCV knowledge and also serves as a method of data triangulation.

Findings:
Focus group participants have little accurate knowledge about HCV including its transmission, course of illness, treatment, or prevention. Participants know that it is a ‘bad disease’ and they want to avoid it, but aren’t sure what to do. They are unaware of the risks of tattoos or body piercing, and think that all types of hepatitis (A, B, C) have similar transmission routes, treatment, and prevention. These qualitative findings are supported by the results of the quantitative analyses from the questionnaires.

Discussion:
These findings provide support for the next phase of community-based participatory research. A community steering committee is being established to assist in the creation of community-wide education program that is focused on primary prevention and identification of screening opportunities (early secondary prevention).

Research Completed: Yes

Abstract History:
- This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
- Details: New Orleans, April 2007

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes
Cultural Differences, Daily Functioning and Rehospitalization in Discharged Patients with COPD in Southern Taiwan

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Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? Yes

Abstract Categories:
Interest Group: Community/Public Health
Thematic Areas: Chronic illness

Purpose/Aims: To explore differences and predictors of post-discharge outcomes in older adults with COPD in rural Taiwan.

Research Questions/Hypotheses:
Are there cultural differences in functioning and health care utilization after discharge for COPD exacerbation in 3 ethnic groups in Taiwan?

Significance: Three distinct cultural groups live in Taiwan with varying income/social support. The ethnicity of the subjects reflected the population in the region: 57.9% Hokkiens and Hakkas; 22% Aborigines; 20% Mainlanders. No previous study has examined differences in post-discharge outcomes for this rural population of older adults in Taiwan.

Methods: Secondary Analysis of longitudinal study, following IRB approval of the original study. Consent and demographic data obtained before discharge; questionnaires including Chinese version of the PFSS completed in-hospital. Phone follow-up at 14 & 90 days after discharge. 145 patients from 5 Taiwan hospitals. 106 males (73.1%) and 39 females with a mean age of 72.2 years; 57.8% married. Mean LOS 8.7±4.9 days (1-32); 27.6% of the patients did not have assistance for care. Ave Education: 4.1±3.9 years; 35.2% had no formal education. 105 (72.4%) had been smokers; 20% remain active smokers; 59.12 pack-years was mean (range: 5-168). >70% reported moderate to very severe dyspnea; 15.2% used oxygen after discharge. 72.4% had been hospitalized due to COPD in the previous year (range: 1-12 times).

Findings: Factors correlated to readmission (<.05) at 14 days: age, oxygen use; at 90 days ER care, COPD history >5 years and previous hospitalizations <1 year. Daily functioning differed by group: Mainlanders lower than Fukiens/Hakkas (F/Hs) or Aborigines (p=.03). Depression less at 90 days versus discharge (p<.001); Aborigines and Hokkiens/Hakkas (natives) more depressed (t=2.93-4.25, p<.01) than Mainlanders. Mainlanders had lower rehospitalizations (p<.01). Only daily functioning predicted readmission at 90 days.

Discussion: Cultural differences in functioning and health care utilization should be further studied as risk factors to decrease readmission in the Taiwan population; possible cultural disparities need further study.

Research Completed: Yes

Abstract History:
- This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
- Details: ATS May 2006 original study - same demographic data

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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FDA Disclosure:
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Non-Exclusive License:
Accepted Terms: Yes
How to Evaluate Internet Cancer Support Groups for Research?

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SNRS Poster Presentation

Willing To Submit Poster?
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Abstract Categories:
Interest Group: Community/Public Health
Thematic Areas: Methods

Purpose/Aims:
The purpose of this presentation is to recommend several evaluation criteria for choosing ICSGs for research based on an Internet study among cancer patients recruited through ICSGs.

Research Questions/Hypotheses:
N/A

Significance:
With an increasing number of Internet cancer support groups (ICSGs), the effectiveness of ICSGs as a research setting or a data collection medium has recently been reported. However, virtually no guideline is available for researchers who want to use ICSGs as a research setting or a data collection medium.

Methods:
For the Internet survey study among 204 cancer patients, the research team had biweekly group discussion on the progress made in the recruitment process. The research team members also wrote memos on issues in identifying, contacting, and announcing the study through ICSGs. Then, the records of the group discussions and the individual memos were analyzed to develop criteria for evaluation of ICSGs for research.

Findings:

Seven evaluation criteria were developed. First, researchers need to evaluate if a specific ICSG is a private or public domain. Second, researchers need to evaluate the mission/purpose of ICSGs. Third, the scope of the ICSG (e.g., number of members, number of hits per day, number of messages posted, etc) also needs to be evaluated. Fourth, researchers need to evaluate the contents of ICSGs (e.g., authenticity, reliable sources and links, appropriateness of the messages, etc). Fifth, researchers need to evaluate requirements for human subject protection by ICSGs (e.g., IRB requirements by ICSGs). Sixth, appropriateness and adequacy of the study announcement fee requested by ICSGs (e.g., reasonable fee for the announcement, any extra fee for banners, etc) need to be evaluated. Finally, researchers need to evaluate the credibility and authenticity of the web-owners/moderators of the ICSG.

Discussion:

Since these evaluation criteria were developed based on a single study, further efforts to develop the evaluation criteria need to be continued through future studies.

Research Completed: Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:

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Non-Exclusive License:

Accepted Terms: Yes

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Residential Inequalities Negatively Impact Women’s Health

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Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Community/Public Health
Thematic Areas: Health Disparities

Purpose/Aims: The specific aims of this study were to: 1) determine the relationships among neighborhood characteristics, perceived stress, psychological distress, and salivary cortisol levels among female heads of household with children of low socioeconomic position (SEP), 2) determine the differences in neighborhood characteristics, perceived stress, psychological distress and salivary cortisol levels by section 8 (S8) and public housing type.

Research Questions/Hypotheses: We hypothesized that public housing sites would have greater levels of neighborhood disadvantage, and neighborhood stress, and lower levels of neighborhood social cohesion than S8 sites. Women living in public housing would report significantly higher levels of psychological distress, and have more pronounced alterations in salivary cortisol secretion than women living in S8.

Significance: Despite the numerous studies that have established a clear relationship between neighborhood disadvantage, housing, and health, the mechanisms by which neighborhoods impact health remain unknown. Research is needed that incorporates a socio-biological approach in order to determine the mechanisms by which neighborhoods contribute to the development of chronic disease.

Methods: A cross-sectional analytic design was utilized to explore exposure to neighborhood characteristics specific to public and section 8 housing types and their relationship to psychological distress and salivary cortisol in women ages 18-45 years old.

Findings: Neighborhood stress explained 13% and 14% of the variation in anxiety and depression. No differences in neighborhood- or individual level variables by housing type were found in this sample of women. This study found a negative association between unfair treatment (a chronic psychosocial stressor) and salivary cortisol (Adj. R2 = 0.13, p < 0.001).

Discussion: The women in this study reported high rates of unfair treatment, perceived and chronic stress. Further research is needed to determine the source of unfair treatment and whether unfair treatment is a more frequent and consistent experience among women living in subsidized housing.

Research Completed: Yes

Abstract History: -This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
-Details: American Public Health Association Annual Conference 2006

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure: Cleared: Yes
Abstract Information

Presentation Preference: SNRS Symposium

Abstract Categories: Interest Group: Community/Public Health
Thematic Areas: Methods

Purpose/Aims: Explain a peer-research, participatory action project for HIV prevention among lesbian and bisexual women and how it might be adapted for use in other groups. Project identified common beliefs, practices and planned prevention behavior by women, as well as providing HIV prevention education.

Research Questions/Hypotheses:
What do lesbian/bi women believe about HIV transmission, and prevention, woman-to-woman (WTW) and woman-to-man (WTM)? What responses do they have to education from peers about HIV?

Significance:
Knowledge is sparse on WTW HIV transmission but it occurs. We need to know what lesbian/bi women believe about transmission in order to tailor interventions. If education is provided, do women plan to change behavior?

Methods:
Peer researchers provided humorous demonstration of HIV-prevention to women, mostly aged 20-40, at women’s events. Peer researchers conducted 1000+ field interviews and 55 HIV-prevention skits to 3000+ attendees. Misconceptions were
corrected after interviews. Content analysis was used to identify frequent themes and information about obstacles to risk reduction.

Findings:
WTM sexual contact was more frequent than expected. Perceived morality and trust were believed to be indicators of HIV status. Many thought WTW transmission was not possible. Barrier methods were taught in the consciousness-raising skits and often needed after individual interviews. The project was hailed as successful given the demand for the skits at new events, and women’s comments in interviews about plans to change behavior.

Discussion:
It is recommended that these humorous, dramatic consciousness-raising and research methods might continue to work if adapted to each locale, and for adolescents. Education should now include information about other pathogens, eg, HPV, and contraception. Problems anticipated, such as lack of privacy and how this was handled at public venues will be discussed.

Research Completed: Yes
Abstract History:
Financial Disclosure:
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Yes
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Building a Children's Health Model Through Participatory Research

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Presentation Preference: SNRS Podium Presentation

Abstract Categories: Interest Group: Community/Public Health
Thematic Areas: Child & Adolescent Health

Purpose/Aims:
Purpose of this study is to: 1. ascertain the health status of children in grades 3-5 pre and post participation in CATCH (coordinated approach to child health) program, 2. evaluate the impact of the program on selected health indicators, 3. determine the relationships between the attitudes of teachers/cafeteria staff and health status of students, and 4. determine the relationships between self-reported diet and physical activity behaviors and current health status of children pre and post participation.

Research Questions/Hypotheses:
Children in 3rd-5th grades will maintain or decrease initial assessed BMI, skin fold measurements, cholesterol levels, blood glucose, blood pressure measurements, and increase exercise tolerance 3 years after school's participation in CATCH program.

Significance:
The percentage of children ages 6-11 considered overweight has increased from 11% in 1994 to 19% nationally. Twenty-eight percent of Alabama's population is considered obese with a large number having chronic health problems related to obesity. Prevention measures need to start at an early age. The use of the school system to implement health promotion and prevention strategies related to nutrition and physical activity is endorsed by numerous organizations.

Methods:
Participatory Action Research Quasi-experimental, interrupted time series, nonequivalent treatment design. Added qualitative component 2nd year.

Findings:
First year assessment findings of nutrition survey supported the need for intervention with numerous at-risk eating habits. The need for increased exercise was supported by children reporting sedentary habits. Teachers who considered themselves role models for the children even reported lack of exercise and being overweight. Physiologically, 21% of the children were at risk for obesity with 23.1% above the 95th percentile. The mean scores for exercise were below the national average.

Discussion:
School nurses and other health care providers have a challenging job of teaching prevention strategies to at-risk children. The use of established community models of care can increase the number of children exposed to positive health behaviors.

Research Completed: No

Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure:
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Yes

FDA Disclosure:
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Non-Exclusive License:

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Abstract ID: 274

Telephone Interviews and Efficacy of Quit and Win Contests

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Abstract Information

Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Community/Public Health
Thematic Areas: Adult Health

Purpose/Aims: This experimental pilot study determined the effect of a telephone interview during the 30-day quit period on quit rates among Quit and Win Contest registrants.

Research Questions/Hypotheses: It was hypothesized that those in the Treatment group would be more successful at quitting smoking than Controls.

Significance: Quit and Win Contests show promise in reaching large numbers of smokers and promoting quitting. Demonstrating the efficacy of a phone call during the intervention period would provide justification for including this component as part of the Contest.

Methods: Participants were recruited and randomly assigned to Treatment (two phone interviews, one during the 30-day quit period and the other during the first two months post-contest) or Control group (one phone interview post-contest). The sample consisted of 32 subjects (14 in Treatment and 18 Controls); most of the study participants were female (69%), white (94%), married (63%), and all had at least a high school education.

Findings: The two groups were similar on demographic characteristics, smoking history, and readiness to quit. Treatment group participants were more likely to completely quit smoking during the 30-day contest period (85%) than the Control group (35%; \( \chi^2 = 7.3, p = .007 \)). Similarly, Treatment group participants were more likely than Controls to be abstinent two months after the contest period; at the time of the post-intervention interview, 57% of Treatment subjects did not currently smoke cigarettes vs. 17% of Controls (\( \chi^2 = 5.7, p = .02 \)).

Discussion: Although the study is limited by its small size and self-report measures, there is preliminary evidence that assessment of smoking history and current use during the Contest 30-day quit period may provide additional motivation to remain abstinent, not only during the quit period but as long as two months post-contest.

Research Completed: Yes

Abstract History: Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

FDA Disclosure: Cleared: Yes

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Abstract ID: 276

Readiness to Quit Smoking and Cessation Contests

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Presentation Preference: SNRS Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Community/Public Health
- Thematic Areas: Adult Health

Purpose/Aims:
Evaluate the impact of a Quit and Win Contest on tobacco quit rates at 3, 6, and 12 months after a contest quit period; assess factors related to readiness to quit smoking including perceived risk of lung cancer, mental health and partner support, significant pain, and secondhand smoke (SHS) exposure.

Research Questions/Hypotheses:
Those in the Treatment group would be more successful at quitting, and that readiness to quit would be affected by personal characteristics.

Significance:
Quit and Win Contests promote cessation for large numbers of smokers. This study provides evidence not only of the efficacy of the intervention, but also whether some subgroups of smokers would be more successful in quitting.

Methods:
494 Quit and Win Contest registrants comprised the Treatment Group; a random sample of 512 smokers unexposed to the media campaign were Controls. Participants were interviewed via telephone; quit rates were determined via self-report and confirmed using urine cotinine.

Findings:
Treatment group participants were more likely than Controls to experience quitting during the one-year follow-up. After adjusting for baseline differences personal and tobacco use characteristics, Treatment participants were 2.6 times more likely than Controls to self-report quitting and 5.3 times more likely to experience quitting confirmed by urine cotinine. Smokers contemplating quitting were more likely to perceive lung cancer risk and be interested in screening compared with either those who were not contemplating quitting or those who were actively quitting or maintaining abstinence. Among rural participants, both positive partner support for quitting and minority status predicted a greater readiness to quit, while experiencing significant pain was not predictive of readiness. The number of sources of SHS exposure predicted greater nicotine dependence and less readiness to quit.

Discussion:
The contest was minimally invasive with a pronounced impact. This study demonstrates the effectiveness of this intervention for smokers who are thinking of quitting, including among vulnerable populations.

Research Completed: Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By: mkrayens@uky.edu
Public Support for Smoke-Free Laws in Kentucky: Differences between Urban and Rural Residents

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This study examined public opinion of local laws prohibiting smoking in public places among urban and rural dwellers.

It was hypothesized that residents living in rural areas would be less likely to support smoke-free legislation.

There has been an upward trend in smoke-free legislation in countries, states, and municipalities in recent years. However, these laws are more likely to be enacted in urban areas.

A series of random digit dialled phone surveys were conducted with 3,672 adult Kentucky residents; responses were weighted to adjust for an over-representation of females in the sample relative to the population. In addition to demographic characteristics, respondents were asked whether they would support a local law prohibiting smoking in public places.

Participants were primarily female (52%), white (96%), had a high school education or less (57%), and were nonsmokers (75%); average age of respondents was 49. About half (51%) lived in rural communities. More than half (60%) supported a local smoke-free law. Significant predictors of support for smoke-free laws were location (urban vs. rural), gender, and smoking status. Compared to urban dwellers, respondents living in rural areas were 21% more likely to support smoke-free legislation (OR=1.21, p=.02). Females were nearly twice as likely as males to support a smoke-free law (OR=1.90, p<.0001), and nonsmokers were more than 7 times more likely than current smokers to do so (OR=7.46, p<.0001).

Findings from this study underscore the importance of promoting smoke-free legislation in communities that have not traditionally enacted these policies since rural residents were actually more supportive of smoke-free public places than those in urban communities.
Lesbian, Gay, Bisexual and Transgender Adolescents: Violence, Homelessness and Resilience

Abstract Information

Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? No

Abstract Categories:
- Interest Group: Community/Public Health
- Thematic Areas: Child & Adolescent Health

Purpose/Aims:
To evaluate history of homelessness, income-securing behaviors, experiences of violence, discrimination, distress and resilience among a community-based sample of lesbian, gay, bisexual and transgender (LGBT) adolescents.

Research Questions/Hypotheses:
1) What is the relationship between demographic factors, experience of violence, discrimination, distress and resilience? 2) What are the correlates of resilience, and do they vary by sexual orientation/ gender identity?

Significance:
LGBT adolescents are at elevated risk for violence and are disproportionately represented among the homeless - making up to 60% of homeless adolescents. However, little is known of the relationships between income-securing behaviors, discrimination, history of homelessness, experiences of violence, distress and resilience in this population.

Methods:
A mixed-method descriptive study of LGBT adolescents was conducted with 90 adolescents.
accessing two LGBT youth social groups. A demographic and descriptive survey and standardized instruments (the Kessler Distress Scale, the Resilience Scale, and an adapted Schedule of Racist Events) were utilized in this study.

Findings:
Approximately half of the sample reported a history of homelessness. Despite this, over half of the sample had graduated from high school/ or obtained a GED. Income-securing behaviors did not vary by sexual orientation/ gender identity. Resilience was correlated to level of education, to working and was inversely related to psychological distress. These relationships did not vary by specific sexual orientation/ gender identity. Overall, higher resilience was related to experiencing less violence and less risky income-securing behaviors. Experiences of violence and discrimination were related to distress, and inversely related to resilience.

Discussion:
LGBT adolescents experience high rates of homelessness, violence, as well as high levels of resilience. Consideration of homeless history, violence and resilience are important when providing health care, designing research interventions, and making policy decisions affecting LGBT adolescents.

Research Completed: Yes
Abstract History: 
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
FDA Disclosure:
Cleared: Yes
Non-Exclusive License:
Accepted Terms: Yes
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Abstract ID: 336

From life style dissimilarity to health disparity: Examine health, health problems, health care utilization, and Buddhism manner-health promoting behavior in Bangkok Buddhist Monks

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To examine health status, health care utilization, health problems, and health impact factors in order to promote health and the quality of care of Thai Buddhist monks.

What are health status, health care utilization, health problems, and health impact factors in Thai Buddhist monks?

Thai Buddhist monks have long hall to perform an imperative role in both spiritual and social matters in Thailand. This population is predominant adult to elderly men who could be at risk of chronic illnesses.

Using accidental sampling, the totals of 400 Thai monks living in Bangkok were recruited into this cross-sectional study. Data were collected by interview using Buddhism health behavior questionnaire, health status, and physical examination including BMI, blood pressure measurement and testing for blood sugar. Data were analyzed for factors related to health problem using Chi-square Test and tested for the strength of association using Odds Ratio (OR), 95% Confidence Interval of Odds Ratio.

The majority of monks had chronic illness at least one disease (31.2%), 36.30% had high blood pressure, and 10.30% had high blood sugar. Total of 41.50% went to the drugstore for over counter drugs. Age (OR=7.9; 95%CI 3.78, 16.71), years in monkshood (OR=2.37; 1.43, 3.94), hierarchical status (OR=2.47; 1.16, 5.25), living background (OR=2.23; 1.14, 4.44; OR=13.87; 3.04, 72.24 ), educational level (OR=1.82; 1.01, 3.46), and location of the temple (OR=1.59; 1.01, 2.51) were factors related to the hypertensive status (p< 0.05). Health promoting behaviors in monks who had normal blood pressure were higher than monks who had high blood pressure (p< 0.05).

Hypertension was prominent among monks. The incidence was higher when they were getting older, and having inappropriate health behavior. Therefore, in order to maintain wellness of Thai Monks, nurses need to consider multiple factors in chronic illness prevention. Health service maintenance in monks is needed to promote health among them.
Mitigating Health Disparities in a Community Based Faculty Practice Site: Measures of Success

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Abstract Information
Presentation Preference: SNRS Poster Presentation
Abstract Categories: Interest Group: Community/Public Health
Thematic Areas: Health Disparities
Purpose/Aims: The learners will be able to demonstrate an understanding of specific measures of success in a community based academic nursing center. The learners will be able to demonstrate an understanding of the relationship between fiscal stability and patient satisfaction and measures of success.
Research Questions/Hypotheses:
What payor mix and patient volume are needed to maintain financial viability?
Is there a relationship between patient satisfaction and fiscal stability?
Significance: UNACARE provides a unique model for improving the health outcomes of an undeserved urban African-American community.
Methods: This is a longitudinal descriptive study of the operation of a community based academic nursing center. An investigator designed tool was used to measure patient satisfaction; monthly patient census reports were utilized to assess patient volume; financial reports were used to assess patient care revenue.
Findings:
A primary care practice that started with a $100 investment maintains a 70% collection rate and provides service to over 200 clients both adults and children per month. The patient satisfaction survey revealed high scores in all categories. The results of the first nine years of operation will be presented at the conference.

Discussion:
There is limited evidence in the literature to support the concept of success in relationship to academic nursing centers. This project identified 2 measures (fiscal and satisfaction) to describe success in a community based academic nursing center that serve minority populations.

Research Completed:
No

Abstract History:

Financial Disclosure:
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FDA Disclosure:
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Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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Abstract ID: 381

Problematic Drinking Among College Students: The Role of Impulsivity and Resistance to Change

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Abstract Information
Presentation Preference: SNRS Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Community/Public Health
Thematic Areas: Child & Adolescent Health
Purpose/Aims:
A major public health problem is the heavy and abusive use of alcohol on college campuses. Problematic drinking is a serious problem facing American colleges today. The purpose of this study is to differentiate the problematic drinker that are ready to change behavior and would benefit from establish programs, from the impulsive problematic drinker that would benefit from an alternative program focusing on changing their impulsive behavior.

Research Questions/Hypotheses:
1. Is there a significant relationship between impulsivity and drinking alcohol among college students? 2. Does a significant relationship exist between readiness to change and alcohol drinking among college students? 3. Is there a relationship between impulsivity and readiness to change among college students who drink alcohol? 4. Is there a significant relationship between impulsivity levels and readiness to change in the subset of binge drinkers? 5. Is there a significant relationship between impulsivity levels in drinkers who have a readiness to change and impulsivity levels of nondrinkers?

Significance:
The goal of this exploratory study was to examine the relationship of impulsivity and readiness to change in drinking in a sample of college-age students.

Methods:
An instrument package was prepared that included the demographic screening tool, as well as, three scales to be used for this study. The instrument designers have used each of these scales with college populations making them appropriate to use. Participants were administered the SAQ, RCQ and Barrett Impulsivity measure BIS-11 during the specified time and locations.

Findings:
The statistical analyses of the study data supported Hypotheses 1 through 5.

Discussion:
The study results demonstrated that drinking levels reported by participants predicted impulsivity and readiness to change. Within the set of participants who were binge drinkers those in Action stage are least impulsive followed by those in Contemplation stage and most impulsive were participants who were in Pre-contemplation stage.

Research Completed: Yes
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
FDA Disclosure: Cleared: Yes
Accepted Terms: Yes
Submitted By: dkazemi@uncc.edu
Abstract ID: 383

The Psychological Consequences to Adolescents' of Exposure to Gang Violence

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Presentation Preference:  
SNRS Podium Presentation

Willing To Submit Poster?  
Yes

Abstract Categories:  
Interest Group: Community/Public Health  
Thematic Areas: Child & Adolescent Health

Purpose/Aims :  
To describe adolescents' emotional response to witnessing gang violence in the community

Research Questions/Hypotheses :  
What are the psychological consequences to adolescents' of exposure to gang violence?

Significance :  
Gang violence is an escalating public health problem in society. In 2000, the National Youth Gang Center estimated that there were 772,500 active gang members in the United States. Further, cities with a population between 100,000 and 250,000 had an active gang presence. Society has seen a growth of violent crimes against adolescents in the recent years. According to the Office of Justice Programs (2005), from 1993-2005 adolescents between the ages of 12-17 were twice as likely as adults to be victims of violence. Violence against adolescents continues to grow and can have negative influence on their development.

Methods :  
This descriptive study was conducted through the use of interviews. A convenience sample of adolescents (N = 8) from community centers were asked to participate. Each subject was asked 5 open-ended questions related to their experiences in the community and with gang violence. Content analysis was used to analyze the data. Data trustworthiness was established through member checking and peer debriefing.

Findings :  
Five adolescents (N = 5) participated in this study. The majority of adolescents were males and lived in single parent homes. Based on their responses themes emerged. The adolescents were exposed to various forms of gang violence (physical assaults, shootings) in their community. The emotional response of adolescents to the exposure of gang violence ranged from sadness to being sacred for their wellbeing. It affected their ability to participate in outdoor activities. In addition, several adolescents expressed feeling unsafe in the community.

Discussion :  
Adolescents’ experiences with gang violence supports the need for focused research on the impact it has on their psychological and social development. Research will help clinicians explore and develop interventions aimed at improving adolescents’ development.

Research Completed :  
Yes

Abstract History:  
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure:  
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure:  
Yes
Abstract Information

Presentation Preference: SNRS Podium Presentation

Abstract Categories:
Interest Group: Community/Public Health
Thematic Areas: Women's Health

Purpose/Aims:
The purpose of this study was to identify predictors of physical injury in women with a recent history of rape.

Research Questions/Hypotheses:
Which forensic and victim variables are the best predictors of injury? Which is the best predictive model? Which are the most significant interaction variables?

Significance:
The severity of rape-related injury is linked to negative health, and injury is may play a significant role in courtroom trial outcomes for rape cases. Studying the predictors associated with injury expands nurses’ knowledge of rape and the potential risks.

Methods:
Multiple logistic regression was used to evaluate cross-sectional data (N = 3318) from 13 to 89 years of age (M = 26.6; SD = 11.1 years) from three regions of the U.S.

Findings:
Results of multiple logistic regression models included a significant forward
stepwise model chi square [18] = 387.26, \( p = .001 \) and adequate fit based on the Hosmer-Lemeshow goodness-of-fit results, chi square [7] = 5.72, \( p = 5.7 \). Noteworthy results included multiple significant interactions. Common elements include regional setting, time from rape to examination, multiple perpetrators, weapon presence, race of victim, and if perpetrator was unknown.

Discussion:
The implications of research with large data bases highlight the importance of ongoing data collection with victims of violence, and standardized data collection to help health care providers understand the diverse health outcomes in various age and racial groups of women in different cities. The link between the health and legal systems, and the need for interdisciplinary collaboration aimed at improvement of health and legal outcomes with victims of violence is evident. Most importantly, analysis of large existing data bases can inform researchers regarding risks and can lead to the refinement of data collection and storage methods that will inform the development of tailored interventions aimed at alleviating negative health outcomes for victims of rape.

Research Completed: Yes

Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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Abstract ID: 400

Preventive Health Outcomes Measurement in Adults with Type 2 Diabetes in a Faculty Practice Site

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Abstract Information
Presentation Preference:
SNRS Poster Presentation

Abstract Categories:
Interest Group: Community/Public Health
Thematic Areas: Chronic illness

Purpose/Aims:
1. The learner will be able to demonstrate an understanding of outcomes measurements in an academic nursing center.<br />
2. The learner will be able to demonstrate understanding of the relationship between the services advanced practice nurses provide and adherence to clinical management guidelines for Diabetes as recommended by the American Diabetes Association.<br />

Research Questions/Hypotheses:
To what degree does an academic health center adhere to the preventative health guidelines for adults with Diabetes? How does this adherence rate compare to the established norms?

Significance:
UNACARE provides a unique national model for improving the health outcomes of an undeserved urban African-American community.

Methods:
This is a descriptive study of the implementation of an outcome measurement process for a faculty practice health center over a three-year period. Investigator designed tools were utilized to determine if providers were meeting clinical
management guidelines for Diabetics as recommended by the American Diabetics.

Findings:
Results of the preliminary data collection to date will be presented at the meeting.

Discussion:
Improving the health status of clients by providing assertive ongoing preventive health care services is the hallmark of nurse practitioner practice.

Research Completed:
No

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

FDA Disclosure:
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Submitted By:
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A STUDY OF RISK FACTORS & PROTECTIVE PREDICTORS OF TEENAGE PREGNANCY FROM THE NATIONAL LOGITUDINAL STUDY OF ADOLESCENT HEALTH (ADD HEALTH)

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The purpose of this study was to conduct a secondary analysis of existing data from the National Longitudinal Study of Adolescent Health (Add Health) to identify potential risk factors and protective predictors of teenage pregnancy.

Research Questions/Hypotheses:
Is there a predictive relationship between specific sociodemographic, personal, and parental factors and the incidence of teenage pregnancy?

Significance:
Although teenage pregnancy rates have been dropping in the U.S. over the last decade, the U.S. teenage pregnancy and birth rates remain one of the highest in the industrialized world.

Methods:
Data was collated from a sample of the public use Merged Wave III Dataset of the Add Health survey on a sub-sample of 3,356 adolescent females who took the initial school based survey between 1994-1995 and completed Wave III of the survey between 2001-2002. Descriptive statistics and logistic regression were used for data analysis and to develop a predictive model to determine the risk/benefit of specific sociodemographic, personal, and parental factors on the odds of teenage pregnancy.

Findings:
The results of the logistic regression analysis suggests that the likelihood of teenage pregnancy decreases as: parent education increases, self esteem increases, college expectation increases, and number of parents in the household increases. Racial disparities were also apparent in the model. African American adolescent females are more likely to experience teenage pregnancy than other ethnic groups.

Discussion:
College expectations and self esteem are protective predictors of teenage pregnancy. These factors have a potential buffering effect against teen pregnancy. On the contrary, parent education, race, and number of parents present in the household are significant risk factors of teenage pregnancy. These results support the need for the development of interventions that aim to reduce teenage girls’ exposure to these and other risk factors and promote those factors that are protective against teenage pregnancy.

Research Completed:
Yes

Abstract History:

Financial Disclosure:

FDA Disclosure:

Non-Exclusive License:
Accepted Terms: Yes

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Abstract ID: 549

Differences in Quality of Diabetes Care based on Payer Status

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Community/Public Health
- Thematic Areas: Chronic illness

Purpose/Aims:
To examine changes in the quality of diabetes care (QDMC) that is delivered in four REACH 201: Charleston and Georgetown Diabetes Coalition (REACH) affiliated healthcare sites in Charleston and Georgetown Counties of South Carolina.

Research Questions/Hypotheses:
This study proposes to examine the effects of payer status on the QOC received by persons in a REACH 2010 demonstration project. Specifically, the question that drives this study is “What is the effect of insurance payer status on the quality of care for patients enrolled in four REACH-affiliated health care facilities?”

Significance:
Nursing has a long history of patient advocacy for quality health care against many barriers, including dwindling resources (Green, 2004). Nurses need to be informed about the issues surrounding access and quality care and remain visible so that they can educate policy makers about these critical issues facing today’s health care delivery system (Abood, 2005). Through diligent assessment and monitoring of the QDMC provided today, nursing can be a force for positive change. Nursing organizations like the American Nurses Association (ANA), a leader in nursing policy, have been at the forefront of health care reform, advocating for better access and higher standards of quality care (American Nurses Association, 2005).

Methods:
Retrospective secondary data analysis using an multivariate regression model. Primary dependant variables process of care measures (A1C, kidney function test, lipid test, foot examination). intermediate outcome measures (A1C, kidney, and lipid result). Independent Variable Payer status Medicare, Medicaid, CI, or no insurance

Findings:
Medicare recipients and Medicaid enrollees were twice as likely to have a lipid level > 130 mg/dl when compared to those with commercial insurance programs.

Discussion:
Other than for lipid control, there were no significant differences in the quality of diabetes care received among this study population. Other exogenous factors must have greater influence on the quality of care, at least in this study setting.

Research Completed: Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:

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Cultural Competence of Public Health Nurses

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Community/Public Health
Thematic Areas: Health Disparities

Purpose/Aims: Examine cultural competence of public health nurses and their perceptions of delivering culturally competent care

Research Questions/Hypotheses:
1. Examine public health nurses’ awareness, sensitivity and behaviors related to delivery of culturally competent healthcare.
2. Determine relationships between demographic, sociocultural, environmental and work factors and nurses’ awareness, sensitivity and behaviors related to delivery of culturally competent healthcare.
3. Examine the perceptions of public health nurses about delivery of culturally competent healthcare.

Significance: Provide a foundation on which to build interventions to increase levels of cultural competence in public health nurses

Methods: Descriptive, exploratory, pilot study with 31 public health nurses in a public health department. Sample size was deemed appropriate for this initial examination. The Cultural Competence Assessment (CCA) tool, and a demographic survey were completed by participants. Reliability and validity of the CCA has been established. They also responded to 3 open ended questions giving their perceptions of the delivery of culturally competent care. Descriptive statistics were used to address question #1, Pearson correlation coefficients and ANOVA were used to address question #2 and content analysis was used to address question #3.

Findings: Cultural competence of this sample of public health nurses was moderate. Higher cultural competence scores were significantly related to participation in certain types of cultural diversity training. Participants expressed a desire for more cultural competence education. Participants delivered cultural and linguistically appropriate care.

Discussion: Education is a critical factor in increasing the levels of cultural competence in public health nurses. Further research should include asking more specific questions of public health nurses such as their beliefs about elements of culturally competent public health nursing care and their views of what culturally competent care means to clients. This study is one step in the achievement of the national goal of a culturally competent workforce to deal with continued health disparities.

Research Completed: Yes

Abstract History:
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License:
Abstract ID: 576

Social Factors Influencing ART Adherence Among HIV+ Black Men

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Abstract Information
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Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Community/Public Health
Thematic Areas: Health Disparities
Purpose/Aims : The purpose of this study is to investigate ART adherence behaviors of HIV+ Black men who use illicit drugs.

Research Questions/Hypotheses:
The proposed study is designed to address the following research questions. Among Black men living with HIV/AIDS who use illicit drugs: 1. Are there differences in perceptions of social capital, patient-provider relationship, and ART adherence for: a) partnered versus non-partnered, b) marginally housed versus stably housed, and c) ART experience? 2. Is ART adherence related to psychological state (i.e., psychological distress, state of mind, and frequency of drug use), ART experience, and housing status? 3. Do social context (i.e., social capital) and characteristics of the patient-provider relationship mediate the effects of psychological state, partnered versus not partnered, housing status, and ART experience on self-reported ART adherence?

Significance : In the United States 1.2 million persons are HIV infected. Among men, HIV rates in Blacks are seven times higher than Whites. More Black men progress to AIDS because of treatment failure and adherence problems. Antiretroviral therapy,
the only treatment effective for long term HIV suppression, requires near perfect adherence. Illicit drug use and homelessness pose further challenges. Suboptimal ART adherence leads to HIV mutations that can render entire classes of medication ineffective and transmission of mutated HIV to others in the community.

Methods:
A sample of 160 HIV+ Black men who use illicit drugs will be recruited using flyers and snowball sampling. These men will complete study questionnaires, that include: demographics, the K-10, PSOM and Social Capital Integrated Questionnaire, among others. One-way ANOVAs, multiple regression, and path analysis will be used to test study hypotheses derived from the research questions.

Findings:
Findings are expected to provide insights for development or refinement of ART adherence interventions for HIV+ Black men who use illicit drugs.

Discussion:
Preliminary data from the study will be reported.

Research Completed:
No

Abstract History:
Financial Disclosure:
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Yes

FDA Disclosure:
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Non-Exclusive License:
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Reflections on Katrina

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Purpose/Aims:
The purpose of this research was to share the lived experiences and efforts toward healing after the most deadly and devastating natural disaster in American history, Hurricane Katrina (and Rita.).

Research Questions/Hypotheses:
What are the lessons learned from hurricane disaster nursing?

Significance:
Hurricane Katrina was a once in a lifetime experience for nursing students in disaster nursing. These events demonstrated the importance of building relationships with victims and an appreciation of nursing in a distressed community.

Methods:
Qualitative data were collected during the immediate aftermath of the storms using journals written by nursing students reflecting on a unique service learning opportunity of experiences in the evacuation shelters during a disaster situation...

Findings:
Qualitative analysis of student journals revealed several themes including: Loss, Fear and uncertainty, Emotional stresses, Mixed feelings, "Making do," "Gathering together," Transformation (being or feeling changed) and God’s will. Although, the analysis was laborious and disquieting. Themes followed a shift in focus from the initial clinical emphasis on triage and acute nursing interventions to therapeutic communication, emotional support, and advocacy as the evacuees became more "settled in" or were transitioned to more suitable accommodations.

Discussion:
Students described being changed by the Katrina and shelter aftermath. They consistently reported that although challenging the experiences were very valuable and a "once in a lifetime" opportunity to become a better person and a better nurse. Accounts also described the important of building relationships with clients and the need for disaster nursing in the curriculum. It was evident that this difficult and uninvited lesson was an excellent learning opportunity that never could have been accomplished in a traditional classroom.

Research Completed:
Yes

Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

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Abstract ID: 632

Predictors of self-reported health status among environmentally and occupationally exposed individuals

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Student Level:
The aim of this study is to identify predictors of self-reported health status (SRH) in individuals exposed environmentally to polychlorinated biphenyls and occupationally to fertilizers, pesticides, ionizing radiation, and other toxins.

Research Questions/Hypotheses:
- What is the best predictive model for SRH when using the personal factors of age, sex, race, exercise, blood pressure, cholesterol measures, body mass index (BMI), and job exposure history? Does the inclusion of environmental exposure improve the prediction in the above model? Do SRH, job exposure history, and psychological distress differ by personal characteristics (race, age, gender)?

Significance:
- Every year, over 3.5 billion pounds of industrial toxins and one to two pounds of environmental toxins are deliberately released into the environment. Although exposures have been shown to have an adverse effect on the health of individuals, the perceived health status of individuals who have been environmentally or occupationally exposed to these toxins is still unclear. Little research has been conducted on predictors of self-reported health (SRH) status and the effect of the combined exposures on SRH in such a population.

Methods:
- A total of 1,110 individuals residing in a community with known exposure to PCB and occupational exposures were randomly selected and interviewed. The survey consisted of the SF-12 and the BSI as well as questions detailing health histories, health behaviors, work histories, and other information. Participants were asked to complete a follow-up visit for physical and physiological measurements, which included a PCB analysis.

Findings:
- Data have been collected and analysis is currently underway.

Discussion:
- Data have been collected and analysis is currently underway.

Research Completed:
- Yes

Financial Disclosure:
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**Occupational Stress Among Firefighters**

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Abstract Categories: Interest Group: Community/Public Health
Thematic Areas: Health Disparities

Purpose/Aims: The primary aim of this study was to explore factors associated with occupational stress in firefighters.

Research Questions/Hypotheses:
1) What is the level of occupational stress among firefighters? 2) Is there a relationship between demographic characteristics (age, position titles, and years of work experience) and level of occupational stress in firefighters? 3) Are there relationships between job pressure, lack of organizational support, and occupational stress level among firefighters? 4) Are there disparities in the relationships between job pressure, lack of organizational support, and occupational stress level among African-American and Caucasian firefighters?

Significance: Firefighters encounter many stressors during their work due to the dangerous nature of their jobs and need for deployment on a moment’s notice. Since most studies have examined factors influencing job stress among other groups of workers, little is known about occupational stress among firefighters. The personal-environment (PE) fit theory guided this study.

Methods: A non-experimental, cross-sectional design was utilized to explore the variables. Of the 311 firefighters who volunteered to participate in the study, a total of 298 submitted completed questionnaires. The Job Stress Survey, developed by Spielberger and Vagg (1999), was used to assess occupational stress.

Findings: Descriptive statistics analysis and F-test will be used to test the hypotheses. Analyses are in progress.

Discussion: Research in progress.

Research Completed: Yes

Abstract History:

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

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COMMUNITY PARTICIPATION TO DECREASE HEALTH DISPARITIES AMONG PHNs IN FLORIDA

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Abstract Information

Presentation Preference: SNRS   Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: 
Interest Group: Community/Public Health
Thematic Areas: Health Disparities

Purpose/Aims: The purpose of this dissertation study is to examine the extent to which a community based participatory approach (CBPA) to public health is being adopted by public health nurses (PHNs) in health departments throughout Florida (FL). This includes examining PHNs perceptions of a) the importance of CBPA to reduce health disparities b) their competence in the use of a CBPA for practice, and c) the barriers and supports within their respective health departments for adopting a CBPA into public health practice.

Research Questions/Hypotheses: To evaluate the extent to which what has typically been a research approach (community based participatory research-CBPR) is being translated into the practice of public health nursing to reduce healthcare disparities in minority populations.

Significance: Although many achievements in public health have occurred, health disparities by race, ethnicity, and socioeconomic status continue. The manner of providing care must change to include an examination of all the determinants of health, principles of equity, and participation by and empowerment of communities of interest.

Methods: The method planned is a descriptive, correlational study design using a web based electronic survey.

Findings: Findings from the proposed dissertation research will yield a better understanding of current PHN beliefs and practices related to the use of a CBPA in a State with notable health disparities by race, ethnicity, and SES, and will provide a foundation from which the applicant will develop an ongoing program of research.

Discussion: The intial results from the paper based trial of survey (Nov, 2007) will be reported. Results from the intial survey will be used to build and tailor a more comprehensive, valid and reliable measure to use with PHNs working in health departments in Florida.

Research Completed: No

Abstract History: -This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure: -Details: APHA Nov 2007 poster presentation

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

Submitted By: levonian
Abstract ID: 705

Injuries to Commercial Truck Drivers

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Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Community/Public Health
- Thematic Areas: Workforce Issues

Purpose/Aims: The purpose of this study is to describe non-motor-vehicle crash (NMVC) injuries to commercial truck drivers and to identify the factors contributing to these injuries.

Research Questions/Hypotheses:
1) What types of NMVC injuries are experienced by commercial truck drivers? 2) What major risk factors contribute to these injuries?

Significance: Transportation ranks in the top 4 most hazardous occupations each year. Truck driving is one of the most rapidly growing occupations in the United States and one of the top three occupational growth areas for women and Hispanics. Over 1.7 million heavy truck and long-haul truckers are on the road, yet little is known about the circumstances or outcomes of non-fatal NMVC work injuries to this occupational group.

Methods: Personal interviews (n = 40) were conducted at truck shows, truck stops, and by telephone. Interviews were audiotaped and transcribed. Transcriptions were verified for accuracy, analyzed, and coded by two independent reviewers to determine injury type, extent of injuries, and factors contributing to the injury events. Inter-rater agreement was reached through discussions. Detailed structuring of the data was conducted to facilitate identification of common trends.

Findings: Musculoskeletal disorders resulting mostly from slips, falls, and overexertion were the primary types of injuries reported (72%). Environmental hazards, load characteristics, and carelessness were the top three factors cited as contributing to these injuries.

Discussion:
Identifying common patterns in injury events enables researchers and safety advocates to develop interventions based on the most frequent occurrences. Health care providers can play important roles in preventing future injuries. This small study reflects the first step toward identifying risk factors for occupational injuries to commercial truck drivers.

Research Completed: Yes
Abstract History:
Financial Disclosure:
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Weight perception and diet experience among Korean adolescents

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

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Abstract Categories: Interest Group: Community/Public Health
Thematic Areas: Child & Adolescent Health

Purpose/Aims: The purpose of the study was to investigate the relationship between weight perception and actual weight status and the relationship between diet experience and weight perception in Korean adolescents.

Research Questions/Hypotheses:
1) Is weight perception statistically associated with categorized BMI? 2) Is diet experience related to misperception when subjects had normal weight?

Significance: Adolescence is the best time to acquire positive attitude about ideal weight and to learn healthy behaviors. Therefore, right perception about ideal weight is important because incorrect perception at this age could result in health problems.

Methods: The data were collected from twenty middle and high schools across South Korea. The total number of subjects was 5,443 students from middle (n=3,191) and high school (n=2,252). Perceptions of their body weight were compared with categorized BMI. The research question 1 was answered in boys and girls and in middle and high school students separately. The question 2 was analyzed in boys and girls separately. Frequency and percentage were executed for descriptive statistics. Cochran-Mantel-Haenszel Chi-square was performed.

Findings: Weight perception and actual weight (categorized BMI) were significantly correlated in boys and girls and middle and high school students (p for all <0.0001). Even though they had normal weight, 9.7% girl, 27.8% boys, 21.5% middle school, and 16.7% high school students perceived they were underweight. While their weight was normal, 23.7% girls, 11.8% boys, 15.2% middle school, and 20.2% high school students reported as overweight. Diet experience was significantly associated with incorrect perception in boys and girls.

Discussion: Although weight perception and actual weight were significantly related, overall 32% of subjects perceived incorrectly. Of particular is that boys, as well as girls, misperceived their weight as underweight or obese. In addition, the correlation between diet experience and perceived themselves as obese was higher in girls than boys. Therefore, gender specific approach will be required.

Research Completed: Yes

Abstract History: Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure: Yes

Non-Exclusive License: Cleared: Yes
Voice, Self-Silencing and Intimate Partner Violence in Adolescent Girls

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Abstract Categories:
Interest Group: Community/Public Health
Thematic Areas: Women's Health
Purpose/Aims:
Within intimate partner violence (IPV) research, there is a need for the development of theoretical frameworks unique to the adolescent population. Adult models have proven to be inadequate. The primary objective of this research is to test a theoretical model to evaluate the risk for IPV in adolescent girls. The specific aims of this research are:
1. To determine relationships among developmental stages, self-silencing behavior and risk for IPV in adolescent girls.
2. To determine if a reduction in self-silencing behavior will reduce the risk of IPV in adolescent girls.
3. To further the scientific knowledge base from which to construct clinical interventions aimed towards the prevention of intimate partner violence among adolescent girls.

Research Questions/Hypotheses:
Based upon the proposed theoretical model, the following research questions are posed:
1. What is the relationship in adolescent girls between developmental stage, self-silencing behavior and risk for IPV?
2. Does participation in a debate program enhance adolescent girls' voices and thus increase their willingness to speak out in intimate relationships?
3. If an adolescent girl is more willing...
to speak out in an intimate relationship, is her risk for IPV reduced?

Significance:
Nearly 5.3 million incidents of IPV occur each year among U.S. adult women. Less is known about this phenomenon in adolescents which is in sharp contrast with numerous findings that this population experiences the highest per capita rate of IPV. IPV accounts for ten percent of intentional injuries to adolescent girls and girls reporting abuse are more likely to report higher rates of pregnancy, illicit drug use, binge dieting, and suicide attempts.

Methods:
The plan is to work within the existing National Debate Program which provides at-risk adolescents the tools needed to participate in debate. The goal is to compare participating adolescent girls with a matching group not involved in the program.

Findings:
Not established

Discussion:
Not established

Research Completed:
No

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

FDA Disclosure:
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Non-Exclusive License:
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Ambulatory Blood Pressure and Physical Activity in Heart Failure

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Aims/Purpose: This is an observational study of repeated measures of ambulatory blood pressure (ABP) and physical activity (PA) over a 24-hour period to explore the ABP response to change in level of PA in community-based individuals with heart failure (HF). The purpose is to determine whether the association between ABP and PA is modified by functional status in HF (as defined by the New York Heart Association [NYHA] classification).

Research Questions/Hypotheses: The hypothesis is that patients with NYHA II/III HF have less ABP response to changes in level of PA than those with NYHA class I HF.

Significance: ABP measurement is a means of monitoring cardiac function in a noninvasive way. Evidence relating functional status to ABP profiles in patients with HF is scarce. The results of this investigation may help identify methods for monitoring patients with HF on an ambulatory basis and shed light on the influence of PA on BP management. Findings will be used in the development of interventions for this patient population.

Methods: The estimated sample size is 56 for two groups of patients aged 45 or older with HF: those who have no symptoms with ordinary activities (NYHA class I) and those who have symptoms with ordinary activities but not at rest (NYHA class II or III). Measurements include ABP at 30-minute intervals (SpaceLabs 90207) and minute-by-minute PA (Basic Motionlogger). A two-level mixed model will be used including each repeated ABP measure as the within-subject analysis. The average scores for PA during the 5-minute interval before each ABP measurement will be the independent variables in the within-subject analysis. Confounding variables at the individual level and within-subject will be adjusted separately.

Findings: The association between ABP and PA is anticipated to be greater among the patients with NYHA I HF than among those with NYHA II/III HF.

Discussion: This study is in progress.

Research Completed: Yes

Abstract History:

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

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Anticipating the Impact of Global Warming on Disaster Preparedness and Response

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Abstract Categories:
- Interest Group: Community/Public Health
- Thematic Areas: Basic science

Purpose/Aims: The purpose of this presentation is to present historical information regarding documented temperature changes, discuss disaster preparedness and climate policy as it relates to global warming issues, and provide goals for future change that can impact global warming.

Research Questions/Hypotheses:
What is the potential impact that global warming may have on disaster preparedness and response?

Significance:
The average global temperature has maintained a pattern of significant increase over the past 100 years. Scientists have deliberated over the possible impact to mankind and the Earth if the climate change continues. This ushers concern and could potentially produce devastating effects.

Methods:
The information for this critical analysis was obtained through an extensive literature search of news sources, governmental policy and documents, and the Homeland Security database. Keywords utilized were global warming, government preparedness, and health impacts relating to global warming and disasters.

Findings:
The global average temperature has risen and projections have indicated continual increases if greenhouse gases persist in the atmosphere. The strength and occurrence of damaging storms have increased. Global governmental policy and disaster preparedness varies; however, preparedness efforts are minimal. Vulnerable populations are at risk for extreme consequences of storms.

Discussion:
Global warming policy has been intermittent in the past. World governments must join forces to stop the effects of global warming. Advancement in preparedness and policy development is essential and can be accomplished through united efforts on climate policy and disaster preparedness. Measures to reduce global warming must be incorporated by all levels, from individuals to international efforts.

Research Completed: Yes

Abstract History:
- This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
- Details: Sigma Theta Tau Gamma Chi Annual Research Day, March, 2007

Financial Disclosure:
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Leadership and Smoke Free Policy Development

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Abstract Categories:
Interest Group: Community/Public Health
Thematic Areas: Health System

Purpose/Aims:
The study examined demographic and other community factors associated with leadership, a dimension of community readiness for smoke-free policy development.

Research Questions/Hypotheses:
What demographic factors are associated with the leadership dimension of the Community Readiness Assessment? What other community factors are associated with the leadership dimension of the Community Readiness Assessment? Is leadership associated with the other readiness dimensions? Is leadership associated with overall readiness for smoke-free policy development?

Significance:
Smoke-free laws are highly effective in reducing community smoking rates and improving health outcomes. Leadership has been found to be highly associated with overall community readiness for smoke-free policy development.

Methods:
As part of a five-year randomized control trial, 30 rural Kentucky communities were evaluated at baseline on six dimensions of readiness for smoke-free policy development including political climate, community climate, resources, leadership, existing smoke-free policies, and community knowledge about secondhand smoke and existing efforts. Additional data on demographic and other community factors were collected. Bivariate analysis and multiple regression were used.

Findings:
Findings will show whether population size, support from community organizations, smoking prevalence, income, voter liberalism, alcohol policy, pounds of burley tobacco produced, and number of full-time personnel devoted to tobacco control are associated with community leadership. Findings also will show whether leadership is associated with the other five readiness dimensions of political climate, community climate, resources, existing smoke-free policies, and community knowledge about secondhand smoke and existing efforts, and also if leadership is associated with overall readiness for smoke-free policy development.

Discussion:
Rural communities are less likely to enact smoke-free laws than urban communities. Given that effective community leadership is crucial to successful passage of smoke-free laws, findings will assist public health nurses and other community health team members to facilitate leadership development in rural communities.

Research Completed:
Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

Submitted By:
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Abstract ID: 795

Transformation and Personal Growth Following Catastrophic Loss from Residential Fire: Inferences for Professional Inquiry

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Abstract Information
Presentation Preference:
SNRS Student Poster Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Community/Public Health
Thematic Areas: Health Disparities

Purpose/Aims:
The recognition of health needs in persons experiencing catastrophic loss is critical in delivering appropriate nursing care to those in need. This poster will present the state of science regarding the concept of transformation and its association with posttraumatic growth in persons affected by catastrophic loss following residential fire.

Research Questions/Hypotheses:
What is the lived experience of persons who go through catastrophic loss from residential fire? What is the relationship among posttraumatic growth, gender, and educational status in persons experiencing catastrophic loss following residential fire?

Significance:
Residential fires were responsible for 3,245 deaths, 16,400 injuries, and an estimated 6.9 billion dollars in property damage in 2006. Formal inquiry regarding those who have experienced catastrophic loss from residential fire, and subsequent health-related challenges associated with such loss is less
common, and little exists in the nursing literature.

Methods:
The concept of transformation was analyzed through exploration of related terms including posttraumatic growth and adversarial growth, and their influence on the current state of the science within the nursing discipline. Investigation of quantitative and qualitative measurements associated with the concept of transformation was conducted.

Findings:
Following literature review, five instruments were identified measuring the closely related concepts of posttraumatic growth and positive outcomes following negative life experiences. A variety of studies exploring posttraumatic growth in persons experiencing physical illness, abuse, and bereavement were prevalent in the psychological and psychosocial literature.

Discussion:
The concept of transformation and associated personal growth following catastrophic loss from residential fire poses a challenge for the nursing discipline. Little is known regarding consequences and processes surrounding this experience, and the impact of nursing care on the growth process. Through scientific inquiry, critical information regarding transformation, its association with posttraumatic growth, and care of those experiencing catastrophic loss from residential fire may be acquired.

Research Completed: No
Abstract History: -This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
-Details: SNRS Galveston, TX- Feb. 2007 The development of the concept of transformation was presented
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
Submitted By: Mrratmoon@verizon.net
Mediterranean-style dietary pattern is associated with lower cardiovascular risk factors in a high-risk population

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Abstract Categories: Interest Group: Community/Public Health
Thematic Areas: Adult Health

Purpose/Aims: To test the association between the alternate Mediterranean Diet Index (aMED) and risk factors in 40 older (&#8805; 55 yr) Kentucky residents free from CVD.

Research Questions/Hypotheses: Higher aMED scores, which are indicative of diets more similar to a Mediterranean-style pattern, will be associated with lower anthropometric CVD risk factors.

Significance: Nutritional habits contribute significantly to cardiovascular disease. Kentucky ranks sixth highest in cardiovascular mortality with relative risks at >50% above national average. Mediterranean style dietary patterns are associated with decreased risk of CVD. Few studies have evaluated the impact of this dietary pattern in Western high-risk populations where foods differ from those in the...
Mediterranean.

Methods:
AMED scores were calculated from detailed 4-day food diaries validated by a dietician, using the Nutrition Data System for Research program. Diets were assigned a 0 or 1 for average daily servings below or above the median intake of 9 food subgroups. Possible scores ranged from 0-9. Higher scores equated with dietary patterns more similar to a Mediterranean-style pattern. Subjects were dichotomized into low (0-4) or high (5-9) aMED scores. Body mass index (BMI) and waist circumference were measured by trained dieticians; body composition by air displacement plethysmography, regional body fat distribution by dual x-ray absorptiometry; and physical activity levels by 24-hr actigraphy. Independent t-test were used to analyze differences in these risk factors between the groups.

Findings:
Subjects with high aMED scores had significantly lower BMI, body fat percentage, waist circumference, and abdominal fat percentage than those with low scores. There was no difference in age or physical activity levels.

Discussion:
Higher aMED scores were associated with lower CVD risk factors independent of age and physical activity levels. The aMED dietary score can be used to identify groups who could benefit from nutritional strategies that reduce cardiovascular risk.

Research Completed:
Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
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Nurse Navigator in the Primary Care Setting: A Hybrid Model Concept Analysis

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Presentation Preference: SNRS  Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Community/Public Health
Thematic Areas: Health System

Purpose/Aims: Poor lifestyle choices, lack of focus on prevention and early detection, and fragmented healthcare can contribute to the negative outcomes seen in the U.S. Healthcare system. The nurse navigator is a role that developed in oncology to address barriers to care. This study examines the concept of nurse navigator in the primary care setting, using the hybrid model of analysis to identify a definition and apply to nursing practice and research.

Research Questions/Hypotheses: What is the role of a nurse navigator in the primary care setting?

Significance: New roles in nursing require a clear understanding of scope and function prior to implementing into practice.

Methods: To identify the current understanding of the concept an integrative research review methodology was used. The inclusion criteria for the literature review included articles written in English, published during 1997-2007, and containing the key words in the abstract. The hybrid model using the theoretical, fieldwork, and analytic phases of concept analysis is used to further explore and evaluate the concept of nurse navigator in the primary care setting.

Findings: In the past decade the literature shows an increase use of the nurse navigator role. The role is primarily used in the oncology care setting to address access issues and barriers to care. There are aspects of the role that overlap with case management and social work. Clearer delineation of the nurse navigator role is required prior to implementing in other care settings.

Discussion: Integration, anticipatory case management, assessment of community needs, patient education, and targeted disease management may assist in improving health outcomes. The nurse navigator can be a key role that can have positive impact on healthcare outcomes in the primary care setting. To apply in the practice and research setting further inquiry is required to measure, contrast, and compare the components of the concepts.

Research Completed: Yes

Abstract History:

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

Submitted By: gloria.barone@parrishmed.com
Abstract ID: 869

All-terrain vehicles and risky behavior of farm children

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Presentation Preference: SNRS Student Poster Presentation

Abstract Categories:
- Interest Group: Community/Public Health
- Thematic Areas: Child & Adolescent Health

Purpose/Aims:
This study was to examine the relationships between all-terrain vehicle (ATV) riding and risky behaviors among 8-12 year olds who live on or have exposure to farms.

Research Questions/Hypotheses:
The hypotheses were: 1) Children who report riding an ATV in the past month will be more likely to report other risky behaviors on the farm than children who have not ridden an ATV in the past month; 2) Children who have attended an ATV safety training class will be less likely to report riding as a passenger on an ATV; 3) Boys will be more likely than girls to ride ATVs and report other risky behaviors on the farm.

Significance:
Children who ride ATVs have an increased risk for injury compared to adults. The American Academy of Pediatrics recommends that children under 16 years of age should not operate ATVs.

Methods:
This was a secondary analysis of a longitudinal study of farm children in five states who participated in community-based farm safety day camps. Three hundred twenty-six children responded to the 12-month self-report survey which asked about ATV riding.

Findings:
One hundred thirty-seven children (42%) reported riding an ATV in the last month. Those children who rode an ATV in the past month were more likely to report doing other risky behaviors on the farm than children who had not ridden at ATV (χ²=17.52, p=0.0006). Attending a training session did not make a difference in whether or not the child rode as a passenger on an ATV (χ²=1.64, p=0.20). Gender was not associated with ATV riding (χ²=1.6, p=0.2) or risky behavior (t=0.54, df 134, p>0.59).

Discussion:
These findings indicate that farm children who ride ATVs may benefit from interventions targeted at modifying their riding behaviors on farm equipment. Future research
is needed to examine the impact of education on the use of farm equipment including ATVs.

Research Completed: Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
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Non-Exclusive License:

Accepted Terms: Yes

Submitted By:
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Monitoring Secular Trends in Community Intervention Studies

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Abstract Information

Presentation Preference:
SNRS   Student Poster Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Community/Public Health
Thematic Areas: Methods

Purpose/Aims:
The purpose of this study is to develop a protocol to measure secular trends that might affect the outcomes of a larger NHLBI-funded intervention study to promote smoke-free policy development in rural Kentucky.

Research Questions/Hypotheses:
It is believed that community events, often difficult to monitor, can threaten the internal validity of community intervention studies.

Significance:
Describing these community events or influences, is often referred to as ‘secular trends.’ Although, the importance of measuring secular trends is well documented, the process for monitoring them is not well understood.

Methods:
Forty rural Kentucky counties comprise the sample, with 22 treatment and 18 control counties. Sites with frequently updated information (e.g. community newspapers, TV and radio stations, as well as weekly “newsflash” e-mails sent by state government) are monitored biweekly and sites with more static information (e.g. Chamber of Commerce, school system, and county government) are monitored monthly. Events are tallied and counted monthly. All events are coded, described and analyzed quarterly. Recurring events are referred to as ‘secular trends.’ These trends will then be analyzed as possible confounding variables for the larger intervention study.

Findings:
A dynamic protocol for website searches have emerged based on identified events and trends, including types of sites and frequency of monitoring. A variety of secular events and trends, and their potential impact on the larger study will be presented.

Discussion:
Secular events that are not directly related to smoke-free policy are identified via review of community based internet sites. Related topics were selected a priori including alcohol policy, smoking cessation, gaming/gambling, tourism, farming issues, economic development, city/county infrastructure, healthcare infrastructure, school system issues, wellness discussions, and influential citizens affected by smoking related illnesses.

Research Completed:
No

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes
Grants/Research Support : Y
National Institute of Health - National Heart, Lung, and Blood Institute

Consultant :

Stock/Shareholder :

Speaker's Bureau :

Other Financial or Material Support :

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INDEX FIRST PREVIOUS NEXT LAST
Genetic and Environmental Links to Health in

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Abstract Information
Presentation Preference:
SNRS Student Poster Presentation
Willing To Submit Poster?
Yes
Abstract Categories:
Interest Group: Community/Public Health
Thematic Areas: Health Disparities
Purpose/Aims:
The purpose of this study is to develop a partnership with Yup’ik Eskimo communities to collaborate in shaping future gene/environment research and public health initiatives to address health disparities in their communities due to increasing prevalence of diabetes and obesity. <br />
Research Questions/Hypotheses:
This study will explore the perceptions, attitudes, and beliefs of Yup’ik Eskimo communities regarding gene/environment research for diabetes and obesity, while gaining knowledge regarding the communities' recommendations for future genetic research and community health initiatives. It is hypothesized that greater cultural orientation will guide the gene/environment research results dissemination to be more environmentally and holistically inclusive.
Significance:
Research in Indigenous communities holds potential risks. Genetic research poses an even greater risk for potential cultural disrespect and harm. A collaborative effort is needed to shape research to meet the needs of Indigenous communities for improved health and decreased disparities.

Methods:
Community based participatory research methodology will guide a mixed-methods design for this study. Focus groups, key informant interviews, culturally tailored pedigrees, and a quantitative survey will be used to gather data on community needs for research and information regarding gene/environmental influences of diabetes and obesity.

Findings:
The first phase of this research consists of the identification of community and academic partnerships for proposed gene/environment research relative to health disparities within this community. Partnership discussion guided the development of the research purpose and question. Approval was given for protocol submission to the tribal committee for review.

Discussion:
Knowledge about establishing community partnerships with Yup’ik Eskimo populations will help researchers understand Yup’ik Eskimo communities’ perspectives on gene/environment research, helping to shape future genetic research to address health disparities. This study will be a helpful spring board for future health disparities research regarding the culturally sensitive area of genetics.

Research Completed: No

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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Abstract ID: 915

Health Risks of Ethnically Diverse Male Students from a Minority Serving University

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Community/Public Health
- Thematic Areas: Child & Adolescent Health

Purpose/Aims:
1. Determine the current condom use self efficacy scores in students ages 18 to 24 who access Florida International University, Student Health Care Center and volunteer to complete the chlamydia questionnaire.  
2. Determine the relationships between high risk drinking, sexual risk taking and condom use from results of the chlamydia questionnaire.

Research Questions/Hypotheses:
1. What are the current infection rates of chlamydia for students accessing services at FIU - UHS?  
2. What is the relationship between condom use self efficacy scale scores, sexual risk taking behavior, high risk drinking and reported cases of chlamydia infections in a convenience sample of college students between the ages of 18 and 24 who access services at a FIU UHS?

Significance:
Chlamydia is an obligate bacteria that invades the male urethra, Vas Deferens, and in some instances the prostate when left untreated (Kelly, 2003). Mild symptoms or lack there of, leave young men at risk for chlamydia related morbidity, most specifically, chlamydia prostatitis and infertility. Unfortunately, inexpensive and effective treatment is often delayed because of vague or absent symptoms (Hu, Hook & Goldie, 2004). Sexual activity, high risk drinking, and infection rates of chlamydia will be examined in this research. Since there is no current routine screening for chlamydia in this population these data may make the argument that chlamydia screening for students on college campuses is not only desired but imperative.

Methods:
Completed anonymous questionnaires from student volunteers yielded deidentified data. Students may report sexual activity, condom use and high risk drinking more accurately if there are no identifiers or connections with their medical records. Data on infection rates of chlamydia was determined from an examination and analysis of confirmed laboratory findings.

Findings:
Pending final Analysis

Discussion:
Pending completed analysis

Research Completed: Yes

Abstract History:
- This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
- Details: American College Health Association

Financial Disclosure:
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Grants/Research Support: Y
Florida International University
Consultant:
Stock/Shareholder:
Speaker's Bureau:
Other Financial or Material Support:

FDA Disclosure:
Cleared: Yes
Abstract ID: 922

Identifying Resources for Depressed Latino Women Using Geographic Information System (GIS)

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Abstract Categories:
Interest Group: Community/Public Health
Thematic Areas: Health Disparities

Purpose/Aims:
This honors project is associated with the study Community Based Participatory Interventions: Depression in Latino Women. The specific aims are to: (1) review literature for appropriate interventions available to treat depressed Latino populations, (2) generate a list of community services to treat depression in Alachua and Ocala, Florida, and (3) to create a map with services available in the community, by using Geographic Information System (GIS).

Research Questions/Hypotheses:
What community-based interventions are describes in the literature to treat depression among Latinos? What are the community services in Alachua and Ocala areas that provides treatment for Latinos, specific to depression?

Significance:
Through the use of Geographic Information System (GIS), services available to the Latino women population will be located and lead to future collaboration and assessment of appropriate community based interventions for Latino women in the Alachua and Ocala areas.

Methods:
This project gathered its review of literature by searching through databases. Several community mental health services are being contacted throughout the Alachua and Ocala area to find what traditional and non-traditional interventions that are being used to aid the depressed Latino population. Geographic Information System (GIS) will be used to compose a map of the Alachua and Ocala communities and the community services pertaining to each.

Findings:
The project is still in progress. It anticipates that the Alachua and Ocala communities will have few mental health services to support Latino populations and there will be more non-traditional support services available such as churches and support groups.

Discussion:
By collecting data on the available mental health services and community-based interventions for Latinos with depression, the project will determine what interventions are lacking and in turn show what needs improvement. By establishing this, the project will contribute with research towards decreasing the health disparities that exist between Latinos and their access to health care.

Research Completed:
Yes

Abstract History:
Financial Disclosure:
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Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
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A Comparison of Health Disparities in Five International Health Systems and the US by MHIRT Scholars: Implications for Research and Practice

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Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Community/Public Health
Thematic Areas: Chronic illness

Purpose/Aims: The foci for the students of the Minority Health International Research Training (MHIRT) program was to participate in mentored international research and understand how countries respond to health disparity challenges, immigration and status inequality within their healthcare system. The students used their newfound knowledge to compare disparities abroad with those of the U.S.

Research Questions/Hypotheses:
Health disparities refer to differential quality of health care, accessibility, and outcomes experienced by racial, ethnic, socioeconomic, and political groups. The issue is not unique to the U.S.

Significance:
Health disparities are well documented in the US. Without social medicine, health disparity affects vulnerable groups like immigrants and individuals without medical insurance through cost and access availability.

Methods:
The MHIRT program at Florida International University (FIU) provided 12 undergraduate and graduate students the opportunity to work with academic research teams and learn from healthcare providers and the literature about vulnerable populations in local communities in Germany, Italy, England, Peru, and Mexico.

Findings:
England, Germany and Italy provide universal healthcare, yet immigrants and individuals of a low socioeconomic status have access to public healthcare systems with fewer resources. Efforts are being made through government intervention to decrease health disparities, however such efforts are dependent on the countries’ priorities. In Peru and Mexico, medical care is inaccessible to many and the prevalence of health problems appears to correlate with the availability of public services. Both countries offer subsidized health insurance, but the
public system only provides primary care.

Discussion:

MHIRT scholars realized that survival struggles and ways of coping of vulnerable groups, as well as the effect of such stress on people’s health, needs world-wide study. In this poster, the MHIRT students share their conclusions about health disparities issues and describe implications in conducting research that will bridge the gap between disadvantaged populations and needed quality healthcare services.

Research Completed: Yes

Abstract History:

Financial Disclosure:

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**Abstract Information**

Presentation Preference: SNRS Student Poster Presentation

Abstract Categories:
- Interest Group: Community/Public Health
- Thematic Areas: Adult Health

Purpose/Aims:
The purpose of this study was to describe the incidence of lung cancer, indoor radon levels, and adult smoking rates by county in Kentucky.

Research Questions/Hypotheses:
What is the distribution of radon levels, smoking rates, and lung cancer incidence rates in Kentucky counties?

Significance:
First and secondhand tobacco smoke and radon are risk factors for lung cancer. Kentucky leads the nation in lung cancer incidence and adult smoking rates, and some counties have predicted average indoor radon screening levels greater than 4 pCi/L (pico curies per liter), the action level designated by the Environmental Protection Agency (EPA). Although radon is a risk for both smokers and nonsmokers, those who have smoked and report radon exposure have a higher risk of developing lung cancer than never smokers and those without radon exposure.

Methods:
Geographical Information System software was used to overlay the incidence of lung cancer, radon levels, and smoking rates by county. Trends over time will be described.

Findings:
Adult smoking rates ranged from 15.6 to 48.6 percent. Lung cancer incidence ranged from 61.49 to 170.94 per 100,000. Indoor radon levels ranged from below the EPA action level to as high as 808 pCi/L. Associations between lung cancer, smoking rates, and radon levels over time will be presented.

Discussion:
The population-level data generated will aid in projecting state lung cancer incidence and mortality as well as future health care expenditures. Data will be used to target high risk areas for public education and screening interventions. Dissemination of findings through media at the regional and community level will be described. Implications for health policy development and further research will be discussed.

Research Completed: Yes

Abstract History:
- This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
- Details: National Conference on Tobacco or Health, October 2007

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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Abstract ID: 954

Use of Citronella (witch-doctor’s remedy) as a Mosquito Deterrent

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Community/Public Health
- Thematic Areas: Adult Health

Purpose/Aims:
Purpose is to test effects of the oil of the citronella from cut plants to deter the breeding of mosquitoes and thus prevent mosquito-borne diseases.

Research Questions/Hypotheses:
There is a difference in the number of mosquitoes counted within one hour of sunset in the EVS catcher in a citronella environment versus the number counted in the EVS catcher in a non-citronella environment.

Significance:
Using paired t-analysis, there was a significant difference (p<0.01) in number of mosquitoes in the citronella environment versus non-citronella environment was found for all samples over two month period of time.

Methods:
Quantitative, quasi-experimental. A study was conducted by ten students who each had 5 randomly assigned Citronella potted plants in the same size area in the back of their homes in three South Florida counties. Data collection of 14 randomly assigned days within 2 months of the peak of mosquito season. Data collected included variables on the date, time, weather conditions, plant health, and number of mosquitoes within the citronella environment as compared to a non-citronella area on the opposite side of their homes. All students used a heavy duty EVS mosquito catcher to collect mosquitoes for one hour.

Findings:
Although significance was reached (p<0.01)in the number of mosquitoes in the citronella environment versus non-citronella environment, researchers noted that on days with strong winds from certain directions (two hurricanes), no statistical difference between the number of mosquitoes in the two environments was found. No difference found in many variables, and the number of mosquitoes in the two environments.

Discussion:
Further research needed to confirm results while testing possibility of the
influence of wind direction and speed during peak mosquito season. Using natural repellents may be effective in areas where citronella is grown and regularly cut. Hildebrandt's model of community empowerment, communities may wish to grow and cut citronella plants around homes to deter breeding of mosquitoes in that area.

Research Completed: Yes
Abstract History: 
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes
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Non-Exclusive License: Accepted Terms: Yes
Submitted By: bjp710@aol.com
Evidence for the effect of nurse certification on nurse and patient outcomes: A review of the literature

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Purpose/Aims:
To analyze published research from peer-reviewed journals between 1980 and 2006 about the effect certification has on patient outcomes, nurses’ relationships with each other and with other disciplines, nurses’ perceptions of their job, and whether this evidence supports the claims of agencies advocating for certification.

Research Questions/Hypotheses:
What evidence exists that nursing certifications influence patient outcomes, nurses’ relationships with other healthcare team members and nurses’ perceptions of their job?

Significance:
Nurse certification was associated with improvements in patient outcomes, and enhanced nurse empowerment and improve nurse-physician relationships.

Methods:
An integrative review of research published between January 2001 and May 2006 was carried out to examine the relationship between nursing certification and patient outcomes, nurses’ relationships with other healthcare team members and nurses’ perceptions of their job. PubMed, CINHAL, and the Cochran library databases were searched using the key terms: nurs* certification, quality outcomes, patient, workforce, and certification.

Findings:
The most consistent finding across all studies was nurses’ increased perception of the intrinsic value of certification and how it positively influenced patient outcomes, nurses’ relationships and their jobs. Findings of increased nurse empowerment and a relationship between certification and patients’ health status and perceived health benefit from nursing care were determined.

Discussion:
Certification has both intrinsic and tangible benefits that may increase nurse retention. The available evidence on the value of certification has limitations. Most studies relied on nurses’ reports of perceptions of their own work performance and patient care. Numerous limitations and barriers contribute to the lack of research having been done in this area, including lack of empirical studies, problems of locating units completely staffed with certified or noncertified nurses to compare patient care, outcomes and adverse events. An area for future research would be in measuring the effects of certification on patient outcomes from perspectives other than the nurse.

Research Completed:
No

Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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Disaster Preparedness of our nations Registered Nurses: How ready are we?

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Abstract Information
Presentation Preference:
SNRS Poster Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Education
Thematic Areas: Health Disparities

Purpose/Aims:
The purpose of this presentation is to increase awareness of the importance of being disaster prepared and ready. All healthcare workers should be prepared for any disaster. RNs must be self-reliant and educated in disaster training in order to not only survive a disaster but to help decrease mortality and morbidity of coworkers and patients.

Research Questions/Hypotheses:
Will RNs who are disaster trained and prepared have a decrease in patient mortality and morbidity than RNs who are not trained?

Significance:
Given the current world-wide events, and increase in natural disasters, RNs must become educated in disaster preparedness and readiness to be effective team players in the community during a disaster.

Methods:
This study is ongoing. The research design will be a longitudinal design. Two groups of RNs, one group will be trained in disaster preparedness and readiness.
by utilizing a three day course; and the other group will not receive any training. A level 2 hospital will be the site for the drill and both groups will be examined and monitored for effectiveness and efficiency. Lessons will be learned from this exercise for ongoing improvement and future exercises.

Findings:

Hopefully, the findings will support the fact that all RNs need and require disaster preparedness and training with ongoing drills and frequent exercises to maintain a state of readiness.

Discussion:

As stated, this is ongoing research. All RNs should be trained and ready for any disaster. All military nurses and healthcare workers train as if "it is the real thing"; shouldn't civilian healthcare workers do the same?

Research Completed: No
Abstract History: 
Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure: 

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

Submitted By:

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Abstract ID: 121

An Evaluation Study of Student Outcomes in an Introductory Nursing Research Course: Hybrid and Internet-only Instruction

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Student Level:
Purpose/Aims: To evaluate student outcomes in an introductory nursing research course with those students who agree to participate in the study, randomly assigning students to an internet-only section or to a hybrid section.

Research Questions/Hypotheses:
Undergraduate baccalaureate nursing students who receive hybrid instruction in an introductory nursing research course will: 1. Demonstrate higher performance on assignments as measured by assignment evaluation criteria. 2. Report more correct answers on the post-test assessment of nursing research knowledge. 3. Report higher satisfaction on the final course evaluation.

Significance:
There is a lack of evaluative research on the outcomes of on-line instruction, especially student outcomes. It is not known what type of course (s) should or should not be taught online. This study compared student outcomes with internet-only instruction compared to hybrid (online and in-class) instruction.

Methods:
During a summer session in 2006, undergraduate nursing students (N = 40) were registered for an internet-only introduction to nursing research course. All students were recruited for the study during an in-class orientation. Students who agreed to participate in the study (n = 20) were randomized into the internet-only (n=10) or hybrid (n=10) sections utilizing a table of random numbers. Students in the hybrid course attended 4 two-hour face-to-face class sessions. All participants completed a demographic profile form, the same course assignments, post-test and course evaluation. The only instructional difference between the two sections was that the internet-only participants received only on-line instruction and the hybrid participants received on-line as well as face-to-face sessions with the instructors.

Findings:
Preliminary statistical analysis does not show a significant difference between the two groups in regard to performance outcomes. It is projected that analysis of the course evaluation will show improved satisfaction in the course for the hybrid section.

Discussion:
One participant withdrew from the study due to lack of time available to attend the 4 face-to-face sessions in the hybrid section.
Abstract ID: 130

Preparing Future Nurses for Tobacco Dependence Treatment

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Abstract Information

Presentation Preference:
SNRS Podium Presentation

Willing To Submit Poster?
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Abstract Categories:
Interest Group: Education
Thematic Areas: Adult Health

Purpose/Aims:
To test the effects of "Rx for Change: Clinician-Assisted Tobacco Cessation" on baccalaureate nursing students’ perceived knowledge, confidence and skills in providing tobacco dependence treatment (TDT).

Research Questions/Hypotheses:
1) Students who participate in the intervention will demonstrate increased knowledge, confidence and skills. 2) Students receiving the 6-hour intervention will demonstrate increased knowledge, confidence and skills compared to those with two hours.

Significance:
Tobacco use is the leading cause of preventable disease and death in the United States, contributing to nearly 500,000 deaths each year. Kentucky leads the
nation in smoking prevalence among adults. Nurses are effective interventionists for TDT, but they lack education related to TDT. Nursing students receive inadequate education related to TDT, resulting in lost opportunities for tobacco cessation.

Methods:
The study was a quasi-experimental design with 103 undergraduate nursing students at a large public university in a tobacco-producing state. Forty-seven seniors received the 6-hour intervention; 56 sophomores, RN-BSN, and 2nd degree students received 2 hours. A pilot study evaluated acceptability of the intervention and measures (n=77). Students completed self-report surveys pre- and post-intervention.

Findings:
At baseline, 61% of both groups rated their ability to help patients quit smoking as poor or fair. Almost ¾ reported they were not at all or not very confident in counseling patients. Most participants were female (88%) and use of tobacco products was similar across groups at 14.6%. Knowledge, confidence and skill showed significant improvement post-intervention for all groups. Scores did not differ for those receiving the 2-hour vs. 6-hour intervention.

Discussion:
Undergraduate nursing students in a tobacco-producing state have a low perception of their readiness to assist patients with TDT. "Rx for Change" had a positive impact on perceived knowledge, confidence and skill for providing TDT to patients. Although six hours is recommended, outcomes did not differ based on duration of the intervention.

Research Completed:
Yes

Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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Abstract ID: 141

Making Clinical Assignments: What are Nursing Schools Doing?

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The purpose of this national randomized exploratory study was to identify, describe and analyze the approaches used in formulating clinical assignments as described by baccalaureate, associate and licensed vocational/practical nursing programs in the United States. The overall aim of the project was to obtain current data relating to this aspect of clinical education.

Research Questions/Hypotheses:

• What is the current state of approaches for formulating clinical assignments in undergraduate nursing education?
• Is there an association between the method of formulating clinical assignments and student outcomes?

Significance:

According to the AACN’s Essential Clinical Resources for Nursing’s Academic Mission (1999), faculty must periodically re-evaluate and re-examine the efficacy of traditional approaches to clinical nursing education. There is a need to evaluate the methods presently used with the goal of designing more effective models.

Methods:

For this study, the researchers constructed a survey that was distributed to a random sample of NLNAC-accredited associate degree, baccalaureate degree and licensed vocational/practical programs within the US.

Findings:

The majority of respondents (78%) report that faculty make clinical assignments for students regardless of program type or level within the curriculum. Across all programs, as students matriculate in their undergraduate nursing program, the results indicate that faculty members are less involved in the formulation of clinical assignments.

Discussion:

The investigators anticipated a variety of methodologies used in formulating undergraduate nursing student clinical assignments. This research study sought a greater understanding of the current methods of formulating clinical assignments being used by nurse educators and the rationale for the approaches. Exploring this long-held tradition in nursing education has provided valuable insight about current practices within the realm of clinical nursing education. More research designed to discover and describe best practices in formulating clinical assignments for nursing student is needed.

Research Completed:

Yes

Abstract History:

- This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
- Details: National League for Nursing 2006 Educational Summit

Financial Disclosure:

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FDA Disclosure:

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Creating a Diverse Professional Nursing Workforce through Learning and Practice Communities

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Purpose/Aims: The purpose of this project is to increase the professional nursing workforce through learning and practice communities.

Research Questions/Hypotheses: By providing educational and economic support to educationally and economically disadvantaged nursing students, there will be an increased rate of: a) retention; b) graduation; c) cultural diversity in the professional nursing workforce in defined areas of need.

Significance: The geographic area served by the three year project is primarily rural, medically underserved, and contains areas of nursing shortage. Students from this area are educationally and/or economically disadvantaged; therefore at risk for academic failure.

Methods: A mixed methodological approach will be used including correlational and one group pretest-posttest quantitative methods and phenomenologic qualitative methods. Anticipated sample size is 121 students, via a power analysis. Data collection includes pre and post surveys, community surveys, interviews, focus-group questions, and questionnaires. Data will be analyzed using descriptive and correlational statistics, t-tests, ANOVA, and repeated-measures statistics to determine if anticipated changes in outcomes stem from project implementation. Regression models will be created to predict variables accounting for outcomes variance. Qualitative data from questionnaires and focus groups during peer mentoring will be analyzed using common themes including barriers and facilitators. Limitations are threats to internal validity including selection bias of the sample, history, testing, and instrumentation due to surveys with undocumented reliability and validity. Activities to meet goals include academic and financial support of students; creation of learning communities, workshops on critical thinking, test-taking, and computer skills; tutorial assistance in selected subjects; peer mentoring; NCLEX preparation; enhanced clinical experiences; faculty development focusing on disadvantaged students; and collaboration with healthcare agencies to promote externships.

Findings: Rates of student enrollment, retention, graduation, and return to disadvantaged county are anticipated to increase. This project is designed for dissemination and replication by other Universities seeking to increase enrollment and retention in nursing programs.

Research Completed: No

Abstract History:

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

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Abstract ID: 164

ATTITUDES OF STUDENT HEALTH PROVIDERS

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Abstract Information

Presentation Preference: SNRS Poster Presentation

Willing To Submit Poster?
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Abstract Categories:
Interest Group: Education
Thematic Areas: Healthy People 2010

Purpose/Aims:

The purposes of this study were to: (1) examine attitudes toward obese clients, using the Attitudes Toward Obese Clients (ATOC) scale, from four groups: Family Nurse Practitioners Students (FNPst), Medical Students (Medst), Physician Assistant Students (PAst), and Nutrition Students (Nutrst); (2) explore the association between the students’ perceptions of their weight using the Attitudes Toward Personal Overweight (ATPO) scale and their ATOC scores ; and (3) identify the strongest correlates of students’ scores on the ATOC.

Research Questions/Hypotheses:

Significance:

Obesity is often associated with negative stereotyping by health care providers. Such attitudes may interfere with weight management approaches. It is unclear if negative attitudes begin in the educational arena.

Methods:

The sample consisted of 64 FNPst, 58 Medst, 37 PAst, and 61 Nutrst enrolled...
at the University of Kentucky. They completed a demographic survey, the ATOC, and the ATPO. A 5-point Likert scale was used for the ATOC and ATPO. Scores on the 37 item ATOC range from 37 to 162; scores above 148 reflect a positive attitude towards obese persons. Scores on the 15 item ATPO range from 15 to 75; scores above 60 reflect a positive attitude toward personal weight.

Findings:
Cronbach’s coefficient alpha for the ATOC was .93 and for the ATPO .67. Scores for the ATOC and the ATPO indicated an overall negative attitude toward the students’ personal weight and that of obese clients. The one-way ANOVA testing for differences in mean ATOC scores among the four groups was significant ($F = 5.372, 3 \text{ df}, p = .001$). Post hoc tests revealed Nutrst were more positive toward obese clients than either FNP or Medst.

Discussion:
Negative attitudes of students across disciplines toward obese clients must be addressed. Frustration in providing weight management counseling was identified. Strategies must be designed to empower both students and clients in this difficult process.

Research Completed: Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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Abstract ID: 192

THE MEANING OF THE EXPERIENCE OF DOCTORAL COURSE WORK FOR MIDLIFE FEMALE NURSING FACULTY

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Abstract Information

Presentation Preference: SNRS Podium Presentation

Abstract Categories: Interest Group: Education
Thematic Areas: Methods

Purpose/Aims: The purpose of this qualitative study was to describe the meaning of the experience of doctoral course work in nursing for mid-life female nursing faculty.

Research Questions/Hypotheses:
What is the meaning of the experience of doctoral course work for midlife female nursing faculty?

Significance:
Today's media is filled with predictions of a worldwide catastrophic nursing shortage. The unprecedented shortage of doctorally prepared nurse educators accelerates this threat.

Methods:
After obtaining Institutional Review Board approval for the study, semi-structured interviews were conducted with 10 self-selecting female full-time nursing faculty, ages 40 to 60, from the southern region of the United States who had completed at least 12 semester hours of doctoral course work but had not yet taken comprehensive exams; narrative records were also examined. Data analysis utilized van Manen's method (1984) of Hermeneutic Phenomenology; a feminist methodology was utilized.
in seeking to give voice to a heretofore unheard population through the telling of their stories. Regarding rigor, credibility was enhanced by thick descriptions and by member checks following data analysis. Fittingness was supported by exemplars and quotes illustrating the themes. Auditability was addressed by audiotaping interviews, verifying transcriptions were verbatim, and researcher journaling.

Findings:
Participants spoke openly and passionately about their journey toward the nursing doctorate. Six essential themes emerged: Metamorphosis or the transformation of self, sacrifice including neglect of self-care, support from others, perseverance as persistence despite adversity, juggling multiple roles (including the superwoman ethos of trying to meet unrealistic expectations), and the imposter phenomenon, common in women who excel, of feeling like they are not good enough to be recognized as such.

Discussion:
Recommendations were made for prospective doctoral students including beginning doctoral study earlier in their careers. Administrators of doctoral programs need to make course work/classes more student-friendly, while policy makers should increase the availability of funding for doctoral study.

Research Completed: Yes
Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
-Details: MS Nurses Association conv Nov 05
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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Grants/Research Support: Y
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FDA Disclosure:
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Abstract ID: 196

**International Nursing Students' Perception of the Nursing Curriculum at an American University**

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The aim of this pilot study is to obtain useful information to describe the experiences of international students in the nursing curriculum at a southeast Alabama state university.

What are the perceptions of international students enrolled in the nursing curriculum at a southeast Alabama state university?

International students are entering American universities at a rapid pace. In 2004-2005, more than 565,000 international students were enrolled in US universities. Schools of nursing are experiencing record. According to the American Association of Colleges of Nursing, enrollment in generic BSN programs increased 13% in the 2004-2005 academic year. Over 32,000 students were denied entry into such programs because of an inadequate supply of nursing faculty. Enrollment in health professions by international students increased 2% in the same time frame. Research has been conducted to gather information about international students perceived needs for success in American universities. Other studies outline apparent qualities and support services that lend themselves to increasing success in the international student. Few studies have been identified that address qualities and services in international nursing students. This study will fill this gap in the current literature.

A qualitative study is being used to gain information related to international students and their experiences in American nursing school. The use of qualitative interviews has been successful in uncovering information in other studies using international students. Therefore, individual interviews will be used to guide this pilot study. Since there are a small number of international students enrolled in the nursing curriculum, a purposive sampling technique has been employed. Students who were invited to participate invited other students to join. A total of 10 students are expected to participate in this study. Data will be analyzed using content analysis.

Ongoing study.

Ongoing study.

Yes

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

Cleared: Yes

Accepted Terms: Yes

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Psychometric Properties of the Burnout Inventory for Nursing Educators

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To test the reliability and validity of the Burnout Inventory (BI) developed for nursing educators.

What are the reliability and validity of the BI?

Currently used instruments for burnout may not fully measure nursing educators’ burnout since nursing educators perform roles of nurses as well as educators, and that is different from general teachers.

The BI (30 items) was developed based on literature reviews. 253 Taiwanese nursing faculties (females with mean age of 35.48) participated in the study. Most of them were master-prepared lecturers and were at current position for an average of 6.87 years. In addition to didactic teaching, 82.6% of them directed students in clinical practice. The reliability of the BI was tested with Cronbach’s alpha and item-total correlation, whereas factor analysis and known-group comparison were for validity.

The Cronbach’s alpha for the BI was .91. Item-total correlation coefficients ranged .28-.70 except for item 15 (was .07). After factor analysis, six components were extracted and explained 60.83% of the total variance of burnout. The sixth component consisted only item 15 and explained 3.42% of the variance of burnout. Another factor analysis was done by excluding item 15. Six components were extracted and explained 61.94% of the variance of burnout. They were named depersonalization/withdrawal (8 items, alpha=.86), lack of achievement (7 items, alpha=.86), tiredness/exhaustion (7 items, alpha=.86), nervousness (2 items, alpha=.68), disappointment (3 items, alpha=.65), and pretending not to see (2 items, alpha=.75). Participants who considered to leave current job had higher level of burnout (t[244]=3.58, p<.001) than those who wanted to stay.

The reliability and validity of the BI were supported. Nervousness, disappointment, and pretending not to see were components specific to nursing educators. More studies are needed to test psychometric properties of the BI with educators of cultural diversity, to examine factors of burnout, and to design interventions to decrease level of burnout.

Accepted Terms: Yes

Submitted By: chingyuus@gmail.com
The purpose of this study was to consider the effect of a multimethod teaching strategy on nursing students’ content knowledge and critical thinking.

Research Questions/Hypotheses:
To determine if differences exist in knowledge and critical thinking between groups of students who were exposed to traditional lecture only as compared to those who engaged in a multimethod teaching strategy. The study considered how age and grade point average at the onset of the course affected the acquisition of content knowledge and critical thinking skills.

Significance:
The use of multiple methods in nursing education may enhance knowledge as well as the critical thinking skills necessary to be safe practitioners. This type of study is significant to nursing education in order to produce proficient entry level professionals.
A convenience sample of 75 students who were enrolled in a maternity nursing course in the fall of 2003 and students enrolled in the same course in the fall of 2005. Aggregate data measuring content knowledge and critical thinking skills were collected from course records, including information from the Health Education System Incorporated (HESI) maternity specialty exam. Test scores from the HESI maternity specialty exam were analyzed using a one way analysis of variance. Multiple regression was used to determine how age and grade point average at the onset of the course affected either content knowledge or critical thinking skills.

Findings:

No statistical significance was noted in the HESI Total Maternity and Critical Thinking Scores between groups, although a correlation was found in GPA and both content knowledge and critical thinking. An increase in the HESI pass rate was found among those participating in the multimethod course.

Discussion:

There was no statistically significant difference in mean scores between lecture and multimethod teaching strategies. A significant difference was found in the HESI pass rate in the multimethod group.

Research Completed: Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:

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Non-Exclusive License:

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Cultural Encounters: Developing Cultural Competency in Family Nurse Practitioner Students

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Abstract Information
Presentation Preference:
SNRS Poster Presentation

Abstract Categories:
Interest Group: Education
Thematic Areas: Family Health

Purpose/Aims:
To compare processes and perceptions of Family Nurse Practitioner (FNP) students experiencing a cultural encounter intervention (CEI) throughout their educational program.

Research Questions/Hypotheses:
Will a cultural encounter intervention used during an educational FNP program precipitate a heightened level of cultural competency that is transferred to care of diverse populations?

Significance:
Cultural competence is an evolving concept and Nurse Practitioner programs across the country assert it as a behavior expected of their graduates. Cultural competence requires an intense examination of self as well as the health and illness perspectives of clients and families receiving care. Within this perspective, the cultural uniqueness of the client becomes a major focus of care that often disrupts the student’s previous assumptions and leads to further exploration. Cultural encounters with clients from varied cultures generate a wide variety of processes and perceptual differences that may affect quality of care.

Methods:
In this descriptive exploratory study, Campinha-Bacote Model of Cultural Competence is used as the conceptual framework. Students entering the master’s program receive a pre-test, a learning module, and a series of self-interview questions, which are taped recorded privately by each student. Students return the pre-test questions and the taped self-interview, which are stored in the research office. During the final semester and with the completion of the cultural learning module, the taped interviews are returned to students. Students complete a post-test and review their taped self-interview. Following the review, students describe the transformation that has taken place over the two year period. Pre and post-test scores will be analyzed. Differences will be displayed in their pre and post-test scores and in the content analysis of their taped self-interview.

Findings:
Completing data analysis.

Discussion:
It is anticipated the use of the CEI will serve to strengthen cultural encounters, increase awareness and responsiveness of the health and illness experience, and improve cultural competency of the practitioner.

Research Completed: Yes
Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
FDA Disclosure:
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Non-Exclusive License:
Accepted Terms: Yes
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INDEX FIRST PREVIOUS NEXT LAST
TRANSFORMATIVE LEARNING EXPERIENCES FOSTER CULTURAL COMPETENCE IN NURSING STUDENTS

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The purpose of this study is to evaluate a cultural course and an international service-learning experience as transformative experiences in improving cultural competence in nursing students.

Research Questions/Hypotheses:
1. Is there a difference in the cultural competence of nursing students pre and post a cultural nursing course and post an international service-learning trip? 2. What are student’s perceptions of how these experiences have affected their nursing care post graduation?

Significance:
Nursing faculty have the responsibility to adequately prepare students for life and work in a world of increasingly interdependent cultures and peoples. Even though many strategies have been implemented in nursing curricula to increase cultural competence, results indicate a more transformative educational model is needed to meet the demands of a multicultural global society.

Methods:
Campinha-Bacote’s (2003) cultural competence inventory was administered pre and post an elective nursing course and post an international service-learning trip to Ecuador. Repeated measures analyses were used to analyze component competency outcomes pre-course to post trip. An emailed questionnaire allowed students to provide anonymous feedback on how the experiences influenced their nursing care 6 months to 2 years post trip. Descriptive and content analyses were used to describe student perceptions.

Findings:
Seventeen students from two classes participated in the course and fourteen went on the trip. The course had the greatest impact on improvements in cultural knowledge and skill. Cultural awareness, encounters and desire were impacted differently by the course and trip related to pre-course level and engagement in the course. Student perceptions revealed they perceived the trip had the greatest influence on their interactions with clients from other cultures as well as their desire to continue to improve their cultural competence.

Discussion:
Student outcomes revealed the positive impact transformative educational experiences have on cultural competence. Discussion includes curricular implications for broadening the experience and benefits and problems related to international collaboration.

Research Completed:
Yes

Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
-Details: Part at FACES Clinical Sessions

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes
Overcoming distance barriers: Cooperative m-learning with nurse practitioner students

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The purposes of this project included the following: explore ways m-learning were used to enhance learning in didactic and clinical nursing education for students at multiple locations, and determine the relationship between technology-based m-learning and students’ learning styles.

Research Questions/Hypotheses:
- The research examined the following questions: 1) Do cooperative m-learning techniques promote learning? 2) Do interactive m-learning techniques promote learning? and 3) Do learning styles influence preference for technology-based learning?

Significance:
Family and pediatric nurse practitioner students (NPS) from two geographically distanced universities participated in cooperative m-learning to complete educational projects that were course requirements. Healthcare software was loaded on students’ personal digital assistants (PDAs) for use in classroom and clinical settings. Students were paired or grouped with at least one student from another university and utilized peer-to-peer (P2P) technology from Skype™, that allows voice and written communication via wireless environment, to connect to complete the assignments. They also completed asynchronous case study evaluation in which pertinent subjective and objective information was presented via video podcasts that could be viewed on PDAs.

Methods:
Evaluation of the project involved focus groups conducted at the end of each semester and qualitative analysis.

Findings:
Participants conveyed that m-learning was effective after they had accomplished the learning curve necessary to navigate the communication tool. They found access to NPS with differing specialties valuable when completing the assignments. This was particularly true for the less experienced students, who especially
benefited from the synchronous case study. Participants also relayed that PDAs and applicable software were important assets in both the classroom and clinical settings to access evidence-based information conveniently and quickly. Students overwhelmingly reported benefit from discovering their learning preferences via the Learning Styles Inventory.

Discussion:
M-learning not only helps prepare nurse practitioner graduates with experience in meeting clinical challenges, but also with technology proficiency that is essential in today’s healthcare environment.

Research Completed:
Yes

Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
-Details: Pilot study of this project was accepted/presented at NONPF Annual Conference, April, 2007

Financial Disclosure:
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Yes

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Y
National League for Nursing Educational Research Grant
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Consultant:
Stock/Shareholder:
Speaker's Bureau:
Other Financial or Material Support:

FDA Disclosure:
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Non-Exclusive License:
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Preparing the Future Nursing Workforce: A 2-Year Longitudinal Study Examining Stressors and Nursing Student Success

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Abstract Information

Presentation Preference: SNRS Symposium

Willing To Submit Podium? Yes
Willing To Submit Poster? Yes

Abstract Categories:
Interest Group: Education
Thematic Areas: Methods

Purpose/Aims:
The current nursing shortage challenges every nursing school to not only increase enrollment but to retain students and reduce attrition. The overall objective of this study is to identify the type, extent, and temporal sequencing of various stressors associated with nursing student academic success. Personal, interpersonal, and environmental stressors will be measured in baccalaureate nursing students over a 2-year period.

Research Questions/Hypotheses:
The study, which began in the Fall of 2006, will investigate the relationship between personal, interpersonal, and environmental stressors and nursing student success as measured by grade point average, absenteeism, and attrition.

Significance:
This will be the first longitudinal study, reported in the literature, that will provide crucial data on the relationships between personal and interpersonal stressors and success in nursing school and eventually success on the job.

Methods:
A longitudinal, repeated measures, cohort study recruited junior I nursing students (N=132) from the Texas Woman's University, College of Nursing, Houston and Dallas campuses. Nursing faculty and graduate student investigators (n=54) on both campuses conducted face-to-face baseline interviews at the beginning of the program and then each semester for 2 years. Participants received a $20 cash incentive/interview. Instruments include: demographic data form, SF-12, Pittsburgh Sleep Quality Index, Brief Symptom Inventory, Posttraumatic Stress Disorder Checklist, Stress Resiliency Profile, Psychological Empowerment Instrument, Student Nurse Stress Index, Perceived Faculty Support Scale, Verbal Abuse Scale, and Student Satisfaction Survey.

Findings:
The sample is full-time students (91.1%), age 26.5 years, mostly female (89.5%), married/committed relationship (67%), and U.S. born (70.2%), Caucasian (42.7%), Asian (20.2%), African-American (18.5%), and Hispanic (18.5%). The answer to, “What language did your mother speak to you when you were a child?” was English (59.7%) or non-English.

Discussion:
Using data from this study, stress mediating interventions can be developed and tested. It is possible nursing school curricula could teach stress mediation and better prepare graduate nurses for their professional work.

Research Completed: No

Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
-Details: STTI Research Conference in Vienna, Austria, July 2007; only a small part

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:
Cleared: Yes
Abstract ID: 312

The challenges of obtaining truly informed consent from obstetric participants: student project. Corresponding author Funded by NIH, National Institute of Nursing Research, Award F31 NR009611

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Presentation Preference: SNRS Poster Presentation

Abstract Categories: Interest Group: Education
Thematic Areas: Methods

Purpose/Aims: The study involves piloting consent forms to assess in terms of wording and comprehension.

Research Questions/Hypotheses: The purpose of this project was to pilot consent forms prior to use in dissertation research, and to introduce undergraduate nursing students to the research process.

Significance: Consent forms should be clearly written, and have the potential to increase the participants’ understanding without sacrificing comprehension of the research. The project reported in this paper has been an attempt to introduce and involve undergraduate nursing students to the research process, and to pilot consent forms, prior to the dissertation study.

Methods: Evaluation of the consent forms was achieved by the tool: The Informed Consent
Questionnaire formulated after a literature review on 11 women of childbearing age. The questionnaire consists of a 5 point Likert scales, ascending from (1) strongly disagree, to (5) strongly agree.

Findings:

The overall mean for the 10 – item questionnaire was 4.34 ± 0.64. The Strongest points to the consent forms as identified by the questionnaire included items: 1) the consent form is easy to read and understand (4.64 ± 0.51), and 2) participation is voluntary (4.73 ± 0.47). Weaker points included items: 4) not feeling coerced (forced) to participate (4.0 ± 0.89), and 7) 20 weeks a convenient time to be recruited into the study (3.64 ± 0.92).

Discussion:

The results provide information to the wording and comprehension of consent forms (English & Spanish) used in the corresponding author’s dissertation study. The data from this pilot research endeavor was used for a class assignment for an undergraduate course (Nursing Research 2), for which three students wrote a paper after completing a literature review on issues relating to obtaining consent, seeking IRB approval, obtaining consent, and evaluating the process.

Research Completed: Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:

Non-Exclusive License:

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Accepted Terms: Yes

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Centralizing Clinical Placements to Facilitate Student Enrollments

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Abstract Information

Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? Yes

Abstract Categories:
Interest Group: Education
Thematic Areas: Workforce Issues

Purpose/Aims:
The purpose of this study was to evaluate the usability, accessibility, satisfaction, and regional saturation of the Computerized Clinical Placement System (CCPS), a web based clinical placement system.

Research Questions/Hypotheses:
What is the level of satisfaction with the CCPS experienced by clinical placement coordinators as compared with the manual system of clinical placements? What is the saturation of use of the CCPS in the region?

Significance:
The forecast of a nursing shortage will have a substantial impact to our nation’s healthcare system in the coming years. Some predications have stated that this shortage may reach 800,000 to more than a million by the year 2020 resulting in a mandate that schools of nursing increase enrollments. Hampering increasing enrollments is the current manual process used for clinical placements of nursing students which does not provide an efficient and overall view of the available resources needed to address significant increases in clinical placement requests.

Methods:
The study used a pre-post descriptive, evaluation design with a survey instrument to evaluate usability, accessibility and satisfaction of the CCPS. The sample was determined by the number of schools of nursing and clinical agencies who provide clinical experiences in a 13 county region. 115 schools of nursing (n=19) and clinical agencies (n=96) were targeted for the sample. A pre and post evaluation survey was done to determine usability, accessibility and satisfaction with the system. Saturation was evaluated by number of subscribed institutions. Data were analyzed using SPSS to evaluate the pre/post data and computations of saturation in the region. Limitations include level of participation by schools and clinical agencies.

Findings:
Study to conclude December 2007.

Discussion: 
The benefits to transitioning to an online, database-driven system include providing an inventory of clinical placement availability in the area. It is not possible to determine the exact percentage of available clinical spots in the region currently.

Research Completed: Yes

Abstract History:

-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

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Exploring Attitudes and Knowledge of Aging in Nursing and Non-Nursing Students

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Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Education
Thematic Areas: Adult Health

Purpose/Aims: To determine attitudes and knowledge of aging in nursing and non-nursing students.

Research Questions/Hypotheses: What is the extent of nursing students’ knowledge of aging compared to non-nursing students? What are nursing students’ perspectives toward older adults compared to those of non-nursing students?

Significance: Increasing life expectancies and more years spent living with chronic illnesses mean that more older adults will require nursing care. Research shows that nursing students tend to have rather limited knowledge and negative attitudes towards older adults, preferring not to work with them.

Methods: This was an exploratory cross-sectional mixed methods study involving undergraduate nursing and non-nursing students. Demographic information, Palmore’s Facts on Aging Quiz (FAQ), and the Perspectives on Caring for Older Patients Scale (PCOPS) were administered. Power analysis indicated for a moderate effect size, 110 participants were needed. Descriptive, correlational, regression, and content analyses were done.

Findings: Most participants were White females. Mean age was 19.6 years (non-nursing) and 25.6 years (nursing). Content analysis was done on the successful aging descriptions; ten categories were identified. Descriptions tended to be uni-dimensional. Nursing students scored significantly higher on the FAQ and PCOPS. PCOPS scores for either group tended to be higher than FAQ scores.

Discussion: Nursing students’ greater knowledge and more favorable views of aging are encouraging and exceed the reported norms. However, mean percentage of correct responses for either group (47% and 42%) could be increased. While both student groups had moderately favorable perspectives on caring for older adults, they had knowledge deficits. These findings may be used to identify areas where more emphasis is needed in aging courses. The descriptions of successful aging are particularly salient; there is little in the literature about younger adults’ views on successful aging. The primarily White, female composition of the sample is one limitation; future research in a more diverse sample may be enlightening.

Research Completed: Yes

Abstract History: -This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

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Critical Incident Management by Baccalaureate Nursing Students Using High-Fidelity Human Patient Simulation

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Abstract Information

Presentation Preference: SNRS Poster Presentation

Abstract Categories: Interest Group: Education
Thematic Areas: Methods

Purpose/Aims: The aims of this study were to 1) evaluate the effectiveness of non-faculty RNs in teaching baccalaureate nursing students management of a simulated patient with pulmonary emboli using high fidelity human patient simulation (HPS) and 2) determine the outcomes of high fidelity HPS relative to student learning, confidence in performance, and satisfaction with the methods.

Research Questions/Hypotheses:
1) Student knowledge and performance in clinical management of pulmonary emboli is greater with high fidelity HPS following lecture than with lecture alone. 2) Non-faculty RNs with specialized training can effectively facilitate high fidelity HPS for baccalaureate students learning clinical management of pulmonary emboli.

Significance: Simulation provides a realistic experience for students to learn complex skills, appropriate interventions, critical thinking, and decision-making in a safe environment. Though high fidelity HPS is presumed to be an effective teaching strategy, there is limited research demonstrating outcome measures of simulation. Furthermore, simulation requires small groups of students which is faculty time and labor intensive. Utilization of specially trained expert clinical nurses may be a rich resource that can be tapped to expand nursing faculty resources and better prepare graduates for the workplace.

Methods: This was a prospective, quasi-experimental, non-randomized controlled study. We have completed the project, which included recruitment and training 65 non-faculty RNs who have facilitated simulation exercises for approximately 400 students. Data entry and analysis is in progress. Outcome measures will include student confidence in performance, satisfaction with the teaching method, and knowledge acquisition using 3 separate instruments; and effectiveness of non-faculty RN performance in facilitation of high fidelity HPS.

Findings: Preliminary data show knowledge acquisition for management of pulmonary emboli was greater when simulation following lecture was used vs. lecture alone (p < 0.05). Additional findings will follow.

Discussion: Simulation methods facilitated by non-faculty RNs may effectively expand faculty resources while better preparing graduates for management of patients experiencing critical incidents.

Research Completed: Yes

Abstract History: -This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

Grants/Research Support: Y
Texas Higher Education Coordinating Board
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DOES KNOWLEDGE AND CONTACT WITH OLDER ADULTS CHANGE ATTITUDES?

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Purpose/Aims:
Thus, the purpose of this study was to determine nursing students’ attitudes toward older people before and after taking a course with a clinical component.

Research Questions/Hypotheses:
The research questions for this study were: Is there a change in attitudes of nursing students about older adults after completion of a didactic and clinical experience? Do younger students’ attitudes about older adults differ from those held by older students before and after completion of a didactic and clinical experience?

Significance:
Although the population of the world is aging and more emphasis is given in nursing education to meet the unique needs of this diverse population, nursing students still possess many stereotypes of older adults. It is imperative that nurse educators assess these negative attitudes and provide meaningful experiences with older adults to help refute these stereotypes.

Methods:
This pre-experimental study was comprised of 40 junior nursing students in a southern accredited baccalaureate nursing program. Students were administered a 32 pairs, seven point semantic differential scale listing two opposing attributes describing older adults. The scale was administered pre and post course content and clinical rotations. Scores will be calculated for all 64 terms, a total of the 32 positively worded pairs, and a total for the 32 negatively worded pairs. In addition, scores will be analyzed for differences between younger and older students. Scores will be analyzed by means of descriptive and inferential statistics.

Findings:
Although analysis is in progress as this course was just completed, preliminary findings indicate significant changes in attitudes in nursing students regarding older adults after completion of their course and clinical. Analysis is ongoing for differences between younger and older students.

Discussion:
Preliminary findings indicate that knowledge and contact with older adults can affect the attitudes of nursing students toward older adults. Implications for education, practice, and research will be addressed.

Research Completed:
Yes

Abstract History:
Financial Disclosure:
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FDA Disclosure:
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Simulation and Pediatric End of Life

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SNRS Podium Presentation

Willing To Submit Podium?
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Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Education
Thematic Areas: End of life issues

Purpose/Aims:
Clinical simulation provides nursing students with opportunities to actively participate in difficult patient care situations in a safe environment. Palliative pediatric care and pediatric deaths challenge the most experienced nurses, yet reportedly few schools of nursing include didactic and clinical lessons to prepare students to meet such challenges. One’s school’s aim to advance the critical thinking and communication skills necessary to address the potentially traumatic event involved role playing by students in a simulated pediatric sudden death setting.

Research Questions/Hypotheses:
How do students rate the clinical relevance and critical thinking benefits of a pediatric sudden death simulation exercise?

Significance:
According to the CDC (2006), nearly 17% of all annual pediatric deaths are unexpected or unintentional. Preparing nurses to manage the patient, family, and staff...
responses to the sudden death needs to start while in nursing school.

Methods:

Testing the value of clinical simulation as an innovative teaching strategy must be based on outcomes learning objectives and research-based evaluation strategies. In this study, evaluation data were collected from a volunteer sample of 41 students who participated in a pediatric sudden death simulation.

Findings:

Using a 5-point Likert rating scale (1=strongly agree and 5= strongly disagree) students rated the clinical relevance of the simulation (M=1.10, SD=.30), the stimulation of their critical thinking and analytical skills (M=1.20, SD=0.46), and overall value of the learning experience (M=115, SD=0.42). Themes found in the narrative comments made by the students suggested this was an "effective learning experience" that "enhanced comprehension" and feeling of "competence for dealing with a real life situation".

Discussion:

Because of the small sample size, a replication of this evaluation research was conducted early summer 2007. Data will be reported in the paper as well as the progress made toward conducting a larger, more rigorous research study using re-test/post-test design.

Research Completed: Yes

Abstract History: Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

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Preparing the Future Nursing Workforce: A 2-Year Longitudinal Study Examining Stressors and Nursing Student Success

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Presentation Preference: SNRS Symposium

Willing To Submit Podium? Yes
Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Education
Thematic Areas: Methods

Purpose/Aims: The purpose of this study is to determine the relationship between certain demographic characteristics of undergraduate baccalaureate nursing students and quality of sleep. Demographic characteristics included nursing courses grades, age, number of children living in the home, hours of employment, commute time to school and/or work, and hours spent studying.

Research Questions/Hypotheses:
R1: Students who report poor sleep quality will have poorer academic outcomes compared to students who report good or very good quality sleep.
R2: Students who report poor sleep quality will have higher levels of non-academic time demands (children at home, employment, long commute) compared to students who report good or very good quality sleep.

Significance: Nursing students report a lack of sleep. This lack of sleep can impair a student and impact the quality of their school performance and ultimately lead to patient safety issues. This abstract will report the relationships between certain demographic characteristics that may interfere with and impact quality of sleep.

Methods: Students (N=132) were interviewed using the Pittsburgh Sleep Quality Index (PSQI) and a demographic data form during the first 2 weeks of starting a nursing program and then re-measured at the end of each subsequent semester while enrolled in nursing school. The PSQI measures subjective sleep quality grouped into 7 component scores: sleep quality, sleep latency, sleep duration, habitual sleep efficiency, sleep disturbances, use of sleeping medication, and daytime dysfunction. A quantitative design using a Pearson product-moment correlation coefficient was used to determine relationships between sleep, academic outcomes, age, number of children, hours of employment, hours of commute to work and school, and hours spent studying.

Findings:
Study findings pending at time of abstract submission.

Discussion:
Study findings pending at time of abstract submission.

Research Completed:
Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

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Improving Nursing Students Knowledge and Attitudes Toward Organ Donation and Transplantation: A Randomized Intervention.

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The purpose of this study was to determine if the use of an educational intervention related to organ donation and transplantation would affect the knowledge and attitude of pre-licensure baccalaureate nursing students.

Research Questions/Hypotheses:
- Does the educational intervention increase knowledge and attitudes toward organ donation and transplantation among pre-licensure baccalaureate nursing students as evidenced by increased knowledge and attitude scores on the posttest?
- Which demographic factors have a greater effect on knowledge and attitude scores within the study population? H1: There will be a significant difference between control group and experimental group knowledge and attitude scores regarding organ donation after exposure to educational intervention. H2: Specific demographic variables such as age, gender, ethnic background, and religion have an effect on knowledge and attitude pre test and post test scores within the study population.

Significance:
Organ donation and transplantation are issues that every nurse will eventually face either directly or indirectly.

Methods:
Participants were asked to complete a pretest and the results were used to adapt an intervention aimed at specific educational needs of the subjects. One week after the pre-test the experimental group was exposed to the educational intervention. The intervention consisted of a one hour lecture and viewing of a DVD depicting an organ procurement procedure. Two weeks after the intervention the pretest questionnaire was administered as a post test to the experimental (n=101) and control (n=84) groups. Following a repeated measures design, SPSS was utilized to analyze the data and evaluate the effect of the educational intervention.

Findings:
Overall a significant increase was found in both knowledge and attitudes after exposure to the educational intervention. Among African Americans there was a notable change in post intervention knowledge, but not in post-intervention attitude.

Discussion:
A one hour educational intervention significantly effected knowledge and attitude. It is feasible to integrate this material into most prelicensure curricula.

Research Completed: Yes

Abstract History:
Financial Disclosure:
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FDA Disclosure:
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Non-Exclusive License:

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Preparing the Future Nursing Workforce: A 2-Year Longitudinal Study Examining Stressors and Nursing Student Success

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Presentation Preference: SNRS Symposium

Willing To Submit Podium?
Yes

Willing To Submit Poster?
Yes

Abstract Categories:
- Interest Group: Education
- Thematic Areas: Methods

Purpose/Aims:
Research indicates that high levels of stress are reported by nursing students with sources including academic difficulty and failure, issues with faculty, financial difficulties, as well as personal problems.

Research Questions/Hypotheses:
Is there a relationship between baccalaureate nursing students’ stress and perceived faculty support?

Significance:
Previous studies have shown that students who complete their chosen program of study perceive higher levels of faculty support than students who withdraw from a program because of academic difficulties or personal reasons.

Methods:
Students (N=132) were interviewed using the Student Nurse Stress Index (SNSI), the Perceived Faculty Support Scale (PFSS) and a demographic data form during the first 2 weeks of starting a nursing program and then re-measured at the end of each subsequent semester while enrolled in nursing school. The SNSI measures stress related to 4 factors: academic load, clinical sources, interface worries, and personal problems. The PFSS measures two types of faculty support: psychological and functional.

Findings:
Preliminary findings indicate that student nurse stress as measured by the SNSI increased significantly from baseline. Student nurses also report a significant decrease in perceived faculty support as measured by the PFS from baseline. There was no significant difference in psychological support, but there was a significant decrease in perceived functional support by faculty.

Discussion:
The implications for nursing education practice include evidence of the impact between nursing student stress, faculty support, and success in school. For example, if certain faculty actions can decrease student stress, then interventions can be designed that promote success.

Research Completed:
Yes

Abstract History:

Financial Disclosure:
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Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

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Preparing the Future Nursing Workforce: A 2-Year Longitudinal Study Examining Stressors and Nursing Student Success

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Student Level:
This study compares gender differences in perceived faculty support in an undergraduate baccalaureate nursing program.

**Research Questions/Hypotheses:**

Is there a difference in perceived faculty support for men compared with women enrolled in an undergraduate baccalaureate nursing program?

**Significance:**

Faculty support is one factor that determines success or failure for nursing students. Communication is a key component of the faculty support and is impacted by conscious and unconscious cues. The interpretation of such cues is uniquely individual; nevertheless, differences may be between men and women. It is reasonable to assume that these differences influence perceived faculty support which in turn influence educational outcomes. Therefore, understanding differences in perceived faculty support between men and women can inform faculty and suggest strategies to improve communication. In turn, creating a learning environment where students, irrespective of gender, feel supported by faculty, enjoy the learning experience, and ultimately graduate.

**Methods:**

Students (N=132) were interviewed using the Perceived Faculty Support Scale (PFSS) and a demographic data form during the first 2 weeks of starting a nursing program and then re-measured at the end of each subsequent semester while enrolled in nursing school. The PFSS measures two types of faculty support: psychological and functional. An independent samples t-test will be calculated to report the findings on two of the study variables, gender and perceived faculty support measured by the Perceived Faculty Support Scale.

**Findings:**

Of the 132 participants, 10.6% (n=14) are male nursing students. Analysis pending at time of abstract submission.

**Discussion:**

Findings from this study will shed light on gender differences in undergraduate nursing education.

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Abstract ID: 492

Bedside Nursing: Will Generation X Fill the Gap?

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Presentation Preference:  SNRS  Student Poster Presentation

Willing To Submit Poster?  Yes

Abstract Categories:  Interest Group: Education
Thematic Areas: Workforce Issues

Purpose/Aims:  The focus of this research proposal is to discover how Generation X nurses choose bedside nursing. The larger issue is how to change educational and employment experiences to promote bedside nursing as a more popular choice for practice.

Research Questions/Hypotheses:  How do Generation X nurses choose bedside nursing over other nursing practice areas?

Significance:  The number of nurses providing bedside nursing care is falling short of the demand, and the trend is that the gap will continue to grow as the population ages. Information gained through this study will increase understanding of Generation X nurses’ attraction to bedside nursing and will provide a starting point for future studies of this problem by contributing descriptive language.
and suggesting variables for further exploration.

Methods:
This research question will be explored using qualitative descriptive methods.

Findings:
(proposal only; study has not been performed)

Discussion:
Many studies have described the dislike of bedside nursing by younger nurses and why nurses leave bedside care. This study is an initial effort to determine why younger nurses are attracted to bedside nursing. Future research may categorize the characteristics of these successful bedside nurses, and the educational and employment experiences that promote the choice of bedside nursing.

Research Completed:
No

Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

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The Engaged Mind: THE BENEFITS OF WIRELESS STUDENT RESPONSE SYSTEMS IN THE CLASSROOM

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Presentation Preference: SNRS   Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Education
- Thematic Areas: Methods

Purpose/Aims:
1. To enhance student learning and critical thinking by increasing student engagement and self-directed learning by using iClicker student response system (SRS).  
2. To encourage development of teaching strategies by faculty to facilitate cooperative learning and interactive engagement in the classroom.

Research Questions/Hypotheses:
How can faculty use technology to enhance student engagement and active participation in the classroom?

Significance:
Improves student attentiveness, participation, critical thinking, and attitudes during delivery of course content by involving every student in the lesson. Encourages students to self-assess understanding of course content while comparing their knowledge level with peers. Faculty can monitor student participation & level of understanding and then modify lecture to enhance relevance of the educational experience.

Methods:
Core faculty team (CFT) will implement the use of iClicker in selected clinical courses. Faculty will provide iClicker SRS in each class, reusing them each semester. Students will be polled using “A Survey of Student Engagement” by S. Ahfieldt et al. which is a valid and reliable tool. Monitor attrition rates, compare average class test scores and end of course grade by fall 2008. CFT will assist other faculty to incorporate the iClicker in their course.

Findings:
Pending present pilot testing

Discussion:
Currently, instructors provide traditional lecture style with minimal student participation. With iClicker: Compatible with current technology. Provides immediate feedback, evaluates student comprehension and remediation of misunderstood concepts. Actively involves students in lecture anonymously. Students gain knowledge more efficiently when actively engaged and involved. iClicker technology encourages students to become engaged in lecture in a non-threatening environment. Allows for students’ self-assessment anonymously and facilitates more focused, meaningful study efforts and self-confidence. Students gain knowledge more efficiently when actively engaged and involved. iClicker technology encourages students to become engaged in lecture in a non-threatening environment. Allows for students’ self-assessment anonymously and facilitates more focused, meaningful study efforts and self-confidence.

Research Completed: No

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:
Cleared: Yes

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Nursing Students' Perceptions of Clinical Critical Thinking: A Qualitative Study

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Student Level:
The purpose of this research is to understand critical thinking (CT) among nursing students with the intention of improving instructional design of nursing curricula. Understanding nursing students’ perspectives about CT will help to improve teaching CT skills in nursing.

The research question is: What are nursing student’s perceptions about critical thinking in relation to patient care situations?

The aim of nursing education is to prepare nursing students to make accurate clinical judgments. Current research suggests that new graduates do not perform CT well. A specialized subset of CT concepts that has yet to be identified may be required for clinical nursing.

A descriptive phenomenological study elicited students’ stories about the CT experiences from a purposive sample of 8 junior Baccalaureate nursing students.

Students indicated that successful critical thinkers had a commitment to solving patient problems because they felt responsible for patient outcomes. This commitment directed students in finding the best answer out of the right answers. Students also reported that the difference between general and clinical CT was acquisition of three major components: information about the situation, nursing knowledge, and clinical experience. If any one part was absent, students were not able to successfully think critically. Knowledge and experience could be ‘borrowed’ by asking questions from someone more knowledgeable. Barriers to CT were perceived as fear of failing the patient and not being the "best nurse" that they could be. Concern for teacher reproach was also an identified barrier.

These findings suggest that critical thinking may be enhanced if faculty teach students how to collaborate with nurse colleagues and create an environment of teaching and acceptance. Furthermore data indicate that teaching notions of responsibility and commitment to the patient will engender perseverance in finding the best solution for patient clinical problems.
Affective Learning in Simulation

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Purpose/Aims:
The purpose of the study is to explore the phenomenon of affective learning by undergraduate students in clinical simulation laboratory experiences.

Research Questions/Hypotheses:
What are the affective learning experiences of undergraduate student nurses in clinical simulation laboratories?

Significance:
Research indicates that students learn values and beliefs about nursing through engagement with patients while performing nursing activities. Do students engage affectively during clinical simulation experiences? Do students attend to the values/beliefs that are embedded in the simulation scenario to respond to these values/beliefs, to value the affective element of the interaction with the human patient simulator (HPS), to organize these values/beliefs into their own cognitive structures through assimilation or accommodation, and to internalize the values/beliefs that enable their being nurses? The answers to these questions could inform simulation design to enhance affective learning.

Methods:
This phenomenological study will employ face-to-face interviewing with open-ended questions to develop a phenomenological description of the affective learning experiences of student nurses in clinical simulation laboratories. The interviews will be audio recorded then transcribed for thematic analysis using constant comparison techniques. After acquiring IRB approval, the convenience sample of typical students will be drawn from level II students at East Carolina University School of Nursing.

Findings:
The findings from the thematic analyses of the students’ transcripts will delineate affective learning patterns and themes within the students' experiences. The patterns and themes may organize into categories of affective learning that will provide data for future comparative studies or grounded theory studies to explore the effectiveness and efficacy of clinical simulation teaching methods for affective domain learning.

Discussion:
Whether students learn in the affective domain during simulation is an important question for nurse educators. Existing research suggests that students do learn within the cognitive and kinesthetic domains within clinical simulation experiences. This study will provide insight into the impact of clinical simulation laboratory on the affective domain learning.

Research Completed:
Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

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Student Nurse Stress and Perceived Faculty Support: A Pilot Study with Foreign born Nursing Students

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Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Education
Thematic Areas: Workforce Issues

Purpose/Aims: The purpose of this study is to describe the essence of stress and perceived faculty support as identified by foreign-born students enrolled in a baccalaureate degree nursing program located in the southwestern United States.

Research Questions/Hypotheses:
1. What are foreign born senior level nursing students’ perceptions of stress experienced in a baccalaureate nursing program?
2. What are foreign born senior level nursing students’ perceptions of faculty support while in a baccalaureate nursing program?

Significance: This research will reveal crucial information regarding student nurse stress and perceived faculty support experienced by foreign-born nursing students. In depth perspectives of foreign-born nursing students have the potential for expanding current conceptualizations of culturally competent education, culturally competent nursing care, and overall increased diversity within the nursing profession.

Methods: Three to four baccalaureate senior level students that have immigrated to the United States within the past 10 years will be recruited by posting study announcements, asking that interested students contact the researcher via telephone. The researcher will ask four screening questions to determine student eligibility. Once eligibility and informed consent is obtained, the principal investigator will use qualitative phenomenological research methods to conduct a focus group, lasting no more than 60 to 90 minutes. To clarify and validate focus group findings, 1 participant from the focus group will be recruited for a follow-up interview. All interviews will be audio-taped and transcribed verbatim. Notes will be analyzed by 2 separate researchers, compared for integrity, then analyzed for common themes, differences, and patterns. For participating in the study, all participants will receive lunch and a $20 gift card.

Findings: There is a marked need to conduct the current study as it will assist educators in recognizing the ongoing inadequacies of foreign born nursing students. Study results will ultimately aid in alleviating the nation’s severe shortage of a culturally diverse workforce.

Discussion: Study In Progress

Research Completed: Yes

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure: Yes

Non-Exclusive License: Cleared: Yes
Improving Online Education: An Engagement Model for Online Interaction

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The purpose of this presentation is to describe The Engagement Model for Online Interaction.

Significance: Online coursework is becoming increasingly popular for both continuing education and degree-seeking students. It has been posited that computer-based education represents a necessary shift in academia because of its ability to create a virtual classroom environment of learners in an asynchronous and cost-effective manner. This innovative technique requires different methodologies as well as a different level of interpersonal communication than in the traditional classroom environment.

Methods: While a review of the literature reveals many tools and techniques for facilitating online learning, a majority is geared toward the perspective of the instructor rather than from that of the student.

Findings: One such example is Community of Inquiry, a framework that outlines three core elements for online learning: cognitive presence, social presence, and teaching presence. Cognitive presence, which is often viewed as the most basic element for success in higher education, includes activities such as critical thinking, and the ability to communicate ideas logically through written and spoken word. Teaching presence is another essential element, and consists of educational design and facilitation of cognitive and social presence. The final element, social presence, is the projection of personal characteristics into the classroom environment; this serves as support for cognitive presence by indirectly facilitating the process of critical thinking carried on by the community of learners.

Discussion: The Engagement Model for Online Interaction provides an adaptation of the Community of Inquiry model that is focused on the student perspective rather than the instructor angle. Further development of this model would involve the development of a student self-evaluation tool as well as a contractual tool to be used in the online classroom to facilitate social presence, therefore improving cognitive presence and overall academic performance.

Research Completed: Yes

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

Submitted By: tlawson@lander.edu
Abstract ID: 678

**Optimism, academic stress, and depression in pre-licensure nursing students**

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**Abstract Information**

Presentation Preference:
SNRS  Student Poster Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Education
Thematic Areas: Health Disparities

Purpose/Aims:
This study aims to explore factors influencing the development of depression among pre-licensure nursing students. College students recently experienced a 56% increase in diagnoses of depression. (American College Health Association [ACHA], 2005). Nursing students perceive their academic stress is higher than students in other disciplines (Texas Higher Education Coordinating Board, 2006). These students are frequently off-campus in clinical agencies and therefore away from campus support services. Academic stress and depression leads to poorer academic performance (ACHA). Therefore, academic stress and depression lowers pre-licensure nursing student retention.

Research Questions/Hypotheses:
Optimistic pre-licensure nursing students experience less academic stress and depression than non-optimistic students.

Significance:
Baccalaureate nursing programs experienced a 13% increase in enrollment (American Association of Colleges of Nursing [AACN], 2005). This increase is insufficient to meet the nation’s needs for registered nurses. Projections of a necessary
40% increase in nursing school enrollment combined with denied admission of 30,000 qualified applicants due to insufficient space in nursing programs are fueling concerns over these programs’ ability to supply adequate numbers of graduates to meet the nation’s needs (AACN). One state, recently, examined retention of students in pre-licensure nursing programs and found only 56% of students complete their programs of study (Texas Higher Education Coordinating Board [THECB], 2006). These figures demonstrate that although there are a large number of applicants and participants in nursing programs, retention of pre-licensure nursing students is a priority to the health of the nation.

Methods:

This is a correlational study examining the relationship between dispositional optimism, academic stress, and depression.

Findings:

This study is in progress. This poster will present the review of literature and planned design.

Discussion:

All pre-licensure nursing students experience academic stress but not all develop depression. The discovery of variables that influence the development of depression is important in developing interventions to reduce the incidence of depression among pre-licensure nursing students.

Research Completed: No

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

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Submitted By:

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Stimulating Interest in Nursing as a Career Choice with School-Age Children

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories:
Interest Group: Education
Thematic Areas: Workforce Issues

Purpose/Aims:
To develop and examine the effects of a career education program to strengthen the future professional nursing workforce by encouraging an interest in nursing as a career choice with school-age children, specifically fifth-grade students.

Aims:
1. Evaluate the effects of a career education program designed to enhance fifth grade students' interest in nursing as a career on interest, competence perception, and desire to help others.
2. Compare the effects of a career education program about nursing on children's interest in nursing as a career for males and females.

Research Questions/Hypotheses:
*What are the effects of a career education program on fifth grade students' interest in nursing as a career choice measured by changes in interest, competence perception, and desire to help other people?*

Significance:
The current nursing shortage, which began in 1998, remains remarkably persistent throughout the nation and is considered one of the most important challenges...
Methods:

Study participants will be recruited from fifth grade classrooms from public elementary schools, resulting in a convenience sample of approximately 100 students. The students will be randomly assigned to two groups, with half of the participants in Group 1 and the other half in Group 2. Both groups will be administered a pretest assessment and begin the four-week education intervention. Upon completion of the intervention, both groups will be administered the posttest assessment. Group 2 will serve as the comparison group for Group 1. The nature of comparisons is within-subjects with group comparison. Data will be collected at two points in time, pre and post experimental intervention. Because of the study’s two measurement points, it is considered a pretest-posttest design.

Findings:

In the process of conducting the intervention.

Discussion:

Will follow intervention.

Research Completed:

Yes

Abstract History:

Financial Disclosure:

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Yes

FDA Disclosure:

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Predictors of NCLEX-RN Success

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Abstract Categories: Interest Group: Education
Thematic Areas: Workforce Issues

Purpose/Aims: The purpose of this ongoing study is to determine factors that contribute to success on the National Council Licensure Examination for Registered Nurses (NCLEX-RN).

Research Questions/Hypotheses: How do race, age, gender, admission testing scores, progression policies, grade point averages, and length of time between graduation and testing predict the success of first time NCLEX-RN examinees.

Significance: Because of the nursing shortage there is a need to increase the numbers of graduates to successfully pass the NCLEX-RN on their first attempt. However, research indicates the first time pass rate is declining. It has become essential for nursing education to identify factors that influence, both positively and negatively, these rates.

Methods:
Intergrated review of the research. Demographic questionaires from all students enrolled in a baccalaurate program.

Findings:
Ongoing and pending.

Discussion:
This study was started with an integrated review of the literature to identify those factors considered to be significant in predicting success or failure on the NCLEX-Rn. Next, Boards of Nursing in each of the 50 states were contacted to identify their pass rate requirements. All students in a baccalaureate program located in a southeastern state were asked to participate in the study. Data including gender, sex, age, previous education, work history, financial and family situations were collected. Data analysis is underway for the first group of graduates who have taken the NCLEX-RN. The study will continue to collect this same data for new students for the next five years. The findings that will be presented will be very preliminary in relation to the total study.

Research Completed:
No

Abstract History:
Financial Disclosure:
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Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

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Abstract ID: 842

Professional Values Held by Senior Level Accelerated Baccalaureate Nursing Students and Traditional Baccalaureate Nursing Students

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Abstract Information

Presentation Preference: SNRS  Student Poster Presentation
Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Education
Thematic Areas: Workforce Issues

Purpose/Aims:
This study was designed to determine whether differences existed in professional nursing values between senior level accelerated baccalaureate nursing students and traditional baccalaureate nursing students. Additionally, the relationships among the independent variables of age, degree option and type of previous degree held by the accelerated student and the dependent variable of level of professional nursing values are described.

Research Questions/Hypotheses:
1. Are there significant differences in professional values between senior students of accelerated baccalaureate nursing programs and traditional baccalaureate nursing programs, measured by the Revised Nurses Professional Values Scale (NPVS-R)? Null Hypothesis: There is no significant difference of professional values between senior students of accelerated baccalaureate nursing programs and traditional baccalaureate nursing programs.
2. Is there a relationship between age of senior students of accelerated baccalaureate nursing programs and professional values measured by NPVS-R? Null Hypothesis: There is no relationship between age and professional...
values of senior students of accelerated baccalaureate nursing programs and senior students of traditional baccalaureate nursing programs. 3. Does previous degree of accelerated baccalaureate senior level nursing students influence level of nursing professional values? Null Hypothesis: There is no relationship between previous degree and professional values among accelerated baccalaureate senior level nursing students.

Significance:

The accelerated nursing programs were designed to rapidly increase the number of practicing nurses, due to today's nursing shortage. The growth of accelerated nursing programs has outpaced any other type of entry level nursing program. However, there is a paucity of research data to support the effectiveness of this option for nursing education.

Methods:

The quantitative study is a non-experimental survey design, utilizing the Revised Nurses Professional Values Scale (NPVS-R), a 26-item instrument with a five point Likert scale, to measure professional values of study respondents. Study respondents personal and professional characteristics data was also gathered.

Findings:

Awaiting return of questionnaires

Discussion:

Pending results.

Research Completed:

Yes

Abstract History:

Financial Disclosure:

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Simulation: An Evaluative Approach

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The purpose of this study is to examine the relationship among senior simulation scores as a predictor in PBDS results upon entry into practice.

Research Questions/Hypotheses:
1. What is the relationship between critical thinking abilities of students educated within the framework of combination simulation and clinical rotation and those with clinical rotation alone?  
2. Can senior simulation results predict PBDS assessment results?

Significance:
While it is well known that critical thinking is difficult to teach, simulation utilizing human patient simulators may serve as a valuable tool in developing critical thinking and clinical competency. Clinical rotation time constraints, increasing student/faculty ratios, and competition for clinical sites are just a few of the hurdles impacting clinical experiences. The complexities of healthcare organizations and safe patient care initiatives have compelled nurse leaders in education and practice to explore innovative teaching/learning strategies. Simulation allows educator latitude in presenting learner appropriate situations that may vary in complexity, yet control for desired outcomes. Long (2005) suggest the use of simulation when providing complex student experiences. According to DelBueno(2005), the Performance Based Development System (PBDS) is a valid and reliable competency assessment system utilized to assess nurses' critical thinking, interpersonal and technical skills.

Methods:
A descriptive correlational design was utilized for the study. Senior nursing students in their clinical capstone course were evaluated in the management of complex patient situations utilizing SIMMAN. Those students hired at a tertiary care center in eastern North Carolina were assessed with PBDS upon hire.

Findings:
Aggregate PBDS results showed improvement for the simulation group with no improvement noted in PBDS results for the clinical rotation group.

Discussion:
While individual senior simulation results were not a predictor of PBDS results, there was improvement in aggregate results. Predictability may be better determined with a larger sample size.

Research Completed: Yes

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

Submitted By: dbrewing@pcmh.com
The Value of Online Post Conferencing in Undergraduate Clinical Nursing Education

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Abstract Information
Presentation Preference:
SNRS Student Poster Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Education
Thematic Areas: Methods

Purpose/Aims:
To synthesize the research related to asynchronous online post conferencing, critical thinking, learning, and satisfaction of faculty and students.

Research Questions/Hypotheses:
Can asynchronous online post conferencing meet traditional criteria for reflection, critical thinking, and learning in undergraduate clinical nursing education?

Significance:
Connects nursing students in a purposeful clinical discourse, linking technology and practice.

Methods:
An extensive general search of the literature was conducted using a variety of databases and supplementary sources. Inclusion criteria were: English, full text, peer reviewed articles. Articles that addressed online interaction but did not include nursing, education, computer dialogue, critical thinking, or faculty were excluded. A total of 465 abstracts were reviewed and 50 documents
Findings:

Online asynchronous discussion meets the criteria for successful clinical post conferencing that is traditionally conducted in face-to-face settings. Research and anecdotal evidence supports its use in undergraduate nursing clinical education. Reported positive outcomes include:  • An enhanced sense of an open, sharing, learning community  • Improved student involvement and leadership  • Improved critical thinking  • Facilitation of learning through reflection  • Course flexibility over time and distance  Online post conferencing has been adapted slowly, and may be related to several factors including:  • Need for more research related to processes and outcomes  • Faculty inexperience with technology and online teaching techniques  • Availability of technical support  • Increased commitments of faculty time and institutional funds

Discussion:

Review of the literature addressing online discussion provides an overview of the strengths, weaknesses, and challenges for students and faculty using online asynchronous discussions. Minimal information was uncovered in the exploration of the current research and literature addressing online asynchronous post conferencing in nursing. Opportunities for technology adoption and research by nursing faculty will provide additional evidence on the potential of this technology in nursing education.

Research Completed:

Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

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Submitted By:

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Interventions to Reduce Medication Errors in Acute Care Facilities

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Abstract Information
Presentation Preference: SNRS Student Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Education
Thematic Areas: Workforce Issues
Purpose/Aims:
The purpose of this abstract is to report the findings of an integrative literature review about effective interventions to reduce medication errors.

Research Questions/Hypotheses:
1. What interventions reduce medication errors in acute care facilities? 2. What educational strategies have been used to reduce medication errors? 3. What institutional practices including interdisciplinary interventions, have been effective in reducing medication errors?

Significance:
Medication errors can destroy the lives of patients, families, and healthcare workers. Healthcare has been identified as a high risk industry with medical errors being the 8th leading cause of death in the United States. Hospital patients are susceptible to at least one medication error per day. The true medication error rate in hospitals remains elusive due to under-reporting by healthcare workers. The most frequent reasons given for not reporting medication errors are non-supportive actions such as blame and reprimands. Medication administration process in acute care involves teamwork among physicians/providers,
nurses, unit clerks, pharmacists, pharmacy technicians, and patients. Nurses intercept only 2% of their medication errors during the actual administration of medications.

Methods:
The integrative literature review will include sources from seminal research that used exploratory and descriptive designs to explore medication errors, survey designs of comparative and correlation work, and experimental studies. Search parameters will include online data bases of CINAH, MEDLINE, Cochrane Library, SCOPUS, and Web of Science, references from research articles, Google Scholar, AHRQ, IHI, and dissertations.

Findings:
Computer technology solutions to reduce medication errors are costly and have not been fully tested for their effectiveness (Koppel et al., 2005). Interventions to reduce nursing medication errors have had mixed results (Greengold, Shane, Schneider, & Flynn, 2003; Pape, 2003). Evidence to support interdisciplinary education is inconclusive (Zwarenstein et al., 2007).

Discussion:
The state of the science on interventions with a focus on interdisciplinary education to reduce medication errors will be identified for future dissertation research.

Research Completed: Yes

Abstract History:
Financial Disclosure:
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Yes

FDA Disclosure:
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Non-Exclusive License:
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Submitted By: mcduffiek@uthscsa.edu
Perceived Barriers and Needs of Hispanic Graduate Nursing Students and Health Care Professionals

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Education
Thematic Areas: Workforce Issues

Purpose/Aims: The purpose of this study, part of a larger study, was to explore Hispanics experiences to gain insight into their under representation in nursing.

Research Questions/Hypotheses:
Identify and describe the perceived institutional barriers and supports among Hispanic students in graduate nursing programs (n=26).

Significance: Minorities are ‘missing persons’ in the health professions in the United States at a time when enrollment of racial and ethnic minorities has stagnated. Less than 2 percent of all RNs are of Hispanic origin (Minority Nurse, 2005). The lack of minority health professionals has been linked to the nation’s persistent
Methods:
A descriptive, qualitative approach, using the adapted Model of Institutional Support (Gray, Bond, and Cason, 2006) provided the theoretical context for content analysis of transcripts. Audio-tapes were transcribed verbatim and coded by two of the study team members and reviewed by the larger research team.

Findings:
Primary themes identified by students and members of Hispanic professional organizations were the need for early recruitment including interpretation of the importance of education to family members, practical assistance with seeking financial aid, technical support, and familial understanding of the demands of graduate education. Additionally, the importance of relationships with fellow students and opportunities for socialization were emphasized. Self-determination, not a part of the original model, emerged as a strong construct which influenced persistence.

Discussion:
Faculty and administrators need to assess program activities for responsiveness to cultural values. An Institutional Assessment tool might be useful in assisting Schools of Nursing to provide needed services from recruitment to graduation. Future studies need to validate the self-assessment tool.

Research Completed: Yes

Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
-Details: SNRS, 2007, additional data presented previously

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
Grants/Research Support: Y
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Faculty Thoughts and Perceptions about Online Teaching

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Abstract Information
Presentation Preference: SNRS Student Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Education
Thematic Areas: Methods
Purpose/Aims: Phenomenologic interviews will be employed to gain a better insight and understanding into the thoughts and perceptions faculty have about the online teaching experience.
Research Questions/Hypotheses:
Faculty will be asked to: 1) Describe their experiences with teaching online 2) Discuss their thoughts and perceptions about the online teaching experience.
Significance:
This study or inquiry will add to the body of knowledge that addresses faculty thoughts and perceptions regarding social presence with online teaching. Analysis of faculty interviews will assist educators in identifying techniques or elements that can be used to improve the quality of education for the student as well as the quality of the teaching experience for faculty who teach online courses.
Methods:
Thus far, much of the research on faculty's thoughts about online teaching have
been acquired via survey or questionnaire methods. Qualitative inquiry can offer rigor to previous findings. Therefore, phenomenologic qualitative interviews will be employed to look at thoughts and perceptions of faculty who teach online courses.

Findings:
The study will be completed by Dec. 2007

Discussion:
This portion will be completed once the study is completed.

Research Completed: Yes

Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

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Submitted By:
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Learning Through Simulation: Limits and Possibilities

Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Education
Thematic Areas: Workforce Issues

Purpose/Aims: The purpose of this study is to explore the knowing in nursing that can be simulated for first year nursing students.

Research Questions/Hypotheses: What is the experience of nursing students following their first exposure to theory guided simulation?

Significance: Simulation research to date has been primarily conducted in other disciplines. Nursing is unique in that it is grounded in caring. Knowing is an expression of caring in the nursing situation. It is not known what ways of knowing in nursing can be simulated using high fidelity simulations.

Methods: Study will be conducted with 40 junior nursing students in a baccalaureate program who are experiencing a high fidelity simulated nursing situation for the first time. Students will be given the opportunity to write about their experience and the data will be analyzed using content analysis.

Findings:
It is anticipated that this study will provide findings regarding the uniqueness of learning nursing in a simulated nursing situation. The analytic approach of content analysis of data will provide guidance regarding the synthesis of knowing which occurs with the nursing situation; specifically categories of knowing that are and are not supported by simulation will be explored.

Discussion:
High fidelity simulation is costly and should only be used if it allows the student to move beyond the empirical skills and competencies which can be represented with task trainers toward a greater understanding of what the essence of nursing is. This study will open a dialogue regarding the challenges of learning nursing which are distinct from learning in other fields.

Research Completed:
Yes

Abstract History:

Financial Disclosure:
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FDA Disclosure:
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Non-Exclusive License:
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Submitted By:
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A Research Literature Synthesis of Health Disparities and Nursing Education in Ghana

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Student Level:
The purpose of this study is to conduct an integrative research review that describes factors relating to health disparities in the country of Ghana, including issues relating to the nursing workforce and nursing education capabilities. This is an initial step in the development of a program of research focused on international nursing education collaboration.

Research questions framing the study include: What factors contribute to health disparities in Ghana? What are the major health problems? What are the nursing workforce issues and nursing education needs?

In response to the United Nations Millennium Development Goals, a 2002-2003 International Council of Nurses' report highlighted the need to support and equip nurses in developing countries. Personal contacts with representatives from colleges in Ghana, requesting help to build nursing capacity, prompted an investigation of the knowledge base regarding health disparities and nursing needs of Ghana.

Preliminary searches of multiple databases (PubMed, ERIC, CINAHL, Nursing & Allied Health Comprehensive, LISTA, and Google Scholar) using 'Ghana' in combination with terms including health problems, health disparities, nursing education, nursing, nursing workforce, and health care needs revealed 79 articles published in the last 10 years. A reference librarian will be consulted to ensure complete identification of publications, including articles, reports, and presentations. Cooper’s (1998) 5-stage process for integrative research reviews will be used to analyze the universe of publications for answers to the research questions.

Initial review indicates an increase in publications following the Millennium Goals focusing on healthcare needs, health problems, and health disparities in Ghana. While publications acknowledge a nursing resource crisis, limited research has focused on nursing education.

Synthesizing the existing knowledge base regarding health disparities, the nursing workforce, and nursing education in Ghana will contextualize the requests from Ghanaian colleges, laying the foundation for a systematic program of research focused on international nursing education collaborations.

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes
Expert, certified neonatal and pediatric nurses' end-of-life practice

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The purpose of this qualitative study was to explore expert, certified (CCRN) pediatric and neonatal nurses’ practice at the end of life and their actions in situations of prognostic conflict.

Research questions guiding the study were:
1. What indicators do participants describe about poor patient prognosis?
2. What do they do when their perceptions of the usefulness of aggressive medical therapies differs from those of the patient, family, physician(s), or peers?
3. What are the reasons they give for their actions?

Significance:
While several studies have documented the problematic state of end-of-life care for hospitalized adults in the United States, less is known about the experience of pediatric and neonatal patients. In addition, the vital role played by nurses in improving end-of-life care and shaping the decision-making processes around the experience has not been fully recognized or explicated.

Methods:
Fifteen participants, certified in either pediatric or neonatal critical care and self-identified as experts were randomly chosen from an inclusive national list obtained from the AACN Certification Corporation. The principal investigator interviewed the participants by telephone. Interviews were audiotaped, transcribed and data analysis employed both narrative and thematic methods.

Findings:
Data analysis yielded several recurring narrative plots. In “presenting a realistic picture”, nurses spoke about assisting family members to reframe their sense of the potential for recovery of their child or infant. Stories of “Trying everything” reflect the nurses’ understanding of the parents’ and child’s need to “go down fighting”. Identified themes included supporting the family, having a relationship with the child, and creating a collaborative unit culture.

Discussion:
The nurses demonstrated caregiver strategies and abilities necessary to improve end of life care in the ICU: the development of a personal relationship with death; the ability to communicate in a compassionate, direct manner; the ability to create a healing environment; and a willingness to express emotion and uncertainty.

Research Completed: Yes
Abstract History:
- This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
Grants/Research Support: Y
SNRS
Abstract ID: 376

Exploring Patient Rights: Toward Further Clarification

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SNRS member? Yes
Student Level:

Abstract Information
Presentation Preference:
SNRS  Poster Presentation

Abstract Categories:
Interest Group: Ethics
Thematic Areas: Methods

Purpose/Aims:
To identify a theoretical definition of patients' rights using the evolutionary method of concept analysis. This analysis aims to clarify the concept of patients' rights and to identify a theoretical definition.

Research Questions/Hypotheses:
Does the literature support a theoretical definition of patient rights with essential attributes, related terms and concepts compare to patients' perceptions of their rights during hospitalization?

Significance:
The notion of patient rights has evolved over the past four decades; from extreme paternalism to shared decision-making. The American Nurses Association Code of Ethics with Interpretive Statements outlines the nurse's obligation to preserve, protect, and support patient rights. In addition, these results will be compared to qualitative data obtained from a previous study using focus group interviews to explore patient's perceptions of their rights.

Methods:
The computerized Cumulative Index of Nursing and Allied Health Literature (CINAHL) and MEDLINE were used to identify the population of published articles in professional...
nursing journals and allied health journals using “patient's rights” as the selected keyword. Data was explored to identify definitions, attributes, surrogate terms, related concepts, references, antecedents, and consequences of patient rights.

Findings :
Content analysis is still in progress.

Discussion :
Identifying an operational definition of patient rights can assist nurses an opportunity to develop plans of care that foster respect for patient's rights. Additionally, nurse educators and clinicians can use the theoretical definition and essential attributes as a framework to evaluate ethical issues. Lastly, the theoretical definition and essential attributes could be used to generate additional research questions.

Research Completed :
Yes

Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
-Details: Poster accepted for SNRS Galviston, 2007 but I was unable to attend due to illness

Financial Disclosure:
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Yes

FDA Disclosure:
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Non-Exclusive License:
Accepted Terms: Yes

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Abstract ID: 474

The Lived Experience of Doing the Right Thing: A Parse Method Study

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Abstract Information
Presentation Preference: SNRS Poster Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Ethics
Thematic Areas: Methods

Purpose/Aims:
The purposes of this research study were to discover the structure of the experience of doing the right thing, to contribute to nursing knowledge, and to expand the knowledge of doing the right thing.

Research Questions/Hypotheses:
The research question was: What is the structure of the lived experience of doing the right thing?

Significance:
Doing the right thing is a universal experience important to health and quality of life.

Methods:
The Parse research method was used to guide this study. Participants were 10 individuals living in the community. The processes of dialogical engagement, extraction-synthesis, and heuristic interpretation were used for data gathering and analysis.

Findings:
The central finding of this study was the following structure: The lived experience of doing the right thing is steadfast uprightness amid adversity, as honorableness with significant affiliations emerges with contentment.

Discussion:

New knowledge extended the theory of human becoming and enhanced understanding of the experience of doing the right thing.

Research Completed: Yes

Abstract History:

Financial Disclosure:

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Yes

FDA Disclosure:

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Submitted By:

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Healthcare Consumers’ Perceptions of Patient Confidentiality

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Abstract Information
Presentation Preference:  
SNRS  Student Poster Presentation

Willing To Submit Poster?  
Yes

Abstract Categories:
Interest Group: Ethics
Thematic Areas: Health System

Purpose/Aims:  
This study sought to clarify consumers’ perceptions of patient confidentiality, specifically, their values and preferences regarding their own protected health information.

Research Questions/Hypotheses:  
What are consumers’ perceptions of who, what, when, where and how confidential health information should and should not be shared?

Significance:  
The Health Insurance Portability and Accountability Act has changed the way that healthcare systems, professionals and consumers think about, safeguard and convey protected health information. This study encouraged healthcare consumers to state their values and expectations about protected health information. Encouraging patients to reflect on their values and to disclose their wishes with healthcare providers will empower patients to be proactive members of the healthcare team and include them in the responsibility of maintaining their confidentiality.

Methods:  

INDEX FIRST PREVIOUS NEXT LAST
Ten participants from the Triad region of North Carolina were asked unstructured, open-ended questions about who, what, when, where and how confidential health information should and should not be shared. Participants were recruited via snowballing until redundancy of information was achieved. Data were analyzed using qualitative content analysis, both with-in case and cross-case analyses, provided a clear and concise audit trail.

Findings:
Participants identified four groups of individuals (family, healthcare providers, work/coworkers and others) with whom information should and should not be shared. Per group, participants wanted information to be shared with individuals closest in relation to themselves, within the most “immediate circle.” Responses lead to development of the relationship target, a visual depiction of who should and should not receive confidential health information. Participants identified what information should be shared, dependant on with whom, where and how information was shared.

Discussion:
Nurses should be prepared to address the individuality of patient preferences for sharing their health information. Use of the relationship target can help patients to clarify their preferences and allow nurses to provide high quality care based on patients’ autonomous choices with respect to legal boundaries.

Research Completed: Yes
Abstract History:
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
Submitted By: anewman1@triad.rr.com
Abstract ID: 183

**HUDDLES: Translating Research into Practice**

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Presentation Preference:  SNRS   Poster Presentation

Willing To Submit Poster?  No

Abstract Categories:  Interest Group: Evidence-based practice/research
                      Thematic Areas: Health System

Purpose/Aims:  The HUDDLES process is thought to affect a health care unit’s teamwork, communication, perceptions of staffing, perceptions of staff autonomy, perceptions of the value of the staff, and perceptions of the value of the patient. This study was designed to confirm the expectations concerning the use of HUDDLES on nursing units within an acute care facility.

Research Questions/Hypotheses:  The specific objectives for this study are: (1.) Determine the key elements encompassed in a HUDDLES experience and (2.) Develop a tool for use to assess the impact of the HUDDLES process on nursing satisfaction.

Significance:  An urban acute care institution has endeavored to address patient safety issues by initiating a process called HUDDLES which is a process adapted from a patient safety project. The process is viewed as a method for improving open communication, empowering team members, and advancing the team environment.

Methods:  The primary investigators (PIs) observed the HUDDLES on three hospital units. Qualitative data were collected related to communication, autonomy, staffing, competent clinical peers, patient safety, value of staff and patients, and teamwork. IRB approval was obtained prior to the implementation. The sample was individuals who were engaged in the HUDDLES process. Following the observation of the actual HUDDLES process, face to face interviews with nursing staff members were conducted and audio taped.

Findings:  The observations and interviews provided valuable information which led to the development of a tool that will assess the impact of the HUDDLES process on nursing satisfaction.

Discussion:  The qualitative study provided the foundation for the next phase of research. The second phase will be a quantitative study utilizing the resulting tool to demonstrate improved communication and nurse satisfaction.

Research Completed:  Yes

Abstract History:
Financial Disclosure:  Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
                      Yes

FDA Disclosure:  Cleared: Yes

Non-Exclusive License:  Accepted Terms: Yes

Submitted By:  carol.boswell@ttuhsc.edu
Abstract ID: 185

Effects of biofeedback relaxation training on hemodynamic control and psychological symptoms among patients with coronary heart disease

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Abstract Information

Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? Yes

Abstract Categories:
Interest Group: Evidence-based practice/research
Thematic Areas: Chronic illness

Purpose/Aims:
To examine whether the biofeedback relaxation (BFR) is effective on the hemodynamic control, peripheral circulation, and psychological symptoms among patients with coronary heart disease (CHD).

Research Questions/Hypotheses:
After 6-weeks of BFR training for patients with CHD, H1. Hemodynamic control will be significantly improved; H2. Peripheral circulation will be significantly improved, H3. Psychological symptoms will be significantly improved.

Significance:
Having an acute coronary event is traumatic, and patients who survived often suffer residual symptoms associated with poor hemodynamic controls and circulation even after surgical and pharmacological interventions. Patients also suffer psychological symptoms that deteriorate patients’ quality of life. BFR may improve hemodynamic controls, circulation and psychological symptoms. This study provides clinicians with an evidence for BFR for CHD patients.

Methods:
Thirty three patients diagnosed as CHD were trained for BFR for two weeks (three times per week, total 6 sessions) and encouraged to keep practicing for 20 minutes everyday at home for 4 more weeks. Systolic and diastolic blood pressure (SBP/DBP), Heart rate (HR), and skin temperature were measured for hemodynamic control and peripheral circulation respectively before and after each session and after 6 weeks. Scores of symptom check list (SCL-90) for psychological symptoms were compared before and after intervention. Data were analyzed by paired t-tests using SPSS PC 12.

Findings:
Both SBP and DBP have been significantly decreased where as there was no significant changes in HR (p<0.001 for both). Peripheral skin temperature has been significantly increased for each session with a larger increment by time (p<0.001 for every session). Total score of the SCL-90 was significantly decreased from 93.05 to 83.68, indicating that patients became less suffered from psychological symptoms after intervention.

Discussion:
The BFR improved hemodynamic control and peripheral circulation. Most importantly, this improvement was coherent with the improvement in psychological symptoms. Randomized controlled study and long term follow up studies are warranted.

Research Completed: Yes
Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
FDA Disclosure:
Cleared: Yes
Non-Exclusive License:
Accepted Terms: Yes
Submitted By:
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Abstract ID: 186

**Salsa Caliente: Evaluation of a Healthy Lifestyles Program on African and Mexican Americans at Risk for Diabetes and Its Complications**

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The purpose is to evaluate the effectiveness of Salsa Caliente in promoting healthy lifestyles among ethnic minorities through the reduction of DM risk factors and complications.

Research Questions/Hypotheses:
1. What are the differences in the level of awareness and knowledge of DM risk factors and complications in participants that complete a 12-week session of Salsa Caliente as indicated by a pre and post test? 2. What are the differences in the level of biomarkers indicative of DM risk factors and complications in participants that complete a 12-week session of Salsa Caliente as indicated by pre and post screening of biomarkers? 3. What is the relationship between level of awareness and knowledge of DM risk factors and complications and biomarkers indicative of DM risk factors and complications in participants that complete a 12-week session of Salsa Caliente?

Significance:
Extensive documentation exists that adherence to an intensive lifestyle program will significantly reduce risk for diabetes and its complications. However, a paucity of information exists regarding how to translate these findings from a clinical trial into a community setting. The goal of Salsa Caliente is reduction of risk factors and complications from diabetes through the promotion of healthy lifestyles among ethnic minority residents that are most at risk for development of and complications from diabetes. However, no formal evaluative mechanism has determined whether the program is effectively translating research findings in the community and therefore meeting its goal of reducing diabetes risk factors and complications.

Methods:
Basic descriptive methods will describe the participants' demographic characteristics. Comparisons by time, pre- and post-test scores, gender, and age as a covariant will be made using dependent t test. A repeated measure MANOVA will be used to determine how certain variables are organized together.

Findings:
To be determined.

Discussion:
Best mechanisms will be described to ensure further translation of this program in the community.

Research Completed:
Yes

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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Abstract ID: 224

Identifying Ethnically Diverse Women's Coronary Heart Disease Symptom Clusters

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SNRS member? No
Abstract Information

Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Evidence-based practice/research
Thematic Areas: Adult Health

Purpose/Aims: To perform a secondary cluster analysis of a large data base.

Research Questions/Hypotheses: What symptom clusters are most likely to occur prior to and during myocardial infarction (MI) among subgroups of women?

Significance: Heart disease remains the number one killer of women and early diagnosis continues to be problematic, especially in minority women.

Methods: We used an existing data base compiled on 1270 women (43% black, 42% white and 15% Hispanic) from 15 sites across the U.S. All women were > 21 years of age and post-MI hospitalization. Initial data were collected using the McSweeney Acute and Prodromal Myocardial Infarction Survey that contains 33 prodromal and 37 acute symptom questions and descriptors, plus risk factors/comorbidities. We used cluster analysis to group women into naturally occurring configurations of prodromal and acute symptom scores. We evaluated several clustering algorithms, adopting the most meaningful separation. Using bivariate analyses, we linked patient characteristics/comorbidities to symptom score configurations by examining the association between clusters and each characteristic separately and then by examining the association between clusters and characteristics combined using multinomial logistic regression.

Findings: Three clusters emerged; each containing women with decreasing frequency and severity of prodromal symptoms. African-American women < 50 years were more likely to complain of frequent and intense symptoms compared to other women. Older, Caucasian women without history of diabetes or smoking had fewer prodromal symptoms. Chest pain/discomfort was not a primary prodromal symptom. Two clusters were identified based on acute symptoms. Cluster 1 women had frequent and severe symptoms including shortness of breath (91.0%) and chest pain/discomfort (76.1%).
Cluster 1 women tended to be Hispanic, obese, < 50 years, and smokers. Women in cluster 2 experienced less acute symptoms; 55.2% reported chest pain/discomfort and 49.8% reported shortness of breath.

Discussion:
Developing clusters of women’s CHD symptoms should provide useful information to inform clinicians, facilitate timely diagnoses, and improve outcomes.

Research Completed: Yes
Abstract History:
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
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Abstract ID: 263

**Correlates of Self-Perceived Job Satisfaction among Licensed Vocational and Registered Nurses**

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Abstract Information

Presentation Preference:
SNRS  Podium Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Evidence-based practice/research
Thematic Areas: Workforce Issues

Purpose/Aims:
The purpose of this study is to examine the relationships among socio-demographic attributes, autonomy, influence of leadership behaviors, self-efficacy, shared governance, and self-perceived job satisfaction among LVNs and RNs employed in a public hospital system.

Research Questions/Hypotheses:
Significant positive correlations will be identified among the effects of socio-demographic attributes, autonomy, influence of leadership behaviors, self-efficacy, shared governance, on self-perceived job satisfaction among LVNs and RNs employed in a public hospital system with a large metropolitan area.

Significance:
There are myriad examples in the scientific literature citing the influences of a variety of correlates upon job satisfaction among licensed vocational and registered nurses. However, there are minimal discussions about these correlations within public hospital systems.

Methods:
A quantitative (survey) descriptive, correlational design was used among a convenience sample of RNs and LVNs, within a public hospital system, to determine the relationships among job satisfaction: (1) socio-demographics, (2) autonomy, (3) leadership behaviors, (4) self-efficacy, (5) shared governance, and (6) job satisfaction. All instruments had well established validity and reliability. The study was approved by a local university Institutional Review Board.

Findings:
A significant positive correlation ($r=0.273$, $p=0.001$, $n=259$) existed between autonomy and the influence of leadership behaviors, leadership behaviors and job satisfaction ($r=0.564$, $p=0.000$, $n=257$), and shared governance and job satisfaction ($r=0.287$, $p=0.000$, $n=251$). A negative correlation ($r=-0.201$, $p=0.001$, $n=254$) was identified between the socio-demographic characteristic of income and job satisfaction. No significant correlation was identified between behaviors and job satisfaction.
products may be mentioned in this material?
Yes

FDA Disclosure:
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Accepted Terms: Yes

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Abstract ID: 285

**Socio-cultural factors affecting sodium and other nutrient intake of adults with heart failure living in Appalachia Eastern Kentucky**

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Presentation Preference:  
SNRS Podium Presentation

Willing To Submit Poster?  
Yes

Abstract Categories:  
Interest Group: Evidence-based practice/research  
Thematic Areas: Chronic illness

Purpose/Aims:  
To describe socio-cultural factors affecting nutrient intake of patients with heart failure (HF) living in rural Appalachian Eastern Kentucky.

Research Questions/Hypotheses:  
(1) What socio-cultural factors are related to food choice, procurement, preparation, and storage? (2) What is the sodium intake and nutrient quality of the diet of rural dwelling patients with HF?

Significance:  
Optimal management of HF includes restriction of dietary sodium intake within the parameters of a nutritionally adequate diet. Patients with HF in Appalachia represent a vulnerable population with unique socio-cultural influences affecting sodium consumption and nutrition. Little information is available to identify
factors unique to rural settings affecting adherence to dietary recommendations for patients with HF.

Methods:

Twenty patients with HF are being recruited from primary care clinics in Eastern Kentucky. This sample is expected to be sufficient to produce common themes because Eastern Kentucky represents a homogeneous population with little ethnic diversity. Data collection includes environmental assessments and semi-structured interviews to explore food beliefs, social influences, and eating patterns affecting food intake. Patients also complete quantitative food frequency (FFQ) and demographics/clinical characteristics questionnaires. Triangulation of qualitative and quantitative measures will help assure trustworthiness of the data.

Findings:

Themes related to socio-cultural factors (individual, family and community beliefs and values), environmental factors (home, work and community infrastructure) and individual resources (land, housing and transportation) influencing sodium intake and food availability and selection. Nutritional quality of the diet as determined by the Food and Nutrition Board of the Institute of Medicine method of dietary assessment.

Discussion:

This study will provide data specific to unique socio-cultural factors influencing the ability of patients with HF to adhere to dietary recommendations. These data can be used to guide development of economical and culturally feasible interventions for rural residents to improve adherence to dietary recommendation for HF.

Research Completed: Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

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EVALUATION OF A FALL RISK ASSESSMENT TOOL

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The purpose of this study is to describe one community hospital’s evaluation of their patient safety culture and fall risk assessment tool.

Research Questions/Hypotheses:
1. What is the perception of patient safety culture of nurses working in medical-surgical areas and their compliance with fall risk assessment tool completion?  2. Is there a difference in fall risk assessment and factors related to falls between fallers and non-fallers?

Significance:
Fall injuries represent a huge healthcare, social and financial burden. Research evidence indicates timely assessment of fall risk and appropriate intervention can help in prevention of falls. With the goal of implementation of a best practice fall-prevention program, an evaluation of the organization’s safety culture and fall risk assessment measures was undertaken.

Methods:
An online anonymous survey of the organization’s patient safety culture was conducted. A random sample of 162 charts from the nine medical-surgical units was used to determine compliance with fall risk assessment. Finally six months of fallers were compared with a matched sample of non-fallers to evaluate the effectiveness of the components of the fall risk assessment instrument. Descriptive statistics were used to analyze survey and compliance data and chi square analyses and t-tests were used to compare fallers and non-fallers.

Findings:
Nurses perceived the patient safety culture to be good with good administrative support for improvement. However, they were concerned that unit and shift changes resulted in potential loss of important patient safety information. Nurses completed initial fall assessments 99% of the time; however, follow-up assessments were completed only 58% of the time with AM assessments completed significantly more often than PM assessments. The tool’s components were able to significantly differentiate fallers from non-fallers with the exception of the medication measure.

Discussion:
Fall assessment tools need to be simple and convenient to use, provide for hierarchy of risk and provide links to available safety measures.

Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
-Details: Orthopedic Nurses Association

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes
Abstract ID: 365

STRESS AND WORRY IN MOTHERS OF PRETERM INFANTS WHO EXPERIENCED NECROTIZING ENTEROCOLITIS DURING HOSPITALIZATION

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Abstract Information

Presentation Preference: SNRS Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Evidence-based practice/research
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims: To determine if levels of maternal stress and worry are higher when preterm infants have experienced the life-threatening complication of necrotizing enterocolitis during their hospitalization when compared to preterm infants with uncomplicated hospitalizations.

Research Questions/Hypotheses:
Necrotizing enterocolitis (NEC) often causes an immediate deterioration in a neonate’s health status. Does this sudden change in infants health caused by NEC lead to increased levels of worry and stress for mothers of these fragile infants?

Significance: The birth and prolonged hospitalization of a preterm infant is a source of stress and anxiety for mothers. These stressors are due to multiple issues including the appearance and behavior of the infant, inability to have a normal parenting role and worry related to infant illness, treatments and prognosis. High levels of worry can cause distress in parents affecting the relationship with the sick infant. Worry has been found to be high in mothers with lower educational levels, which possibly indicate that these mothers are not able to understand the complex explanations given by health care providers when their infants are seriously ill.

Methods: A secondary analysis of data from Assessment of Biological and Social Risk in Preterm Infants (R01 NR01894 from the National Institute for Nursing Research, NIH). Preliminary analyses using logistic regression to examine the effect of severe illness, specifically necrotizing enterocolitis on parental stress.

Findings:
- Parents showed increased levels of stress initially
- Illness-related stress was higher at 2 months
- NEC affected stress when mechanical ventilation was removed from the model and was related to higher parental role alteration stress (p=0.01)
- Black mothers exhibited lower levels of illness-related stress.

Discussion: Illness-related and parental role alteration stress were significantly related to longer mechanical ventilation - Illness severity related stress was lower for Black mothers - Maternal worry was greatest when the infant with relatively short mechanical ventilation developed NEC

Research Completed: Yes

Abstract History: -This material has been submitted previously.

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

Grants/Research Support: Y R01 NR01894 from the National Institute for Nursing Research, NIH
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Other Financial or Material Support:

FDA Disclosure:

Cleared: Yes
Non-Exclusive License:
Accepted Terms: Yes
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Abstract ID: 406
Predictors of Injury Associated with Rape of Adult Women

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Abstract Information
Presentation Preference: SNRS Podium Presentation
Willing To Submit Poster? Yes
Abstract Categories:
- Interest Group: Evidence-based practice/research
- Thematic Areas: Women’s Health
Purpose/Aims:
The purpose of this study was to identify predictors of physical injury in women with a recent history of rape.

Research Questions/Hypotheses:
- Which forensic and victim variables are the best predictors of injury? Which is the best predictive model? Which are the most significant interaction variables?

Significance:
The severity of rape-related injury is linked to negative health, and injury may play a significant role in courtroom trial outcomes for rape cases. Studying the predictors associated with injury expands nurses’ knowledge of rape and the potential risks.

Methods:
Multiple logistic regression was used to evaluate cross-sectional data (N = 3318) from 13 to 89 years of age (M = 26.6; SD = 11.1 years) from three regions of the U.S.

Findings:
Results of multiple logistic regression models included a significant forward stepwise model chi square \([18] = 387.26, p = .001\) and adequate fit based on the Hosmer-Lemeshow goodness-of-fit results, chi square \([7] = 5.72, p = 5.7\). Noteworthy results included multiple significant interactions. Common elements included, regional setting, time from rape to examination, multiple perpetrators, weapon presence, race of victim, and if perpetrator was unknown.

**Discussion:**

The implications of research with large data bases highlight the importance of ongoing data collection with victims of violence, and standardized data collection to help health care providers understand the diverse health outcomes in various age and racial groups of women in different cities. The link between the health and legal systems, and the need for interdisciplinary collaboration aimed at improvement of health and legal outcomes with victims of violence is evident. Most importantly, analysis of large existing data bases can inform researchers regarding risks and can lead to the refinement of data collection and storage methods that will inform the development of tailored interventions aimed at alleviating negative health outcomes for victims of rape.

**Research Completed:** Yes

**Abstract History:**

- This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

- Details: American Academy of Forensic Science

**Financial Disclosure:**

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

**FDA Disclosure:**

Cleared: Yes

**Non-Exclusive License:**

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Abstract ID: 436

The Accuracy of Portable Lipid Analyzers in an Old Order Mennonite Population

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The primary aim of this study was to determine the accuracy of two portable lipid analyzers (PLAs) when compared to a value obtained from a reference laboratory.

Research Questions/Hypotheses:
1). What is the total cholesterol (TC) value of two PLAs and a reference laboratory?
2.) What is the relationship of TC with age, gender, body mass index, blood pressure, and parity?
3). What is the accuracy of each PLA as compared to the reference laboratory value?

Significance:
Data identify a relationship between elevated lipid levels and cardiovascular diseases and the use of portable lipid analyzers (PLA) is common in community settings. Conservative religious groups are hypothesized to be at increased risk for hyperlipidemia and in this setting it is essential that the most reliable measurement is used.

Methods:
The convenience sample for this descriptive correlational study was composed of 41 adult members of a old order Mennonite community in south central Kentucky. Using a pre-established protocol, investigators collected demographics, physiological measurements, and blood samples for lipid analyses.

Findings:
The TC values ranged from 121 to 284 mg/dL (reference), 112 to 358 mg/dL (PLA1), and 150 to 241 mg/dL (PLA2). A single positive correlation between TC and age ($r = 0.37, p <.05$) was noted. Using Chi Square analyses, PLA1 revealed an under referral rate of 33.3%, and PLA2 an over referral rate of 31.7%.

Discussion:
On the average men in this population had a lower TC as compared to the general male population, while women had equivalent TC with the general female population. A positive correlation was noted between TC and age. Systematically, PLA1 under estimated the TC and PLA2 over estimated the TC. PLA lipid values may be useful for screening but they should be used with caution. Healthcare providers and health educators should be aware of the limiations of these PLAs.

Submitted By: susan.jones@wku.edu
Abstract ID: 528

A Pilot study of characteristics and perceived benefits of persons self-selecting yoga for treatment of chronic low back pain

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Presentation Preference:  
SNRS  Student Poster Presentation

Willing To Submit Poster?  
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Abstract Categories:  
Interest Group: Evidence-based practice/research  
Thematic Areas: Chronic illness

Purpose/Aims :  
The purpose of this study was to determine the characteristics of individuals who self-select yoga for relief of chronic low back pain (cLBP) and to explore long-term outcomes and treatment adherence patterns.

Research Questions/Hypotheses :  
1. What are the demographic and clinical characteristics (depression, anxiety and health status) of persons self-selecting a 6-week yoga intervention for treatment of cLBP?  
2. What are the reported benefits of yoga and long-term treatment adherence patterns?

Significance :  
Low back pain is a significant and costly public health problem. Predicting treatment outcomes is challenging because patient characteristics associated with improved outcomes are poorly understood. Identifying patients who may benefit from cost-effective approaches can lead to improved outcomes and reduced treatment expenditures. Yoga shows promise as a beneficial and cost-effective treatment for cLBP. Determining the patient characteristics associated with improved outcomes from yoga may reduce back treatment expenditures and failures.

Methods :  
Thirty adults who participated in a 6-week yoga class for cLBP were interviewed 6-16 weeks following treatment for perceived benefits and treatment adherence patterns. Baseline demographic and questionnaire data were examined to explore participant characteristics.

Findings :  
Yoga benefits included reduced pain and stress and improved mobility and flexibility. No adverse side effects were reported. Subjects had a mean age of 48, were well-educated (college+ N=18/25), female (N=28/36), white (N=29/30), married (N=19/24), obtaining mild depression and anxiety scores and below average pain and health status scores. Treatment adherence patterns varied with practice performed only for symptom exacerbation control to daily for other benefits. Increased adherence was associated with more reported benefits.

Discussion :  
Yoga participants differ demographically and clinically from others with cLBP influencing treatment outcomes. Treatment adherence patterns may be influenced by these characteristics. Increased treatment adherence may be self-reinforcing leading to increasing benefits. Cross-comparison research exploring characteristics and treatment adherence patterns of persons selecting yoga versus conventional treatments for cLBP is warranted.

Research Completed :  
Yes

Abstract History:  
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure:  
Details: presented at Sigma Theta Tau Beta Theta Evidence based practice Research Memphis, TN 4-20-07
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Submitted By:
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Patient Safety Perspective Integrative Literature Review

Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Evidence-based practice/research
Thematic Areas: Health System

Purpose/Aims: Patient safety is of utmost concern because of preventable injuries and deaths which occur every day. The purpose of this study is to complete a systematic literature search and integrative review resulting in a state of the science overview on safety from the perspective of patients.

Research Questions/Hypotheses: What literature exists that addresses patients' perspectives of safety in inpatient settings? How do patients describe safety as it relates to their inpatient experience? What elements do they report as influencing their perceived safety in these settings?

Significance: In the quest to address the emergent issue of unnecessary patient injuries and death, patient safety research has increased significantly. Current literature indicates a patient’s perspective of safety has been left largely unexamined (Vincent & Coulter, 2002; Wolosin, Vercler, & Matthews, 2006). Patient safety reform agendas have marginalized consumer input, relegating it to accent values and ideas formulated by healthcare delivery experts (Hatlie, 2004).
which have examined patient safety note there is additional knowledge from patients’ perspectives which qualitative research would help to uncover (Burroughs et al., 2005). The National Patient Safety Foundation (2003) is currently encouraging active patient participation on the healthcare team so as to ensure their safety and decrease errors.

Methods:
This integrative literature review will include a description of the search parameters including data bases, search terms, inclusion and exclusion criteria, article counts by contributing discipline, and reported study designs. Factors found to influence patient safety from this literature review will provide the foundation for developing a program of research beginning with a qualitative study of the patient perspective of safety.

Findings:
TBA

Discussion:
Omitting the patient perspective on hospital safety eliminates information which could reduce morbidity and mortality in the healthcare industry. Nursing and healthcare will benefit from the current review by becoming aware of other vital elements in building patient safety solutions.

Research Completed:
Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
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The Relationship of Type of Healthcare Provider to Clinical Practice Guideline Adoption: A Pilot Study

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Evidence-based practice/research
Thematic Areas: Health System

Purpose/Aims: The purpose of the study is to pretest a data collection instrument designed to measure the innovation-adoption process in different healthcare providers (registered nurses, advanced practice nurse, physicians). The specific aim is to determine the clarity, adequacy, and freedom from bias and problems of the instrument

Research Questions/Hypotheses:
1. Is the data collection instrument composed of all necessary and appropriate questions?
2. Are all of the questions interpreted similarly by all respondents?
3. Is the length of the data collection instrument appropriate?
4. Are the questions appropriately worded and easily understood

Significance: The innovation-adoption process is a well-defined multi-faceted process that follows a pathway involving knowledge, persuasion, decision, and adoption. Numerous studies have explored various components of this process, but no studies have evaluated all components across multiple healthcare disciplines.
The proposed data collection instrument will consist of established and investigator-developed instruments designed to capture the full spectrum of the innovation-adopter process in the acute care setting.

Methods:
The data collection instrument will be administered to a mix of healthcare providers with clinical practice and/or instrument development expertise. Upon instrument completion, each participant will be interviewed to ascertain any clarity, adequacy, or bias issues using a semi-structured, open-ended, interview technique.

Findings:
Anticipated findings should clarify issues of instrument clarity, adequacy, or bias. Specific areas of concern are instrument length and the potential for respondent fatigue. Preliminary psychometrics for the investigator-developed components of the instrument will also be established.

Discussion:
Modifications to the instrument will be made based on the feedback obtained. A second phase of the pilot will then be conducted using a web-based version of the instrument. Issues of survey design and interface with data management software will be evaluated, and psychometrics further explored. The final phase of the study, supported by an AHRQ dissertation grant, will be conducted using the finalized web-based version of the instrument.

Research Completed:
No

Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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FDA Disclosure:
Cleared: Yes

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Accepted Terms: Yes

Submitted By:
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Abstract ID: 695

Decreasing Blood Culture Contamination: Chlorhexidine vs. Povidone-Iodine

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Student Level:
The aim of this study was to determine if changing the skin preparation methodology from Povidone-iodine to Chlorhexidine 2% prior to drawing blood cultures reduce the number of contaminated blood cultures collected in the ER.

**Research Questions/Hypotheses:**
Does changing the skin preparation methodology from Povidone-iodine to Chlorhexidine 2% reduce the number of contaminated blood cultures collected in the ER?

**Significance:**
Blood culture contamination represents an unending patient safety problem in healthcare. Inappropriate and delayed treatments add to the raising healthcare costs. Hospital, laboratory, and pharmacy utilization totals to hundreds of thousands of dollars annually. The primary culprit is thought to be poor skin preparation prior to obtaining the blood culture.

**Methods:**
A descriptive, prospective design was conducted to examine blood cultures collected over four consecutive months in the emergency room during 2006. In Months 1 and 4, skin preparation solution used was chlorhexidine. For two consecutive months (Months 2 and 3), povidone-iodine was used as the skin in skin preparation. A daily computerize medical record program query was used to collect all patients’ admission entry point, number of blood cultures drawn, and blood culture contaminations. A contamination rate was calculated for all blood cultures drawn during the study months.

**Findings:**
Of the 1,302 blood cultures, the povidone-iodine contamination rate was 6.05%; chlorhexidine contamination rate was 3.35%. The change difference was 2.75% with a decrease in contamination rate of 39% during the study.

**Discussion:**
In this study, chlorhexidine skin preparation was found to be a significantly better skin preparation which improves the safety and quality of care delivered by ER staff.
Post Cardiac Catheterization Protocols

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Abstract Information

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Willing To Submit Poster? Yes

Abstract Categories:
  Interest Group: Evidence-based practice/research
  Thematic Areas: Adult Health

Purpose/Aims:
To evaluate the institutional ambulation and discharge protocol for diagnostic cardiac catheterizations determining differences in 4 and 5 Fr. sheaths in regard to time to activity progression and vascular access site complications.
To identify predictive factors for vascular access site complications related to demographic characteristics or co-morbidities.

Research Questions/Hypotheses:
Are patients meeting the expectations of the ambulation and discharge protocol? Is there a difference in recovery times between 4 and 5 Fr. sheaths? Is the ambulation and discharge protocol able to be generalized to other adult outpatient diagnostic CC labs? Is there a relationship between vascular access site complications and activity progression, demographic characteristics, co-morbidities or sheath size?

Significance:
This study will evaluate the possibility of a comprehensive ambulation and discharge protocol after outpatient diagnostic CC and review the potential for application to other facilities. It will attempt to identify predictors for vascular access site complication potential, improving patient outcomes.

Methods:
The study was a descriptive, summative evaluation survey based on previous practice and expert opinion. Data was collected retrospectively using the researcher developed tool.

Findings:
There is no difference in recovery times or vascular access site complications in patients with comorbidities of hypertension, diabetes or obesity, receiving either 4 Fr. or 5 Fr. sheaths. Patients on Coumadin therapy, held for three days prior or on Plavix had significantly longer times to discharge. No patients exactly met the ambulation and discharge protocol expectations as written. The staff-altered protocol ambulated patients an average of 96 minutes post hemostasis and discharged patients an average of 126 minutes post hemostasis. Smoking was found to be statistically significant for vascular access site complications.

Discussion:
Could inventory be reduced to only 5 Fr., saving money, and improving physician satisfaction with picture quality and catheter control and patient outcomes. Do patients on anticoagulant therapy need a protocol specific to them?

Research Completed: Yes

Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

Grants/Research Support:
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Other Financial or Material Support: Y
Abstract ID: 729

Clinical Decision-Making of Nurses Regarding Elder Abuse

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Abstract Information
Presentation Preference: 
SNRS  Student Poster Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Evidence-based practice/research
Thematic Areas: Workforce Issues

Purpose/Aims :
The purpose of this study is to explore the relationship of the RN’s knowledge of elder abuse, years of experience as a RN, the use of intuition, level advancement status of the RN, patient assessment cues, and the decision outcomes of RNs regarding elder abuse.

Research Questions/Hypotheses:
The specific aims of the study are to: determine the relationship of the RNs knowledge of elder abuse, years of experience as a RN, use of intuition in nursing practice, level advancement status of the RN, assessment cues of the patient, and the RN’s clinical decision outcomes for elderly patients regarding elder abuse, and examine the difference in the variables between RNs who have had mandatory elder abuse training during orientation, and those who have not.

Significance :
To date there have not been any published research studies regarding the above aims. Health care organizations must ensure RNs have education and knowledge about elder abuse including what defines elder abuse, the laws and implications
for practice, how to assess and intervene in a suspected case of abuse to make
the best clinical decisions possible for their elderly patients.

Methods:
A descriptive, correlational design was used in this study to describe the clinical
decision-making of ED RNs regarding elder abuse. The study was conducted in
three EDs of tertiary care Magnet designated hospitals in a southeastern state.
The convenience sample included all ED RNs employed in the three EDs. Six variables
were measured; Knowledge of elder abuse (by the Knowledge of Elder Abuse Survey);
Intuition use in nursing practice (by the Intuition Use in Nursing Scale);
Assessment cues and clinical decisions of the ED RNs regarding elder abuse
(by the Elder Abuse Vignette Instrument). Data on years of experience as a
RN and clinical level advancement status will be collected from the demographic
information form.

Findings:
Analysis to begin next week.

Discussion:
Pending

Research Completed: Yes

Abstract History:

Financial Disclosure:
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Yes

FDA Disclosure:
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Submitted By: sjomee@earthlink.net
Evaluation of “Bedside Scientist Program” Effects on Perceived Research Barriers by Nurses and Allied Health Professionals

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This study utilizes E. M. Rogers’s (1983) diffusion and innovation theoretical framework to study whether the perceived barriers to research utilization are amenable to reduction in nurses and allied health professionals with a structured educational offering.

Research Questions/Hypotheses:
Does the “Bedside Scientist Program” produce significant changes in any or all of the commonly reported research barriers regarding individual, organizational, innovational, or communication issues?

Significance:
Recently, the National Institute of Health has placed emphasis on all healthcare providers participating and espousing research findings in daily practice, commonly called “translational research” (Zerhouni, 2003). Research has been conducted on research barriers in the field since 1991 (Funk, 1995). Even though these barriers have been well identified in the literature, interventions designed to reduce or overcome these barriers have not been widely studied in nurses or allied health professionals.

Methods:
A convenience sample of nurses and allied health professionals at a large southern teaching hospital attending the “Bedside Scientist Program” were voluntarily recruited for the study after IRB exemption was obtained. The program consisted of five one-hour lectures taught by content experts on research utilization topics. The 29-item “Barriers to Research Utilization Scale” (Funk, 1991) was administered using a pre/post-test design to assess the impact of the “Bedside Scientist Program.”

Findings:
The study currently is in the pilot phase. Descriptive statistical methods will be used to assess the impact the “Bedside Scientist Program” has on research utilization barriers commonly experienced by nurses and allied health professions. Such results will most likely serve to improve utilization of translational research via educational offerings. It is hoped that insight will be gained into the dimensions and structure of the program, with revisions made prior to large-scale testing.

Discussion:
This study findings will be used to expand the science of nursing by studying the effects of an educational program on research barriers.

Research Completed:
Yes

Abstract History:
Financial Disclosure:
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Yes

FDA Disclosure:
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Non-Exclusive License:
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Improved Outcomes for Inpatient Heart Failure Patients

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The purpose of this project is to compare Heart Failure (HF) patient outcomes before and after selected interventions.

Research Questions/Hypotheses:
Will selected interventions reduce readmission rates for inpatients whose primary diagnosis is heart failure?

Significance:
HF is the most frequent and most costly diagnosis for hospital admissions throughout the United States. Approximately five million Americans are affected by HF, and 40% of those live in the South. The estimated cost of HF to the health care system in 2005 was $27.9 billion. At the site for this study, a regional medical center, 10% of the patients admitted have a principle diagnosis of HF and of all diagnoses recorded, HF is the second most frequent. The medical center has established an HF team to improve clinical and financial outcomes for these patients and the facility.

Methods:
This project included a thorough review of current HF treatment guidelines; revision of the computerized medical record; staff development for Registered Nurses (RNs); and publication and distribution of updated patient education materials.

Findings:
There were no statistically significant differences in demographics, severity of HF (measured by left ventricular ejection fraction), inpatient length of stay, or third-party payers between 2004 and 2006. However, between 2004 and 2006, these interventions have resulted in a decrease in readmission rates from 23.31% in 2004 to 19.82% in 2006.

Discussion:
Improvement in the percentage of HF patients readmitted to inpatient care was achieved. However, further work is needed with post-discharge interventions to further improve clinical and financial outcomes of HF patients. Current literature supports the use of home care, vigilant self-monitoring and telemonitoring of symptoms, and out-patient, or continuum-of-care, nursing case management as effective interventions for reducing readmissions to hospitals, decreasing costs, and improving quality of life of HF patients.
Introducing Evidence-based Practice in a Community Hospital Setting: Staff Nurse Knowledge Base and Perceptions

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Abstract Information

Presentation Preference: SNRS  Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Evidence-based practice/research
- Thematic Areas: Workforce Issues

Purpose/Aims: The purpose of this descriptive pilot study is to identify baseline knowledge and perceptions related to evidence-based practice (EBP) of registered nurses employed in a community hospital setting.

Research Questions/Hypotheses:
1) What is the basic knowledge of evidence-based practice of registered nurses in a community hospital setting?  
2) What are the perceptions of staff nurses regarding their ability to implement evidence-based practice?  
3) What basic concepts are necessary to include in an educational program to support the implementation of evidence-based practice in a community hospital setting?

Significance: Educational programs designed to provide the registered nurse with tools necessary to incorporate EBP in the delivery of nursing care are needed. Successful programs begin first with an understanding of the level of knowledge and perceptions of the target audience.

Methods: A brief 18-item questionnaire was used to measure staff nurse knowledge and perceptions of EBP. Upon obtaining IRB approval, a questionnaire designed by the researchers was distributed to registered nurses on five pilot units at a 315 bed community hospital in Athens, Georgia. Participation in this study was completely voluntary and data collection utilized no subject identifiers. Those agreeing to participate (n=79) were asked to complete the questionnaire and place it anonymously in a sealed collection box placed in a central location on each unit. Subjects were given two weeks to complete the questionnaire. Statistical analysis of the data was carried out using the Statistical Quality Control Pack (SQCpack) for Windows.

Findings: Our findings revealed an overwhelming majority of nurses in the community hospital setting report competency related to the concept of EBP. Interestingly, however, our findings indicated that many of these nurses lack the skills necessary to support competency in EBP.

Discussion: This study demonstrated an apparent disconnect between perceived and actual ability of staff nurses in a community hospital setting to implement EBP.

Research Completed: Yes

Abstract History:
- This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
- Details: 9/07 Marietta, GA, Hospital-sponsored program.

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

Submitted By: rjohns@mcg.edu
Abstract ID: 827

Analysis of instruments for measuring acute care nurses’ attitudes towards research utilization: a systematic review

Author Information:
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Abstract Information

Presentation Preference:
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Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Evidence-based practice/research
Thematic Areas: Acute illness

Purpose/Aims:
This poster reports a systematic review describing instruments used to measure nurses’ attitudes towards research utilization. Analyses of concepts and psychometric properties of instruments designed to measure nurses’ attitudes towards using and participating in research are provided. Identification and use of the instrument with the strongest theoretical and psychometric properties can be invaluable to nurse researchers in measuring, implementing, and testing strategies to increase the adoption of research in practice.

Research Questions/Hypotheses:
• Do existing instruments measure the concepts in Estabrooks’s conceptual framework for research utilization? • Which instruments used to measure nurses’ attitudes towards using and participating in research have sound psychometric properties?

Significance:
Limited literature critically analyzes instruments and the concepts that comprise nurses’ attitudes towards research utilization.

Methods:

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The comprehensive literature review methodology described by Hawker et al. (2002) was employed to review this large body of data. The purpose was to generate a useful source for nurse researchers who are interested in measuring nurses’ attitudes towards research utilization. While this review method was intended primarily for qualitative research, this systematic review method can be used for all types of disparate data (Hawker et al. 2002).

Findings:
Indirect and overall research utilization were measured by all of the instruments. Ten instruments measured direct research utilization and nine instruments measured persuasive research utilization. The Research Utilization in Nursing Survey by Estabrooks, as adapted by Kenny, was an instrument with strong psychometric properties measuring all four concepts of nurses’ attitudes towards using and participating in research and was clinically feasible.

Discussion:
Fourteen instruments met the criteria for in-depth critical analysis of psychometric properties and concepts. Each instrument item was judged to be relevant to direct, indirect, persuasive and overall research utilization as defined by Estabrooks. Instruments were arranged from the strongest to the weakest reliability of the subscales to determine the instrument with the strongest psychometric properties.

Research Completed: No
Abstract History: -This material has been published or accepted for publication.
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
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Abstract ID: 845

Competence: A Concept Analysis

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Willing To Submit Poster?	Yes

Abstract Categories:	Interest Group: Evidence-based practice/research
Thematic Areas: Workforce Issues

Purpose/Aims:
The purpose of this concept analysis is to clarify the concept of competence in clinical nursing practice.

Research Questions/Hypotheses:
What are the factors that define competence in nurses?

Significance:
The United States is in a nursing shortage that is expected to increase as the population gets older and the need for healthcare grows. As the nursing shortage worsens, the demand for competent nurses increases. The nurses that are available for work are likely to be new graduates with no practical experience (Beyea, von Reyn, & Slattery, 2007). Nurses must demonstrate and maintain competence throughout their nursing career. “The assessment of competent nursing practice has an important role in managing the caregiver processes to achieve desired patient outcomes” (Meretoja & Leino-Kilpi, 2003, pg 404). Competence is linked with performance, which is defined as exhibiting a skill, ability, or aptitude of a professional nurse. Nurse competence plays an important role in guaranteeing quality in nursing interventions and patient outcomes (Meretoja & Leino-Kilpi,
The hiring of greater numbers of new graduate nurses necessitates the development of competency in the workplace.

Methods:
A review of literature was completed using Ovid, Medscape, and EbscoHost databases. A concept analysis of competence was performed using Walker and Avant’s (2005) eight step approach to clarify the concept. The defining attributes, antecedents, and consequences were identified. Further clarification was done with the constructing of model, borderline, related, contrary, illegitimate, and invented cases. Empirical referents were identified to illustrate the concept in clinical practice.

Findings:
The Defining Attributes identified were well qualified, cognitive ability, ability to perform tasks, and specific role.

Discussion:
The implications for nursing research is to further investigate potential interventions to be utilized to enhance competency. Implications for nursing education is to employ evidence based interventions to establish best practices to enhance competency. Implications for nursing practice to implement interventions to ensure and maintain competency.

Research Completed: Yes
Abstract History:
Financial Disclosure:
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Yes
FDA Disclosure:
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The effect of inflammation and respiratory muscle fatigue on weaning outcome in adult patients receiving mechanical ventilation

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Evidence-based practice/research
Thematic Areas: Acute illness

Purpose/Aims: To determine: 1) the association between respiratory muscle function, inflammation and weaning outcome, and 2) the predictive ability of inflammation for weaning outcome in adult patients supported by mechanical ventilation.

Research Questions/Hypotheses:
H1 Indicators of respiratory muscle function and oxygenation prior to weaning will not be associated with weaning outcome

Significance: Although patients who require chronic mechanical ventilation comprise only 5-10% of critically ill patients, they consume up to 50% of intensive care resources ($1.3 and $1.5 billion annually). Identification of mechanisms that influence ability to ventilate after prolonged mechanical ventilation may provide a focus for evaluation and intervention. Inflammation may influence global oxygenation, because elevated concentrations of inflammatory cytokines are associated with changes in muscle structure and muscle dysfunction. There are no recent studies that determine the association between inflammation, respiratory muscle function and weaning outcomes.

Methods: This is a retrospective medical records review being conducted at an academic medical center. A random sample of 225 patients was chosen from all patients who received mechanical ventilation between January 1 and June 30, 2007. Markers of respiratory muscle function (rapid shallow breathing index, negative and positive inspiratory pressures, vital capacity and minute ventilation) and inflammation (sedimentation rate, fibrinogen, C-reactive protein, uric acid) will be obtained from the medical record for the period the participant receives ventilation. Number of weaning trials and total weaning time in hours will be determined. Correlation coefficients and logistic regression will evaluate associations among the variables and determine the predictive ability of inflammation for weaning outcome. APACHE III score will be used to control for the severity of illness.

Findings:
Data collection is anticipated to be completed by January 1, 2008.

Discussion:
This study will explore relationships between inflammation, respiratory muscle function and weaning outcome. Inflammatory markers may be useful in predicting weaning outcome.

Research Completed: Yes

Abstract History:

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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EVALUATION OF AN EDUCATIONAL INTERVENTION FOR THE STAFF ON THE HEAD OF THE BED ELEVATION IN THE PEDIATRIC INTENSIVE CARE UNIT

Abstract Information
Presentation Preference: SNRS Student Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Evidence-based practice/research
Thematic Areas: Child & Adolescent Health
Purpose/Aims: To determine if an educational intervention for PICU staff resulted in higher HOB elevations, addressing four research questions.
Research Questions/Hypotheses:
What is common practice related to elevation of HOB in the PICU? Is there a difference in mean HOB elevations before and after an education intervention? Is there a difference in percent of time the HOB is at or above 30° after intervention? What factors influence HOB elevation in the PICU?
Significance: Head of bed (HOB) elevation reduces risks for aspiration, and educational interventions results in elevation of HOB in adults. Limited research exists for pediatric intensive care units (PICU).
Methods: Quasi-experimental, pre- post- measurement, nonequivalent comparison group design was used. HOB elevation measured using “Pitch and Angle Locator” (PAL) (Johnson,
Mequon, WI). Baseline measurements (n = 99) obtained in PICU. An educational intervention for PICU staff, focusing on elevating and strategies for measuring HOB elevation was done. Post-intervention, measurements (n = 98) were obtained. During data collection, staff members responded to what influenced elevating the HOB.

Findings:

- HOB elevation increased from 23.5° to 26.5° (t = -1.19, df 195, p = .033).
- Ventilated patients, HOB elevation increased from 23.6° to 29.1° (t = -3.25, df 95, p = .001). Patients mechanically ventilated, in an adult bed, increased from 26° to 30° (t = -1.80, df 63, p = .038). Percent of measures greater than 30° increased from 26%, to 44% (χ² 6.71, df 1, p = .005). Responses, (n = 230) influencing elevation, categorized: physician order (3%), safety (7%), found this way (11%), therapeutic intervention (16%), comfort (24%), and patient condition (39%). Six month follow-up results pending.

Discussion:

Educational interventions impact HOB elevation in a PICU, decreasing risks. HOB elevation increased statistically, the HOB was <30° in 44% of post intervention measurements. The PAL device was a reliable measurement of elevation. Follow-up research is needed to assure gains.
Abstract ID: 892

Telehealth Following Rehabilitation in South Texas

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The aim of this pilot study is to report the feasibility of an innovative computer-assisted informational, decisional, and interpersonal support program for newly injured spinal cord injury (SCI) patients in South Texas during the first six months following rehabilitation.

This innovative strategy can contribute to the body of evidence supporting best practice methods to foster health promotion and risk reduction behaviors in persons who are newly disabled, thereby enhancing quality of life and adjustment, and subsequently reducing complications, hospital readmissions, and health care costs.

Latinos represent 50% of the new SCIs in South Texas. After stabilization in inpatient rehabilitation most return to their home or community. Research has demonstrated professional and peer support is important due to reduced rehabilitation length of stay. The best method is unknown or whether this support is effective with the Latino population.

A longitudinal, mixed method research design was utilized, using a convenience sample of 10 individuals. Data was collected using semi-structured interviews, the Herth Hope Index (HHI) to measure patient hope, Life Situation Survey (LSS) to measure perceived life quality, the Medical Outcomes Study – Shortened Form (MOS SF-36) to measure health perception, and the Positive and Negative Affect Schedule – Shortened (PANAS) to measure self-rated affect.

Preliminary analysis of the data shows increased levels of adaptation and perceived quality of life with the intervention. Qualitative data analysis was also obtained to elucidate the quantitative findings and obtain patient perceptions of the intervention.

The conclusions and implications for future research will be discussed.
Abstract ID: 898

Faith-Based Interventions: Are They Reported Using Recommended CONSORT Guidelines?

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Abstract Categories: Interest Group: Evidence-based practice/research
Thematic Areas: Methods

Purpose/Aims: To determine the extent to which faith-based interventions are reported using CONSORT guidelines.

Research Questions/Hypotheses: To what extent are faith-based interventions reported using CONSORT guidelines?

Significance: CONSORT guidelines (2001) are current recommendations for use in reporting intervention studies. This literature review will determine the extent to which CONSORT guidelines are used in the reporting of faith-based intervention studies.

Methods: This literature search was conducted using PubMed (2001-September 2007). Key terms include “faith-based”, “church-based”, and “randomized controlled trial”.
Fifteen articles were found, with eleven articles meeting inclusion criteria. Inclusion criteria were that articles be databased, published after CONSORT guideline availability, English-available, faith-based or church-based, and be an intervention study. Exclusion criteria were articles non-databased, published prior to 2001, non-English, non-church-based or non-faith based, or non-intervention study.

Findings: This review of the literature is currently in progress. Based on preliminary review, it is anticipated that CONSORT guidelines are not completely being followed.

Discussion: This review is currently in progress.

Research Completed: Yes

Abstract History:

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

Submitted By: amberjillian@gmail.com
Abstract ID: 930

The Assessment of Cultural Diversity in Measuring Quality of Life in Women with Breast Cancer: A Literature Review

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Abstract Information
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Abstract Categories:
Interest Group: Evidence-based practice/research
Thematic Areas: Women’s Health

Purpose/Aims:
The aims of this paper are twofold: 1) examine if cultural characteristics are considered when choosing an instrument to measure quality of life (QoL) in women with breast cancer. 2) understand the impact cultural diversity has on the interpretation of research results.

Research Questions/Hypotheses:
The following research questions will be answered: 1) Is cultural diversity considered when choosing QoL instruments in women with breast cancer? 2) How are cultural differences in QoL interpreted in women with breast cancer?

Significance:
QoL is defined by the World Health Organization as the perception of one’s position in life in the context of their culture and the value system of that culture. Thus, it is important to gain an understanding of QoL in women with breast cancer within the context of their culture in order to better understand their needs.

Methods:
A literature search of PubMed, the ISI Web of Science and CINAHL was conducted
of international, peer reviewed articles published in the last five years. Search words used were “quality of life”, “breast cancer”, “culture”, and “research”.

Findings:
In the nine articles reviewed, the EORTC QLQ-C30, FACT-B, SF-36 and CARES-SF were the most frequently used instruments to assess QoL in women with breast cancer. None of the studies discussed the use of cultural diversity as a factor in choosing a tool to measure QoL in this population. Additionally, cultural differences in the interpretation of the QoL in women with breast cancer was not reported.

Discussion:
Nurse researchers have an opportunity to examine the QoL of women with breast cancer from many different cultures who have breast cancer. While several reliable tools exist to measure QoL, they do not identify cultural differences in women with breast cancer. This finding presents an opportunity for the development of instruments that identify the culturally diverse QoL needs of women with breast cancer.

Research Completed: Yes
Abstract History: 
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
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Abstract ID: 946

A Positive Attitude Lowers Blood Pressure in Older Adults with Heart Failure

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Abstract Categories: Interest Group: Evidence-based practice/research
Thematic Areas: Chronic illness

Purpose/Aims: This interim analysis was conducted to determine if a 5-minute verbal report about HF-symptoms experiences resulted in detrimental affect(s) in HR or BP.

Research Questions/Hypotheses: Do HR and BP change following a 5-minute verbal report about HF-symptoms experiences. How does affect influence these changes.

Significance: Heart failure (HF) affects 1:56 Americans. The symptoms experience impacts quality of life and emotions. Strong emotions increase blood pressure (BP) and heart rate (HR) in healthy individuals. In HF, hemodynamic response to emotions may be blunted with medications.

Methods: Participants were: >55-years of age, had HF > 6-months, symptomatic for the past two-weeks [Kansas City Cardiomyopathy Questionnaire], live independently, spoke, understood, and consented in English (Mini Mental Status Exam > 23). Exclusion criteria were: at end-of-life (<6-month), pre or post heart-transplant, left-ventricular device, pacemaker, or pregnant. Participants were acclimated for 45-minutes prior to measures, followed by a description of symptoms and feelings. Measures were repeated at 20 and 40-minutes. The Positive and Negative Affective Scales (PANAS) evaluated affect.

Findings: Participants (N=29) had mean: age 70.29 (SD 9.55), education 14.14 (SD 3.06) years. 79% male, 72% Caucasian, 59% married. Positive affect score mean=34.35 (SD 7.52), and negative affect= 18.52 (SD 9.47). To determine if the degrees of positive and negative affect affected BP or HR, the sample was divided into groups using mean score. No between-group differences were found on KCCQ subscales-scores. Based on negative affect scores, controlling for time-1 BP and HR, no significant changes were observed following a repeated measure analysis of variance. Diastolic BP (DBP) was significantly lower in the group reporting higher positive affect scores (F=4.57, p=.002), [8 mm Hg (12%)].

Discussion: Early findings provide evidence that when comparing subjects based on positive affect, those with higher scores significantly lower their DBP after speaking about HF symptoms. The expression of negative affect had no detrimental effect on BP or HR.

Research Completed: Yes

Abstract History:

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes
Symbiotic Caregivers: African American Custodial Grandparents and Grandchildren

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories:
Interest Group: Evidence-based practice/research
Thematic Areas: Family Health

Purpose/Aims: The purpose of this study is to explore and describe symbiotic caregiving experiences of custodial grandparents and their grandchildren. Demographic variables, experiences of intergenerational caregiving, intergenerational incompetence, burden and coping of caregiving will be explored to determine ways and resources available to help in this intergenerational relationship.

Research Questions/Hypotheses:
1. Tell me what it is like to care for your grandchildren. 2. Tell me what it is like to care for your grandparents

Significance: This significance of this study will be to expand knowledge of grandparents and grandchildren symbiotic caregiver roles. Explored experiences of this study will help in understanding long-term caregiving bond and the need to assess and include today’s grandchildren in caregiving of the grandparents. Ultimately, this study will establish groundwork for future studies to examine the experiences of grandparents and grandchildren caregivers.

Methods: 

Methods: 

INDEX FIRST PREVIOUS NEXT LAST
A qualitative research design will be used. All custodial grandparents and their grandchildren enrolled in the Tennessee Shelby County Relative Caregiver Program will be approached to participate in the study. Participants will be 12 African American custodial grandparents and 12 grandchildren. Data collection will be open-ended interview. Participants (Grandparents and Grandchildren) will complete demographic data questionnaire. Case study will be used to explore and describe symbiotic caregiving experiences of custodial grandparents and grandchildren. The caregiving bond relationship between the grandparents and grandchildren will be examined and analyzed.

Findings:
Sample characteristics will be described. Findings from the open-ended interview will be used to determine and provide resources available to educate, improve and maintain the skills necessary in this informal caregiving task.

Discussion:
Symbiotic caregiving for both grandparents and grandchildren can be challenging. The experiences have both negative and positive implications. This study will give insight and understanding of the experiences of custodial grandparents and their grandchildren as symbiotic caregivers.

Research Completed: No

Abstract History:
Financial Disclosure:
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FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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THE TRAJECTORY OF HEMODIALYSIS USE IN PATIENTS WITH END-STAGE RENAL DISEASE: IMPLICATIONS FOR FAMILY NURSING

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Abstract Information
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Abstract Categories:
Interest Group: Evidence-based practice/research
Thematic Areas: Family Health
Purpose/Aims:
This poster will present a delineation of the illness trajectory of hemodialysis use in patients with End-stage renal disease within the context of the family.

Research Questions/Hypotheses:
Throughout the trajectory of hemodialysis use, various stressors will be experienced by clients and their families.

Significance:
Hemodialysis is the most prevalent renal replacement therapy used for management of End-stage Renal Disease (ESRD). The intrusiveness of the hemodialysis regimen can deeply impact the entire family system and its associated subsystems (Fox, et al. 2004; Friedman et al., 2003; Jablonski, 2004; O'Toole, 2003). An understanding of the trajectory of hemodialysis use, in patients diagnosed with ESRD, will assist nurses in helping clients and their families adapt to the needs and demands of the treatment regimen.

Methods:
The Corbin and Strauss Chronic Illness Trajectory Framework was used as a guide
to examine family literature related to hemodialysis use in patients diagnosed with ESRD. Several electronic databases were accessed using key search terms; hemodialysis, hemodialysis management, dialysis, pre-dialysis, family, parental kidney disease, and ESRD. Inclusion criteria included English peer-reviewed, empirical studies performed in the U.S and classical references for family nursing.

Findings:
Families of persons receiving hemodialysis for ESRD are faced with many potential losses and lifestyle changes. Families may experience a decrease in financial resources, extended periods of parental unemployment, and changes in family roles and responsibilities. Further description of hemodialysis use in patients with ESRD will be presented within a family context based on the chronic illness trajectory phases identified by Corbin and Straus (1992).

Discussion:
Patients’ and their families’ biographies vary as they progress along the trajectory of hemodialysis use for ESRD. Further research regarding the impact of the hemodialysis regimen on the family is warranted. Additional studies focusing on each phase of the trajectory will increase nurses’ ability to implement appropriate strategies for both the client and family.

Research Completed: Yes
Abstract History: 
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
Submitted By: kimyak@aol.com
Predictors of Depressive Symptoms in Medical-Surgical Hospital Nurses

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Abstract Information
Presentation Preference:
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Willing To Submit Poster?
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Abstract Categories:
Interest Group: Health Promotion/ Self-care
Thematic Areas: Adult Health

Purpose/Aims :
The purpose of this study was to describe the prevalence of depressive symptoms and their predictors in medical-surgical hospital nurses.

Research Questions/Hypotheses :
Do demographic characteristics, occupational stress, major life events, or somatic symptoms predict nurses' depressive symptoms?

Significance :
Because hospital nurses play a vital role in healthcare delivery, it is imperative to identify factors, such as the development of depressive symptoms, which can increase their risk for clinical depression, impede professional performance or contribute to attrition from the bedside.

Methods :
A sample of 150 nurses completed a demographic questionnaire and Nursing Stress, Social Readjustment Rating and Centers for Epidemiologic Studies-Depression Scales along with the Patient Health Questionnaire-15 during a one time survey.

Findings :
Thirty-five percent of the nurses in this study scored > 16 on the CES-D, the cutoff for mild to moderate depressive symptoms. Fatigue or low energy (43%), pain in their extremities or joints (30%), trouble sleeping (29%), back pain (28%), and headaches (18%) were the primary somatic complaints. Depressive symptoms were positively correlated with somatic symptoms, major life events, and occupational stress. Hierarchical multiple regression was used to identify predictors of nurses’ depressive symptoms. Income ($\beta$ = -.17, p < .01) was the only significant predictor of depressive symptoms when age and income were entered in step one (adjusted R square = .03). Somatic symptoms ($\beta$ = .39, p < .01), occupational stress ($\beta$ = .18, p < .05), major life events ($\beta$ = .18, p < .05), and income ($\beta$ = -.15, p < .05) accounted for 34% of the variance in nurses’ depressive symptom scores when predictor variables were added during step two.

Discussion:

Interventions to reduce empirically identified symptoms such as fatigue and poor concentration among hospital nurses have the potential to diminish patient care errors and health care costs while improving quality of life for the nurse.
Abstract ID: 119

Impact of Pre-Hospital Delay in Seeking Medical Treatment on In-Hospital

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The purpose of this study is 1) to identify demographic, clinical and psychological factors contributing to pre-hospital patient delay time and to in-hospital complications, and 2) to investigate the relationships among demographic, clinical, and psychological factors, pre-hospital delay, in-hospital complications, and length of stay in patients with acute myocardial infarction (AMI) using structural equation modeling (SEM).

Hypothesis 1: Patients with AMI who have a longer pre-hospital delay will have more in-hospital complications. Hypothesis 2: Patients with AMI who have more in-hospital complications will have a longer length of hospital stay. Hypothesis 3: Psychological factors will be important predictors of delay and in-hospital complications.

Coronary heart disease (CHD) is the number one cause of death. Rapid arrival at the hospital for treatment of AMI, the most common CHD manifestation, improves long-term AMI outcomes. Whether pre-hospital delay time is associated with in-hospital complications remains unknown.

AMI patients (N=536; 66% male, age 62 ± 14) were enrolled in this study which was conducted using a prospective predictive design. Demographic, clinical and anxiety data were obtained by patient interview and medical record review. After patient discharge, complications were abstracted from the medical record.

SEM demonstrated that (1) pre-hospital delay time predicted in-hospital complications, including recurrent ischemia, re-infarction, sustained ventricular tachycardia or fibrillation, and cardiac death, after AMI (p = .036); (2) the occurrence of in-hospital complications was related to length of stay in hospital (p < .001); and (3) that anxiety was an important predictor of in-hospital complication and length of stay in hospital (p < .001).

Patient delay in seeking timely treatment negatively impacts in-hospital outcomes. It is essential that research and clinical efforts focus on the complex and dynamic issue of improving pre-hospital delay in AMI patients. A focus on anxiety may be appropriate.
Abstract Information

Purpose/Aims:
To determine whether participation in a tailored Chronic Disease Self Management Program (CDSMP) significantly improved underserved rural participant’s outcomes.

Research Questions/Hypotheses:
What changed in perceived health status occurred following participation in the Chronic Disease Self-Management Program?

Significance:
Chronic disease management is a vital health care issue, yet success has been limited. Switching from a palliative medical model to a participatory and prevention-based approach may provide a roadmap to meet today’s health care challenges.

Methods:
A quasi-experimental pre-test, post-test design intervention was tested with 48 rural, underserved, poor community members with chronic disease at two subsidized clinics.

Findings:
Results reflect the changes in client’s perceived health status reported after the implementation of a tailored CDSMP. The conceptual framework, process, content of the intervention as well as the feasibility and acceptability of study materials and methods, and effects of the intervention are reported. Significant improvements in perceived health status were noted on the health distress (p<.01) and energy/fatigue (p=.01) scales.

Discussion:

Study results accentuate the importance of evaluating intervention programs for specific populations and for a new practice exemplar that focuses on patient-provider partnerships that can meaningfully improve health outcomes in underserved, poor, rural populations.

Research Completed: Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

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Other Financial or Material Support :

FDA Disclosure:

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Non-Exclusive License:

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Abstract ID: 211

Hurricane-Related Stress Experiences of Louisiana School Nurses after Katrina and Rita

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Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? No

Abstract Categories: Interest Group: Health Promotion/ Self-care
Thematic Areas: Health Disparities

Purpose/Aims: The purpose of this study was to examine the hurricane-related stress experienced by school nurses in Louisiana six and eighteen months after Hurricanes Katrina and Rita.

Research Questions/Hypotheses:
1. What impact did two major disasters occurring within one month of each other have on the personal and professional stress experiences of registered nurses employed in Louisiana public schools six months after the hurricanes?
2. What impact did these same natural disasters have on the school nurses' stress experience eighteen months after the hurricanes and how did this compare to their initial levels of stress?

Significance: Hurricanes Katrina and Rita affected everyone in Louisiana to some degree, and school nurses were no exceptions. For some, personal loss, as well as drastic changes in their job expectations, workloads, and professional settings were experienced. An understanding of the effects of these changes on their professional practice and the stress experienced by school nurses will allow for practice guidelines which may be applied to school nurses experiencing various types of natural disasters.

Methods: A tool adapted by the researcher from Cohen's Perceived Stress Scale and information from the National Mental Health Association on common reactions to dealing with stress after a tragedy was administered to school nurses at their Annual Conferences in March 2006 and March 2007. In 2006, 75 school nurses participated, and in 2007, 30 school nurses completed the tool. All data was entered into SPSS, and appropriate statistical tests are currently being run.

Findings: Analysis of the data is currently in progress. All data analysis will be completed in July 2007, and the findings will be ready for presentation in February 2008.

Discussion: The final stages of this project are underway, with statistical data analysis in progress at the present time.

Research Completed: Yes

Abstract History:

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

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Health Literacy in HF Patients and Family Caregivers

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Health Literacy (HL) is related to chronic illness outcomes, however it has not been well characterized in heart failure (HF) patients or their family caregivers (FM).

The purposes of this study were to: 1) describe levels of HL among HF patients (PT) and their FMs, and 2) examine the relationships among HL, sociodemographic factors and HF medication adherence.

Attention to health literacy and associated factors may improve HF self care.

HF patients (n=86), age 31-78 years, mean LVEF 26.6 + 14.2, 64% men, 61% Black, and their FMs, age 19-78 years, 83% women, 64% Black, 52% spouses/partners, completed measures of health literacy (REALM), HF Knowledge, and medication self efficacy (PCS-Meds). Sociodemographic variables were obtained, and HF medication adherence was monitored with MEMS for 14-21 days. Data were analyzed with descriptive, inferential and correlational statistics.

PT REALM scores ranged 1-66, mean 58 + 11.2. Converted reading levels ranged 3-12th grade, mean grade of 10.1. FM REALM scores ranged 19-66, mean 60 + 9.3 reflecting reading levels of 6-12th grade, mean grade of 10.6. The majority had REALM scores less than 8th grade reading level. Raw REALM scores were transformed by taking the log; reported p-values are based on transformations. A paired t-test revealed a higher REALM score for FMs (p=.052). For PT and FM, lower REALM scores were found in those with lower education levels (p<.05), lower income (p<.01) and in Blacks (p<.05). For both PT and FM, literacy was related to HF Knowledge (p<.001). PT literacy was related to PCS-Meds (r=.32, p=.005); FM literacy was related to HF medication (r = .31, p=.014) and diuretic (r=.33,
Discussion:

Many HF PTs and FMs had health literacy levels considered at risk for poor understanding of patient education materials. Patient and family literacy levels are associated with perceived confidence and medication taking behavior.

Research Completed:
Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:

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Family Functioning and Heart Failure Caregiver Outcomes

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Abstract Information

Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Health Promotion/ Self-care
Thematic Areas: Adult Health

Purpose/Aims: To examine the associations among HF severity, CG sociodemographic, clinical, and family functioning (FF) variables, and CG outcomes.

Research Questions/Hypotheses: Can CG outcomes of depression and perceptions of life change be predicted by FF, sociodemosographics and patient severity of HF?

Significance: Family functioning has been associated with caregiver (CG) outcomes in other cardiac populations such as stroke, however little is known about the influence of these factors in heart failure (HF) caregivers.

Methods: HF patient-CG dyads (n=77) were recruited. HF patients were men (64 %), Black (65 %), NYHA class II (77 %), age 55 ± 10 years. CGs were women (79%), age 52.6 ± 13 years, and 44% were spouses. CG variables and measures included depressive symptoms (Beck Depression Inventory; BDI-II), perceived life changes (Bakas Caregiving Outcomes Scale; BCOS), and the global family functioning (GFF), communication (COM) and problem-solving (PS) subscales of the Family Assessment Device (FAD). Multiple regression analyses were used to predict CG outcomes of BDI-II and BCOS scores by FAD subscales after controlling for CG age, gender, history of antidepressant use, and HF patient NYHA class.

Findings: CG BDI-II scores ranged from 1 to 30, mean 7.6 ± 6.7; 17.6% had scores reflecting moderate depressive symptoms. The lower the BDI-II, the higher the BCOS (r=.44, p=.001). Regression analysis yielded an adj R2 of .17, (F1,62=11.3, p=.001) with lower PS (p=.001) as a predictor of higher BDI-II. Lower family PS (p=.000) and younger CG age (p=.02) were predictors of lower BCOS scores indicating negative perceptions. PS accounted for more variance in BDI-II and BCOS than COM or GFF scores.

Discussion:
Family CGs experience varied depressive symptoms and perceived life changes. The lower the CG depression, the more favorable the caregivers' perceived life changes. Younger caregivers and families with poor problem-solving skills are at higher risk for worse outcomes. Family-focused interventions aimed at enhancing problem-solving may improve HF CG outcomes.

Research Completed: Yes

Abstract History:
- This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
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Non-Exclusive License:
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Abstract ID: 247

Transition Theories and Trauma Recovery Narratives:

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Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? No

Abstract Categories:
Interest Group: Health Promotion/ Self-care
Thematic Areas: Women's Health

Purpose/Aims:
To compare transition and developmental theories to research findings about recovery from childhood maltreatment.

Research Questions/Hypotheses:
Explore: (a) aftereffects of trauma, (b) strengths and strategies, (c) relational aspects of recovery and thriving after trauma, and (d) sociocultural contexts in comparison to transition and developmental theories.

Significance:
Transition theories, (Melies; and others) are essential to nursing practice. Developmental theories are applied to childhood maltreatment. Trauma recovery theory, (e.g., resilience), parallels these theories. These theories haven't been compared and examined in research about thriving in survivors of childhood maltreatment. Without clarification, practice may be based on erroneous and unnecessarily pathologizing principles.

Methods:
Secondary analysis of the rich, in-depth narrative database of a multiple (open-ended) interview study (n=44), using narrative analysis (Bal, Barthes) examined an essential dimension of thriving after trauma, counterframing perceptions.

Findings:
The core process of thriving was becoming resolute, having six dimensions. One is counterframing perceptions of the social world as a context where safe relationships are formed versus a continued struggle and perceptions of a closed abusive relational space. We identified that trajectories of healing, becoming resolute, represent transitions, one of which is a major upward turn, the focus of the secondary analysis. We read narratives for how women accomplished and maintained the gains made in the upward turn in their life trajectories, despite aftereffects of abuse and neglect. Reading, educational and work achievement, constancy and recognition of the survivor as differentiated were key to counterframing social perceptions.

Discussion:
Transitions theories explain some but not all of our findings regarding how survivors of childhood maltreatment become resolute through counterframed perceptions, and become successful in work, education and relationships. We offer comparisons with transitional, developmental and thriving theories to illustrate how recovery from the trauma of childhood maltreatment is a unique change process. We explain implications for multiple disciplinary practices, including those of nursing, psychotherapy and psychiatry.

Research Completed: Yes

Abstract History:
Financial Disclosure:
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FDA Disclosure:
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Submitted By:
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Assessment of Health-Promoting Factors in College Students' Lifestyles

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Abstract Categories:
Interest Group: Health Promotion/ Self-care
Thematic Areas: Healthy People 2010

Purpose/Aims:
The purpose of this study was to determine the level of health-promoting behaviors evident among college students.

Research Questions/Hypotheses:
(1) What is the overall health-promoting lifestyle among college students? (2) What are the health-promoting behaviors in subscales? (3) Is there a difference between grade levels and health-promotion scores? (4) Can health-promoting lifestyle and subscale scores be predicted by demographic variables?

Significance:
The health of young adults is critically linked to the health status they will have as older adults. Even a common knowledge about the benefits of a healthy lifestyle, it is disturbing that students continue to participate in harmful health habits. Lack of effective campus based educational programs and student health centers identification of risk taking behaviors are impacts on health.

Methods:
A descriptive comparative design was used for this study. The convenience sample of 1,752 students completed an on-line demographic data form and the Health Promotion Lifestyle Profile II (HPLP II). Appropriate permissions were obtained and means, standard deviations, 1-way ANOVA, Pearson correlations, t-tests, and linear regression were used to analyze data.

Findings:

The HPLP II answered research questions one and two revealing a mean score of 2.68 on a 4 point scale. All subscales scores were 2.50 or greater. 1-way ANOVA answered the third research question and revealed more health-promoting behaviors among graduate students. Backward linear regression was used to determine if any of the demographic variable predicted HPLP II scores. All regression models were statistically significant with all demographic variables having predictive value except for family history of disease.

Discussion:

More screening and health histories need to be obtained during student health center visits. Interactive and peer lead educational programs should be implemented to increase participation. Further research on college students would lead to increased awareness of need for health-promotion programs. Lastly, financial support and campus-wide policies for health programs is essential for success.

Research Completed: Yes

Abstract History:

Financial Disclosure:

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Yes

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

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Assessment of Safer-Sex Activities of Hispanic/Latino College Students Living On Campus

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Yes

Abstract Categories:  
Interest Group: Health Promotion/ Self-care
Thematic Areas: Health Disparities

Purpose/Aims:  
Study purpose was to assess and identify HIV/STI sexual and safer-sex activities of a subset of Hispanic college students.

Research Questions/Hypotheses:  
What are sexual and safer-sex activities of Hispanic/Latino college students who live on campus (sexual orientation, sexual activity, H/O of STIs/STI testing, condom usage?)

Significance:  
In 2004 there were 2/3x as many Hispanics than whites infected with STIs (Chlamydia, gonorrhea, syphilis). Hispanic/Latino college students may be at particular risk for HIV/STIs due to normative beliefs/ethnicity roles (Jemmott, Jemmott & Villarruel, 2002).

Methods:  
Participants were recruited Fall 2006 during a campus HIV awareness event held at the residence halls. SENORITAS BSN Peer Educators conducted a condom skills display. After participating, attendees were asked to complete an anonymous survey, adapted from the National College Health Assessment (2003) sexual activity assessment.

Findings:  
Sample= 23 students; 18 females, mean age of 22; five males, mean age of 21. Twenty students (87%) reported having sex with at least one partner. Sixteen of these students self-identified as heterosexual (80%); four were not (20%); two males = men who had sex with men; two females = bi-sexual. Females had a mean average of 3.3 sexual partners; males had a higher mean of 32 sexual partners. Most sexually-active students had taken an STI test at least once; one student tested positive. All sexually-active students had used condoms; only half stated they used condoms all the time.

Discussion:  
Findings of concern were male student's high numbers of partners, and students' lack of consistent condom use. Findings of interest were the "virgins" who came to the condom skills table, which could indicate an intention to become sexually active, and the students who self-identified as non-heterosexual. Further study is needed to determine the most effective method to deliver tailored STD/HIV prevention education to these distinct groups of college students.  
Funded by the Office of Women’s Health, DHHS

Research Completed:  
Yes

Abstract History:  
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FDA Disclosure:  
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Safer Sex Behaviors of Heterosexual Men Aged Over-50 Using Prescribed Viagra, Levitra or Cialis

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Abstract Categories:  
Interest Group: Health Promotion/ Self-care  
Thematic Areas: Adult Health

Purpose/Aims :  
Identify and describe safer-sex behaviors of older heterosexual men who are using prescribed oral PDE5 inhibitor medications (Viagra, Levitra or Cialis) for treatment of erectile dysfunction (ED).

Research Questions/Hypotheses :  
What are the health promotion practices and safer-sex behaviors of heterosexual men over age 50 who are using prescribed ED drugs? What are their attitudes towards condoms?

Significance :  
Older heterosexual men using prescribed ED drugs may be at risk for sexually-acquired HIV because they do not perceive themselves as at risk/susceptible to HIV and may lack factual knowledge of HIV transmission ((Karlovsky, Lebed & Mydlo, 2004; Palmer, 2000; Paniaqua, 1999).  

Methods :  
Pilot is being conducted as a one-time 30-minute telephone interview. Participants are being recruited from physician/NP practices. The following data is being collected: Demographics; Older Men’s Health Program & Screening Inventory (Loeb, 2003); Brief HIV Knowledge Questionnaire (Carey & Schroder, 2002); Safe Sex Behavior Questionnaire (Difiorio, et al, 1992); Condom Attitude Scale (Sacco et al., 1991); and the Time Line Followback (TLFB) Interview of Sexual Behavior & Alcohol and Other Drug (AOD) Use (Weinhart, 2002).

Findings :  
Study is in progress.

Discussion :  
Older heterosexual men prescribed ED drugs may be at risk for HIV/STD infection. An understanding of these factors can be useful when designing health promotion activities and education programs for this population. Funded by the National Institute of General Medical Sciences, NIH, Minority Biobehavioral Research Support (MBRS) program

Research Completed :  
Yes

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CHURCH-BASED MANAGEMENT PROGRAM FOR AFRICAN AMERICANS WITH TYPE 2 DIABETES (CAMP-Diabetes)

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The purpose of this study is to explore the feasibility of implementing a church-based diabetes self-management intervention (that includes stress management, diabetes education, physical activity and spirituality as a coping mechanism) for 45 middle-aged and older African American (AA) adults with Type 2 Diabetes (T2D).

Research Questions/Hypotheses:
What is the feasibility of conducting a church-based diabetes management intervention program? To what extent does a church-based diabetes management program lead to changes in the appraisal of diabetes, level of self-care management and emotional distress, glycemic control and on health as compared to baseline measurements? Is the effectiveness of church-based diabetes management programs on glycemic control influenced by the gender make-up of the groups?

Significance:
T2D and its complications disproportionately affect African Americans. Approximately 3.2 million AA adults ages 20 years and older have diabetes, and it is well established that AA adults with diabetes have higher rates of CVD morbidity and mortality associated with a variety of diabetic complications than Caucasians. Unfortunately, AA adults with T2D, in the South, have poorer glycemic control and higher blood pressure than their Caucasian counterparts. Inadequate knowledge about the importance of lifestyle changes adds to the difficulty in making changes in order to achieve adequate control of diabetes for AA with T2D. New, holistic approaches to help AA with T2D are critical.

Methods:
This longitudinal quasi-experimental study will incorporate quantitative (Pre-post tests) and qualitative methodologies (focus groups) across four time points (baseline, 3, 6, and 12 weeks). Baseline and post-intervention data will include structured interviews and completion of questionnaires, and physiological measures.

Findings:
Data collection is currently in progress. Preliminary findings indicate that church-based diabetes management programs are feasible for middle-aged and older African American adults with T2D.

Discussion:
Findings from this study will provide a basis for future studies to develop culture specific intervention studies for AA with T2D.
An Exploratory Study of Family Health History Knowledge Among Diverse Populations

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Abstract Information

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Willing To Submit Poster? Yes

Abstract Categories:
Interest Group: Health Promotion/ Self-care
Thematic Areas: Health Disparities

Purpose/Aims:
This study describes the family health history profiles and levels of knowledge of family health history among a sample of ethnically diverse working adults.

Research Questions/Hypotheses:
1. What are the family health history profiles of a sample of ethnically diverse working adults? 2. What are the levels of knowledge of family health history among a sample of ethnically diverse working adults?

Significance:
Family history of disease is an important predictor of an individual’s health. A family medical history is a “genetic biopsy” and may be one of the most cost-effective genetics assessments for health promotion/prevention including cancer and heart disease (Bennett, 2004). Public lack of knowledge of family history and barriers to use among clinicians prompted the US Surgeon General Family History Initiative. Most study of family history knowledge has examined primarily white populations; little is known about family history knowledge among diverse populations, particularly adult, working Hispanics.

Methods:
The study used a descriptive design. Volunteers were recruited from staff members in a private facility caring for elders. "My Family Health Portrait", a web-enabled program organized family history into a printable graphical representation. Blood pressure, height, weight, waist, hip measurements were obtained. Descriptive statistics were used in the analysis.

Findings:
Of 28 participants, 68% were unaware of at least one piece of health/mortality data for one or more members of three generations. Over half had two or more first degree relatives (FDR) with cardiac disease; 25% had one FDR with cardiac disease; 57% had FDRs who developed heart disease at a younger age. Three-fourths
had BMIs in the overweight or obese categories. Among Hispanics, 46% had a FDR with diabetes and 25% had FDRs who were young adults at diagnosis.

Discussion:
More study is needed of diverse populations and mechanisms to include professional use of this tool in primary care settings.

Research Completed:
Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
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Non-Exclusive License:

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Evaluating the Effectiveness in Teaching "ToPIC": Tobacco Prevention in Children

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Abstract Categories: Interest Group: Health Promotion/ Self-care
Thematic Areas: Healthy People 2010

Purpose/Aims: The purpose of this study is to evaluate the effectiveness in teaching "ToPIC" (Tobacco Prevention in Children), a program developed by the First Author, to increase awareness in children of health risks related to tobacco use through the delivery of an age-appropriate interactive educational program.

Research Questions/Hypotheses: The following hypothesis will guide this study: Children who are taught "ToPIC" will remember 75% of the key points about tobacco awareness as indicated by a post-test score of 75%.

Significance: Tobacco use is the leading preventable cause of premature death and disability in the U.S. 3.1 million adolescents use tobacco with 3,000 additional adolescents becoming regular smokers each day. Tobacco awareness programs for children vary in structure and length. An intense interactive program offered in 3 weekly sessions was developed to address tobacco awareness in children.

Methods: Using the one-group pretest--post-test design, this study will evaluate how much information children ages 8 to 15 years learn about tobacco awareness and prevention in three 40-minute weekly sessions. The targeted sample are children who attend the Boys and Girls Clubs in 5 southeast Georgia counties. Approximately 200 children will complete ToPIC with ~800 children encountered throughout the program teaching period. Descriptive analyses will be performed on pretest and post-test scores. Item analysis of test questions will be performed to determine internal consistency.

Findings: Complete statistical analysis will be conducted at the end of the study period (summer of 2007). Currently, 119 children have completed ToPIC. Thus far, average post-test score is 84.4%, exceeding the expected outcome. 76.4% had higher post-test scores, 11.2% scored less on post-test, and 12.4% had the same score.

Discussion: Teaching ToPIC has demonstrated positive outcomes thus far, indicating a high probability of effectiveness. Teaching tobacco awareness is a health promotion objective of Healthy People 2010. Further program development is recommended to identify other effective measures in teaching tobacco awareness in children.

Research Completed: Yes

Abstract History: -This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
-Details: At the MuKappa Research Conference in Statesboro, GA, on April 9, 2007 as a poster presentation.

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

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Grants/Research Support: Y
American Cancer Society
Kids for healthy eating and exercise (KHEE) club

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Abstract Categories:
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- Thematic Areas: Health Disparities

Purpose/Aims:
Reducing childhood obesity to improve overall health in African American children by teaching the proper balance between food intake and exercise.

Research Questions/Hypotheses:
Can structured classes on proper balance between food intake and exercise affect obesity?

Significance:
According to the Centers for Disease and Control Center (CDC) (2004), Mississippi ranked first for the states with the worst obesity epidemics. Realizing that obesity is easier to prevent than to treat, this program's aim is to teach youth that obesity is not a normal phase of development, but rather, a result of an improper balance between food intake and exercise. Furthermore, proper nutrition does not need to be boring or difficult, and good exercise/activity does not have to be dull or isolating.

Methods:
The KHEE club consists of a ten-month daily or weekly pilot program that will convene during the regular school semesters [Fall, August-December; Spring, January-May] from 3:00-5:00pm. Enrollment and size are tentative, but 20 children/year is the estimated sample size. The conceptual model is based on a three-level approach to preventing and/or treating childhood obesity. Level I consists of baseline BMI screening. Level II consists of initiating early interventions (services that addresses risk factors of obesity) for children with BMI>25 but <30. Level III consists of coordinated, comprehensive, intensive and sustained child- and family-focused services and support.

Findings:
Expected findings are: 1) at the completion of the program 50% of the children participating would have lowered BMI by 10% or >; 2) at the completion of the 1st year, attendance rate for all scheduled activities will >60%; 3) attrition rate will be <15%. These expected findings are important because, via this program obese children will relate healthy eating and exercise with fun!!!

Discussion:
Adolescents must learn to eat and enjoy healthy foods in moderate amounts and to exercise regularly to maintain desired weights. This program teaches just that—in a FUN way!!!

Research Completed: No

Abstract History:

Financial Disclosure:

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Methods in Research to Reduce Drinking in College Students who are High-Risk Drinkers

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The purpose of this study was to investigate the agreement between the Brief Readiness to Change (RTC) questionnaire and a one-question scale measure in college students who engage in high-risk drinking.

Can a single item readiness to change question be substituted for the Readiness to Change questionnaire when assessing college students' readiness to change drinking behavior?

Reducing alcohol consumption in college students has been identified as a major health priority for college campuses. Students' readiness to change behaviors may assist in identifying effectiveness of an intervention. A one-item tool, if relevant, could be beneficial in screening students.

Three hundred sixty-four high-risk drinking college students, identified during their initial student health clinic visit through an alcohol screening questionnaire incorporated into a health questionnaire, completed the brief Readiness to Change (RTC) questionnaire. Participants were also asked “How ready are you to change your drinking behavior?” with response options on a scale of 1-10, called the RTC Ruler.

One-way ANOVA, evaluating the relationship between stage of RTC and the RTC ruler, was significant, F(2, 340) = 91.858, p = .000, with the stage of RTC accounting for 35.3% of the variance of the RTC ruler. Post hoc tests revealed a statistically significant difference (p = .000), between each of the three stages of RTC as measured by the questionnaire.

The RTC ruler demonstrated statistically significant agreement with the brief RTC questionnaire. Use of the RTC ruler as a mechanism for individualizing alcohol interventions warrants study. Its ease of use, coupled with the speed at which it may be administered, suggests that it may be a valuable assessment instrument in resource-limited student health centers.
Abstract ID: 380

Methods in Research to Reduce Drinking in College Students who are High-Risk Drinkers

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Thematic Areas: Methods

Purpose/Aims:
The purpose of this study was to evaluate the feasibility of using word association as a rapid assessment measure of drinking behavior in college students who engage in high risk drinking.

Research Questions/Hypotheses:
Can knowledge of college students' first words associated with drinking behaviors be helpful in developing interventions?

Significance:
Reducing alcohol consumption in college students is a major priority on college campuses. College students typically identify alcohol use as a positive experience. Knowledge of college students' expectancies as identified by their first word associations may be helpful in intervention research.

Methods:
Three hundred sixty-four high-risk drinking college students, identified during their initial student health clinic visit through an alcohol screening questionnaire incorporated into a health questionnaire, completed a Healthy Lifestyle Questionnaire that included a first-word alcohol expectancy question and a 30-day alcohol recall diary.

Findings:
Using a normative set of alcohol expectancies, 69% of the participants gave responses that were positive or positive/aroused. For females, frequency of responses peaked at three to four drinks per occasion while for males, they peaked at six to seven. Negative first-word associations were more common for students who reported fewer drinks per occasion.

Discussion:
Data suggest that alcohol expectancies vary by gender based on average drinks per occasion. While the probability of a positive response was found to be higher with heavy drinkers, more research is needed to evaluate the predictive value of word associations with level of alcohol consumption in both genders and among all levels of college students. Use of normative sets of word association alcohol expectancies provides a standardized method for evaluation of alcohol expectancies.

Research Completed: Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

Grants/Research Support: Y
National Institutes of Health

Consultant:

Stock/Shareholder:

Speaker's Bureau:

Other Financial or Material Support:

FDA Disclosure:

INDEX FIRST PREVIOUS NEXT LAST
Methods in Research to Reduce Drinking in College Students who are High-Risk Drinkers

Abstract Information

Presentation Preference: SNRS Symposium

Willing To Submit Podium? Yes
Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Health Promotion/ Self-care
Thematic Areas: Methods

Purpose/Aims:
The purpose of this study was to determine the fidelity of brief interventions (BI) intended to reduce alcohol harms among college students identified as high-risk drinkers. Brief interventions vary among studies in duration, frequency and content. Brief interventions based on MI are popular in the addictions field of health care.

Research Questions/Hypotheses:
Do healthcare providers implement brief intervention when analyzed with a standardized assessment tool?

Significance:
College students are at risk for harms related to alcohol use behaviors. BI are recommended by the National Highway Traffic Safety Administration (NHTSA) as a key component of prevention in the college student population. The University of Central Florida Health Services designed a study to test the effectiveness of BI on students’ drinking behaviors. Preliminary findings demonstrated significant
reductions in alcohol use and associated harms in treatment group.

Methods:

A total of 364 students were enrolled in the study; 181 students were randomly assigned to the BI group. The BI sessions were audiotaped in a subset of subjects those in the treatment group. A content analysis methodology was used to analyze audio-taped transcripts of 63 BI sessions. The Motivational Interview Skill Code (MISC) framework and a word analysis for the components of the BASICS program were used to assess BI elements.

Findings:

Analysis of the audiotapes using the MISC guide found that 17% of the tapes demonstrated MI proficiency. The majority of the interventions, 63%, met the criteria more consistent with brief advice counseling that adhered to many of the components of the BASICS program.

Discussion:

Brief advice that incorporates BASICS components appears to be successful in changing alcohol behaviors among college students. Motivational interviewing is difficult to master. Further research to determine the elements that are efficacious in BI are needed.

Research Completed: Yes

Abstract History: Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

Grants/Research Support: Y
AANP Foundation
FNA Foundation
Sigma Theta Tau, Theta Epsilon
Consultant:
Stock/Shareholder:
Speaker's Bureau:
Other Financial or Material Support:

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

Submitted By:

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Such interventions are recommended by the National Highway Traffic Safety Administration (NHTSA) as a key component of prevention in the college student population.

Abstract Information

Presentation Preference: SNRS Symposium

Abstract Categories:
- Interest Group: Health Promotion/ Self-care
- Thematic Areas: Methods

Purpose/Aims:
The purpose of this symposium is to discuss methods and measurements that are part of a large randomized trial to reduce alcohol consumption and its associated harms in college students identified as high risk drinkers. Those assigned to the treatment group received Brief Intervention as recommended by the National Highway Traffic Safety Administration.

Research Questions/Hypotheses:
- What are methodologic and measurement issues in conducting intervention research with college students identified as high risk drinkers?

Significance:
Reducing alcohol consumption and its associated harms is a major public health issue. College students have a high incidence of drinking behaviors. Interventions delivered through providers at the college health center may be effective in changing drinking behaviors in this high-risk group.

Methods:
Three papers will be presented. The first, by Rash, relates to testing the fidelity of the model of brief intervention. The second, by Sole, discusses...
findings related to readiness to change drinking behaviors. The last paper, by Harper, discusses word association expectancies.

Findings:

Issues related to methods and measurement will be summarized as part of the symposium.

Discussion:

Most of the brief intervention episodes were more consistent with brief advice rather than brief intervention. A one-word measure of readiness to change, along with a one-word alcohol expectancy measure, may assist the provider in assessing readiness to change and in delivering the interventions to change drinking behaviors.

Research Completed: Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

Grants/Research Support: Y

National Institutes of Health

Consultant:

Stock/Shareholder:

Speaker’s Bureau:

Other Financial or Material Support:

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

Submitted By:

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Abstract ID: 402

Comparison of physiologic and biochemical obesity markers in healthy college age students.

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Abstract Information

Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Health Promotion/ Self-care
- Thematic Areas: Healthy People 2010

Purpose/Aims:
This investigation was a preliminary study that explored factors linked to obesity that may be associated with co-morbidities in college students (mean age 23.5). The specific aim of this study was to explore the links between leptin and other obesity markers with body composition, ventilation and fitness in college age students that may point to early indicators of co-morbidities.

Research Questions/Hypotheses:
Do obese, compared to non-obese, college age individuals show a greater propensity toward obesity related co-morbidities, determined by the presence of specific physiologic and biochemical variables?

Significance:
Obesity has reached epidemic proportions and is expanding in younger populations at an alarming rate, quickly becoming the nation’s major health issue. Excess body weight is linked to numerous acute and chronic disease processes with their associated morbidity and mortality.

Methods:
Forty participants (20 obese BMI>30, 20 non-obese BMI <30) underwent: Spirometry (FVC/FEV1) and impulse oscillometry (IOS5/IOS20) measures to determine respiratory function; Cycle ergometry testing to determine fitness level (VO2); Body composition measures (percent body fat); and Blood analysis to determine Leptin, C-peptide (CRP), cortisol, insulin, glucose, and lipid levels.

Findings:
The sample was 66% Caucasian, 32% Black and 2% Hispanic, with 80% female and 20% male. Applying a t test to compare group means, the obese group was found to have: A greater percent body fat (p 0.000), a lower fitness level (p 0.000), an elevated CRP (p 0.024), Leptin (p 0.002), Insulin (p 0.021), and lower HDL’s (p 0.005). All other variables were similar for each group.

Discussion:
These preliminary findings on this small sample indicate that obese college students in this study are showing some positive indicators toward the development of obesity related disease that could signal an earlier onset of cardiovascular or metabolic disease that typically occurs later in life. Additional study is planned with a larger cohort to further analyze these variables.

Research Completed: Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

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Quality of Male Infertility Web Sites

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Abstract Information

Presentation Preference: SNRS Podium Presentation

Abstract Categories:
Interest Group: Health Promotion/ Self-care
Thematic Areas: Basic science

Purpose/Aims:
Male reluctance to discuss matters related to infertility may lead to seeking alternative sources of information such as the Internet. As a major source of health information without formal standards, the quality of the information and sites is not always assured. The purpose of this study was to provide information about the quality of websites related to male infertility. The specific aim is to evaluate the quality of selected sites using Silberg and colleagues criteria.

Research Questions/Hypotheses:
What is the quality of male infertility information and sites on the Internet?

Significance:
Information on assessing quality of sites for infertile male e-health users will enable health care providers to better assist them and facilitate their access to relevant, accurate information.

Methods:
A descriptive study was conducted using the Internet and five search engines. The first 100 sites from each engine were included using the search word "male"
infertility". After site screening for duplication, inaccessibility, etc., 119 sites comprised the sample. A check sheet with Silberg and colleagues standards was used to collect data. Content validity was obtained. Interater reliability was 85%. Descriptive statistics were used to analyze data. Limitations include the number of sites in the final sample and the inconsistency in site accessibility.

Findings:
Only 1% of sites met all of the standards and 50% of them did not meet any.

Discussion:
The findings from this study support the existing literature regarding the poor quality of Internet information in general and male infertility specifically based on the Silberg and colleagues criteria. Health care providers, policy makers, and nurse educators must take heed to the increased use of this source of information and include assessments of use by clients with strategies to ensure the quality of that information. Research from the e-health users regarding their Internet information needs is warranted as well as how they make decisions about what information to use.

Research Completed: Yes
Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
FDA Disclosure:
Cleared: Yes
Non-Exclusive License:
Accepted Terms: Yes
Submitted By: rsherrod@bama.ua.edu
Abstract ID: 440

Attention-Control Groups: Active or Inactive Treatment for Women with FMS

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Student Level:
Purpose/Aims: The purpose of the interview component of a larger intervention study, Health Promotion for Women with Fibromyalgia Syndrome, was to explore the experiences of women in the attention-control group in order to suggest explanations for the changes in outcome variables reported by this group.

Research Questions/Hypotheses: What are the perceptions of women in the attention-control group about their experience in the research study?

Significance: An important underlying assumption of attention-control groups is that attention is an “inactive ingredient” of a therapeutic intervention that can be separated from the treatment’s active ingredient, but there is little scientific evidence for this assumption (Gross, 2005).

Methods: Participants in the intervention study (N = 177) were randomly assigned to either the intervention group, consisting of eight lifestyle change classes and a supportive environment component, or the attention-control group, comprised of eight classes on various health-related topics that were not covered in the intervention. All participants completed quantitative measures at baseline, 2 months, 5 months and 8 months. The data reported here were collected after completion of the intervention and all quantitative data collection. The six participants from the attention-control group who participated in the interview component had a mean age of 55 years. Two were employed either full or part-time. The data was analyzed using qualitative content analysis (Morse and Field, 1995).

Findings: Participants reported the value of being able to share experiences, and made comparisons between themselves and others in the group. The attention-control classes did not cover topics specific to living with FMS and did not alter the way they thought about or managed FMS. Negative effects on relationships due to illness were discussed.

Discussion: Social interactions figured prominently in the data, suggesting that the positive changes in outcome variables in the attention-control group may be related to interacting with other women with the same chronic health condition.

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

Submitted By: threebeals@gmail.com
Abstract ID: 447

Congruence in Symptom Recognition Between HF Patients and their Caregivers

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SNRS member? Yes
Student Level:
This study examines the congruence between heart failure (HF) patients and their family caregivers (FC’s) as they relate to the frequency and severity of perceived symptoms.

Research Questions/Hypotheses:
Is there a significant difference between HF patients and FC’s on the frequency and severity of symptoms experienced by the patient?

Significance:
Inadequate symptom management in HF patients is a major factor in repeated rehospitalization. FC’s play an important role in symptom management and can influence symptom assessment and outcomes.

Methods:
A sample of 25 HF patients receiving home health care and their designated FC’s were recruited. HF patients were 71.6±9.4, 64% Caucasian, and NYHA class III (76%). FC’s included primarily spouses (36%). Both patient and FC completed the Heart Failure Symptom Survey (HFSS) which measured the frequency and severity of HF symptoms experienced in the past seven days on a 0-10 scale (0=never, 10=very frequently) for 14 common symptoms of HF.

Findings:
The four most prevalent symptoms were the same for patient and FC (difficulty sleeping, tiredness, edema, and shortness of breath (SOB)) although the FC’s reported lower percentages. Spearman rank correlation coefficients and t-tests were used to compare patients and FC’s responses. HF patients reported sleep problems (8.18±2.4), tiredness (7.43±2.9), swelling (7.43±3.3), SOB while lying down (7.40±2.9), and SOB at rest (7.06±2.9) most frequently. FC’s ranked tiredness, sleep problems, SOB with activity, bloating and swelling as the most frequent symptoms respectively. The most severe symptoms reported by the patient were problems with sleep (7.94±2.4) and tiredness (7.38±2.5). FC’s ranked tiredness as the most severe patient symptom followed by trouble sleeping.

Discussion:
Some symptoms of HF are more salient and perceived best by the patient. In this analysis, FC’s are fairly congruent in symptom recognition. Further analysis of the HF/FC assessment of symptom frequency and severity is necessary to tailor interventions that will improve symptom recognition and management.

Research Completed:
Yes

Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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Oral Health among Adults with Doctor-Diagnosed Arthritis:

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SNRS member? No
The primary purpose of the current study was to evaluate oral health among adults with doctor-diagnosed arthritis (DDA).

What is the association between oral health and Doctor Diagnosed Arthritis?

The significance of the current study was it evaluated progress to date in meeting related Healthy People 2010 objectives as applied to DDA at-risk groups.

The recently-released Behavioral Risk Factor Surveillance System (BRFSS-2005) data served as the numerical predicate for both the determination of relative progress, as well as, the identification and/or validation of significant socio-demographic and health-related quality of life predictors of oral health among the vulnerable DDA cohort.

Healthy People 2010 Objectives 21-3 and 21-10 were seemingly met in advance of the 2010 suspense date. Additionally, multivariate regression analyses identified 4 independently significant predictors of poor oral health: having arthritis (OR=2.07), age ≥ 65 years (OR=2.46), less than a high school education (OR=2.30), currently smoking (OR=1.84), and a body mass index ≥25kg/m2 (OR=1.78).

The findings of this study are consistent with those of external studies that linked oral health including tooth loss and periodontal disease to arthritis (Al-Emadi, Bissada, Farah, Siegel, & Al-Zaharan, 2006), to age (Tutuncu & Kavanaugh, 2005), to smoking (Al-Shammari, Al-Khabbaz, Al-Ansari, Neiva, & Wang, 2005; Molloy, Wolff, Lopez-Guzman, & Hodges, 2004; Riley, Tomar, & Gilbert, 2004), to educational and socio-demographic status (Davis, 2000; Kocher et al., 2005) and finally, to obesity (Alabdulkarim, Bissada, Al-Zahrani, Ficara, & Siegel, 2005; Borges-Yanez, Irigoyen-Camacho, & Maupome, 2006).

The findings of this study are consistent with those of external studies that linked oral health including tooth loss and periodontal disease to arthritis (Al-Emadi, Bissada, Farah, Siegel, & Al-Zaharan, 2006), to age (Tutuncu & Kavanaugh, 2005), to smoking (Al-Shammari, Al-Khabbaz, Al-Ansari, Neiva, & Wang, 2005; Molloy, Wolff, Lopez-Guzman, & Hodges, 2004; Riley, Tomar, & Gilbert, 2004), to educational and socio-demographic status (Davis, 2000; Kocher et al., 2005) and finally, to obesity (Alabdulkarim, Bissada, Al-Zahrani, Ficara, & Siegel, 2005; Borges-Yanez, Irigoyen-Camacho, & Maupome, 2006).

The findings of this study are consistent with those of external studies that linked oral health including tooth loss and periodontal disease to arthritis (Al-Emadi, Bissada, Farah, Siegel, & Al-Zaharan, 2006), to age (Tutuncu & Kavanaugh, 2005), to smoking (Al-Shammari, Al-Khabbaz, Al-Ansari, Neiva, & Wang, 2005; Molloy, Wolff, Lopez-Guzman, & Hodges, 2004; Riley, Tomar, & Gilbert, 2004), to educational and socio-demographic status (Davis, 2000; Kocher et al., 2005) and finally, to obesity (Alabdulkarim, Bissada, Al-Zahrani, Ficara, & Siegel, 2005; Borges-Yanez, Irigoyen-Camacho, & Maupome, 2006).
Abstract ID: 467

Self-care behaviors of African-and Mexican-American adolescent males whose partner(s) have sexually transmitted infections

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Abstract Information

Presentation Preference: SNRS Poster Presentation

Abstract Categories: Interest Group: Health Promotion/ Self-care
Thematic Areas: Child & Adolescent Health

Purpose/Aims: The purpose of this study is to explore the self-care behaviors of adolescent males in relationships with African- and Mexican-American adolescent females who have or have recently had sexually transmitted infections (STI).

Research Questions/Hypotheses:
What is the meaning of self-care and access to resources to support self-care for adolescent males in sexual relationships?

Significance: Providing appropriate and adequate healthcare resources for adolescents who are engaging in sexual intercourse is extremely important given the belief that behaviors established early in life strongly influence morbidity and mortality throughout the lifespan. Data from the 2005 Youth Risk Behavior Surveillance Survey (YRBSS) created by the Centers for Disease Control and Prevention offer data about the prevalence of sexual activity by high school adolescents. Of male adolescents surveyed, 75% of African-American, 58% of Hispanic and 42% of Caucasian, indicated that they have engaged in sexual intercourse (Centers for Disease Control and Prevention, n.d.). Researchers have used these and other instruments and surveys to gain insight into adolescent males’ attitudes and behaviors regarding sexuality. Few, if any, studies ask male adolescents what they know about caring for their bodies when they are in a sexual relationship and how they learned this information. It is also not known how the male adolescent perceives the use of health care services as a resource for self-care behaviors. What, where and how these men gain information and how this correlates with behavior may offer insights into not only his self-care, but also his partners’.

Methods: A qualitative study using grounded theory methodology will be conducted with male adolescent partners of African- and Mexican-American adolescent women who have a history of STI.

Findings: Preliminary findings will be presented from the ongoing study.

Discussion: Data from this study will form the basis for cognitive behavioral interventions and a better understanding of the male adolescent’s role towards self-care in relationships.

Research Completed: Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

Grants/Research Support: Y
Sigma Theta Tau Delta Alpha Chapter
Consultant:
Stock/Shareholder:
Speaker's Bureau:
Other Financial or Material Support:

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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Abstract ID: 551

Exploring Oral Health Status and Acidogenic Characteristics of Food Intake and Meal Patterns in Low-Income Women Early in Pregnancy

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SNRS member? Yes
Student Level:
Purpose/Aims: To explore oral health status and maternal acidogenic dietary patterns in early pregnancy.

Research Questions/Hypotheses: How do low-income women in early pregnancy report their oral health status and dietary patterns?

Significance: Pregnant women with poor oral health and oral conditions coupled with acidogenic dietary patterns can lead to poor pregnancy outcomes and oral diseases.

Methods: Using a descriptive design, three 24-hour dietary recalls were conducted on non-consecutive days over two weeks. Participants (n = 13) were between 19-31 years old (mean = 24 y/o), 5-9 weeks pregnant at time of initial screening (mean = 7wks), were uninsured or underinsured and 54% reported an income of less than $20,000/year.

Findings: 61.5% of women reported visiting a dentist within the past year, 38.5% either did not recall the last dental visit or had not seen a dentist in the past 2 years. All women reported brushing daily, however only 3 reported flossing daily. 3 women reported tooth pain and 1 reported gum pain. None reported difficulties with chewing or swallowing. 6 of the women had inadequate intake of calcium and Vitamin C, 2 nutrients important for maintaining oral health. 5 women reported vomiting 1-2 times a day and vomited up to 2 cups each time. Over the 3 separate dietary recalls per woman, 62% of foods eaten during snacks had high acidogenic content (carbonated/sweetened beverages, starches, fruits, and sugar products) in contrast to 4% of foods consumed during meals.

Discussion: Women in this study had increased susceptibility to periodontal disease, plaque formation and dental caries, particularly women with low intake of vitamin C. These women had an increased risk for developing systemic infections and therefore, increasing their risk for developing adverse pregnancy outcomes. Health care professionals need to assess pregnant women for oral health problems, dietary intake patterns, and oral health behaviors and provide referrals to appropriate dental health professionals.
STATE OF THE SCIENCE of DIABETES PEER SUPPORT

Abstract Information:

Presentation Preference:
SNRS  Student Poster Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Health Promotion/ Self-care
Thematic Areas: Chronic illness

Purpose/Aims:
To analyze the concept of peer support as it relates to adherence to diabetes self-care through a variety of perspectives: conceptual, methodological, and empirical.

Research Questions/Hypotheses:
What are the conceptual, methodological, and empirical dimensions of peer support?

Significance:
There were 1.5 million new cases of diabetes diagnosed in people aged 20 years or older in 2005. The epidemic of type two diabetes is projected to reach 333 million persons worldwide by 2025. As a consequence, many more patients will develop complications such as blindness, chronic kidney disease, lower-limb amputations, peripheral neuropathy, as well as decreased quality of life, decreased functional status, and emotional distress.

Methods:
Pubmed, Medline, and CINAHL were searched using the key words of diabetes, chronic...
illness, peer support, support groups and adherence. Limits were set for articles published after the year 2000, English language, outpatients, and type two diabetes.

Findings:
While social support for diabetes patients has been studied, little can be found regarding the specific component peer support. Support from peers and fellow patients may enhance psychological and biophysical outcomes of care. However, there is a lack of consistency in operationalization of peer support as an intervention to augment diabetes self-care adherence. Instruments have been developed with items that measure peer support. Usually, peer support is measured within an instrument that is designed to measure the broader concept of social support or biophysical and psychological outcomes of care.

Discussion:
The small amount of research produced about peer support has used varying measures and differing effects. Measures of peer support occur primarily through instruments designed to address social support and do not reflect the attributes of emotional, informational and appraisal support. Future research examining peer support may provide additional insight into factors affecting adherence to diabetes self-care.

Research Completed: Yes
Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
FDA Disclosure:
Cleared: Yes
Non-Exclusive License:
Accepted Terms: Yes
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Abstract ID: 636

Evaluation of Health Promotion Model (HPM) Measures for Use with Sheltered Homeless Women

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Abstract Information

Presentation Preference: SNRS  Student Poster Presentation

Willing To Submit Poster?  Yes

Abstract Categories:  
Interest Group: Health Promotion/ Self-care  
Thematic Areas: Women's Health

Purpose/Aims:  
To assess the Health Promoting Lifestyle Profile II (HPLP II), Self-Rated Abilities for Health Practices scale (SRAHP), and personal health history form (PHF) for acceptability, readability, and respondent burden for homeless women.

Research Questions/Hypotheses:  
Are the HPLP II, SRAHP, and PHF acceptable, readable, and cause little respondent burden?

Significance:  
There is little research documenting the health-promoting behaviors of homeless women. This study will assess the usefulness of the HPLP II, SRAHB, and PHF for research with homeless women.

Methods:  
Data were collected for this descriptive study by self-report and by structured interview. A convenience sample of 25 women, 18-55 years old, was recruited by flyers placed in homeless shelters. Seventy-six percent reported they had completed high school or greater. Qualitative data were collected by structured interview.

Findings:  
Women completed the questionnaire in 10 to 45 minutes. One woman stated the questionnaire took too much time (25-30 minutes). Regarding the HPLP II, one participant stated she did not know the meaning of “target heart rate;” two were not familiar with the word “intimacy;” and two found the words “often” and “routinely” difficult to differentiate and suggested that “routinely” be replaced by “always.” Two HPLP II questions were identified as confusing and three were identified as “overlapping.” Women reported they did not have difficulty understanding or answering any SRAHP or PHF items but suggested the PHF include “prison” and “another shelter” in the question asking where she lived prior to the present shelter, why “Black or African American” was used to identify race, and another found it offensive to be asked about age.

Discussion:  
Homeless women expressed that they found the questionnaire easy to read and the instructions clear and easy to follow. The findings confirm that the measures are appropriate and acceptable for use with sheltered homeless women.

Research Completed:  
Yes

Abstract History:

Financial Disclosure:  
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:  
Cleared: Yes

Non-Exclusive License:  
Accepted Terms: Yes

Submitted By:  
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Abstract ID: 639

The Long Term Effects of Military Assisted Tobacco Use

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Abstract Information

Presentation Preference: SNRS  Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Health Promotion/ Self-care
Thematic Areas: Healthy People 2010

Purpose/Aims: To explore the history of military-assisted tobacco use, consequences of this action, compensation to veterans for tobacco-related illness and attempts to prevent tobacco use among military service members.

Research Questions/Hypotheses: What is the effect of military assisted tobacco use on the service members and veterans?

Significance: The long-term effects of tobacco use continue to cost the military and Veterans Administration millions of dollars yearly in tobacco-related health care costs. Smoking status is associated with over $130 million yearly in excess military training costs. Many veterans began using tobacco because of “accessory” packs provided to them with meals. Others are the victims of second hand smoke.

Methods: Review of literature regarding military assisted tobacco dependency was conducted in CINAHL and PubMed databases.

Findings: Despite continuing challenges of tobacco control and the massive burden of illness, death, and economic costs associated with tobacco products, per capita cigarette consumption has decreased to its lowest level since World War II. There are opportunities to prevent and treat tobacco dependence through a variety of interventions. One such intervention is the use of the 5 A’s as advocated in the Clinical Practice Guideline titled Treating Tobacco Use and Dependence. Comprehensive tobacco cessation efforts are effective in improving tobacco cessation rates.

Discussion: The cost of care of military personnel with tobacco dependencies can be economically far reaching and stress the healthcare system. Reductions in tobacco use have great potential to prevent the 30% of cancer deaths associated with tobacco use. The Department of Defense and the Veterans Administration have an obligation to provide services to veterans suffering as a result of military-assisted tobacco use. Furthermore, we must provide assistance with cessation intervention for those already addicted to nicotine and tobacco use prevention classes for those at risk. It is suggested that tobacco use prevention classes begin immediately after basic training to identify at risk service members sooner.

Research Completed: Yes

Abstract History: -This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
-Details: Univ of AR for Medical Sciences, CON Research Day; April 2007

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes
Abstract ID: 657

The Relationship of Aerobic Fitness and Physical Activity in Middle School Students Using Pedometers

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Willing To Submit Poster?  Yes

Abstract Categories:  Interest Group: Health Promotion/ Self-care
Thematic Areas: Child & Adolescent Health

Purpose/Aims :  The purpose of this study was to evaluate the relationship between pedometer assessed physical activity and aerobic fitness in middle school students.

Research Questions/Hypotheses :  Are higher levels of physical activity related to higher levels of aerobic fitness?

Significance :  The benefits of physical activity in youth have been well established. A recent study revealed a moderate relationship between physical activity measured with pedometers and aerobic fitness in youth with higher levels of aerobic fitness related to higher numbers of pedometer step counts. Additional research in this area is warranted.

Methods :  This descriptive, correlation study consisted of 59 male and 57 female sixth and seventh grade students from two rural middle schools. Physical activity levels were assessed using Digiwalker 200 pedometers. Research has established positive correlations (r= .78) between pedometer steps and oxygen uptake during treadmill walking while wearing the Digiwalker 200. Aerobic fitness levels were assessed using the one mile walk test. Age, sex, walking time, heart rate, and weight were entered into a conversion calculator that estimated VO² max. The one mile walk test and this conversion equation have been found to be a reliable method of estimating aerobic fitness in children and adolescents with a reported reliability coefficient of >0.80. We examined the relationship between aerobic fitness and physical activity using Pearson’s correlation coefficient.

Findings :  Findings revealed mean body mass index (BMI) as 21.9, mean level of physical activity was 10,180 steps, and mean VO² max=49.79. Data analysis revealed a weak, positive correlation between aerobic fitness and physical activity (r = 0.289, p= 0.002). The variance accounted for by the interaction of aerobic fitness and physical activity was 0.08.

Discussion :  Although the findings were weak, they were consistent with other stronger studies that report a correlation between aerobic fitness and physical activity. Thus, interventions aimed at increasing physical activity and aerobic fitness in youth is warranted.

Research Completed :  Yes

Financial Disclosure:  Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure:  Cleared: Yes

Non-Exclusive License:  Accepted Terms: Yes
Abstract ID: 686

Self-Efficacy and Barriers to Health-Promoting Behavior in Cardiac Rehabilitation Participants and Non-Participants: A Research Proposal

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Presentation Preference: SNRS   Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Health Promotion/ Self-care
Thematic Areas: Adult Health

Purpose/Aims: The purpose of this study is to compare self-efficacy and barriers to exercise and healthy dietary intake of cardiac rehabilitation (CR) program participants and non-cardiac rehabilitation participants. Specific Aim 1 will compare the change in self-efficacy and barriers related to exercise in CR participants versus non-CR participants between 6 and 12 weeks post-hospital discharge. Specific aim 2 will compare change in self-efficacy and barriers related to healthy dietary intake in CR participants versus non-CR participants at both 6 and 12 weeks post-hospital discharge.

Research Questions/Hypotheses: It is hypothesized that CR participants will present higher levels of self-efficacy and less barriers to exercise and healthy dietary intake than non-CR participants.

Significance: CR research has largely focused on the outcomes of exercise participation, with less emphasis on dietary habits or psychological determinants of behavior change (ie. self-efficacy and barriers to health-promoting behavior). It is expected that the knowledge gained from this study may differentiate success in adopting healthy lifestyle behaviors for both groups. In addition, findings of this study may facilitate development of future interventions to improve cardiac patient outcomes and enhance educational strategies for improving heart healthy lifestyle behaviors.

Methods: A prospective cohort pilot design will be used in this study.

Findings: N/A

Discussion: N/A

Research Completed: No

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

FDA Disclosure:
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Non-Exclusive License: Accepted Terms: Yes

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Abstract ID: 687

Answering the Call: An Advance Practice Nurse's Quest to Improve the Care of a Vulnerable, Heart Failure Population

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Student Level:
The purpose of this study was to determine if heart failure (HF) patients that receive telephone enhanced disease management led by an APN would experience fewer HF-related hospital readmissions and have improved QOL and self-care behaviors than HF patients that receive usual care.

The research question for this study is: Does APN-led telephone enhanced disease management decrease HF-related hospital admissions, and increase QOL and self-care behaviors in HF patients?

The prevalence of HF continues to expand, making this disease a major public health problem. Certain populations, such as the elderly, blacks, and those with lower incomes and living in rural areas, are especially vulnerable to hospital readmissions, poor QOL, and inadequate self-care behaviors associated with heart failure. Tele-health interventions can improve the health of underserved populations.

The study design was a pretest- post test experimental design in which subjects were randomly assigned into two groups, the intervention group and the usual care group. Pretest measures of demographic data, HF-related readmissions, QOL, and self care behaviors were collected from both groups at the time of enrollment in the study. For 12 weeks after the pre-test the APN contacted the subjects from the intervention group via telephone according to the intervention plan. The control group received usual care. The three month follow up will consist of post-test measures for both groups to determine a change in outcomes.

Data collection is underway. Previous research suggests that findings may include a decrease in HF readmissions and an increase in QOL and self-care behaviors in the control group.

Implications for practice and research, based upon the findings of the study to date, will be discussed.
Abstract ID: 691

Breast Cancer Risk Perception and Lifestyle Behaviors among White and Black Women with a Family History

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Abstract Information
Presentation Preference:
SNRS Student Poster Presentation

Abstract Categories:
Interest Group: Health Promotion/ Self-care
Thematic Areas: Women’s Health

Purpose/Aims : To provide a more comprehensive understanding about breast cancer risk perception and its relationship to lifestyle behaviors in white and black women with a family history.

Research Questions/Hypotheses :
1) What factors influence breast cancer risk perception among women with a family history?
2) Do women with a family history make lifestyle changes as a result of their perceived risk?

Significance:
One of the most influential risk factors for breast cancer is family history. Several modifiable lifestyle factors are related to breast cancer risk. For women at increased risk to engage in healthy lifestyle behaviors, theory suggests they need a heightened sense of risk. There is a lack of information regarding the relationship between family history, risk perception and lifestyle behaviors.

Methods:
Participants were invited from the Sister Study, an epidemiological study of
women between the ages of 35 and 74 who are unaffected, but have at least one sister diagnosed with breast cancer. Maximum variation sampling was used to seek phenomenal variation. Twenty white and twelve black women participated, which included a single audio-recorded interview using a semi-structured format. Constant comparative analysis was used. ATLAS.ti augmented analysis. To help demonstrate validity of the findings, expert feedback, memoing, and descriptive statistics were used.

Findings:
Most women had an elevated risk perception and family history played a significant role. A higher percentage of black women mentioned unhealthy diet and lack of exercise as risk factors; more white women identified overweight and tobacco. Eleven women, six black and five white, made some lifestyle change as a result of family history; dietary changes were most frequently reported.

Discussion:
Many factors were involved in risk formulation, but many women were unaware of the relationships between lifestyle behaviors and breast cancer. Knowledge of racial differences in causal beliefs and lifestyle behaviors are important for future developers of breast cancer education programs.

Research Completed: Yes
Abstract History:
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
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Abstract ID: 707

Step It Up: Women Wearing Pedometers

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Abstract Information

Presentation Preference: SNRS  Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Health Promotion/ Self-care
Thematic Areas: Women's Health

Purpose/Aims: This study seeks to uncover intrapersonal variation in step counter reading based on pedometer placement on women.

Research Questions/Hypotheses: What is the intrapersonal variability and reliability in women when a pedometer is worn on the shoe or bra strap when compared with gold standard placement at the waist?

Significance: Motivation is a key component in weight loss and physical activity participation. A pedometer is a tool used for monitoring and motivating physical. Increasing physical activity is a critical component for the prevention and treatment of obesity. Gold standard placement of pedometers is at the waistline or on a belt. This placement is not always feasible for women who have different abdominal fat distribution, wear dresses or avoid waistbands. Alternative placements have not been validated.

Methods: Twelve, non-pregnant women over the age of 20 will be recruited to wear three pedometers (on the bra strap, shoe and at the waist). They will be given a step log that they will return weekly for 3 weeks. Each week they will get a new log and a new placement for each pedometer (pedometer A will be worn on the waist this week, B on the shoe etc). Inter and intra rater reliability will then be determined through statistical analysis (t test equivalence of means, difference scores with waist placement as the referent score and Bland-Altman plots).

Findings: At the time of submission, this study has been funded by Sigma Theta Tau and has been cleared by IRB. Data collection and analysis will be completed by January 2008.

Discussion: Pedometers have successfully been used in programs to increase physical activity levels through monitoring and motivation. Consistent use of the device is essential. Nurses need to be equipped with evidence based recommendations to encourage consistent pedometer use and placement for women. This study is working to provide evidence specific to women.

Research Completed: Yes

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

Grants/Research Support: Y
Sigma Theta Tau Gamma Omicron Chapter At Large Consultant:
Stock/Shareholder:
Speaker's Bureau:
Other Financial or Material Support:

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Cleared: Yes

Accepted Terms: Yes
Abstract ID: 722

An Exploration of the Concept of Compassion Fatigue

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Abstract Information

Presentation Preference: SNRS  Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Health Promotion/ Self-care
- Thematic Areas: Workforce Issues

Purpose/Aims: To present the results of a concept analysis of compassion fatigue (CF) in the health and social sciences literature.

Research Questions/Hypotheses:
- How is CF conceptualized in the health and social sciences literature?

Significance:
The “cost of caring” weighs heavily on professional caregivers. Many health care providers experience compassion fatigue (CF) which can negatively affect their ability to provide care and maintain professional relationships.

Methods: Using Walker and Avant’s framework for concept analysis, literature was reviewed in the professional disciplines of nursing, medicine, psychology/social science, journalism and economics. A search for the term “compassion fatigue” in Ovid, Medline, Infotrac and PsycNet generated 360 articles in the past 20 years. Of these, 31 were selected based on the following criteria: a) sampling from a wide range of disciplines, and b) focusing on selecting references from well-known experts in the area of CF.

Findings: Five key concepts – Secondary Traumatic Stress Disorder (STSD), Post Traumatic Stress Disorder, Vicarious Traumatization, Burnout, and Compassion Satisfaction – were used synonymously with CF in the literature reviewed. Upon further analysis one concept, STSD, was most closely related to CF whereas the other concepts were: a) linked in symptomology only, b) served as precursors to CF, c) focused only on cognitive changes within a caregiver’s inner belief system or d) positively correlated to CF depending on the degree of caregiver resiliency.

Discussion: This analysis reinforced a major existing definition of CF which is the inability to bear witness to the suffering of others. Four new defining attributes common to CF were also identified. These are a) feeling traumatized by others’ trauma, b) having depleted resilience, c) having distorted empathic ability, and d) experiencing negative memories of previous events. Understanding CF through this analysis will help to guide research efforts toward a focus on preventive strategies with a goal of improving patient outcomes and optimizing therapeutic relationships.

Research Completed: Yes

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

Submitted By: miabend7@ufl.edu
The Stay Fit and Healthy Intervention: Chronic Disease Prevention in Women Prisoners

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Abstract Information
Presentation Preference: SNRS Student Poster Presentation
Willing To Submit Poster?: Yes
Abstract Categories:
  Interest Group: Health Promotion/ Self-care
  Thematic Areas: Women's Health
Purpose/Aims:
The Stay Fit and Healthy Intervention was developed as a control attention
Arm of the HOPE research study designed to test a nurse-developed HIV risk reduction intervention for women prisoners. The Stay Fit and Healthy Intervention focuses on disease prevention in women and includes information on nutrition, exercise, stress reduction, smoking cessation, and health promotion behaviors. The purpose of this secondary analysis is to document women prisoner's lifestyle behaviors including dietary habits, smoking cessation, and increase in physical activity and to examine changes in behavior following the Stay Fit intervention.

Research Questions/Hypotheses:
We hypothesize that the women who received the intervention had more positive changes in the selected lifestyle behaviors than those who did not receive the intervention.

Significance:
Current literature on women prisoners and lifestyle behavior change related to nutrition, exercise, and smoking cessation is very limited. Poor nutrition, lack of exercise and smoking is highly associated with chronic illness.

Methods:
The Wellness Inventory section of the Lifestyle Assessment Questionnaire (LAQ) was used to measure lifestyle behaviors and health risks other than sex- or drug-related risks. Each item is scored on a scale ranging from 1 ("almost never") to 5 ("almost always"). Test-retest reliability coefficient is reported to be .76, and content validity has been established (National Wellness Institute, 1980; Steinberg, 1983; Cooper, 1989). The instrument has been used at health fairs and in employee wellness education. Participants completed the LAQ prior to receiving the intervention (T1), immediately following the intervention (T2), 1 (T3), 3 (T4), 6 (T5) and 9 (T6) months after release from prison.

Findings:
Data collection is ongoing at the current time, September 2007 and will be completed in December 2007. Data from T1, T3, T5 and T6 will be analyzed.

Discussion:
To be included in the poster session following data analysis in December 2007.

Research Completed: Yes
Abstract History: Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
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Development of the Health Beliefs Related to Cardiovascular Disease (HBCVD) Scale

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Abstract Information
Presentation Preference: SNRS Student Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories:
Interest Group: Health Promotion/ Self-care
Thematic Areas: Chronic illness
Purpose/Aims:
Develop an instrument measuring health beliefs related to CVD risk and diet and exercise in adults with type 2 diabetes.<br />
Research Questions/Hypotheses:
What are the psychometric properties of the Health Beliefs related to Cardiovascular Disease scale (HBCVD)?
Significance:
Cardiovascular disease (CVD) is the major cause of morbidity and mortality in diabetes. Diet and exercise significantly decrease CVD risk; however adherence rates for these behaviors are low among diabetics. The HBCVD is based on the Health Belief Model (HBM) which provides an effective framework for understanding behavior motivation. Understanding beliefs about CVD risk and diet and exercise among diabetics would provide important insight for CVD risk-reduction strategies.
Methods:
The HBCVD is a 25 item self-report Likert scale consisting of four subscales
Findings:

Findings demonstrated adequate support for validity and internal consistency of the HBCVD, although the barriers subscale needs improvement. Construct validity was assessed by factor analysis. The susceptibility, severity, and benefits subscale items loaded as predicted. Analysis of the nine barriers subscale items identified four separate factors within the barriers subscale. The HBCVD was a significant predictor of both diet and exercise adherence, providing evidence for criterion validity. The HBCVD demonstrated adequate internal consistency for the total scale ($\alpha=.75$) and individual subscales (susceptibility $\alpha=.91$; severity $\alpha=.72$; benefits $\alpha=.90$; barriers $\alpha=.61$). Adding items to the barriers subscale to measure each sub-factor would likely improve the internal consistency of this sub-scale.

Discussion:

The HBCVD can be utilized as an assessment of health beliefs related to CVD risk and diet and exercise among diabetics. It can be applied in behavior change interventions that target an individual’s health beliefs to reduce CVD risk in adults with type 2 diabetes.

Abstract History:

-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Details: Preliminary results presented at SNRS 2007 Conference

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

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Prostate Cancer Screening Patterns Among Men in the Rural South

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Abstract Information
Presentation Preference: 
SNRS  Student Poster Presentation
Willing To Submit Poster? 
Yes
Abstract Categories: 
Interest Group: Health Promotion/ Self-care 
Thematic Areas: Health Disparities
Purpose/Aims : 
The Aim of this descriptive quantitative study was to identify critical barriers to prostate cancer screening among men living in rural areas. Objectives were a.) to determine the relationship of health beliefs, knowledge, and selected demographic variables (age, income and education to a man's decision to participate in prostate cancer screening. b.) to examine the differences in health beliefs, prostate cancer knowledge scores, age, income and educational levels between men who participate in prostate cancer and those who do not.

Research Questions/Hypotheses: 
Is there a difference in Health Beliefs, Prostate Cancer Knowledge, Age, income or educational levels of men who participate in prostate cancer screening compared to men who do not? What is the relationship of health beliefs, knowledge, age, income and educational level to a man's decision to participate in prostate cancer screening?

Significance: 
One in Six men in the U.S. will develop prostate cancer. Lower prostate cancer screening rates among African American men are clearly potential cause for
higher cancer mortality rates among African American men. The National Prostate Cancer Coalition (2006) reported, "Only about half of all African American men 50 and older have ever been tested for prostate cancer." Few studies have addressed issues, such as value of preventive care, perceived benefits and knowledge especially among rural populations.

Methods:
A convenience sample of 90 African American men dwelling in the rural south completed a questionnaire. Data were Analyzed utilizing descriptive statistics, t-test, Chi square and Logical Regression.

Findings:
Statically significant differences were found between groups concerning Knowledge, motivation, and age. The health belief subcategory motivation was statically significantly different in men who reported participating in prostate cancer screening.

Discussion:
Motivation is a statistically significant factor in prostate cancer screening among men dwelling in the rural south. The study indicated that men who were older, more knowledgeable and motivated were more likely to participate in prostate cancer screening.

Research Completed:
Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
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Experiences of Self-monitoring of blood glucose of adults with type 2 DM who are not on insulin

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Presentation Preference:  SNRS   Student Poster Presentation

Willing To Submit Poster?  Yes

Abstract Categories:
   Interest Group: Health Promotion/ Self-care
   Thematic Areas: Chronic illness

Purpose/Aims :
Few researchers have investigated the role self-monitoring of blood glucose (SMBG) plays in type 2 diabetes mellitus (DM). The purpose of this study is to analyze the experiences of SMBG of adults with type 2 DM who are not on insulin. The impetus to understand the correlates of behaviors is based on the premise that behavior can be modified.

Research Questions/Hypotheses :
   The question guiding this research is "What are the experiences of SMBG in adults with type 2 DM who are not using insulin?"

Significance :
Despite 30 years of use, the role and efficacy of SMBG in individuals with type 2 DM who are not on insulin remains unclear. SMBG is costly and in 2002, nearly one-half billion dollars was spent on Medicare patients for SMBG supplies. Different approaches and a re-evaluation of SMBG from the perspective of SMBG users is necessary to continue to help individuals achieve glycemic control and an improved quality of life.

Methods :
A grounded theory design will be used. A strength of grounded theory is that insight can be gained into understanding how and why an experience happens. The sample will consists of English speaking adults with type 2 DM monitoring at least once a week, on oral and/or dietary therapy only, and who have participated in DM education class/es. Recruitment will continue until data saturation is achieved. Data will be collected via semi-structured audio-taped telephone interviews. Data will be analyzed by the constant comparative method with open coding and line-by-line analysis. Emerging categories, patterns and a core category will be identified.

Findings :
Expected findings include various expressions of thoughts, feelings, barriers, challenges and successes related to SMBG. From all these factors, a core category with all the related core category properties will be identified. The final goal will be the generation of a theory of SMBG.

Discussion :
Study "in-progress"

Research Completed :
No

Abstract History:
   -This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
   -Details: STTI region 7 January 2007

Financial Disclosure:
   Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
          Yes

FDA Disclosure:
   Cleared: Yes

Non-Exclusive License:
   Accepted Terms: Yes

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Submitted By:
Hispanic Healthcare Disparity on the Rise

Abstract Information

Presentation Preference: SNRS Student Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories:
  Interest Group: Health Promotion/ Self-care
  Thematic Areas: Health Disparities
Purpose/Aims:
In 1999 after the IOM report, Unequal Treatment, Confronting Racial and Ethnic Disparities in health care was released in 2002, health providers, legislators, and consumers, sat up and took notice that not only was there disparity in healthcare delivery, but that it was significantly different. The reason for the study was to discern if there was a discrepancy in care provided and if so to explore the causes of these inequities and recommend specific guidelines and policies to prevent them from occurring in the future. The purpose of this paper is to review the evidentiary articles that have addressed the alarm that was set off among healthcare providers to look amongst themselves to see if biases have crept into their decision making regarding minorities.

Research Questions/Hypotheses:
Do today's healthcare providers allow their own biases to impact the healthcare decisions they make for Hispanic patients?

Significance:
The reason this study is significant is because if 50% of the population have the intellect and ability to navigate the healthcare system adequately to make decisions about care, then the likelihood of the Hispanic patient to understand...
the complexity of healthcare is negligible.

Methods:

Integrated review of the literature specifically addressing care of the Hispanic patient.

Findings:

Trends in healthcare of the Hispanic population are evident for disparity in regards to access for healthcare and the quality of that delivery.

Discussion:

The balance of the 2005 national healthcare disparities report finds that although the areas focused on showed some narrowing in regards to disparities among blacks, Asians and American Indians/Alaska natives, the gap has grown wider for the Hispanic populace. Action needs to be taken in 2006 and onward to continue to improve efforts to reduce disparities among all minority groups but with a specific focus on reaching and discerning the needs of the Hispanic population and breaking down the barriers to care.

Research Completed:

Yes

Abstract History:

Yes

Financial Disclosure:

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FDA Disclosure:

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Non-Exclusive License:

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RELATIONSHIP BETWEEN HEALTH LITERACY AND HEALTHCARE MANAGEMENT

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Student Level:
Purpose/Aims:
The purpose of this study is to examine the relationship between health literacy and personal healthcare management. Personal healthcare management includes comorbidities, use of medication (both prescribed and over-the-counter medicines), use of complementary therapies (including herbal products), and a number of visits to the healthcare providers.

Significance:
Although it is difficult to correctly estimate a prevalence of limited health literacy, health literacy is associated with level of education, age, ethnicity, socioeconomic status, comorbidities, and health care access. In Healthy People 2010, health literacy is defined as “the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions.” It suggests inadequate or poor health literacy may cause inappropriate health decisions and negative health outcomes.

Methods:
A cross-sectional, descriptive, correlational design will be used to explore the relationship between health literacy levels and personal healthcare management. One hundred subjects in Florida will be recruited through convenience sampling. Inclusion criteria: Persons with Hispanic/Latino, non-Hispanic Blacks, and non-Hispanic Whites who are 40 years or older at the time of an interview, able to speak either English or Spanish, residing in a community, and able to communicate verbally with intact memory. Excluded will be persons who are those who are hospitalized at the time of interview, reside in a nursing home or other type of assisted living facility, and are unable to be contacted after multiple attempts. Instrument: A questionnaire developed by Yoon and the selective questions from the 2002 National Health Interview Survey; Rapid Estimate of Adult Literacy in Medicine to measure health literacy levels.

Findings:
Findings will be available in February 2008

Discussion:
This study will provide information about potential relationship between health literacy and self care management to develop an intervention.

Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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Abstract ID: 916

Self-Actualization and Purposefulness: An Empowering Approach to Health Promotion and Health Disparity Interventions for African American Women

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The purpose of this study was to identify critical factors that are associated with health promoting attitudes and behaviors in African American women in order to develop interventions that result in positive health outcomes for this population.

Research Questions/Hypotheses:

What factors contribute to the facilitation of health promoting attitudes and behaviors among African American women?

Significance:

According to the US Department of Health and Human Services, African American women experience disparate morbidity and mortality related to conditions such as heart disease, stroke, adverse birth outcomes, and certain cancers. A potentially empowering approach to solving the problem of health disparities in this population is to target the practice of health promoting behaviors. However, environmental, economic, and social barriers negatively influence initiation and maintenance of health promoting behaviors; these barriers also are significantly associated with pervasive health disparities. A promising solution may involve identifying effective facilitators to health promoting attitudes and behaviors despite the presence of these existing barriers.

Methods:

A secondary analysis of qualitative data from 8 focus groups on stress and coping in African American women between the ages of 18 and 72 was conducted to determine factors associated with health promoting behaviors and attitudes. Analytic induction analysis identified themes and concepts related to this objective.

Findings:

Self-actualization and purposefulness were identified as critical factors in health promoting behaviors. Women who identified a distinct purpose for their lives or a focus on personal value and potential also reported actions indicative of health promoting behaviors and attitudes. Their pursuit of purpose represented a drive toward self-actualization, defined as an “ongoing actualization of potentials, capacities and talents, as fulfillment of mission” (Maslow, 1968, p. 25).

Discussion:

Designing health promotion interventions that include components to support the pursuit of purposefulness and self-actualization may enhance health outcomes and decrease disparate morbidity and mortality rates in African American women.

Research Completed:

Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

Submitted By:

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Abstract ID: 904

The relationship between the demands on caregivers and the appraisal of the caregiving experiences of post-stroke veterans

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SNRS member? No
To investigate the relationships between the demands on caregivers and the appraisal of the caregiving experience. This study is a sub-project of a larger study named Informal Caregivers of Veterans Post Stroke, carried out by a Nursing Research Initiative funded by the VA Health Services Research and Development Program in Washington, D.C. The Principal Investigator is Maude Rittman, PhD, RN, Chief Nurse for Research, North FL/SGA Veterans Health System.

The longer the time spent providing care, the less positive the appraisal.

Stroke is the leading cause of long term disability and the third leading cause of death in the U.S. Stroke has major consequences on the lives and experiences of patients and it also affects caregivers. Studies have reported on the negative aspects of caregiver experience but little research has been done the positive experiences of stroke caregivers.

A Waiver of Consent allowed identification of potential subjects from a clinical database and informed consent was obtained for all study participants. IRB approval was received for this sub-study. Data were collected via the use of a structured, standardized survey over the phone. Survey responses regarding positive aspects of caregiving are ranked from 1 to 5. Data also include hours of care provided, type of relationship between caregiver and veteran, and demographic information about caregivers and veterans.

Data from 275 patient-caregiver dyads have been collected and are currently being analyzed to determine the relationship between caregiver demands and the caregiver appraisal of the situation.

The Caregivers’ appraisal of demands is an often overlooked aspect of the life of a caregiver. To sustain caregiving, informal caregivers manage these demands which are often stressful for the caregiver and may lead to negative appraisal of caregiving. Nurses have an important role in helping caregivers cope with demands and to maintain positive perspective of their lives.

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Self Care: A Concept Analysis

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories:
Interest Group: Health Promotion/ Self-care
Thematic Areas: Adult Health

Purpose/Aims:
The purpose of this concept analysis was to clarify the meaning and usage of self-care in patient education.

Research Questions/Hypotheses:
What are the defining characteristics of self care in patient education?

Significance:
The concept of self-care is not a new idea. Orem (2001), stated that adults persons, all things being equal, have developed powers and capabilities to meet their own requirements for continuing care that is regulatory of their own functioning and development (self-care) and that of their dependents (dependent care). According to the Encyclopedia of Public Health (2002), no single definition of self-care behavior has been broadly accepted. Definitions vary as to (1) who actually engages in self care behavior, (2) what prompts self-care behaviors, and (3) the extent to which health care professionals are involved. For this
reason, the concept of self-care should be further clarified.

Methods:
The eight-step process developed by Walker and Avant (2005) was used to conduct this concept analysis. Upon selection of a topic of interest and the determining the purpose thereof, a review of literature was performed. The review of literature revealed past research, applicable information, and the current usage of the self-care concept. The defining attributes were determined. Model, borderline, related, invented, and contrary cases were constructed.

Findings:
The concept of self-care was determined in this analysis to be proactive, beneficial, empowering, and favorable for the involved parties. Performance of self-care maintains dignity and promotes a sense of worth in patients.

Discussion:
Understanding the concept of self-care is essential in the facilitation and encouragement of its use by healthcare providers. The autonomy of self-care aids in health promotion, restoration, and maintenance. The design and implementation of nursing interventions should be aimed at self-care utilization and should serve as a constituent in the expected outcome of patient care plans. The concept of self-care supports personal growth and contributes to optimal functioning and well-being.

Research Completed: Yes
Abstract History: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Financial Disclosure: Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
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Abstract ID: 973

Coming to know the ongoing impact of disruptive life events through an American veteran’s experience of war

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Abstract Information

Presentation Preference: SNRS  Student Poster Presentation

Abstract Categories: Interest Group: Health Promotion/ Self-care
Thematic Areas: Adult Health

Purpose/Aims : Begin to understand how people manage disruptive life events, like those occurring for war veterans.

Research Questions/Hypotheses :
What are the challenges for veterans who had engaged in active combat, and how do these challenges live on, over time?

Significance :
More than 1.5 million soldiers have served in Iraq and Afghanistan since 2001. While this service can be considered a disruptive life event in and of itself, many soldiers experience exceptionally traumatic events. Research shows that many veterans experience difficulties when reintegrating into civilian lives. If we hope to empower veterans to renegotiate home life, we must understand their war experience.

Methods :
One case study of an 84-year-old Pearl Harbor survivor was analyzed using a story inquiry research method. The method has five inquiry processes: 1) gather stories of a health challenge; 2) analyze the stories for themes of “what matters
most”; 3) describe the developing story plot for each theme; 4) identify movement toward resolving the health challenge; 5) synthesize findings to address the research question.

Findings :
A disconnect between the trained in-the-moment reaction and reflection-over-time, was “what mattered most.” Struggle between today’s thoughts and feelings and the past’s demanded/required actions characterized the story plot. Movement toward resolving was expressed as patriotism, an important value, too-seldom shared with younger generations. From this case study analysis, research questions regarding healthy approaches for reentry into normal everyday living can be posed.

Discussion :
Even 65 years after war, veterans are living with the impact of the disruption of military service. There is a critical and imminent need that we understand the war experience so that we may plan meaningful healthcare interventions for veterans who will be returning home in upcoming years.

Research Completed : No
Abstract History:
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
Submitted By: lmwands@yahoo.com
DEVELOPMENT OF A VALID AND RELIABLE TOOL FOR TESTING KNOWLEDGE OF CARDIOVASCULAR DISEASE AND ITS RISK FACTORS IN PATIENTS’ DIAGNOSED WITH HYPERTENSION AND/OR DIABETES: THE BALTIMORE CARDIOVASCULAR PA

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Abstract Information

Presentation Preference: SNRS Poster Presentation

Abstract Categories: Interest Group: Minority Health
Thematic Areas: Health Disparities

Purpose/Aims: The purpose of this research study is to develop and test the validity and reliability of a written tool assessing African American hypertensive and diabetic patients’ knowledge of cardiovascular disease (CVD) and its risk factors.

Research Questions/Hypotheses:
"Development of a valid and reliable tool for testing knowledge of CVD and its risk factors in African-Americans may assist providers with their approach to counseling, and the management and treatment of underlying causes, such as hypertension and diabetes."

Significance: Assessment of patients' knowledge of CVD and its risk factors may assist providers with patient education and the management and treatment of its underlying causes.

Methods: Construction of the tool will build on measures adapted from past research and construction of new items as necessary. Following the initial development of the tool, the expertise, experience, and familiarity of the physicians with the patient population of the Baltimore Partnership to Reduce Cardiovascular Disparities will be relied upon for evaluation and revision of items. Patients recruited from the parent project’s treatment and control groups, will assist with construct-related validity. Focus groups of 8-10 patients with diabetes and/or hypertension will be asked to complete the preliminary questionnaire and comment on the items. The tool will then be administered to patients while waiting to be seen by the physician/provider at initial visits.

Findings: For assessing construct validity, factor analysis (principal component or classic) will be used. Internal consistency reliability will be evaluated using the Kuder-Richardson formula 20. The alpha level will be set at 0.05. Test-retest reliability testing will also be employed. Bivariate correlations will be examined using Spearman’s Rank Correlations. Additional analysis will be carried out as necessary.

Discussion: Customized/tailored counseling may increase patient compliance with treatment and improve communication between physician/providers and patients. Having some idea of what African Americans know about CVD will raise physician’s/providers awareness and assist with the initiation of effective communication.

Research Completed: No

Abstract History: -This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes
Grants/Research Support : Y
NIH (NHLBI)
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Abstract ID: 161

Are Cuban Caregivers in Miami different from other Hispanic Caregivers?

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Student Level:

Abstract Information
Presentation Preference: SNRS Poster Presentation

Abstract Categories:
Interest Group: Minority Health
Thematic Areas: Chronic illness

Purpose/Aims:
Coping patterns of Hispanic family caregivers of chronically ill elders in their homes were examined in greater Miami. The purpose was to explore differences between Cubans and other Hispanics (Central and South America, or Caribbean) in demographics, cultural values, and service needs.

Research Questions/Hypotheses:
Do Cuban and other Hispanic caregivers differ in demographics and education? What is the difference in cultural values, family assistance and need for services between Cuban and other Hispanic caregivers?

Significance:
Hispanics belong to significantly different cultures. Health professionals need awareness of such differences in caregivers as they affect health needs and behaviors.

Methods:
Recruitment of 155 Cuban and 85 other Hispanic caregivers, all born in Latin America, occurred in home health agencies and the community. They were 27 to 89 years old, 81% female, mostly married, and cared an average of 71 hours weekly for spouses, parents, or relatives. They were interviewed in their homes.
Instruments used included Montgomery ADL, burden, affection and obligation scales, Reed religiosity scales and a list of available community services.

Findings:

Chi-square analysis revealed few differences in caregivers or patient characteristics. Education was somewhat higher in Cuban caregivers: 48.5% had not finished high school compared to 61.2% other Hispanics. Patient ADL levels were slightly higher for Cubans but mental status was comparable. Culture and caregiving variables were compared with independent sample t-tests. The sense of obligation was generally high with Cubans scoring highest. Other Hispanics scored significantly higher in religiosity and reported considerably higher needs for community services and family help.

Discussion:

The results suggested that Cuban immigrant, even though similar in demographics, met their caregiving needs better than other Hispanics, possibly due to higher availability of family assistance and culturally congruent community services. Professionals need to pay attention to the needs for culturally adequate services of other Hispanics and religious aspects in the care.

Research Completed: Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

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Abstract ID: 178

Cardiovascular Disease in Rural Alabama Women

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Abstract Information
Presentation Preference:
SNRS Podium Presentation
Willing To Submit Poster? Yes
Abstract Categories:
Interest Group: Minority Health
Thematic Areas: Women’s Health
Purpose/Aims : The purpose of this study was to examine the relationships between demographic
Research Questions/Hypotheses:
What are women’s perceptions of CVD as a health issue for women in general and as a health problem to them personally? What is the knowledge level of CVDRF in women? Are their relationships between demographic factors, women’s perception of CVD, their knowledge of CVDRF and their CVD risk prediction score?

Significance:
Past research on CVD in women has focused on Caucasians from urban and suburban settings. The women in this study were rural Alabamians; 35% were African-American. The results of this study addressed gaps in knowledge about rural and African-American women and CVD.

Methods:
The setting for this study was a rural Alabama Health Clinic. The study was a prospective descriptive design with data collection tools that included: (1) demographic data form, (2) Perceptions of CVD in Women Survey, (3) The Coronary Health Disease Knowledge Test, and (4) Framingham Heart Disease Risk Prediction Score Tool.

Findings:
There were 112 women who completed the study. The majority of participants were married and between the ages of 50 and 74. Only 30% of the women identified CVD as a significant health problem facing women. Seventy-eight percent of the women were able to identify only one personal risk factor of CVD. The average number of CVDRF among the participants was 3. The mean score for the Knowledge Test was 8.5 out of 20. The Risk Prediction Score mean was 9.14. Increased age, single marital status, full time employment and lower income were variables associated with higher risk scores.

Discussion:
This study’s results indicated that knowledge of CVD in rural Alabama women was inadequate and that these women were at significant risk for CVD.

Research Completed: Yes
Abstract History:
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
FDA Disclosure:
Cleared: Yes
Non-Exclusive License:
Accepted Terms: Yes
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The Efficacy of Interventions Designed for Poor Women in the Rural South

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Presentation Preference:
SNRS Podium Presentation

Willing To Submit Poster?
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Abstract Categories:
Interest Group: Minority Health
Thematic Areas: Health Disparities

Purpose/Aims:
The purpose of the paper is to report on the lessons learned from 15 years of experience in designing and testing interventions for rural women with HIV disease.

Research Questions/Hypotheses:
1) What are the unique characteristics of the lives of rural women with HIV disease that impact the efficacy of interventions designed for this population? 2) What strategies can be used to develop interventions that are predictably effective for rural women?

Significance:
Rural women are increasingly recognized as high risk for health disparities due to a number of socioeconomic factors that provide a context for the lives of this population. The health of this population is greatly impacted by a number of gender, race, and economic issues that can attenuate the effect of any intervention if such factors are not addressed. Important factors include alienation from the local health/social services systems, psychosocial problems such as lack of supportive networks, mental health problems such as depression,
substance abuse, and history of abuse/violence, isolation and the experience
of race and disease-related stigma, economic vulnerability and limited employment
opportunities, and the physical barriers posed by the rural environment such
as the absence of public transportation.

Methods:

The author will synthesize findings from a number of qualitative and quantitative
investigations to elucidate the context of the lives of rural women with HIV
disease that are disempowering and make it difficult for such women to take
control of their lives, health, or illnesses. An empowerment model of intervention
tailored to the issues of rural women is presented.

Findings:

The findings provide support for the use of empowerment intervention strategies
and the use of community-based participatory research approaches to design
research that is relevant to the population of rural women with HIV disease.

Discussion:

The implications of the findings presented for other populations of rural women
are discussed.

Research Completed:

Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose
products may be mentioned in this material?

Yes

Grants/Research Support: Y
National Institute of Nursing Research/National Institutes of Health
Consultant:
Stock/Shareholder:
Speaker's Bureau:
Other Financial or Material Support:

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

Submitted By:

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Sleep Assessment in Latino Mothers and Preschool Children –a Feasibility Study

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Abstract Information

Presentation Preference: SNRS Poster Presentation

Abstract Categories: Interest Group: Minority Health
Thematic Areas: Methods

Purpose/Aims: The purpose of this study is to evaluate the feasibility and maternal acceptability of actigraphy and sleep diaries as tools to assess sleep concurrently in Latino mother/child dyads.

Research Questions/Hypotheses:
Significance:
There is substantiation that poor quality sleep is associated with obesity in adults and overweight in children. Latino women and children experience high rates of overweight/obesity and its sequelae in health outcomes like diabetes and cardiovascular disease. Despite the evidence of burden of disease on Latino populations, most studies examining the relationship between sleep and obesity/overweight have focused on non-Latinos. Therefore, it is not known what sleep assessment tools are reasonable and acceptable to Latinos. In addition, there is limited literature describing the relationship between maternal sleep and preschool child sleep patterns.

Methods:
A descriptive research design was selected for this study. Sleep will be examined concurrently in mother and child by the use of actigraphy as an objective assessment, and maternal/child sleep diaries as a subjective assessment. The Pittsburgh Sleep Quality Index (PSQI) will measure a baseline of maternal sleep. Maternal Acculturation will be measured by the Acculturation Rating Scale for Mexican Americans. A maternal acceptability survey will assess the mother’s perceptions of the instruments and the study protocol. Recruitment of 10 dyads of Latino mothers and their 2-5 year old children will take place in Seattle community.

Findings:
Data on number of subject responses to recruitment, consent rate, study completion rate, adherence to study protocols, the percentage of wearable time and maternal acceptability of instruments will be presented. Preliminary data on the relationship between maternal and child total sleep time, sleep efficiency and wake after sleep onset will be examined.

Discussion:
Findings from this feasibility study will inform a future descriptive study exploring the relationship between sleep, eating patterns, physical activity, and overweight/obesity in Latino mothers and preschool children.

Research Completed:
Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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Health Beliefs: A Risk Factor for Hypertension?

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Presentation Preference: SNRS Podium Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Minority Health
Thematic Areas: Women's Health
Purpose/Aims: To examine associations between (hypertension) HTN-related health beliefs, perceptions regarding weight, weight class, and blood pressure (BP) class among African-American women (AAW).
Research Questions/Hypotheses: HTN-related health beliefs, perceptions regarding weight and HTN knowledge will predict weight class and BP class.
Significance: Identifying modifiable risk factors for HTN and obesity may reduce the prevalence of obesity and HTN in AAW.
Methods: A cross-sectional design was used to enroll 167 AAW 18-45 with a mean age of
31.1 (SD=7.03) years, no diagnosis of HTN, no current depression, and non-menopausal.
Clinical variables: age, SBP, DBP, and BMI. Sociodemographic variables and measures:
HTN-related health beliefs (HRHB) (HTN Beliefs Scale); perceptions regarding weight (PRW) (The Weight Perception and Control Scale); and HTN knowledge (HTN Knowledge Questionnaire). Data were analyzed with separate multinomial logistic regression models for weight class and blood pressure (BP) class.

Findings:
Higher perceived HTN susceptibility (OR=1.11, p=.02), increased the odds, and higher perceived HTN seriousness (OR=.86, p=.01) and higher actions to reduce HTN susceptibility (OR=.84, p=.02) decreased the odds of being overweight or obese. More positive self-image in relation to weight (OR=1.22, p<.001) and greater weight management and control practices (OR=1.29, p<.001) increased the odds of being overweight or obese. Higher perceived HTN susceptibility (OR=1.03, p=.01) and more positive self-image in relation to weight (OR=1.08, p=.03) increased the odds of having a BP in the pre-HTN or HTN class. Higher perceived HTN seriousness (OR=0.92, p=.05) decreased the odds of having a BP in the pre-HTN or HTN class.

Discussion:
Hypertension-related health beliefs and perceptions regarding weight were significant correlates of BP class and weight class in AAW. Interventions that target these modifiable factors should be developed and tested for their effect on HRHB, PRW, HTN and obesity risk in this vulnerable population. Further research to determine whether these factors are correlates of hypertension and obesity risk in other populations is needed.

Research Completed: Yes
Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
Grants/Research Support: Y
NINR
Emory University
Consultant:
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Speaker’s Bureau:
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FDA Disclosure:
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Superwoman Schema: An Asset or a Vulnerability to

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Abstract Information

Presentation Preference:
SNRS Podium Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Minority Health
Thematic Areas: Women’s Health

Purpose/Aims:
Superwoman Schema (SWS) involves feeling obligated to remain silent about feelings of stress or vulnerability in order to project an image of strength. This method of responding to stress may be detrimental to the health of African American women as a result of increased psychological distress, heightened physiological stress responses, or maladaptive coping behaviors (e.g., stress-related overeating) to manage circumstances that are hidden and internalized. The empirical literature on SWS in African American women is limited. The aim of this study was to learn about antecedents and effects of SWS on health.

Research Questions/Hypotheses:
What are the dimensions, antecedents, and health effects of SWS? Is SWS an asset or a vulnerability to health?

Significance:
A growing body of research suggests that stress and coping strategies may be significant factors that explain health disparities in African American women. In order to determine how SWS relates to negative health outcomes, this phenomenon needs to be clearly conceptualized.

Methods:
Purposive sampling was used to obtain a diverse sample of African American women. Eight focus groups were conducted to identify critical components and contextual elements (e.g., sociohistorical, economic, generational) of this phenomenon using analytic induction.

Findings:
Seven dimensions of Superwoman Schema were identified. Participants across groups reported that SWS was both good and bad in terms of their health and well-being. While SWS helped participants persevere during challenging times and allowed them to achieve goals, for some, this style of coping also resulted in isolation from social support resources, limited self-care, risk-related health behaviors (e.g., adult-onset smoking and binge eating), and embodiment of stress (e.g., migraines, anxiety, hair loss).

Discussion:
SWS may be an important risk factor for adverse health outcomes among African American women. Data from this study has contributed to the development of a preliminary instrument to empirically examine the health outcomes of this phenomenon.

Research Completed: Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
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Abstract ID: 290

The Effectiveness of Psychoeducational Support Interventions on Quality of Life Among Rural Breast Cancer Survivors

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Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Minority Health
Thematic Areas: Health Disparities

Purpose/Aims: The purpose of this paper is to report initial results of the effectiveness of innovative psychoeducational support interventions on quality of life (QOL) among 53 rural women with breast cancer in the first year of post-treatment survivorship.

Research Questions/Hypotheses: This study (1) examined patterns of change in QOL over time in 53 rural and 203 urban breast cancer survivors; (2) compared the effects of psychoeducational support interventions on quality of life (QOL) among rural and urban women with early stage breast cancer in the first year of post-treatment survivorship; and (3) examined within group differences in QOL domains among rural breast cancer survivors.

Significance: Disparities exist in providing follow-up cancer care for rural cancer survivors. In particular, few interventions exist for rural breast cancer survivors, an at risk population of cancer survivors.

Methods: Data were derived from subjects enrolled in the Breast Cancer Education Intervention (BCEI), a randomized clinical trial (RCT) of QOL psychoeducational support interventions. A standard QOL measure (QOL-BC) and a Sociodemographic tool were used to examine the treatment effects between groups. Data were analyzed using Generalized Estimating Equations (GEE).

Findings: Patterns of change over time showed improvement in overall QOL. BCEI intervention effects were similar for both rural and urban subjects. Rural subjects in Experimental arm showed improvement in overall QOL and across all QOL domains of Physical, Psychological, Social, and Spiritual well-being. GEE analysis showed significant differences in overall QOL between the two groups.

Discussion: This study is one of the first to describe the effectiveness of psychoeducational support interventions among rural breast cancer survivors in the first year of post-treatment survivorship. Rural breast cancer survivors derive benefit from participation in interventions targeted to post-treatment survivorship. With the growing number of cancer survivors, meaningful and pragmatic solutions are needed to assist them transition from treatment to survivorship.

Research Completed? Yes

Abstract History: -This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
-Details: National Cancer Institute, Office of Cancer Survivorship meeting in October 2006

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

Grants/Research Support: Y National Institute of Nursing Research
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Abstract ID: 294

Florida Index of Treatment Accessibility (FITA): Quantifying and Profiling Travel Barriers to Access Care

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Currently, there is no commonly accepted protocol for evaluating relative access to care or a metric for comparing care accessibility for individuals or groups. The purpose of this study is to report the development of the Florida Index of Treatment Accessibility (FITA), an innovative quantitative relative index that helps determine the probable ease or difficulty in accessing treatment for: (1) an individual compared to a reference group, or (2) a group of individuals compared to a reference group.

Research Questions/Hypotheses:
This research study examines the feasibility and applicability of the FITA to quantify and profile travel barriers to access care.

Significance:
Measures of treatment accessibility are generally subjective within the context of a study and are often imprecise in definition. The FITA takes an innovative approach for measuring disparities in access to care.

Methods:
The study describes the development of the FITA with a sample of 256 breast cancer survivors. Subjects served as the benchmark group for comparing treatment accessibility with other population samples. We focused on two factors: (1) travel ease between one’s home and the nearest appropriate cancer treatment facility for care, and (2) population density in the area immediately surrounding one’s home. Subjects’ physical home address served as one point of reference and the address of the treatment facility served as the other point of reference. The United States Census Bureau provided census track data for calculating population density. A range of publicly available resources were used to provide supplemental calculation support.

Findings:
Publicly available data were used to formulate the conceptual, descriptive, and calculation formulae to develop the FITA and will be described. Assessment protocols and results from the application of FITA for 256 breast cancer survivors will also be discussed.

Discussion:
Researchers can apply principles of the FITA to determine disparities in access to care for vulnerable, at risk populations in the future.
Psychometric Analysis of the Spanish Language Diabetes Patient Foot Care Knowledge Test

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Abstract  Information

Presentation Preference:  SNRS   Podium Presentation

Willing To Submit Poster?  Yes

Abstract Categories:
Interest Group: Minority Health
Thematic Areas: Health Disparities

Purpose/Aims:
To determine the reliability and validity of the Spanish Diabetes Patient Foot Care Knowledge Test (S-DPFCKT) for Mexican/Mexican Americans (MX/MA).

Research Questions/Hypotheses:
Specific aims: 1) identify the internal consistency and test-retest reliability of the S-DPFCKT across MX/MA; 2) determine the construct validity of the test based on the following hypotheses: subjects with diabetes will score higher on the S-DPFCKT vs. those without diabetes, and, those with diabetes who attend class will score higher than non-attendees; and, 3) evaluate the item difficulty and discriminative power of test items.

Significance:
MX/MAs have a significantly higher proportion of diabetes lower extremity amputation than non HA whites. Diabetes education programs can substantially decrease diabetes complications. Yet, there are no Spanish measures to assess the patient knowledge outcomes of diabetes foot care education among linguistic and dialect diverse MX/MAs.

Methods:
A convenience sample of bilingual or Spanish speaking only MX/MAs with and without diabetes along the US-Mexico border in west Texas completed the S-DPFCKT in person or by mail. Subjects were mailed the test within 2 weeks for re-test purposes.

Findings:
\( n=190 \) completed the test, \( n=78 \) with and \( n=112 \) without diabetes. KR20=.67 all subjects combined with .71 for both groups. For re-test, \( r=.66 (p<.0001) \) all subjects combined with \( r=.64 (p<.0001) \) and \( r=.65 (p<.0001) \) for those with and without diabetes, respectively. Those with diabetes did not score significantly higher than those without (13.97 vs. 14.89, \( p>.9372 \)) while those with diabetes who attended class scored significantly higher vs. non-attendees (14.87 vs. 12.58, \( p<.007 \)). For discriminative power, 18 test items were good to excellent to determine high from low test scorers; 7 items require further review as those in the high score group were more likely to answer these incorrectly.

Discussion:
Reliable and valid Spanish language measures of foot knowledge are critically important to assure quality care and outcomes for MX/MAs with, and at risk for diabetes.

Research Completed:  Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:

Submitted By:
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Living with Sickle Cell Disease During High School and The Role of School Nurses

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Abstract Information

Presentation Preference: SNRS Poster Presentation

Abstract Categories:
Interest Group: Minority Health
Thematic Areas: Chronic illness

Purpose/Aims:
To explore how the experience of living with sickle cell anemia impacts the well-being of high school students and their families and to explore the role of school nurses in preventing crises and advocating for students with Sickles Cell Disease (SCD).

Research Questions/Hypotheses:
The challenges that high school students with SCD face could be resolved if school nurses worked together with teachers, students with SCD, and their families to educate them and effectively advocate for the special needs of students with SCD.

Significance:
Students with SCD have many school absences that adversely affect their academic performances. They also experience lack of awareness and understanding from their teachers and peers, and this impedes tremendously the management of SCD while they are in school.

Methods:
The sample is a subset of individuals from a larger study about the family experience of living with SCD in which in-depth interviews were conducted with one or more family members from each family. The guiding framework was the Family Management Style Framework.

Findings:
Teachers and peers may have limited understanding of SCD. Some parents were told to withdraw their children from school because the students have too many school absences. Students reported being picked on by their peers being afraid to interact with them because they thought SCD was contagious. Students also stated that their teachers accused them of faking illness. Their biggest concern was the lack of knowledge the teachers have about SCD and its management.

Discussion:
Nurses can play a major role in helping High school teachers understand the challenges and management of SCD and work together with the students and their families to prevent and/or decrease the number of pain crises and school absences that students with SCD experience. As a result, nurses will help high school students achieve both their short and long term educational goals.

Research Completed: Yes

Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure:
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Yes

FDA Disclosure:
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Cardiovascular Health Education for College Students: An Experiential Approach

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Abstract Information

Presentation Preference:
SNRS Podium Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Minority Health
Thematic Areas: Health Disparities

Purpose/Aims:
This study evaluated the efficacy of a culturally specific and developmentally appropriate experiential curriculum for African American college students aimed at cardiovascular risk awareness and behavioral change to reduce risk.

Research Questions/Hypotheses:
None

Significance:
The Center for Disease report that death rates for heart disease were 30% higher among African Americans than Whites. Thus, interventions are needed to help African American young adults understand the importance of cardiovascular risk for their future health, learn how to assess their own family history and health behaviors, and develop the self-efficacy to make behavioral changes that improve life-long cardiovascular health.

Methods:
A quasi-experimental design using pre-post assessment data were used for this feasibility pilot study. Participants were predominantly female (86%) African
American students between the ages of 18 to 24 attending a historically Black university in the South, The conceptual framework used to support the development of the intervention was the Health Belief Model with the integration of self-efficacy as a guiding principle. Key concepts were cardiovascular health knowledge, stress and stress management techniques, physical activity, and dietary health specific to African Americans. Two cohorts of students participated in 6 weekly 2-hour small group experiential workshops that included experiential activities, self-assessments, discussion, homework assignments and focus groups.

Findings:
Analysis of pre-post survey questionnaires indicated that participants showed an increase in knowledge of family history, risk factors of CHD, stress and stress management strategies, physical activity and improved dietary habits.

Discussion:
A small group experiential workshop approach appears to be effective in helping African American college students understand risk and establish healthy heart habits aimed at decreasing risk of CHD. The results of this study will be used to revise the intervention and replicate it with a larger sample of African American students. Additionally, findings from this study will add to the body of knowledge related to cardiovascular risk reduction in the targeted population.

Research Completed: Yes
Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
Grants/Research Support: Y
Winston-Salem State University
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Other Financial or Material Support:
FDA Disclosure:
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The association between diabetes symptoms, knowledge and health literacy in adult Latinos with diabetes

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SNRS member? No
Diabetes is a serious chronic illness that requires ongoing, consistent health care services. Latino immigrants living in the Southeast may have diabetes but not receive adequate health care.

The purpose of this study is to examine the association between diabetes symptoms, diabetes knowledge, and health literacy to blood glucose levels and health care use in Latino adult with diabetes or diabetes risk factors (BMI > 25; age > 45).

According to symptom interpretation models, individuals with serious diabetes symptoms should respond by seeking health care. If adequate skills are present, symptoms are interpreted correctly, followed by appropriate health care use. Inappropriate symptom response often leads to costly and debilitating complications.

This study was descriptive and correlational. Using instruments to measure diabetes symptoms, diabetes knowledge, health literacy and health care use, Latino adults (N = 144) with either self-reported diabetes or diabetes risk factors were interviewed. Glycosylated hemoglobin (HbA1c) levels were taken.

Eighteen participants (12.5%) self-reported diabetes and an additional 17 (13.5%) likely had the disease (HbA1c > 7.0). Both groups had poorly controlled blood glucose levels with a mean HbA1c of 8.7 (SD = 1.8). When compared to participants without diabetes, the self-report group had the lowest diabetes knowledge, and lowest health literacy. According to multiple regression analyses, increased diabetes knowledge was significantly associated with health care use (F(1, 144) = 5.50, p = .02) and having diabetes symptoms was significantly associated with higher HbA1c levels (F(1,144) = 8.16, p = .005). Diabetes symptoms were not associated with health care use.

Undetected and under treated diabetes is a significant problem in Latino immigrants. The inability to adequately respond to symptoms is likely a result of poor diabetes knowledge and health literacy. Interventions that teach health literacy skills and diabetes symptom interpretation may improve appropriate health care use.

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

Grants/Research Support : Y
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Cleared: Yes
Partnering with Diverse Communities Using Web based Health Technology

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Abstract Information
Presentation Preference: SNRS Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories:
Interest Group: Minority Health
Thematic Areas: Health Disparities

Purpose/Aims:
The purpose of the research was to develop a culturally appropriate internet site that incorporates an online research strategy using an existing web page that provides health education for underserved populations (African American, immigrant and Gay, lesbian, bisexual and transgendered).

Research Questions/Hypotheses:
What are the health care priorities for each of the identified communities? How can the desired health care information be most appropriately provided using web based technology?

Significance:
Research is needed to address the complex issue of health disparities. Two new approaches to research that show promise with vulnerable and hidden populations are community based participatory action paradigm and internet based research methodology (Im et. al. 2003, 2004a, 2004b, Strickland 2003).

Methods:
The descriptive study was conducted in three phases. 1) Development of research
content and approaches with assistance of targeted populations using focus group methodology. 2) Application of data management technology and desired content into the capability of the web page with research applicability. 3) Testing developed strategies with targeted populations for cultural and social appropriateness, literacy, accessibility and usability. Ninety participants were included in phases 1 and 3. Inclusion criteria were 1) membership in the selected populations, 2) willing to participate in focus group and computer testing activities 3) communicate in English. Focus groups were conducted in community settings using a semi-structured interview guide. Descriptive data of participants characteristics, online survey data, and computer generated data related to accessed information, were analyzed. Focus group data from phases 1 and 3 were analyzed using Atlas-ti data management software.

Findings:
Findings from phase 1 indicated that health had many environmental components. Confidentiality and privacy were important issues when using computers in public settings. More than 50% did not feel competent to access information due to computer literacy, language and reading level.

Discussion:
Making a technological approach to health information appropriate to these populations requires ongoing partnership.

Research Completed: Yes
Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
-Detail: National Black Nurses Conference 7/27/07

Financial Disclosure:
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FDA Disclosure:
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Non-Exclusive License:
Accepted Terms: Yes
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Pilot Study to Test the Effects of Mind-Body Intervention for Symptom Management in Hispanic Persons Diagnosed with Fibromyalgia.

Abstract Information

Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Minority Health
Thematic Areas: Chronic illness

Purpose/Aims: To test the effects of a 10-week guided imagery intervention on pain, functional status, self-efficacy and distress in Hispanic adults diagnosed with fibromyalgia.

Research Questions/Hypotheses: Will Hispanic adults with fibromyalgia who receive a relaxation and guided imagery intervention experience significant decreases in pain perception and distress and significant improvements in functional status and sense of self-efficacy?

Significance: Fibromyalgia, a chronic pain syndrome that affects 3.7 to 6 million adults in the United States, has unknown pathogenesis and no known cure. While studies of fibromyalgia in Hispanics have been reported in Spain and Latin America, very few studies have been reported in the U.S. This gap exists despite data indicating that Hispanics form the fastest growing minority group in the U.S.

Methods:
Quasi-experimental design, pre-post with repeated measures. Sample: 14 Hispanic adults with fibromyalgia. Intervention: 3 guided imagery audiotapes used in proscribed order for 6 weeks; any order for weeks 7-10. Dependent variables measured: baseline, 6- and 10 weeks. Pain measured using the Short-Form McGill Pain Questionnaire; daily pain: Visual Analogue Scale; functional status: Fibromyalgia Impact Questionnaire; self-efficacy: Arthritis Self-Efficacy Scale; and distress: Mental Health Inventory.

Findings:
Changes in means from baseline to week 10 demonstrated improvement for three dependent variables: Self-efficacy for managing pain (p = 0.02), self-efficacy for managing other symptoms (p = 0.03), functional status (p < 0.01), present pain intensity subscale of the SF-MPQ (p = .04), and daily pain (p = 0.03).

Significance: p = 0.05.

Discussion:
Study findings suggest that relaxation and guided imagery interventions may be used to improve self-efficacy for managing pain and other symptoms related to fibromyalgia and improve physical functioning in this population. Data from this study will contribute to the further development of nonpharmacologic interventions for symptom management in minorities with fibromyalgia.

Research Completed: Yes
Abstract History:
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-Details: STTI Biennium, Vienna, July 12, 2007

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Exploring Cancer Support Issues for Minority Elders

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Abstract Categories:
Interest Group: Minority Health
Thematic Areas: Health System

Purpose/Aims:
Specific aims of this study include: (1) To understand financial issues related to cancer care as experienced by African American elders (2) To elicit from African American elders resources and strategies which are helpful in assisting with the financial aspects of cancer care; (3) To explore African American cancer survivors’ ability to identify and characterize a person whom they relied on for support during diagnosis and treatment and the role s/he played during that period.

Research Questions/Hypotheses:
What is the experience of older African Americans living through cancer diagnosis and treatment? What resources/support are important?

Significance:
Older African Americans currently face substantial barriers to state-of-the-art cancer care from screening to diagnosis to treatment and survivorship. Implementing culturally appropriate sources of support during cancer therapy for this population is critical to improving cancer outcomes and quality of life for this at-risk population.

Methods:
An exploratory, inductive focus group method was used to examine cancer survivors’ experiences with cancer diagnosis/treatment among 40-60 older African Americans >65 residing in rural Virginia and urban Baltimore. Participants’ recommendations regarding a culturally-appropriate cancer support intervention addressing information related to the administrative responsibilities of managing the cancer diagnosis and treatment along with treatment-related decisions and financial challenges were obtained. Focus groups included questions on treatment-related needs, cancer-treatment decision-making, psychosocial support strategies, resources and desired support with financial aspects of cancer care.

Findings:
Information gained from this study enhances understanding of rural and urban African American elders’ experiences with cancer diagnosis and treatment and identifies particular support needs of this vulnerable population. Participants were also able to identify culturally appropriate resources and supportive strategies based on their recent experiences with cancer.

Discussion:
Focus group findings will be used to create a culturally tailored support intervention addressing resource, education and support needs identified by African American cancer elders who have survived cancer diagnosis and treatment.

Research Completed: Yes
Abstract History:
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Diabetes Self-Management Education for Rural African Americans: Who Benefits from Group vs Individual Interventions?

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Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Minority Health
- Thematic Areas: Health Disparities

Purpose/Aims:
The purpose of this study was to test a culturally tailored DSME program delivered through group or individual methods.

Research Questions/Hypotheses:
The research question was, “what are the characteristics of participants who benefit most from a culturally-tailored approach?”

Significance:
African Americans suffer disproportionately from type 2 diabetes mellitus (T2DM) with higher rates of disease and serious complications of amputations, end stage renal disease, and blindness. Diabetes self-management education (DSME) is considered the “cornerstone of diabetes management”, however rural African Americans rarely have access to comprehensive programs. Approximately 80% of those with T2DM receive diabetes care from primary care clinicians who usually offer individual guidance and sometimes group classes. Therefore, it is important to determine characteristics of rural African Americans who benefit from differing methods of culturally-tailored DSME that can be delivered in primary care offices.

Methods:
Participants were 21 rural African American adults with T2DM randomly assigned to either group or individual DSME. The intervention was based on principles of Afro-centric culture and results of prior focus group research. The DSME intervention was pilot tested to determine the feasibility and the impact on the following outcomes: glycemic control (HbA1c using Bayer 200+ point-of-care equipment), Summary of Diabetes Self-Care Activities (SDSCA), goal attainment (AADE Goal Form), and Diabetes Self-Empowerment Scale-Short Form (DES-SF).

Findings:
Data analysis indicates trends toward improved outcomes, but t-test comparisons...
of group to individual change scores indicate no significant differences based on group assignment. The latter finding may indicate both approaches are effective in this population. Data analysis is ongoing to examine changes in outcomes. Nonparametric analysis will be used for group comparisons, while analysis of co-variance (ANCOVA) will be used to determine demographic characteristics associated with outcomes.

Discussion:

Results of this analysis will help inform clinicians about which methods of DSME are most effective in promoting self-management for African American adults with T2DM.

Research Completed: Yes

Abstract History:
- This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
- Details: preliminary analysis SNRS07

Financial Disclosure:
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Impact of Sociodemographic Characteristics and Duration of Diabetes with Self-efficacy in Caucasians and African Americans with Type 2 Diabetes

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Presentation Preference:
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Willing To Submit Poster?
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Abstract Categories:
Interest Group: Minority Health
Thematic Areas: Health Disparities

Purpose/Aims:
This study examined relationships of sociodemographic characteristics and duration of diabetes with self-efficacy in Caucasian and African American adults with type 2 diabetes. The aims were to: (1) determine if self-efficacy differs by race, controlling age and duration of diabetes; (2) investigate whether self-efficacy differs by gender, controlling age and duration of diabetes; and (3) evaluate the potential interaction of race and gender in predicting self-efficacy.

Research Questions/Hypotheses:
The research questions were: (1) What is the relationship between age and self-efficacy among participants?; (2) What is the relationship between duration of diabetes and self-efficacy among participants?; (3) Are there significant gender or racial differences in age, duration of diabetes, and self-efficacy scores?; and (4) Are there significant differences in self-efficacy scores by gender and race?

Significance:
African Americans experience higher rates of diabetes-related complications than Caucasians. Existing studies suggest that self-efficacy may positively influence the initiation and performance of diabetes self-care behaviors.

Methods:
Ninety-one adult participants (64 Caucasian, 27 African American) were recruited at three different clinic sites. Sociodemographic data (age, gender, duration of diabetes) were obtained from medical records. Participants completed the Self-Efficacy Questionnaire (SEQ) to measure their confidence to perform diabetes-related behaviors.

Findings:
No significant correlations were found between: (1) age and self-efficacy subscale scores or total score when the group was considered in total or by race; and (2) duration of diabetes and self-efficacy subscale scores or total score when the group was considered in total or by race. No significant gender or racial differences in age, duration of diabetes, and SEQ scores were found. No significant differences in SEQ scores by gender and race were revealed.

Discussion:
African Americans experience higher rates of diabetes-related complications possibly due to other factors. Further studies are necessary to identify factors associated with self-efficacy in order to develop and test interventions and promote diabetes self-care management.

Research Completed:
Yes

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Constructive Thinking Inventory: Adapting to the Puerto Rican Culture

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Abstract Information
Presentation Preference: SNRS Poster Presentation
Abstract Categories:
Interest Group: Minority Health
Thematic Areas: Health Disparities
Purpose/Aims: This study describes using focus groups to improve the Constructive Thinking Inventory (short version, CTI-S) for Puerto Rican women. Specific aims were to: (1) examine language and cultural appropriateness of CTI-S items, and (2) revise these items for the Puerto Rican culture.
Research Questions/Hypotheses:
Is the focus group an appropriate method for cross-cultural adaptation of an instrument for minorities? What are the important linguistic/cultural dimensions when using the CTI-S with Puerto Ricans?
Significance: The CTI-S measures coping ability through items describing both adaptive/maladaptive automatic thoughts experienced in everyday life (Epstein, 1998). In this study, a version of the CTI previously translated into Spanish for Spain, was adapted for use with Puerto Rican women, making it culturally appropriate for this population and thus more accurate for research.
Methods: This descriptive qualitative design used three focus groups with a convenience sample of Puerto Rican women; five per group. Health practitioners, heads of
Findings:
Participants’ different perspectives influenced contributions; focus groups were a powerful tool for adaptation of the CTI-S. Revisions focused on cross-cultural equivalence in three dimensions: semantic, content and technical. All items were accepted; some were substantially revised for cultural appropriateness.

Discussion:
Achieving linguistic equivalence is essential, but not sufficient, for ensuring cultural equivalence of the instrument. For example, an item in the validity scale was “I wash my hands at least once a year.” In Puerto Rican culture, however, it has a double connotation, with “hands” implying a religious proverb meaning “I gave up in something” (“I wash my hands of it”). It was revised to: I wash my feet at least once a year,” which carries no ambiguous connotation.

Research Completed: Yes

Abstract History:
Financial Disclosure:
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OVERVIEW: Latinos are the fastest growing population group in the USA. To provide high-quality health care, the communities that welcome Latinos must find inventive ways to provide intervention for critical health issues. Partnering with Latino communities to test these interventions raises methodological issues of accurate measurement, particularly of the outcomes of the interventions being tested. One health issue of concern for nursing is that of depressive symptoms in newly-immigrated, Spanish-speaking, low-income Latina mothers. These mothers report very high rates of severe depressive symptoms which may compromise the development of their USA-born infants and toddlers. Yet, they are unlikely to receive timely intervention due to stigma, fear and a limited supply of qualified, linguistically-competent providers. A team of nurse researchers developed and conducted a randomized clinical trial of in-home psychotherapy delivered by partnering an advanced practice psychiatric nurse and a trained interpreter who reached the mothers by working with Early Head Start, a federal child enrichment program. Measurement of the intervention fidelity and critical maternal-child outcomes raised methodological issues that were studied as well. This symposium will present three different
methodological issues - observation of maternal-child interactions using Latina and non-Latina behavioral coders, development of a system to measure the accuracy of interpreted content, and methods to improve the reliability of ordinal self-report scales with low-literate Latina mothers. The symposium will promote discussion of how these issues were addressed in the course of this study and the implications for health disparity-reduction research with diverse populations.

Research Questions/Hypotheses:
See Overview

Significance:
See Overview

Methods:
See Overview

Findings:
See Overview

Discussion:
See Overview

Research Completed:
Yes

Abstract History:

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Presentation Preference: SNRS Symposium

Willing To Submit Podium? Yes
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Abstract Categories: Interest Group: Minority Health
Thematic Areas: Methods

Purpose/Aims: Disparities in mental health care for Spanish-speaking populations arise from a shortage of fully fluent, Spanish-speaking mental health providers. The use of interpreters can fill this gap. Accurate interpretation is crucial to the safety and quality of intervention outcomes. In creating a suitable mental health interpreting system to deliver in-home psychotherapy to Spanish-speaking, depressed mothers, a team of nurse researchers corrected the factors that have lowered the accuracy of information transfer from the health professional to the client and back. This study was conducted to develop and test the feasibility of a system to validate the accuracy of interpreted information transferred between the English-speaking intervention nurse and the intervention mothers.

Research Questions/Hypotheses: See purpose

Significance: See purpose

Methods: Laws and colleagues (2004) created 22 codes to capture interpretation errors in 66% of client-interpreter-provider "conversation segments." The coding system was difficult to replicate and contained overlapping categories. Using a de-centering technique, we reduced the Laws system to 6 categorical codes that were not overlapping and exhaustively captured all of the systematic and random interpretation errors that had been identified in the literature on healthcare interpreting. We tested the system by using scripted interactions in which an English-speaker and a fluent Spanish speaker read from a prepared interaction script that deliberately contained words and phrases commonly used in the mental health intervention. We tested the system on untrained interpreters before and after receiving a manualized training program. The interactions were taped and transcribed. Two coders coded each transcript using the 6-code system and reached 95% agreement.
Findings:
The shortened coding system captured interpretation errors in 100% of the conversation segments and was sensitive to increased accuracy in the post-course performance of the interpreters.

Discussion:
This coding system has shown preliminary accuracy and ease of use. Analysis of inter-rater reliability using actual intervention transcripts is underway and will be presented.

Research Completed: Yes

Abstract History:

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Presentation Preference: SNRS Symposium

Willing To Submit Podium? Yes
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Abstract Categories:
- Interest Group: Minority Health
- Thematic Areas: Methods

Purpose/Aims:
Mother-child interactions are commonly scored by systematic coding (scoring the occurrences of specific behaviors) and rating scales. Interactions of Spanish-speaking mothers are rarely studied due to a shortage of Spanish-speaking coders and the difficulty of comparing data from Spanish- and English-speaking mothers whose data were scored by different coders. This study described the accuracy of combining English- and Spanish-speaking coders to score interaction data.

Research Questions/Hypotheses:
See purpose

Significance:
See purpose

Methods:
The sample included videotapes from two studies of depression in low-income mothers: 67 Spanish-speaking mother-child dyads; 41 English-speaking dyads. Spanish-speaking mothers averaged 27.0 years of age and 8.8 years of education. Mean child age was 17 months; 55% were boys. English-speaking mothers averaged 26.4 years and 12.1 years of education. Mean child age was 20 months; 68% were boys. In systematic coding, English-speaking coders scored behaviors every 10 seconds, and then Spanish-speaking coders corrected verbal behavior coding. For ratings, two coders, at least one with the same language as the mother, rated maternal interaction quality; their consensus was used.

Findings:
Inter-rater reliabilities for systematic coding were good (kappas .53-.89). Spanish coders made relatively few changes: e.g., 641 corrections in 10,114 episodes of mother talk (3.0%) and affect was corrected on 227 episodes (1.6%); 103 changes in 15869 episodes of play with mother (0.7%); 266 changes in 642 episodes of mother teach (38.9%); 1227 changes in 3552 episodes of child talk (34.6%). Agreement with the consensus maternal ratings was good (kappas .71-1.00). Spanish-speaking coders had slightly better agreement with the consensus than the English-speaking coders for Spanish-speaking mothers, but agreement did not differ for English-speaking mothers.

Discussion:
Combining English and Spanish coders was an efficient method of coding interactions. English-speaking coders had greater difficulty in making discriminations that required understanding the content of speech, whereas Spanish-speaking coders were equally accurate at coding in English and Spanish.

Research Completed? Yes

Abstract History:

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FDA Disclosure:
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The Experience of Being a Promotora

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Purpose/Aims:
Promotoras, or lay health promoters, are used in numerous types of programs, such as healthy cardiovascular behaviors, smoking cessation, diabetes management, and domestic violence. Yet, factors influencing recruitment of these workers is unknown. The purpose of this study is to describe Hispanic women's experience of becoming promotoras, and their implementation of that role in Paseo de Salud, a community diabetes prevention project. Promotoras must complete La Academia, a 14 session educational program, and a 6 week program specific to the promotora role.

Research Questions/Hypotheses:
What motivational factors lead women to decide to become promotoras? What factors facilitate or create barriers to women's completion of the diabetes education and promotora programs? How do women describe the actual promotora experience?

Significance:
Recent studies of promotora use show their effectiveness for health promotion and disease prevention. However, the promotora experience itself has received little attention. Recruiting adequate numbers of these facilitators remains difficult, so gaining information about factors that promote or inhibit their recruitment is essential.

Methods:
A qualitative design was used to study focus groups with 10 women who are in the Paseo de Salud promotora program. Audiotaped sessions are transcribed verbatim and transcripts analyzed to identify and describe common themes. Trustworthiness of data is maintained through member-checking focus groups with at least 5 of the women, to review the initial interpretation and analysis of the interview data. Persistent observation is used to gain an in-depth understanding of participants' experiences.

Findings:
The study is in process. Data collection and analysis will be complete this fall. Findings are expected to contribute to promotora recruitment strategies, enhancement of existing programs and in assisting development of promotora curricula.

Discussion:
Discussion will be provided on the poster.

Research Completed:
Yes

Abstract History:

Financial Disclosure:
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FDA Disclosure:
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Flaskerud (1988) and others have warned that the typical Likert-type ordinal scales used in many self-reports are not adequate for Spanish-speaking populations, especially those who are newly-immigrated and who are challenged in their reading ability in Spanish. As part of a larger intervention study of newly-immigrated Spanish-speaking mothers of infants and toddlers, this study was conducted to analyze the effectiveness of specific safeguards put into place to create readable, linguistically-congruent instruments administered with procedures to assist participants to answer in a way that best represented their perceptions.

Research Questions/Hypotheses:
See purpose

Significance:
See purpose

Methods:
80 Spanish-speaking mothers participated. Average age was 26 years, SD 5.9; 92% were from Mexico and were newly-immigrated (4.7 years in US, SD 2.3) with an average of 9 years of formal education (SD 2.9). Seven ordinal-scale instruments were administered: The Center for Epidemiological Studies Depression Scale (CES-D), the Child Behavior Checklist (CBCL), the Parenting Stress Index (PSI), the Marin scale (language acculturation), the Psychological Acculturation scale (PAS), the General Self-efficacy Scale (GSE) and the Family Environment Scale, conflict subscale (FES). Instruments were carefully checked for accuracy of translation and if translated, were front and back-translated using community samples of mothers close to the target population. Visual response cards were given to mothers for each scale and bilingual data collectors were trained to read all instruments aloud in Spanish and supply pre-determined explanations for complicated items. Continuous quality-control procedures were in place.
Findings:

On all but one of the ordinal measures, the Cronbach alphas ranged from .80 to .95. The 5-item Family Environment Conflict subscale yielded .76 which was deemed acceptable.

Discussion:

The procedures put into place to assure accurate translation and support participants’ capabilities were sufficient and resulted in adequate reliability of the ordinal self-report measures used.

Research Completed:

Yes

Abstract History:

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Purpose/Aims:

Many studies regarding female and couple infertility issues exist but few focus exclusively on males, particularly African American (AA) males. This disparity in information results in disparity of services. The purpose of this study was to provide descriptive information regarding infertility attitude and practices of AA males. The specific aim was to explore attitudes and practices comparing AA and White males using a national survey.

Research Questions/Hypotheses:

Are there differences in AA and White male's: attitude about not fathering a child; receipt of infertility services; nature of infertility services received; and nature of reported diagnosed infertility problem?

Significance:

Limited information regarding potential infertility health care disparities limits service quality for AA males.

Methods:

A descriptive comparative study using data from cycle 6 of the National Survey of Family Growth (NSFG) representing civilian, non-institutionalized population of US men ages 15-44 was conducted. From a sample of 4,928 men, a sub-sample of 206 respondents met study inclusion criteria. Data were analyzed using Chi Square. Limitations included female interviewers and some sampling error.

Findings:

There were no statistically significant differences for AA and White males in this sample regarding fathering a child; receipt of infertility services; nature of infertility services received; nor types of infertility diagnoses.

Discussion:

Although no statistically significant differences were found in this sample regarding research questions, to conclude that no differences in attitudes and practices at all exist is premature given the NSFG's narrow focus. A broader array of issues such as barriers to services and self-action in lieu of services must be addressed. Policy makers and practicing nurses must be aware of special needs of disparate populations and implement measures to decrease any disparities. Nurse educators must work to instill this same awareness in nursing students. Additional research strategies, especially qualitative ones, must be employed for a fuller meaning of infertility attitudes, practices, and experiences for AA males.

Research Completed: Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

Submitted By:

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Abstract ID: 412

Acculturation, Emotional Distress, Neuroendocrine & Immunologic Changes Related to Preterm Birth in African American and Hispanic Women

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In spite of many attempts to address the problem of preterm birth (PTB), the rate has been increasing and in 2004 reached an all time high of 12.5% nationally. There is also a major disparity of the PTB rate between African American (AA) and Hispanic women, as compared to Caucasian women. One explanation for the failure to influence PTB rates is provided by a growing body of evidence suggesting that PTB, rather than an acute event, may be the end point of subacute or chronic pathophysiologic changes that occur before clinical symptoms are present (Freda & Patterson, 2001). Recently, researchers have provided new clues on how disturbances of bodily processes, which are often influenced by psychosocial factors, may lead to PTB (Wadhwa et al., 2002). A connection appears to exist between prenatal stress, the biochemical effects of stress, and PTB. Prenatal maternal stress appears to promote PTB through two possible biochemical pathways: 1) a neuroendocrine pathway through which prenatal stress may lead to early and/or a greater degree of activation of the maternal-placental-fetal endocrine systems that promote labor; and 2) an immune/inflammatory pathway through which stress may alter immunity thereby increasing susceptibility to intrauterine infection/inflammation that promotes labor. This symposium presents research findings related to pregnant African American women’s emotional distress. We also present findings related to Hispanic women’s level of emotional distress as related to acculturation (English or Spanish proficiency, years in the US, and country of birth) during the second trimester. Pathways to explore the phenomenon of PTB will also be discussed. Lastly, research investigating the effects of relaxation-guided imagery on stress variables will be presented.
Abstract ID: 420

Diabetes Education as Designed by African American and Haitian American Elders

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Abstract Information

Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Minority Health
Thematic Areas: Health Disparities

Purpose/Aims:
The purpose of the first part of a multi-phase study was to work with diabetic elders of one African American and one Haitian American community as they designed diabetes education programs.

Research Questions/Hypotheses:
We asked the question, “Given the opportunity, what would you include in a diabetes education program and what is the preferred mode of delivery?”

Significance:
Diabetes is a growing health problem, especially for older adults. While progress is being made in improving diabetes-related health outcomes, there remains a significant disparity for elders from minority groups. There are established guidelines for the content and delivery of diabetes education. Yet there has been little effective outreach to minority communities and only recently have we begun to see culturally influenced programs.

Methods:
An exploratory focus group approach was used with participants recruited from both an African American and a Haitian American community. The hand-recorded responses were subjected to content analysis.

Findings:
Twenty-four African American elders participated in one of three focus groups. The participants described their ideal program inclusive of information about diabetes, diabetic diets, exercise, and medications. Diet and disease-related information were considered the most important. Twenty-seven Haitian American elders participated in one of two focus groups. The basic content desired was the same; however additional information about how to obtain necessary medications and how to adjust a traditional Haitian diet were considered most important. They also wanted “testimony” from someone who had diabetes themselves. Both groups preferred the church as the site of any program; however, most importantly the participants requested that only a “conversational” approach be used with
“No one telling us what to do.”

Discussion:

The variation of access to insurance coverage explains the slight differences in content. The preferred “conversational approach” challenges the nurse to reframe our educational paradigm to one which avoids any implications of nurse: patient hierarchy or oppression.

Research Completed: Yes

Abstract History:

Financial Disclosure:

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State Of Florida
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Speaker’s Bureau:
Other Financial or Material Support:

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Non-Exclusive License:

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Abstract ID: 421

Acculturation, Emotional Distress, Neuroendocrine & Immunologic Changes Related to Preterm Birth in African American and Hispanic Women

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Abstract Information
Presentation Preference:
SNRS Symposium

Willing To Submit Podium?
Yes
Abstract Categories:
Interest Group: Minority Health
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims:
This study investigated the effects of acculturation on emotional distress, social support, gestational age and infant birth weight in Hispanic women.

Research Questions/Hypotheses:
What are the effects of acculturation on distress, support, and birth outcomes?

Significance:
The Hispanic paradox is that despite adverse economic and living conditions, the new immigrants have birth outcomes similar to their Caucasian counterparts. The acculturation paradox is that risk factors and health outcomes become unfavorable with greater acculturation. The effect of acculturation may present a major problem with this growing population.

Methods:
In this cross-sectional study at 22-24 weeks gestation, we measured emotional
distress (the Perceived Stress Scale, PSS, the State-Trait Anxiety Inventory (STAI), and the Center for Epidemiological Studies of Depression (CES-D). We measured social support (Family Cohesion and Father’s Support). We measured acculturation by the Bidimensional Acculturation Scale. We conducted medical record reviews to obtain birth outcomes for length of gestation (term vs. preterm birth) and infant birth weight. We conducted correlations and Structural Equation Modeling (SEM).

Findings:
Emotional distress correlated with English proficiency (r = +.162, p < .05) and negatively with Spanish proficiency (r = -.225). Emotional distress was negatively correlated with social support (r = -.63, p<.05). Spanish proficiency was correlated with support (r = +.31, p<.05), and correlated with increasing gestation (r = +.18, p < .05), and correlated to birth weight (r = +.11, p < .05). English proficiency was negatively correlated with gestational age (r = -.14, p <.05) and negatively correlated with birth weight (r = -.11, p <.05).

We used SEM to theoretically test these same variables, and had an excellent model fit (CFI = 0.98, TLI = .96.)

Discussion:
Findings provide evidence of the Hispanic and acculturation paradox, better mental health scores, more social support, and better birth outcomes in the lesser acculturated women. Acknowledgement: NINR R01NR00789-04 made this study possible.

Research Completed: Yes
Abstract History:
Financial Disclosure:
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Acculturation, Emotional Distress, Neuroendocrine & Immunologic Changes Related to Preterm Birth in African American and Hispanic Women

Abstract Information

Presentation Preference: SNRS Symposium

Willing To Submit Podium? Yes

Abstract Categories: Interest Group: Minority Health
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims: This study investigated the effects of acculturation (English vs. Spanish proficiency) to predict increases in inflammation in Hispanic pregnant women.

Research Questions/Hypotheses: What are the effects of acculturation to predict inflammation in Hispanic pregnant women?

Significance: Certain pro-inflammatory cytokines (Tumor Necrosis Factor-alpha (TNF-α)) and Interleukin 1 Ra (IL-1 Ra) are associated in the literature with atherosclerosis, and Insulin resistance as well as preterm birth. Hispanics have an increased propensity to diabetes and as a result to heart disease. Little is known about the effect of acculturation on these inflammatory markers, especially in pregnancy.

Methods: In this cross-sectional study at 22-24 weeks gestation, we measured acculturation
by the Bidimensional Acculturation Scale (BAS) giving scores for English, Spanish
and bilingual language proficiencies. We measured TNF-α and IL-1Ra in
serum via a high sensitivity ELISA technique from R&D systems. We ran linear
regressions comparing acculturation (English proficiency) to acculturation
(Spanish proficiency) to predict TNF-α and IL-1Ra.

Findings:

Acculturation (English Proficiency) significantly positively predicts TNF-α
(Coefficient of Regression = .13, p <.05) and IL-1 Ra (Coefficient of regression
= .24, p < .05). In contrast, acculturation (Spanish proficiency) does not
significantly predict TNF-α. Acculturation (Spanish proficiency) negatively
predicts IL-1Ra (coefficient of regression = -.19, p < .05).

Discussion:

Findings provide evidence that there is a different physiologic response of
the English proficient women related to inflammation as compared to the Spanish
proficient women. This may be part of the explanation of better birth outcomes
with the less acculturated women, as their inflammatory response is different
from their more acculturated counterparts. Acknowledgement: NINR R01NR00789-04
made this study possible. Contents are the authors’ responsibility and do
not necessarily represent the views of NINR, or NIH.

Research Completed:
Yes

Abstract History:

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Cleared: Yes

Non-Exclusive License:

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Acculturation, Emotional Distress, Neuroendocrine & Immunologic Changes Related to Preterm Birth in African American and Hispanic Women

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Abstract Information

Presentation Preference: SNRS Symposium

Willing To Submit Podium?
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Willing To Submit Poster?
No

Abstract Categories:
Interest Group: Minority Health
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims:
This study investigated the effects of relaxation-guided imagery (R-GI) on perceived stress, anxiety, depression, and corticotropin releasing hormone (CRH) levels in pregnant African American (AA) women.

Research Questions/Hypotheses:
Describe the effects of relaxation and guided imagery on maternal stress in African American women during the second trimester of pregnancy.

Significance:
Preterm birth (PTB) is an acute problem. A connection exists between prenatal stress, the biochemical effects of stress, and PTB. Based on the mind-body connection between stress and PTB, a mind-body intervention, such as R-GI, may be effective in reducing stress and excessive neuroendocrine levels that may lead to PTB.

Methods:
This longitudinal study used a controlled randomized two-group [R-GI and usual care (UC)] experimental design. The intervention was 3 R-GI CDs designed to enhance study outcomes. Study measures collected at baseline and weeks 8 and 12 included the Perceived Stress Scale (PSS), State Anxiety Inventory (STAI), Center for Epidemiologic Studies-Depression (CES-D) and maternal plasma CRH levels. All participants completed a daily Numeric-Rating-Scale-of-Stress (NRSS), and the R-GI group completed a daily Practice Log that provided information on perceived benefits.

Findings:
STAI scores decreased significantly over time (baseline, 8, 12 weeks) for the R-GI group but not for the UC group (F = 7.28, p<.05). The change in daily stress scores (NRSS) from pre-to-post use of R-GI decreased significantly (p<.05), indicating an immediate effect of the intervention. PSS scores, a more general measure of stress, and the CES-D scores did not differ between groups over time. The entire R-GI group reported perceived benefits on the Practice Log. There were no differences in CRH over time.

Discussion:
Findings support the effectiveness of the R-GI intervention in reducing anxiety and daily stress levels in pregnant AA women. Perceived benefits suggest the acceptance of this mind-body intervention. Acknowledgement: This study is made possible by NINR NRSA-1-F31-NR008977, and NCCAM K-30-AT00062.

Research Completed:
Yes

Abstract History:

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Acculturation, Emotional Distress, Neuroendocrine & Immunologic Changes Related to Preterm Birth in African American and Hispanic Women

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Student Level:
The purpose of this study was to assess the levels of maternal stress in African American (AA) women longitudinally during the second trimester.

Preterm birth (PTB) rates are increasing and there are notable disparities in these rates with African American (AA) women experiencing highest rates of PTB. Although stress is a risk factor for PTB and AA women experience a higher rate of PTB, there is limited information about the patterns of stress in AA women during this time.

This prospective 12 week longitudinal study used three repeated measures. Study measures collected at baseline (14-17 weeks) and 8 and 12 weeks later included the Perceived Stress Scale (PSS), Numeric Rating Scale of Stress (NRSS), State Anxiety Inventory (STAI), and Center for Epidemiologic Studies-Depression (CES-D).

Pregnant AA women during the second trimester demonstrated high levels of stress, anxiety, and depression. Perceived stress and depression scores remained consistently high and anxiety levels increased during the second trimester.

Patterns of perceived stress, anxiety and depression in AA pregnant women during the second trimester are concerning as they are risk factors for PTB. Results of this study suggest nurses should assess stress levels at the initial prenatal visit and throughout pregnancy and provide stress reduction strategies.

This study is made possible by NINR NRSA-1-F31-NR008977, and NCCAM K-30-AT00062.
Abstract ID: 438

Barriers to Mammography in African American and Caucasian Women Visiting the Emergency Department

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The purpose of this pilot study is to describe the barriers to mammography for African American and Caucasian women visiting the Emergency Department.

Research Questions/Hypotheses:
What are the sociodemographic characteristics of women visiting the ED? Are there differences in mammography utilization between African American and Caucasian women visiting the ED? What are the barriers to mammography experienced by this group of women?

Significance:
Screening mammography may reduce breast cancer mortality by as much as 20% to 35% in women aged 50–69 years and 20% in women aged 40–49 years. Healthy People 2010 set as its objective 70% of women receiving regular mammography, which the American Cancer Society defines as every year for women over the age of 40. National data from 2000 showed that only 57% of Caucasian women and 53% of African American women aged 40 and older had a mammogram within the past year. Low income women, women without health insurance, and those without a usual source of health care have even lower screening rates of 44%, 34%, and 28% respectively. These are the women that visit the ED regularly.

Methods:
Women visiting the ED for non urgent complaints were administered an anonymous survey. The survey assessed sociodemographic characteristics, mammography use, barriers to mammography use, and stage of readiness to adopt mammography.

Findings:
Twenty-five percent of the women in this sample (n=96) were African American. The majority of the women had not complied with mammography guidelines (55%) and 12% of those women had never had a mammogram. The main barriers to mammography were time/competing demands, money, transportation, and child or elder care issues.

Discussion:
Women visiting the ED are an underserved population. They have unique needs for preventive health care information. The “teachable moment” concept may be utilized during this window of opportunity to intervene and encourage screening mammography in this vulnerable group of women.

Research Completed:
Yes

Financial Disclosure:
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Yes

FDA Disclosure:
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Accepted Terms: Yes

Submitted By:
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Standing Up for Caregiving Research with Rural African American Families: Making it Work with HIPAA, IRBs, and Community Agencies

Abstract Information

Presentation Preference: SNRS Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Minority Health
Thematic Areas: Family Health

Purpose/Aims: This paper will use, as a case example, an ethnography (of an ongoing longitudinal study) that focuses on how rural African American families make decisions about acute and long-term care for their older adult relatives when a caregiving transition or episodic and/or emergent health event occurs.

Research Questions/Hypotheses: In the back and forth process with the university IRB, the PI pursued the following:
1. A memorandum of agreement between the University and the community hospital. 2. Use of community hospital staff to assist in the recruitment of rural, African American, older adults.

Significance: Caregiving research has become more difficult since the 1996 Health Insurance Portability and Accountability Act (HIPAA). In response to this Privacy Rule, the limitations Institutional Review Boards (IRBs) have imposed on researchers have created challenging recruitment issues for caregiving studies.

Methods:
This methodological paper will discuss the recruitment protocol submitted to the IRB which, addressed vulnerabilities that make the study population difficult to recruit: age, race/ethnicity, and rural residency. In addition, care recipients and primary, secondary, and tertiary caregivers are needed from each family. Rural community hospitals and nursing homes often do not have IRBs or review committees thereby requiring other entities to take on the responsibility of serving as their IRB of record. Recruitment strategies that were approved by the IRB as well as strategies that were unsuccessful will be discussed.

Findings:
The university decided not to grant the memorandum of agreement. The PI gained staff status at the community hospital thus helping to solve some of the recruitment issues. The PI was required to obtain permission from patients' physicians before talking with them about the study.

Discussion:
Caregiving researchers must develop creative ways of recruiting hard-to-reach groups and must partner with rural community health agencies to conduct research while simultaneously adhering to HIPAA guidelines and working cooperatively with IRBs.

Research Completed:
No

Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

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Non-Exclusive License:
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Psychosocial Factors that Influence Sexual Behavior of African American Adolescent Girls

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Presentation Preference:
SNRS Podium Presentation

Willing To Submit Poster?
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Abstract Categories:
Interest Group: Minority Health
Thematic Areas: Child & Adolescent Health

Purpose/Aims:
The purpose of this study was to examine relationships among psychosocial factors that influence and predict sexual behavior among African American adolescent girls.

Research Questions/Hypotheses:
• What are the relationships among knowledge of HIV/AIDS, attitude toward abstinence, attitude toward condom use, sexual self-efficacy, and perceived parental attitudes about premarital sex among African American adolescent girls?  
• What factors predict sexual activity among African American adolescent girls?

Significance:
In 2002, African American females accounted for 60% of AIDS cases among women ages 13 to 24, and 74% of newly diagnosed HIV cases among women ages 13 to 19. To address the crisis of HIV/AIDS among African American women, it is imperative to identify psychosocial factors that influence sexual practices.

Methods:
A predictive correlational design was used in this study. A convenience sample
of 94 African American adolescent girls aged 12 to 18 years was drawn from low-income housing communities in the Southeast. Participants completed the following questionnaires: (1) Adolescent AIDS Knowledge Test, (2) Sexual Self-Efficacy Scale, (3) Attitude toward Abstinence Scale, (4) Attitude toward Condom Use Scale, and (5) Perceived Parental Attitude about Premarital Sex Scale. Data were analyzed using the Statistical Analytical System (SAS) version 9.1.

Findings:

1) There were significant positive relationships between (a) age and perceived parental attitudes about premarital sex and (b) knowledge about HIV/AIDS and attitude toward abstinence. 2) There were significant negative relationships between (a) perceived parental attitudes about premarital sex and condom use and (b) sexual self-efficacy and attitude toward abstinence. 3) Age and attitude toward abstinence were significant predictors of sexual activity. 4) Age was a significant predictor of condom use.

Discussion:

Findings from this study may provide information needed to understand the psychosocial factors that influence sexual behavior of African American adolescent girls. Additionally, these findings may contribute to the development of gender and culturally sensitive HIV/AIDS risk reduction programs.

Research Completed: Yes

Abstract History:

-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:

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The purpose of this mixed method study was to test the efficacy of hypertension-related educational sessions and a telephone support intervention on the adherence to hypertensive regimen with African Americans.

Research Questions/Hypotheses:
1) What is the effect of diet and exercise education with telephone support on adherence to a hypertensive regimen with African Americans? 2) What are the perceptions of the participants and their significant others on living with hypertension?

Significance:
Because of the health disparity with hypertension, there is a need for culturally appropriate interventions to control hypertension among African Americans.

Methods:
A mixed methods research design was used with a sample of 37 hypertensive African American participants, ages 18-64. There were randomized intervention and comparison groups for the 12-week study. The intervention was a weekly telephone support call and monthly educational meetings on diet and exercise. Blood pressure, pulse, and weight was measured with the intervention and comparison groups.
at the initial visit and at 12 weeks. The intervention group had these measurements taken monthly at the educational meetings. The participants of the intervention group completed an open-ended questionnaire at the end of the study and telephone interviews were conducted with their significant other. Descriptive statistics described the sample characteristics. Statistical techniques used to analyze the data were descriptive statistics and two-way repeated measures ANOVA. Content analysis was utilized to analyze and interpret the data from the open-ended questionnaires and telephone interviews.

Findings:

The quantitative results showed that there was not a significant difference between the intervention group and comparison group. However, the qualitative data showed that the intervention group did make positive changes in their eating patterns.

Discussion:

Findings warrant further investigation on the development of culturally appropriate interventions to motivate and address lifestyle changes in hypertensive African Americans.

Research Completed: Yes

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- Details: SNRS Feb. 07

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Speaker's Bureau:

Other Financial or Material Support:

FDA Disclosure:

Cleared: Yes

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Accepted Terms: Yes

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Cardiac Risk Factor Profile Differs between African American and Caucasian Women
Undergoing Cardiac Catheterization for Suspected Coronary Artery Disease

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SNRS member? Yes
Student Level:
Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Minority Health
Thematic Areas: Women's Health

Purpose/Aims: This study aims at assessing the differences in cardiac risk factor profile between African American women (AAW) and Caucasian women (CW) with suspected CAD.<br />

Research Questions/Hypotheses: We sought to answer the question: Are there differences in cardiac risk factor profile between AAW and CW with suspected CAD?

Significance: Coronary artery disease (CAD) is the leading cause of death among women in the United States. Landmark studies that established risk factor criteria utilized mostly Caucasian male subjects. It is still unclear how prevalent these risk factors are among women and whether differences in risk factor profiles exist between AAW and CW.

Methods: A chart review of 80 women (AAW, n=40; CW, n=40) referred for cardiac catheterization was conducted. Cardiac risk factors examined included: obesity, smoking status, illicit drug use, physical inactivity, family history of CAD, abnormal lipid profile, hypertension, and diabetes mellitus. Descriptive data was reported as frequencies and means ± SD. Differences between racial groups was examined using Chi-square and t-tests as appropriate with a p-value of ≤ 0.05 considered significant.

Findings: Multivessel CAD was more prevalent among CW while more AAW had no angiographically significant CAD. However, more AAW had significant peripheral vascular disease. Abnormal lipid profile was more common in CW primarily due to low HDL (p = 0.04), as was a positive family history for CAD. In contrast, cigarette smoking, illicit drug use, diabetes, physical inactivity, obesity, and morbid obesity were more prevalent among AAW (p = 0.04). AAW also had a higher systolic blood pressure with higher prevalence of left ventricular hypertrophy (p < 0.05).
While CAD is highly prevalent among women, CW and AAW present differently and may not share the same risk factor profile. A larger prospective clinical trial will be needed to further define the differences in risk factor profiles and its impact on the prevalence of CAD.

Research Completed: Yes
Abstract History: 
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
Submitted By: qhenryok@utmem.edu
Abstract ID: 558

Exploring the Future Orientation of Sexually Active, Young African-American Women in a Resource-Poor Community

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Abstract Information
Presentation Preference: SNRS Student Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories:
Interest Group: Minority Health
Thematic Areas: Health Disparities
Purpose/Aims:

Research Questions/Hypotheses:
How does the target population express future orientation? Does having children result in differences in future orientation for these women? How do these findings compare with common public health expectations of future orientation for these women?

Significance:
Traditional public health expectations view engagement in sexual activity and pregnancy at an early age, especially among African-Americans, as a liability. Despite programs, such as Abstinence-Based Education, aimed at lowering early sexual initiation and resulting pregnancy, 2005 data from the YRBS indicate that nationally over 61% of African-American female high school students have initiated sexual intercourse. Among Alabama teens, ages 15-19, the Alabama
Center for Health Statistics reports African-American birth rates of 90.1 versus 61 for whites.

Methods:
A secondary data analysis was conducted on interviews from 50 African-American females living in a resource-poor, inner-city community. The sexually active (by self-report) participants, ages 19-24, were recruited by a female African-American research assistant through street intercept techniques. Interviews included questions about future orientation, childbearing status, and sexual risk behavior perceptions.

Findings:
All participants, including those with children, had a positive future orientation, in contrast to public health expectations. The women saw themselves as capable of obtaining careers, with realistic expectations of work or additional schooling that might be required for such accomplishments. Mothers highly valued their children, often identifying them as motivation to work for positive futures.

Discussion:
Past interventions have viewed childbirth among the target population as a liability. Understanding the value of children as a self-defined asset of future orientation might lead to programs that are effective at enabling these women to achieve their stated goals.

Research Completed: Yes

Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure:
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FDA Disclosure:
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Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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ADVANCE DIRECTIVES: YOUNG ADULT AFRICAN AMERICAN FAMILIES’ PERCEPTIONS, KNOWLEDGE, ATTITUDES, AND UTILIZATION

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Abstract Information
Presentation Preference: SNRS  Student Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Minority Health
Thematic Areas: End of life issues
Purpose/Aims:
Documented legal cases of incapacitated individuals within the young adult ages of 21-35 have been publicized making the young adult African American families query what they would do. The purpose of this descriptive, mixed-method study will be to discover what are the knowledge, perceptions and attitudes of young adult African American families toward utilizing Advance Directives. It will also determine if there is a correlation between the variables gender, education level, income level, and occupations in making this decision.

Research Questions/Hypotheses:
1. What are the perceptions, knowledge, and attitudes of young adult African American families toward utilizing Advance Directives? 2. What is the relationship between the demographic variables of gender, education level, and occupation of young adult African American families and their knowledge, attitudes, and utilizing Advance Directives?

Significance:
It is never too early for adults to have input to choices in the direction of
their health care at the end-of-life, if they become incapacitated in the future and unable to make health care choices. Information on Advance Directives indicates value to patients, decreased stress for families, and awareness of patient’s end-of-life preferences for the healthcare provider. The young healthy adult would not naturally be inclined to plan for end-of-life. Rarely do physicians discuss this issue with a young adult at a wellness visit. It is believed a wellness office visit may be the appropriate time to discuss or assess the young adult’s perception of end-of-life issues or Advance Directives.

Methods:
The subjects will be asked to complete the Advance Directives Knowledge, Attitudes, and Utilization Questionnaire. The approach will incorporate a descriptive correlational design to collect quantitative data and focus groups sessions to describe or explain the perceptions, knowledge, and attitudes of young adult African American families’ ages 21-35 years.

Findings:
Data to be collected.

Discussion:
Data to be collected.

Research Completed:
No

Abstract History:

Financial Disclosure:
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FDA Disclosure:
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Non-Exclusive License:
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**African American Teen Mothers of Children Born Preterm**

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**Abstract Information**

Presentation Preference:
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Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Minority Health
Thematic Areas: Child & Adolescent Health

Purpose/Aims :
The birth of a premature infant constitutes a major life event in the life course of a teen parent. Little is known about this important life experience from the perspective of African American teen mothers. The purpose of this study is to explore the life pathways and processes of African American adolescent mothers parenting children born prematurely.

Research Questions/Hypotheses :
The research questions for this study are: 1. How does parenting a prematurely-born-child intersect with the developmental tasks of adolescence? and 2. What are the influences of intergenerational and cultural attributes on African American teen parenting behavior?

Significance :
The significance of this study is to establish a better understanding of the multidimensional influences on African American adolescent parenting behavior in order to facilitate the development of interventions that will help to improve their life chances and inform current policy and practice in order to more effectively meet the needs of this vulnerable population.

Methods :

INDEX FIRST PREVIOUS NEXT LAST
A qualitative descriptive design informed by ethnography will be employed in order to achieve an in-depth understanding of the African American adolescent experience of parenting children born prematurely. Data generation methods will involve participant observation, minimally-structured interviews, and demographic data.

Findings:
Research currently in progress.

Discussion:
Research currently in progress.

Research Completed:
Yes

Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

-Details: Emory Regional Research Conference June 2006

Financial Disclosure:
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Consultant:
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Other Financial or Material Support:

FDA Disclosure:
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Non-Exclusive License:
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Abstract ID: 699

RISK FOR METABOLIC SYNDROME IN AFRICAN-AMERICAN WOMEN

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The purpose of this study is to assess metabolic syndrome risk in African-American women (AAW).

Research Questions/Hypotheses:
There will be significant correlations between the various risk factors: Age, Body Mass Index (BMI), physical activity (PA), smoking, and socioeconomic status (SES). Metabolic Syndrome (MetS) will be predicted by the various risk factors in a sample of premenopausal AAW. There will be significant differences in mean values of risk factors for subjects with and without MetS.

Significance:
MetS in women is comprised of a clustering of three or more of the following cardiovascular risk factors: waist circumference >88 cm, serum triglyceride level ≥150 mg/dL, high-density lipoprotein cholesterol level <50 mg/dL, blood pressure (BP) ≥140/≥90 mm Hg and serum glucose ≥110 mg/dL. Little is known regarding the clustering of cardiovascular risk factors for MetS among AAW. AAW are reported to have a disproportionate prevalence of the factors comprising MetS when compared to other ethnicities.

Methods:
A secondary data analysis of the Coronary Heart Disease in Premenopausal African-American Women’s study was performed. The sample consisted of 295 military and non-military AAW aged 18-45. Key variables in the study included: blood pressure, waist circumference, triglycerides, fasting blood glucose, high density lipoproteins, age, BMI, smoking, SES and PA. Data analysis includes Spearman’s rho and Pearson's correlations, ANOVA, and regression analysis. Data will be categorized according to the nature of the risk factors present and assessed for the frequency and clustering of MetS risk factors in this sample.

Findings:
Significant relationships will be determined for the cardiovascular risk factors that constitute MetS in this sample of AAW.

Discussion:
The explication of risk factors for MetS is needed in order to manage metabolic syndrome and improve cardiovascular health among premenopausal AAW. These findings give further indications for the screening and developing of interventions that focus on these risk factors of MetS.

Research Completed: Yes
Abstract History:
- This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure:
- Details: In Part ISCHIB 6/2007 Orlando, Florida
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FDA Disclosure:
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Submitted By:
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Abstract ID: 703

The Birth of the Interracial Hospital Movement

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Student Level:
This study explored the historical and social variables that influenced the beginning of the Interracial Hospital Movement and its influence on access to care for the "colored" community.

Research Questions/Hypotheses:
- How did segregated care impact the black population of Kentucky?
- How did the Interracial Hospital Movement begin?
- How did that grassroots organization institute change?
- What was the outcome?

Significance:
The neglect of a county hospital in Kentucky in 1950 resulted in unnecessary suffering of three "colored" men who sought care and in the death of one. The incident reflected a larger practice of denied access to care that was all too common in the experience of the minority community at that time. Improving access to care for persons with health disparities was and remains critical for the nursing profession and health care system.

Methods:
A social history framework was used to examine events related to care of this minority population and to grassroots advocacy for changing health policy in the context of social themes of the 1950s in Kentucky. Historical research methods were used to examine primary and secondary source materials, including relevant newspaper articles, correspondence, transcripts of interviews, photographs, and related documents.

Findings:
The grassroots response to denial of care led to the birth of the Interracial Hospital Movement and subsequently to improved access to care for this minority population. The study of this movement and of the advocacy for populations of health disparity provides insight into strategies that have relevance for nurses today. The role of community advocacy was then and continues to be relevant to solving problems of health disparity for minorities.

Discussion:
The improved access to care for minorities in Kentucky in the decade of the 1950s was heavily influenced by the work of the Interracial Hospital Movement. The advocacy for improved access by this organization served as a catalyst for change in health policy.

Research Completed: Yes
Abstract History:
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
Submitted By: akcall01@louisville.edu
Abstract ID: 712

Exploration of the African American woman's perception of the connection between diabetes, high blood pressure and kidney disease.

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Abstract Categories: Interest Group: Minority Health
Thematic Areas: Health Disparities

Purpose/Aims: The purpose of this study was to empower African American women through action research to influence healthy outcomes within their families.

Research Questions/Hypotheses: What are the educational needs and perceptions of African American women and families related to the connection between diabetes, high blood pressure and kidney disease?

Significance: African American women are at a higher risk to develop kidney disease. Little research has been done on the preventions and early detection of chronic kidney disease in this population.

Methods: The researchers chose a community based participatory research (CBPR) approach (action research) based upon the fact collectivism is valued in the African American community. Utilizing an interactive educational program on diabetes, hypertension and kidney disease, the participants first shared their health care and educational needs, and illness concerns. Then with the help of the researchers, participants adapted the program to develop strategies (action) to incorporate into their family social unit.

Findings: Utilizing the approach of action research may improve health prevention and early detection by helping African American women promote health within their families.

Discussion: Health care providers may gain insight and knowledge in improving educational strategies that may effect the their African American patients and families. Through empowerment of African American women, health care needs and prevention strategies will reach this populace.

Research Completed: Yes
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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Bridging the Gap: Measurement of Socioeconomic Status and Its Association to Health Status among Minority Populations

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Abstract Information

Presentation Preference: SNRS  Student Poster Presentation

Abstract Categories:
- Interest Group: Minority Health
- Thematic Areas: Health Disparities

Purpose/Aims: To determine the variety of methods by which SES is measured, and how it is operationalized among minority population. In addition, it is our aim to offer an overview of advantages and limitations of frequently used measurement tools for SES in minority populations.

Research Questions/Hypotheses:
We hypothesized that education level would be a more common marker of SES than income and the use of both education and income together would be the most frequent measure of SES.

Significance:
Socioeconomic status (SES) has powerful influence on the health status of individuals in general but in particular on minority populations. There is evidence that an association exist between SES, morbidity and mortality. Therefore, especially among minority populations, the lower an individual’s SES the shorter the life expectancy, and the higher their morbidity and mortality. A systematic approach to examining SES is necessary to understanding its impact on health status.

Methods:
A summative review of literature was conducted using studies published between January 2002 and August 2007 which were identified through the MEDLINE, PubMed, and CINAHL databases. The terms “socioeconomic status”, “educational level,” “income,” “wealth”, “occupation,” “ethnic groups,” and “measurement” were utilized.

Findings:
Three common measures of SES are education, income and occupation. Other measures of SES identified included insurance status (health), wealth (net worth), job status (white and blue collar workers), and geographical locations (zip code). A variety of measurement tools to assess SES are available such as: Hollingshead Measurement Tool, Duncan Socioeconomic Index (SEI), Nam and Powers Occupational Status Score (OSS), and Rossi, et al. Household Prestige (HHP) Score.

Discussion:
Multiple measures of SES are necessary to adequately assess its impact on health. Measurement tools should be adaptable and appropriate for the population being measured. Although there is a degree of confounding that exists when examining SES, it should be considered as independent variables instead of always as confounding variables.

Research Completed: No
Abstract History: 
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
Submitted By: tonya1973@gmail.com
Abstract ID: 744

**Body Mass Index and Weight Perceptions in Pre-Hypertensive and Hypertensive Black Americans**

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The purpose of this study was to explore relationships between body mass index (BMI), concern about weight, and perception of being overweight or obese in pre-hypertensive and hypertensive Black adults.

Research Questions/Hypotheses:
What are the relationships between BMI and concern about weight and BMI and perceptions of being overweight or obese in pre-hypertensive and hypertensive Black Americans?

Significance:
This study provides insight on how Black American men and women view their weight with respect to their actual BMI. The findings could be useful in developing new strategies for psychosocial treatment modalities for management of weight in people with or at risk for hypertension.

Methods:
A secondary analysis of data from the study Everyday Life for Black American Adults was conducted. The sample consisted of 145 men and women who were either pre-hypertensive or hypertensive by JNC VII criteria. Descriptive, correlational and nonparametric statistics were used.

Findings:
Contrary to popular belief, there was a strong correlation between BMI and concern about weight ($r=.365, p<.001$). Black women had higher BMI, were more concerned about their weight, and were more likely to perceive themselves as being overweight or obese than men. Although there was no significant difference in BMI between the pre-hypertensive and hypertensive groups, the hypertensive group was more likely to report being overweight or obese. Interestingly, income and education were not correlated with BMI; however, economic stress was significantly correlated with BMI ($r=.226, p=.006$) and concern about weight ($r=.247, p=.003$).

Discussion:
Results of this study indicate that pre-hypertensive and hypertensive Black American adults are concerned about their weight and this concern is consistent with their increased BMI. Still, pre-hypertensive adults see their weight as less of a problem than those with hypertension. Since obesity is a risk factor for hypertension, interventions are needed to address misconceptions so that weight can be reduced.

Research Completed:
Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

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Breastfeeding in African American Women

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The purpose of the study was to explore issues related to initiating and sustaining breastfeeding in African American women.

Research Questions/Hypotheses:
What are the issues related to initiating and sustaining breastfeeding in African American women?

Significance:
Despite known benefits, there continues to be a disparity that exists between African American women and Caucasian women in the rates of initiation and duration of breastfeeding. Lower rates could be seen as a health disparity for African American infants, who already have a higher infant mortality rate than Caucasian infants. Few studies focus exclusively on African American women’s breastfeeding experiences. Exploring the issues that may affect the decision of African American women to breastfeed and continue breastfeeding may lead to the development of interventions to encourage initiation and longer duration of breastfeeding. Improving breastfeeding rates could increase the likelihood of African American infants experiencing the health benefits of breast milk.

Methods:
Focus group methodology and individual qualitative interviews were used in this study. Baseline data were collected with a demographic form and a semi-structured question guide was used in the interviews and focus groups. Focus groups and interviews were conducted in three different regions in North Carolina. Purposive sampling was used to recruit African American women who were currently breastfeeding or who had breastfed within the past 12 months. Sessions were audio taped and transcribed verbatim. Field notes were also taken and used as context in the data analysis.

Findings:
Data collection and analysis is ongoing and preliminary categories center around not knowing why breastfeeding is important, being afraid of failing, problems breastfeeding in public, problems breastfeeding after going back to work, and advice/help is important.

Discussion:
Study findings will be used to identify areas appropriate for culturally specific intervention development to increase breastfeeding initiation and duration rates in African American women.

Research Completed: Yes

Abstract History: 
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

Submitted By: dstreet@gardner-webb.edu
Abstract ID: 794

**Symptom Clusters and Overall Burden in African American Men with Prostate Cancer receiving Androgen Deprivation Therapy (ADT) – A Literature Review**

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**Abstract Information**
Presentation Preference: SNRS Student Poster Presentation

Abstract Categories: Interest Group: Minority Health
Thematic Areas: Health Disparities

**Purpose/Aims**: The purpose of this literature review is to describe the overall burden of prostate cancer and androgen deprivation therapy on African American men by delineating symptom clusters.

**Research Questions/Hypotheses**: What symptom clusters have been identified among prostate cancer patients? What symptom clusters have been identified among prostate cancer patients undergoing androgen deprivation therapy? How does androgen deprivation therapy add to the overall burden of prostate cancer?

**Significance**: Prostate cancer is the second leading cause of cancer related deaths in men in the United States. African American men not only have a greater incidence of prostate cancer, but the disease is more aggressive and recurs more often in this population. One of the most frequently prescribed treatments of prostate cancer is androgen deprivation therapy (ADT) with a Gonadotropin Releasing Hormone (GnRH). GnRH is routinely used for local, regional, and metastatic disease. Complications from this therapy are many and affect the endocrine, neurological, psychological, and musculoskeletal systems. Clusters of symptoms...
develop because of the cancer and its treatment. Cancer symptoms, medication side effects, and emotional effects each contribute to the overall burden experienced by men with prostate cancer.

Methods:
A literature review of current nursing/medical journals will be used to identify cancer related symptoms, ADT treatment related symptoms, and combination symptoms. Symptom clusters, both previously studied and newly identified, will be examined in the context of how they contribute to the total burden among African American men with prostate cancer who are undergoing ADT therapy.

Findings:
pending

Discussion:
pending

Research Completed:
Yes

Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
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Low income minority first time mothers infant care problems: Effects of APN interventions.

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SNRS Student Poster Presentation
Willing To Submit Poster?
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Interest Group: Minority Health
Thematic Areas: Women's Health
Purpose/Aims:
The purpose of this study with low income minority first time mothers was to examine infant care problems and effects of APN interventions by telephone calls.<br />

Research Questions/Hypotheses:
What are the infant care problems of low income minority first time mothers? What are the effects of APN interventions by follow up phone calls?

Significance:
Minority women have difficulty accessing the health care system due to language, financial and transportation problems (Nissen, & Borum, 2006). The 2006 Deficit Reduction Act indicates that children born in the United States to low income undocumented immigrants will no longer be automatically entitled to health insurance. Medicaid recipients are now experiencing serious delays in receiving healthcare for their newborns (Pear, 2006). Additionally, the Bush administration is proposing 2008 budget cuts from Medicaid (Zimonjic, 2007). All of these changes impose heightened challenges for low income mothers and infants in receiving necessary health care.

Methods:
Analysis of logs from a randomized clinical trial examined infant care problems and the effects of APN interventions using telephone calls post delivery discharge on days 3, 7, 14 and weeks 4, 6 and 8. The sample consisted of 36 mother infant pairs with maternal ages between 18-36 years. Sixty four percent of the sample were Hispanic, 19% Black and 17% other racial/ethnicities. There were no significant differences in maternal age, race or receipt of prenatal care by group.

Findings:

Thirty three mothers completed the 2 month data collection (93%). Ninety percent of the infant problems were feeding difficulties. Others were inconsolability, diarrhea, and vomiting. Using chi square, infants care problems were significantly non-pathological and APN interventions included education and reinforcement that concerns were not emergent.

Discussion:

Telephone calls by APN’s are an effective way to improve access to care, facilitate communications, and remove barriers.

Research Completed: Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

Submitted By:
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Cultural-sensitive indicators for studying risk behaviors in Afro-Caribbean adolescents

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Presentation Preference:
SNRS Student Poster Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Minority Health
Thematic Areas: Child & Adolescent Health

Purpose/Aims:
The purpose of this analysis was to identify factors indicative of cultural sensitivity in research studies that address risk behaviors in Afro-Caribbean adolescents.

Research Questions/Hypotheses:
What are the literature-based factors indicative of cultural sensitivity in risk-behavior research with Afro-Caribbean adolescents?

Significance:
Afro-Caribbean people are usually not distinguished from Afro-Americans, but there are distinct cultural challenges for this population. Many Afro-Caribbean adolescents experience greater socioeconomic deprivation than other adolescents, primarily due to undocumented immigration status. In addition, there is almost always a code of silence about undocumented status. These challenges may create an environment where risky survival strategies, like unsafe sexual activity and substance abuse, become reasonable alternatives. It is critical that researchers pursue understanding of the cultural context where risky behavior occurs. A first step in achieving understanding is inclusion of cultural sensitivity.
factors in research.

Methods:

Studies for inclusion were identified through computerized database literature searches. Databases included EBSCO, CINAHL, and Social Science Wilson Web. Key terms included ‘adolescent risky behavior,’ ‘Afro-Caribbean adolescent risky behavior,’ ‘behavioral problems,’ ‘maladjustment,’ ‘West Indian adolescent risky behavior,’ ‘immigrant adolescent behavioral problems,’ ‘risky behaviors,’ and ‘ethnic immigrant adolescent risky behaviors.’ Studies using quantitative and/or qualitative research designs were considered.

Findings:

No qualitative studies were found. Two groups of cultural-sensitive factors were identified: demographic (racial/ethnic identity; language spoken at home; length of time in the U.S.) and social (family structure; parental presence; religion; urbanicity; region of the U.S.; parents level of education). Though an important factor, when wishing to understand adolescents, adolescent self-expression (voice) was never considered.

Discussion:

There is very little research on risk behaviors of Afro-Caribbean adolescents; none takes a comprehensive cultural-sensitive approach incorporating adolescent voice. Collection of both qualitative and quantitative data promises to increase understanding of risky behaviors for this population.

Research Completed:

Yes

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:

Cleared: Yes

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Worry Now to Prevent Later: A Study of African American Girls and HPV

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Abstract Categories:
Interest Group: Minority Health
Thematic Areas: Health Disparities

Purpose/Aims:
To examine the knowledge of HPV among African American girls between the ages of 11-14.

Research Questions/Hypotheses:
What is the knowledge of HPV in African American girls between the age of 11-14?

Significance:
Sexually Transmitted Diseases (STDs) are affecting African American adolescent females in epidemic proportions. African American adolescent females are 26 times more likely to be infected with an STD compared to their white counterparts (CDC. 2001). The majority of African American adolescents begin sexual intercourse before the age of 18. African Americans have the highest prevalence of sexually transmitted diseases. Human Papillomavirus (HPV) is the most common sexually transmitted disease. The FDA approved HPV vaccine has public health implications however; the challenge lies in area of increasing awareness in African American girls.

Methods:
A convenient sample consisted of 206 African American girls age 11-14 years. The Family Ecology Demographic Questionnaire (FEDQ) was utilized to determine participant’s knowledge of common STDs and their source of information about STDs. The tool is a 51-item questionnaire using short answers and multiple choice answers. The instrument was completed using a one to one interview conducted by a trained data collector with each sample participant. Each participant’s identity was protected by assigning a unique identification code. The statistical baseline data was analyzed using SPSS version 12.

Findings:
The study concluded that 80% of African American adolescent girls that participated in the study did receive information about STDs. Of the 80%, only 18% of the participants had heard of HPV.

Discussion:
This study has implications for future educational interventions targeting HPV to reduce health disparities among African American females. Educational interventions should be culturally tailored to enhance an effective strategy. Prevention through vaccination has the potential to save lives and increase healthcare cost savings. The most effective approach is the one that begins prior to engagement into sexual intercourse.

Research Completed: Yes
Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
FDA Disclosure:
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Non-Exclusive License:
Accepted Terms: Yes
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Abstract ID: 847

Relationship of Health Literacy and Locus of Control to Medication Compliance in Older African Americans

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To address medication compliance from an African American perspective to fill gap in literature.

1) What is the relationship of Health Literacy (HL) to older African Americans’ compliance with prescription medications? and 2) Is Health Locus of Control (HLC) associated with medication compliance in older African Americans?

Medication noncompliance is a hidden epidemic in the African American population which continues to experience significant health disparities. Medication noncompliance results in negative health outcomes for chronic illnesses and increased healthcare costs from multiple hospital admissions.

In this non-experimental cross-sectional correlational study, 30 African Americans &gt; 45 years and taking at least one prescription medication were recruited. The Hill-Bone Compliance Scale; the Test of Functional Health Literacy in Adults (TOFHLA) and Rapid Estimate of Adult Literacy in Medicine (REALM); and the Multidimensional Health Locus of Control (MHLC) were used to measure compliance, HL, and HLC respectively. Data were analyzed with SPSS using descriptives, t tests and correlations.

Eighty seven percent of the sample read at high school level, while 53% displayed adequate Health Literacy, and 50% reported medication noncompliance; 87% exhibited internal HLC, and 50% reported medication noncompliance. Worse medication compliance was related to lower income (rs = -.50, p =.005). Higher education was related to higher income (rs = .67, p <.0005); worse compliance was related to worse Quality of Life (rs = -.40, p = 0.029).

Only participants with adequate HL reported medication compliance. Most participants displayed an internal HLC and over half of these were noncompliant. Healthcare professionals can provide clearer medication instructions for clients with poor health literacy; solicit clients’ involvement in their care; and educate clients to the benefits of correct medication-taking. Health Literacy and Health Locus of Control influenced medication compliance.

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Yes

Cleared: Yes

Accepted Terms: Yes

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Abstract ID: 849

**Physician Partnership-Building Behaviors: Implications in Health Disparities**

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The purpose of this pilot study was to identify how often and in what illness communication context does the physician’s use of partnership behavior vary with the race of the patient, controlling for age, and educational level in men with prostate cancer.

Research Questions/Hypotheses:
1. What types of partnership-building behaviors and information-giving behaviors are used for men seeking treatment for prostate cancer?
2. Do types of physician partnership-building behaviors vary by race, age, and educational level of the patient?
3. Does the quantity of information-giving by physicians about treatment options vary with the race of the patient controlling for age and educational level?
4. Do patient behaviors influence the use of physician partnership-building behaviors?

Significance:
Racial disparities in health care could be at least partially related to physician-patient communication. One factor that influences physician-patient communication is the use of partnership-building behaviors by the physician. Partnership-building behaviors include encouraging patients to ask questions, eliciting patient options for care, and encouraging patients to express opinions. The literature is sparse involving studies examining how race along with age and educational level, affects physician use of partnership-building behaviors during the medical visit.

Methods:
This study used secondary data from Decision Making under Uncertainty in Men with Prostate Cancer Patients (R01 NR008144-01, Dr. M. Mishel, PI and Dr. B. Germino, Co-PI). The data was 20 randomly selected (10 African American and 10 Caucasian subjects) verbatim transcripts of physician-patient treatment decision conferences. Patients’ participation and physicians’ partnership-building behaviors were coded using a system developed by Street and colleagues.

Findings:
Physicians used partnership-building behaviors for Caucasians 3 times more than used for African American patients. Information given by physicians varied between races, Caucasians received more information. Caucasian patients asked more questions than African Americans.

Discussion:
Physicians use of partnership-building behaviors and information given varied by race. Patients behaviors influenced the use of partnership-building behaviors.
Abstract ID: 875

Healthcare Decision Making Among Chabad-Lubavitch (Orthodox Jewish) Women

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Student Level:
The purpose of this study was to develop an understanding of what it means to be a Chabad-Lubavitch woman, a subset of Traditional Orthodox Judaism, and how this lived experience affects access to and utilization of healthcare in a Southern border state.

Research Questions/Hypotheses:
1) What are the healthcare experiences of Chabad Lubavitch women who live in a small Jewish community and 2) Do religious practices have an impact on how healthcare decisions are made?

Significance:
To date, limited research exists about the overall culture and primary care health needs of Chabad-Lubavitch women. However, the literature that does exist indicates that secular professionals living with very different values and priorities are viewed as unable to understand this community. Such a view can impact health care and health care access on many levels. This perceived lack of understanding supports the need for health care providers to develop increased cultural awareness and sensitivity regarding the cultural and religious practices of clients within this group.

Methods:
Using a phenomenological methodology, a purposive sample (N=5) was selected from Chabad-Lubavitch women who were part of a small Jewish community in a southern state. Face to face interviews were conducted with each participant. A semi-structured interview guide was designed for and utilized in this study. All interviews were tape recorded and transcribed verbatim. Open coding was undertaken through line by line analysis of the interview transcripts and the development of descriptive labels for responses to each question on the interview guide was developed.

Findings:
Initial findings indicate that cultural sensitivity is more important than is cultural competence to this group of women. This sensitivity directly effects how care providers are selected and retained. In addition such sensitivity impacts and informs the provider-patient relationship.

Discussion:
Healthcare providers need to be culturally sensitive to patients whose cultures and practices are vastly different from their own.
Abstract ID: 887

Culturally sensitive care for African American parents and infants

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Abstract Information
Presentation Preference: SNRS Student Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Minority Health
Thematic Areas: Healthy People 2010
Purpose/Aims:
Describe culture care meanings, perceptions of African American parents related to infant mortality, infant sleep positioning, and health promotion.
Research Questions/Hypotheses:
What are the values, beliefs, and care practices of African American parents of infants 0-6 months of age? What professional care practices influence health practices of African American parents of infants 0-6 months of age?
Significance:
The Healthy People Initiatives has targeted the elimination of racial and ethnic health disparities by 2010 as a goal for the nation's health.
The increased incidence of sudden infant death syndrome and the resultant disparity in infant mortality among African American infants is a concern.
Methods:
Ethnonursing study - Interviews with African American parents of infants most at risk for SIDS were conducted in an attempt to document professional care expressions perceived by parents to be valuable and worthy of adherence to health care recommendations.
Findings:
African American mothers value care from friendly, attentive nurses who include recipients' family members. Care is meaningful and trustworthy when recipients feel respected by nurses. As a result of receiving respectful care that is responsive to their values and beliefs, mothers in the current study indicated that they felt more confident in the health care recommendations of nurses.

Discussion:

Information obtained in this inquiry can be used to articulate and understand African American parents' perceptions of interactions with healthcare providers and to discover the barriers to this group's adherence with health care recommendations for safe infant sleep position.

Research Completed: Yes

Abstract History:

Financial Disclosure:

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Yes

FDA Disclosure:

Cleared: Yes

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Submitted By:

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Genetic and Environmental Influences of Hypertension in African American Women

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Student Level:
Studies have shown that AA women have higher rates of hypertension (HTN) compared to other population groups. Recent literature identifies two genes associated with hypertension. The serotonin transporter gene 5-HTT has been linked with depression, negative emotion, anxiety and pulmonary hypertension. Systemic hypertension has been linked to the serotonin neurotransmitter 5-HT gene. It is not known to what extent hypertension in AA women is affected by environmental versus genetic influences.

Research Questions/Hypotheses:
What is the conceptual framework that links genotypical, phenotypical and environmental influences to hypertension?

Significance:
Further research is needed about genetics and hypertension to help reduce health disparities related to HTN in AA women.

Methods:
A literature review of environmental influences and current genetic findings related to hypertension is being conducted to determine a conceptual framework for the study of HTN in AA women.

Findings:
Initial review of the literature reveals that AA women are underrepresented in research studies. Further review is in progress.

Discussion:
A framework for genetics and hypertension would advance the state of knowledge of this phenomenon for future programs of research.
SELF-PRACTICED CAM USE IN MINORITY MIDDLE-AGE AND OLDER ADULTS: COMPLEMENTARY OR ALTERNATIVE?

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Student Level:
Purpose/Aims:
This study examines system, personal, and cultural factors that influence the use of CAM among middle-age and older minority adults.

Research Questions/Hypotheses:
Is CAM used primarily as complementary or as alternative to conventional care?

Significance:
The elimination of health disparities and increasing the quality of healthy life are the primary goals of Healthy People 2010. Understanding the factors that influence choices pertinent to health behaviors in diverse populations will aid in addressing their healthcare needs. Racial/ethnic minority groups are more likely than non-Hispanic Whites to have chronic health conditions, live in poverty, and suffer from disability at an earlier age. Pagan and Pauly (2005) reported the inability to access and afford conventional healthcare as primary reasons for using CAM. Others, however, argue that CAM use was based on personal/cultural beliefs, and dissatisfaction with conventional healthcare regarding health management. If CAM is used as a substitute for conventional care, this may result in poor disease management and a corollary increase in healthcare costs.

Methods:
Convenient sample of 100 subjects who are 40 years and older will complete a questionnaire, which is developed by Yoon and includes selective questions from the 2002 National Health Interview Survey. Non-Hispanic Blacks and Hispanics will be over-sampled.

Findings:
Data collection is in progress. Findings will be available in February, 2008.

Discussion:
This study will examine patterns of using complementary vs. alternative medicine for selected health conditions among middle-aged and older minority adults in comparison with Whites. More importantly, this study will investigate the relationships among limited or delayed access to conventional healthcare services, personal and cultural influences, and the use of self-practiced CAM among ethnic minority adults by identifying specific system factors affecting access to conventional healthcare services, personal and cultural components that impact CAM use.

Research Completed:
Yes

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

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Non-Exclusive License:
Accepted Terms: Yes

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**Food Insecurity and Pediatric Health of a Southern Rural African-American Community**

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Minority Health
Thematic Areas: Health Disparities

Purpose/Aims:
The discovery of how poverty affects children's health is ongoing. The purpose of this study was to examine the impact of food insecurity on pediatric health in a rural, poverty-ridden African-American community in the southeastern United States.

Research Questions/Hypotheses:
What types of foods are members of the household consuming? What health challenges are occurring in children in these households? Are participants aware of federal and state programs that assist households in securing food?

Significance:
The significance of this study is in its contribution to the body of knowledge of nursing and to advocacy/policy change efforts for improving quality of life for those living in poverty in the United States.

Methods:
A qualitative study was designed to facilitate open dialogue between the researcher and the participant. Initiations to participate were extended to parents/grandparents in a rural Africa-American community through the local health department. One-on-
one interviews were conducted with parent/grandparents who volunteered for participation. All participants received a $10.00 gift certificate from a local grocery store paid for by the Cooperative Baptist Fellowship. Data were entered into Excel 2003 for analysis.

Findings:
Fifty parents/grandparents completed the interviews representing 50 households. The majority of households had an annual income of $10,000 or less with two to nine children living in the home. Types of foods eaten included luncheon meat, cornbread, chicken greens, and field peas. All but one participant were using a number of resources to meet the food challenges for the family including reduced meal programs at schools, food stamps, WIC, and vouchers. Health problems identified in these children were: chronic respiratory conditions, concentration, seizures, behavioral, migraines and anemia.

Discussion:
The results support the literature as it pertains to the development of pediatric health issues specifically respiratory and concentration and poverty. There was a strong relationship between the development of these health problems and concerns about obtaining enough food for the household.

Research Completed: Yes
Abstract History: 
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
FDA Disclosure: Yes
Non-Exclusive License: Cleared: Yes
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Exploring the Mental Health Impact of Immigrant Parent Survival Reasoning

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Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Minority Health
Thematic Areas: Women’s Health

Purpose/Aims:
The purpose is to explore the impact that immigrant parent survival reasoning has on Hispanic/Latina women who immigrate to the United States.

Research Questions/Hypotheses:
What is the mental health impact on Hispanic/Latina immigrant women whom leave their children behind in their countries of origin?

Significance:
The Hispanic/Latino groups make up the largest minority in the U.S. at 42.7 million, or 16% of the total population. Ethnicity and race bring unparalleled multicultural and multilingual diversity, which in turn have a direct and notable impact on the health and health care of individuals, groups and communities. The mental health impact of migration on Latina women is often manifested by feelings of culture shock, mourning and loss. Their freedom to choose migration often leaves them with mixed feelings of guilt for leaving their children and a longing for cultural and familial support.

Methods:
Story inquiry and the Theory of Meaning edified the concept of immigrant parent
survival reasoning. An immigrant woman’s story and the framework of the Theory of Meaning allowed the understanding of the abstraction of mental images that bring meaning to human experiences.

Findings:

A model was created at a middle range level of discourse to enable the understanding of the decision that immigrant women make when they leave their children back in their countries of origin. The model depicts immigrant parent survival reasoning as an expression of stress identified by the choice to migrate, leaving culture, families and children behind while hoping for opportunities in a new life.

Discussion:

Nurses are presented with vast opportunities to provide care to immigrants. Nurses can relieve human suffering by understanding these immigrants’ plight and by living the ethical and moral aspects of a nurse’s social contract.

Research Completed: Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

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EMPOWERMENT AND SEXUAL DECISIONS AMONG HIV-POSITIVE AFRICAN AMERICAN WOMEN

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To assess factors of empowerment relating to sexual decision-making among HIV-positive African American women.

Research Questions/Hypotheses:
What factors influence an HIV-positive woman’s empowerment to make safer sexual decisions? Factors include education, employment status, incarceration, substance use, partner relationships, social support, self-reported health, and stress.

Significance:
African American women represent one of the fastest growing populations in the United States contracting HIV, with an infection rate nearly 23 times that of Caucasian women. Because infection in women occurs primarily through heterosexual contact, it is imperative to determine significant factors that influence women’s sexual decision-making choices. Empowerment, as defined as economic opportunity that lessens dependence, impacts decision-making, and promotes social and political advancement, is considered as a means to improving women’s health.

Methods:
In this secondary analysis, two measures of sexual decision-making related to empowerment were taken from a statewide survey conducted by the Alabama AIDS service organizations. These two measures were having sex with persons of unknown serostatus and having sex for exchange (i.e., bartering).

Findings:
Having sex with persons of unknown serostatus was related to incarceration ($r = .31, p < .01$), alcohol use, ($r = .24, p < .05$), and sex for exchange ($r = .32, p < .001$); participants who had sex with persons of unknown disease status were more likely to have been incarcerated, to use alcohol more, and to use sex for exchange. Sex for exchange was related to incarceration ($r = .29, p < .01$) and alcohol use ($r = .23, p < .05$); those who used sex for exchange were more likely to have been incarcerated and to use alcohol more.

Discussion:
HIV interventions for women should focus on their more immediate needs such as economical advancement and substance abuse treatment, paying close attention to sub-populations such as incarcerated women, in order to enable them to be empowered to make safer sexual decisions.

Research Completed: Yes

Submitted By: calongrn@hotmail.com
An Exploration of factors related to Hypertension Control in African American and Caucasian municipal employees

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African Americans (AAs) have among the highest hypertension prevalence in the world, being at least twice the rate for Caucasians in almost every age and sex group. AAs are also at higher risk for more severe complications from hypertension than are Caucasians. The aim of this study was to identify selected individual, psychosocial, behavioral, and physiologic factors responsible for the disparity in hypertension control between AAs and Caucasians.

Research Questions/Hypotheses:
Which individual, psychosocial, behavioral, and physiologic factors are related to disparities in hypertension control between AAs and Caucasians?

Significance:
Identifying such factors is the first step to devising interventions for addressing the disparity.

Methods:
A secondary analysis of data from 1,287 municipal employees participating in City of Birmingham Good Health Program health screenings was used. Covariates included age, sex, marital status, educational level, and income; predictors included race, antihypertensive medicine, work shift, stress, job satisfaction and life satisfaction, physical activity, smoking, salty food intake, alcohol intake, frequency of eating out, high fat foods, BMI, and waist circumference; controlled hypertension was the response variable. Multiple logistic regression was used to identify variables associated with disparity in odds for hypertension control between AAs and Caucasians.

Findings:
After controlling for covariates, AAs had .33 lower odds for controlled hypertension (p = .003), though odds for taking antihypertensives were similar (p = .206). In participants on antihypertensives, the pattern of medicine was different (p <.001), with Caucasians more likely to be prescribed Beta Blocker or Other type (cell chi-square = 8.38, 4.57), but not combination therapy (cell chi-square = .077).

Discussion:
Given the observed disparity in hypertension control, even among those taking antihypertensives, the finding that AAs were no more likely to be prescribed combination therapy suggests one avenue to reducing that disparity, namely use of more aggressive treatment, using combination therapy.
Pilot Study to test the Spanish Version of the Thomas HPV Survey

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Minority Health
Thematic Areas: Health Disparities

Purpose/Aims: After a review of the literature it was determined that the survey developed by Dr. Thomas to examine the influence of a) parents’ knowledge, beliefs, and attitudes and intent to vaccinate for HPV in Black Non-Hispanic, Hispanic, and White Non-Hispanic parents with daughters ages 8 to 12; would benefit from translation into Spanish.

Research Questions/Hypotheses:

1. What discrepancies, if any are there between the Spanish and English Version of the Thomas HPV Survey? 2. What clarifications or are needed to improve the Spanish Version Thomas HPV Survey?

Significance: Health Care disparities can occur on many levels. In research it is imperative that accurate data be collected from volunteers in their native language when
possible. Dr Thomas has developed an Anonymous Survey to gather data regarding parents knowledge, beliefs, attitudes and intent to vaccinate with the HPV vaccine. This research will provide data for dissemination of health information regarding HPV vaccine across racial/ethnic groups to improve reproductive health for future generations of young women. The long term goal of Dr Thomas’ research is to develop and test an intervention to increase vaccination rates in varying racial/ethnic groups.

Methods:
Students completed an integrate literature review, translated the Thomas HPV Survey into Spanish, back translated it and then proceeded to do focus groups to note themes and inaccuracies so the Thomas HPV survey could be improved prior to implementation in a larger study.

Findings:
Pending Analysis

Discussion:
Pending analysis

Research Completed:
Yes

Abstract History:
- This material has been published or accepted for publication.

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

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FDA Disclosure:
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Understanding intergenerational mothering through the story of an

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Abstract Categories:
Interest Group: Minority Health
Thematic Areas: Health Disparities

Purpose/Aims:
Begin exploring intergenerational mothering for African-American mother-daughter dyads. <br/>

Research Questions/Hypotheses:
What is the health challenge faced by African-American mothers and daughters when the adolescent becomes a mother?

Significance:
The rate of pregnancy for African-American adolescents exceeds that of other ethnic groups, leading to health and socioeconomic disparities. Most of these adolescents live with families who actively participate in child-rearing. Little to nothing is written about adolescents’ perspective of intergenerational mothering. With the predominance of adolescent pregnancy in African-American populations, it is important to understand intergenerational mothering for mother-daughter dyads.

Methods:
Story inquiry was used with one African-American mother-daughter dyad; each was interviewed separately. The inquiry began with the questions: Who is the
mother in your household? and What does it mean to be a mother? Story inquiry, guided by Story theory, has seven phases: 1) gather the story of a health challenge; 2) compose a reconstructed story; 3) connect existing literature to the health challenge; 4) Refine the name of the health challenge; 5) describe the developing story plot; 6) identify movement toward resolving the health challenge; 7) collect additional stories. The first 6 phases are presented through the story of a 34 year old mom and her 16 year old daughter, who had a 6-month old baby. This family lived with the baby’s great grandmother.

Findings:
The health challenge was identified as the ongoing strain of figuring out shifting parental responsibility; the story plot focused on the daily struggle of being caught between motherhood and sisterhood; movement toward resolving happened when the adolescent’s grandmother was accepted as the “mother of the house”.

Discussion:
The grandmother-mother-daughter triad must be considered when doing research with this population. Exploring the experience for each member of the triad offers the best potential for addressing the disparities arising with adolescent pregnancy.

Research Completed: No
Abstract History: Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
FDA Disclosure: Cleared: Yes
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The influence of stress on the self care practices of Hispanic diabetic caregivers

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Presentation Preference: SNRS Student Poster Presentation

Abstract Categories:
- Interest Group: Minority Health
- Thematic Areas: Chronic illness

Purpose/Aims:
To examine the influence the chronic stress of caregiving on the self care habits of Hispanic diabetic caregivers.

Research Questions/Hypotheses:
Diabetic caregivers experiencing increased caregiver stress will have increased psychological response (depressive symptoms) and decreased adherence to self care practices and decreased physiological response (physical function and perceived health status). The effects of caregiver stress and psychological response (depressive symptoms) on the physiological response (physical function and perceived health status) are mediated by adherence to self care practices.

Significance:
Caregivers frequently experience high levels of stress. There is conflicting evidence concerning the influence of ethnicity on the experience of caregiving. In many cases, the result of the caregiving relationship is a deterioration of the caregiver's own physical health especially those with a chronic illness as diabetes. The incidence of diabetes in the Hispanic population is noted to be 2-3 times higher. Despite the awareness of the link between the care demands, psychological and physical health of caregivers, it is unclear what mechanisms are active especially as it relates to self care practices of Hispanic caregivers with diabetes.

Methods:
A descriptive correlational design will be used. The study will be conducted in a community primary care health center, serving the uninsured. The sample will consist of Hispanic adult diabetics that self-identify as the primary caregiver of an adult family member who is having difficulties with daily activities.

Data collection will include self-report questionnaires (caregiving stress, depressive symptoms, and self care activities) and biomedical evaluation of HgbA1c.

Findings:
Data analysis will include descriptive statistics, statistical testing using Chi square, t-test, and regression analysis as appropriate.

Discussion:
A better understanding of the self care practices of caregiving Hispanic diabetics would allow clinicians and researchers to identify, develop and evaluate culturally appropriate interventions for improvement of glycemic control, thus decreasing morbidity and mortality of Hispanic diabetics experiencing caregiver stress.

Research Completed: No

Abstract History:

Financial Disclosure:
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Non-Exclusive License:
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Abstract ID: 956

Feasibility and Effectiveness of Pedometer-Based Self-Monitoring to Increase Self-Efficacy and Physical Activity in African Americans with Metabolic Syndrome

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Student Level:

Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Minority Health
Thematic Areas: Adult Health

Purpose/Aims : Metabolic syndrome (MetS) is a disorder characterized by dyslipidemia, central adiposity, insulin resistance, and hypertension, which increase risk for serious chronic diseases. The primary treatment for MetS is weight loss through diet and exercise. Self-monitoring to increase self-efficacy has been clearly correlated with increased physical activity (PA), and pedometers are increasingly used to self-monitor and increase PA. However, the use of pedometers, as part of a comprehensive lifestyle intervention, to increase self-efficacy and associated PA has not been adequately studied in urban African Americans (AA) with MetS.

Research Questions/Hypotheses : It is hypothesized that pedometer-based self-monitoring, as part of a lifestyle intervention, is feasible and effective in improving exercise self-efficacy and PA for a population of urban AA with MetS.

Significance :
Results could help shape comprehensive interventions to address health disparities in urban AA populations.

Methods:
Secondary analysis of data from the Morehouse and Emory Team Up to Eliminate Cardiovascular Health Disparities (META-Health), a randomized, experimental study involving a community centered intervention to improve outcomes in AA with MetS. To date, data have been collected on 23 AA participants with MetS, 70% female, mean age (±SD) 52±9 years and mean (±SD) BMI 37±6 [range 26 – 48]. PA will be measured as mean steps/day/week from self-report daily pedometer logs. Feasibility and acceptability will be measured by compliance to pedometer self-monitoring through analysis of step logs. Self-efficacy will be measured with the Self Efficacy for Exercise Behaviors Scale at baseline and 6 months.

Findings:
Analysis will include a 0, 3, and 6-month pretest-posttest within-group analysis of trends and correlations between pedometer use, PA, and self-efficacy. Preliminary findings will be reported.

Discussion:
Results will increase understanding of how self-efficacy correlates with pedometer-based PA in this minority population and may help shape comprehensive interventions that address health disparities in urban AA’s with MetS.

Research Completed: Yes
Abstract History:
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
Submitted By: rcarbley@yahoo.com
Abstract ID: 966

**Barriers to Economic Independence in African American Female Welfare Recipients**

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Minority Health
Thematic Areas: Women's Health

Purpose/Aims: This study describes the prevalence of overweight/obesity, depressive symptoms, and low self esteem and self efficacy in a sample of African American (AA) women enrolled in a university-based job training program. Relationships among these variables are also described.

Research Questions/Hypotheses: What is the prevalence of overweight/obesity, depressive symptoms, and low self esteem and self efficacy and what are the associations among these variables in this sample of AA women moving from welfare to work.

Significance: Obesity and depression are highly prevalent among disadvantaged African American (AA) women, such as welfare recipients. Women who are obese and have frequent depressive symptoms and low levels of self-esteem and self-efficacy will likely not fare well during job interviews or perform well once hired because each of these health problems can affect functioning. Individuals with sub-clinical depressive symptom levels in the general population have similar or higher rates of medication use, medical visits for emotional problems, and days lost from work as individuals diagnosed with clinical depression; this is probably true for AA women who are welfare recipients.

Methods: A descriptive correlation study design was used to analyze data from 97 AA women enrolled in the above-mentioned job-training program. The Center for Epidemiological Depression Scale (CES-D), Rosenberg Self Esteem Scale, and Self-efficacy Cantrill Ladder data were obtained from the program database to assess depressive symptoms, self-esteem, and self-efficacy scores, respectively. Program height and weight data were used to calculate body mass index using the standard formula.

Findings: Data analysis is in progress and will include descriptive statistics to characterize
the sample and summarize study outcomes. Spearman’s rho will be calculated to report the strength and direction of associations among study variables.

Discussion:
Findings from this study will guide the design of effective strategies to eliminate these health problems. Financial self-sufficiency will likely be achieved if these barriers are eliminated.

Research Completed: Yes
Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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FDA Disclosure:
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Representation of Middle Class Black Women in the Childbirth Preparation Literature: An Integrative Review

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Abstract Information
Presentation Preference:
SNRS Student Poster Presentation
Willing To Submit Poster?
Yes
Abstract Categories:
Interest Group: Minority Health
Thematic Areas: Perinatal/Neonatal/Infancy
Purpose/Aims:
To analyze the childbirth preparation literature of the past fifteen years for reference to middle class black women (MCBW).
Research Questions/Hypotheses:
What is the representation of middle class black women in the childbirth preparation literature?
Significance:
American blacks represent 13% of the total population (Census 2006). There is great diversity amongst American blacks (Johnson & Staples; McAdoo, 2007), with two thirds being considered middle class (McKinnon & Bennett, 2005). Yet MCBW have represented only a small portion of research samples (Sawyer, 1999) as reported in the pregnancy literature. If this is also true for the childbirth preparation literature, then there has not been adequate voice given to these women.

Methods:
A literature search was performed using PubMed and CINAHL with the key words
pregnant, African American, black, women, childbirth preparation, and antenatal classes. Nineteen studies, using a variety of research methods, were found over the span of fifteen years. The studies were analyzed for research method used, sample size, race/ethnicity, and reported socio-economic status.

Findings:

A wide variety of qualitative and quantitative methods were used. Sample size ranged from 4 to 1583. Two studies did not report race. Four studies included no black women. Two studies did sample black women but did not report their numbers. Four studies included only black women. In the remaining studies black women comprised 9% to 22% of the total sample. Only three studies, one of which had a sample size of 4, specified the presence of MCBW. Seven studies did not report socio-economic status.

Discussion:

Of the nineteen childbirth preparation publications analyzed, fourteen included black women in their samples. However, only three, one of which had a very small sample size, specified the middle class status of the black women. Thus there is an urgent need to include MCBW in future childbirth preparation research.

Research Completed: Yes

Abstract History:

Financial Disclosure:

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AFRICAN AMERICAN GRANDMOTHER CAREGIVERS: RELATIONSHIP BETWEEN
PERCEIVED HEALTH AND SERVICE NEED

Abstract Information

Presentation Preference:
SNRS  Student Poster Presentation

Abstract Categories:
Interest Group: Minority Health
Thematic Areas: Women’s Health

Purpose/Aims:
The purpose of this study is to explore and describe the influence of information need upon perceived health upon service need in African American (AA) grandmother caregivers.

Research Questions/Hypotheses:
What is the relationship between AA grandmother perceived health (physical and mental) and service need while controlling for demographic factors (age, income, education, number of grandchildren, and time caregiving)?

Significance:
This preliminary data is the impetus for developing further research studies with AA grandmother caregivers. These studies are needed to address efficacious ways to improve health of AA grandmothers by offering services the meet their specific health needs.

Methods:
Ninety-three AA grandmothers who have custody or are the primary provider for one or more of their biological grandchildren participated in this study. All grandmothers completed surveys, which elicited information about their perceived
health and service need.

Findings:

Preliminary findings suggest age (B = .035, p = .009), education (B = .082, p = .036), and perceived health (B = .028, p = .004) were significant predictors of service need. The positive relationship between perceived health and service need indicates poor perceived health is associated with greater service need.

Discussion:

Grandparent needs and health issues are major topics in research about grandparents raising grandchildren. Today, grandparents, in overwhelming numbers, assume responsibility for their grandchildren. According to the US Census Bureau, over 2 billion grandparents were primary caregivers for their grandchildren 18 years of age or less. Over three fourths of these primary grandparent caregivers are grandmothers. Unfavorable grandparent caregiver health has been reported when this caregiving is assumed. To date, few studies have examined specific factors that influence health alterations and service need in this population of women.

Research Completed: Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:
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Non-Exclusive License: Accepted Terms: Yes

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Abstract ID: 91

**BIOLOGICAL AND SOCIAL RISK PREDICTORS OF DEVELOPMENTAL OUTCOMES OF PREMATURES**

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Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? No

Abstract Categories: Interest Group: Parent-Child
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims: To use biological risk measures along with neurological insults and social risk measures to predict development of preterms

Research Questions/Hypotheses:
Could biological risk measures in the preterm period predict development at 9 and 27 months?

Significance: Measures of biological risk in infancy--development of sleep behaviors over the preterm period and EEG patterns--reflect brain functioning and might predict outcomes.

Methods: 106 preterms (55 boys, 50 Blacks) weighing less than 1500 gm or requiring mechanical ventilation were recruited from two hospitals in two states. Gestational age averaged 28.7 weeks; birthweight averaged 1222 gm. Sleep-wake states were observed weekly when infants were no longer critically ill until hospital discharge. Cluster analyses of the individuals' deviations from group slopes of eight sleep behaviors found five clusters. Seven variables were obtained from EEGs conducted monthly. NBRs measured neurological insults. Three maternal (positive involvement, developmental stimulation, negative control) interactive dimensions were derived from videotapes of mother-infant interactions and HOME sub-scales at 6 and 18 months. At 9 and 27 months, developmental status was assessed.

Findings: General linear models indicated that the Bayley MDI at 9 months was predicted by hemispheric correlations on the EEG, and at 27 months by sleep cluster membership, percent quiet sleep on EEG, positive involvement, and developmental stimulation. Bayley PDI at 9 months was predicted by the NBRs score, and at 27 months by quiet sleep on the EEG and the NBRs. Language abilities at 27 months were predicted by sleep cluster membership, hemispheric correlations on the EEG, and developmental stimulation. R2 values were larger for 27-month outcomes than 9-month ones.

Discussion: Measures of preterm sleep development are effective indicators of biological risk. Along with social risk indices, they predict development in the first 2 years and have a stronger relationship to outcomes at 27 than 9 months, probably because more cognitive skills are apparent at 27 months.

Research Completed: Yes

Abstract History: -This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure: Yes
Abstract ID: 96

Children's Health and Nursing Service in Alabama's Public School Systems

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Presentation Preference:
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Willing To Submit Poster?
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Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Child & Adolescent Health

Purpose/Aims:
The purpose of this study was to describe the current state of both children's health and nursing service in Alabama's public school systems.

Research Questions/Hypotheses:
The research question was "How is the state of children's health as well the nursing service provided changing over time in Alabama's public school systems?"

Significance:
Since implementation of the regulations which allow school nurses to delegate procedures to unlicensed personnel, the Alabama Board of Nursing has requested a yearly report which addressed the current state of student populations as well as the nursing care provided by licensed and supervised, unlicensed personnel.

Methods:
This longitudinal study used data from the previous year as well as the current year. The instrument for data compilation consisted of an online survey which
was distributed to 134 Alabama public school systems and 1451 public schools. A response rate of 100% was achieved. The primary limitation of the project is that of poor external validity due to a lack of random sampling.

Findings:
Compilation of data revealed that fingerstick glucose monitoring is the health procedure most frequently implemented in the public schools in Alabama. The most frequent chronic conditions experienced by students include asthma, attention deficit disorder, obesity, and severe allergies. Regarding medications, the number of medications used to treat Attention Deficit Disorder increased 354.37% from 2005-2006 academic year to 2006-2007, while the number of breathing treatments administered in the public schools increased 307.45% and the number of oral antibiotics administered increased 498.83%. Also, 313 nurses reported that they did not have access to adequate medical information on each student served.

Discussion:
The findings have implications for the school nurses who are attempting to provide comprehensive health care to Alabama's school children as well as for parents who are involved in the health care needs of their children. The need for additional numbers of school nurses is clearly demonstrated.

Research Completed: Yes
Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
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Nutrition in Early Pregnancy: A Feasibility Study

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Purpose/Aims: To determine the feasibility of: 1) recruiting women with a positive pregnancy test into a study that examines nutritional status in the first trimester and 2) data collection procedures for obtaining dietary intake information.

Research Questions/Hypotheses: How many women will be willing to participate in a nutrition study in the first trimester of pregnancy? How acceptable are the data collection procedures for obtaining dietary intake information?

Significance: Dietary quality, particularly in the first trimester of pregnancy, is a key factor affecting pregnancy outcomes and has a profound effect on fetal and placental development. Overall dietary quality during the periconceptual period, however, is often overlooked and unvalued by health care providers. No research exists that explores the effects of contextual and modifiable factors on women’s dietary intake during the first trimester and prior to receiving benefits from WIC. This study attempts to fill that gap.

Methods: Non-experimental descriptive study using a convenience sample of 15 women who received notification of a positive pregnancy test at Planned Parenthood.

Findings: Descriptive statistics will be obtained regarding: 1) Number of women with positive pregnancy tests who are willing to participate in this study, 2) Number of women dropped from the study after initial screening, 3) Number of women who completed or did not complete all data collection procedures, 4) Number of times each participant was contacted to obtain necessary number of dietary recalls, 5) Participant demographic information, and 6) Degree of missing data. Preliminary reliability statistics will be conducted on study questionnaires.

Discussion: Nurses are currently unprepared to efficiently assess the dietary quality of low-income pregnant women. The results from this study will provide valuable information regarding the feasibility of recruitment and data collection procedures designed to determine how well a proposed model explains the influence of modifiable factors and contextual factors on dietary quality in low income pregnant women.

Research Completed: Yes

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Improved Asthma Quality of Life for Children Participating in a Self-management Program

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To evaluate asthma quality of life (QOL) for school-age children who were taught peak flow monitoring (PFM) as part of an asthma self-management program.

Research Questions/Hypotheses:
It was hypothesized that children who participated in an asthma self-management program would have improved asthma QOL.

Significance:
Clinical measures capture the child's asthma status but not the impact of the condition and treatment on everyday life.

Methods:
Asthma QOL was evaluated, using the Children’s Health Survey for Asthma (CHSA), for 77 children participating in a 16-week randomized, controlled trial testing an intervention to promote adherence to electronic PFM. The CHSA included five subscales (physical health of the child; activities of the child and family; emotional health of the child and family), administered at baseline, Weeks 8 and 16. Repeated measures analysis of variance was used to determine whether there were group differences (intervention vs. control) in asthma QOL over time. The relationship of asthma QOL with adherence to PFM and health outcomes (e.g., asthma attacks, ED or acute care visits for asthma, or missed school days) was determined using the two-sample t-tests.

Findings:
For all five subscales there were no group differences but there was an increase from baseline to Week 8, and this improvement was maintained at Week 16. There was additional improvement from Week 8 to 16 for the child’s physical health measure. During the maintenance period (Week 16), the children who were adherent to PFM (> 80%) had a higher mean score for physical health compared with the physical health ratings for non-adherent participants. Children with more positive health outcomes had higher scores on asthma QOL measures.

Discussion:
Asthma QOL significantly improved for children participating in an asthma self-management program, guided by PFM. The outcomes have important nursing practice implications for teaching PFM. Supported by Grant # R15 NR08106-01 from the National Institute of Nursing Research, National Institutes of Health.
Perinatal Nursing in Uncertain Times: The Katrina Effect

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Abstract Information

Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Parent-Child
- Thematic Areas: Workforce Issues

Purpose/Aims:
- Purpose: To describe and make explicit the nurses’ shared meanings of their lived experience providing nursing care in obstetrical and newborn settings during the disaster of Hurricane Katrina and coping with the aftermath.

- Aims:
  1. To describe issues and concerns related to emergency preparedness in perinatal nursing settings.
  2. To describe the personal and professional needs of perinatal nurses following their experience working in a disaster.

Research Questions/Hypotheses:
1. What impact did the disaster have on nurses’ personal and professional lives?
2. What is the nurses’ perception of the care they delivered during the disaster?
3. What are the disaster preparation needs for perinatal nurses?
4. What are the concerns that perinatal nurses face as they rebound from the experience of working during the Hurricane Katrina disaster?

Significance:
Explication of the nurses’ experiences during the Katrina disaster can inform health care and professional organizations in how to better prepare specialty nurses for disaster-care experiences and to improve support services for nurses after the disaster.

Methods:
Interpretative phenomenology was used to guide the study. Sixteen maternal-newborn nurses were interviewed 9-18 months after the disaster. The semi-structured interviews were taped and transcribed. An audit trail was maintained and data were analyzed, guided by van Manen’s method of hermeneutic reflection and thematic analysis.

Findings:
An exhaustive description of themes included:
- Duty to care
- Conflict in duty
- Chaos after the storm: Uncertain outcome
- Evacuation: Routes through uncertainty, hopelessness, abandonment, fear
- Strength to endure
- Grief: A loss of relationships, identity, and place
- Anger: Where was corporate?
- Feeling you are in the right place again

Discussion:
The prolonged stress and lack of perceived support voiced by the participants should serve to inform health care and professional organizations in how to better prepare specialty nurses for disaster-care situations and assist nurses to cope afterwards with the effects of working and living through a major disaster.

Research Completed: Yes

Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

Grants/Research Support: Y
New Orleans District Nurses Association
Consultant:
Stock/Shareholder:
Speaker's Bureau:
Stress and Social Support of Chinese Postpartum Mothers in the U.S.

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Abstract Information
Presentation Preference:
SNRS Poster Presentation

Willing To Submit Poster?
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Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Women's Health

Purpose/Aims:
To explore the level of and relationships between stress and social support of Chinese postpartum mothers in the US.

Research Questions/Hypotheses:
(a) What are Chinese mothers’ levels of stress and social support, (b) what are the relationships between stress and support, and (c) what is the effect of parents-in-law on mothers?

Significance:
Stress was found to have negative impacts on maternal health while social support moderated the impact of stress. However, support may be viewed negatively by Chinese mothers especially when it is from mother-in-law.

Methods:
The study was a cross-sectional, correlational design. Snowball sampling was used to recruit 150 Chinese mothers who were within 1 year postpartum via electronic and paper surveys. The Perceived Stress Scale, Duke Social Support and Stress Scale, and Postpartum Support Questionnaire were used. Descriptive statistics,
Pearson correlations, and Mann-Whitney U tests were applied. Mothers in the study had high educational level, most were primiparas and delivered vaginally.

Findings:
Mothers’ level of global stress was higher than that of general population norm for females and ethnic minority people in the US. Parents-in-law, husband, and children were the most frequently mentioned people who brought on most stress. Mothers thought support was important, however; did not receive as high level of support. Husband and friends were the most frequently mentioned people who provided the most support. Support mothers received was negatively correlated with global stress. Stress brought on by people was positively correlated with global stress while global stress was positively correlated with the importance of support. Mothers’ perception of received support did not differ by whether living with or perceiving stress from parents-in-law.

Discussion:
Strategies that reduce stress and inclusion of supportive people in care can be applied to postpartum care. Cultural sensitive instruments that focused on postpartum life events and postpartum needs can help to understand more about Chinese mothers’ stress and needs.

Research Completed: Yes

Abstract History: -This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

Submitted By: chingyuus@gmail.com
Community Participation in Preventing Adolescents from Becoming Overweight

Abstract Information

Presentation Preference: SNRS Poster Presentation

Abstract Categories: Interest Group: Parent-Child
Thematic Areas: Child & Adolescent Health

Purpose/Aims: The aim is to develop a community based plan to prevent young adolescents from becoming overweight.

Research Questions/Hypotheses: What are the values, beliefs, resources and constraints reported by members of an underserved minority community around the issue of preventing young adolescents from becoming overweight?

Significance: The state of Alabama has the distinction of being both the most at risk for heart disease and stroke and one of the states with the highest percentage of obesity. Adolescents are no exception to this trend, and their obesity and inactivity greatly increases their risk for Type 2 diabetes, hypertension, hyperlipidemia and other chronic disorders. Minority adolescents, particularly in the African American and Hispanic American subgroups, have had an even higher incidence of these problems. In the state of Alabama a 2001 study of 822 adolescents in 6 regions of the state found that 44% were either at risk for becoming or were overweight.

Methods:
Parents, teens, and community leaders participated in focus group meetings and discussed their opinions, beliefs, behaviors, resources, and constraints around the issue of preventing teens from becoming overweight.

Findings:

Preliminary findings include that because both parents work or are single parents with one or more jobs, children frequently prepare their own meals and often make unhealthy food choices; children often can't play outside because of the lack of safe places to do so; sports participation is expensive in both money and time for most families; social and church activities usually include serving and eating unhealthy foods; healthier school cafeteria food preparation methods and menus are not accepted by teens who usually wait and go home to eat snack food instead.

Discussion:

The above findings indicate a need in the community for new approaches to preventing overweight in adolescent. A plan will be developed from these findings and presented to the participants for discussion and revision.

Research Completed: Yes

Abstract History:

Financial Disclosure:

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FDA Disclosure:

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Psychological impact of childbirth among adolescents

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Abstract Information
Presentation Preference:
SNRS Podium Presentation

Willing To Submit Poster?
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Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Child & Adolescent Health

Purpose/Aims:
to explore the psychological impact of childbirth among teens nine months postpartum

Research Questions/Hypotheses:
what is the incidence of posttraumatic stress disorder (PTSD) and postpartum depression (PPD) among teens following childbirth? what is the relationship between PTSD, PPD and perceived childbirth trauma?

Significance:
over 500,000 teens deliver per year; 50% experience PPD, the acute and potential chronic stress (PTSD) preceding PPD is unrecognized and unstudied in this population as related to childbirth

Methods:
telephone surveys at nine months postpartum of 28 teens enrolled in a prenatal educational program assessed signs and symptoms (S&S) of PTSD and PPD and childbirth trauma via the Impact of Events Scale, Edinburgh Postnatal Depression Inventory and the Childbirth Trauma Index

Findings:
S&S of depression were reported by 50% of teens; 1/5 of teens experienced S&S of PTSD. Minority teens and those under 15 and over 17 reported more S&S. Childbirth was considered traumatic to many defined as fear of dying, loss of control, increased anxiety, no support and poor pain control.

Discussion:

Teens can be traumatized by childbirth and are vulnerable to PTSD and PPD especially minority or younger/older teens. Recognition of these risk factors directs the care nurses need provide such as support and presence, education of L&D process/procedures, allowance of small decisions, and adequate pain control.

Research Completed: Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

Grants/Research Support: Y

University of Texas at Arlington
Tarrant County Healthcare System

Consultant:

Stock/Shareholder:

Speaker’s Bureau:

Other Financial or Material Support:

FDA Disclosure:

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Non-Exclusive License:

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Submitted By:

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Identifying Family Education Needs of Latino Immigrant Parents and Adolescents

Abstract Information

Presentation Preference: SNRS Podium Presentation
Willing To Submit Poster? Yes
Purpose/Aims: The purpose of this project is to identify perceptions of Latino immigrant adolescents and parents regarding their needs for family life education programs, as a component of a community-based project to design, implement and evaluate a parenting program for Latino immigrant families in rural Alabama.
Research Questions/Hypotheses: The research questions guiding this study are: 1. What are the perceptions of Latino immigrant adolescents and parents related to their levels of acculturation, parental behaviors, and family conflict? 2. What are Latino adolescents’ levels of risky health behaviors? 3. What are perceived needs for family life education programs among Latino immigrant parents and adolescents?
Significance: Immigrant Latino adolescents are at greater risk for problems such as substance abuse, risky sexual behaviors, and gang involvement, as a result of increased conflict and alienation from their families of origin resulting from acculturation-related stresses. Parenting education programs can strengthen families and thereby prevent problems such as physical and mental health problems, sexually transmitted
diseases, early pregnancies, and substance abuse.

Methods:
Surveys were conducted in English or Spanish (based on participant preference) with 100 Latino parents and 50 adolescents in a rural area of Alabama. The project was approved by the University Institutional Review Board, and consent or assent obtained from parents and adolescents. Instruments included the Youth Risk Behavior Survey developed by the Centers for Disease Control, an assessment of preferences and interest in family life educational programs, and validated measures of parental discipline, communication, and involvement developed by Gonzales, and a modification of the acculturation scale developed by Cuellar et al.

Findings:
Data analysis is in progress but will be complete by the time of the presentation.

Discussion:
The findings will be used to identify risky adolescent health behaviors and family interaction patterns to design a community-based parent/adolescent educational program for Latino immigrant families.

Research Completed: Yes

Abstract History:
- This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
- Details: Abstract for poster prelim results submitted for the Nov. American Academy of Nursing meeting.

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes
Grants/Research Support: Y
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FDA Disclosure:
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Non-Exclusive License:
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Abstract ID: 237

Identifying Family Life Education Needs of Latino Immigrant Parents and Adolescents

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Abstract Information

Presentation Preference:
SNRS Podium Presentation

Willing To Submit Poster?
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Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Family Health

Purpose/Aims:
The purpose of this project is to identify perceptions of Latino immigrant adolescents and parents regarding their needs for family life education programs, as a component of a community-based project to design, implement and evaluate a parenting program for Latino immigrant families in rural Alabama.

Research Questions/Hypotheses:
The research questions guiding this study are: 1. What are the perceptions of Latino immigrant adolescents and parents related to their levels of acculturation, parental behaviors, and family conflict? 2. What are Latino adolescents’ levels of risky health behaviors? 3. What are perceived needs for family life education programs among Latino immigrant parents and adolescents?

Significance:
Immigrant Latino adolescents are at greater risk for problems such as substance abuse, risky sexual behaviors, and gang involvement, as a result of increased conflict and alienation from their families of origin resulting from acculturation-related stresses. Parenting education programs can strengthen families and thereby
prevent problems such as physical and mental health problems, sexually transmitted diseases, early pregnancies, and substance abuse.

Methods:

Surveys were conducted in English or Spanish (based on participant preference) with 100 Latino parents and 50 adolescents in a rural area of Alabama. The project was approved by the University Institutional Review Board, and consent or assent obtained from parents and adolescents. Instruments included the Youth Risk Behavior Survey developed by the Centers for Disease Control; an assessment of preferences and interest in family life educational programs; validated measures of parental discipline, communication, and involvement developed by Gonzalez; and a modification of the Cueller et al. acculturation scale.

Findings:

Data analysis is in progress but will be complete by the time of the presentation.

Discussion:

The findings will be used to identify risky adolescent health behaviors and family interaction patterns to design a community-based parent/adolescent educational program for Latino immigrant families.

Research Completed:

Yes

Abstract History:

Financial Disclosure:

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Grants/Research Support: Y

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FDA Disclosure:

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Non-Exclusive License:

Accepted Terms: Yes

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Exploration of the Relationships among Personal Characteristics, Levels of Stress, High Risk Behaviors, and Levels of Resilience in Adolescent College Students

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Presentation Preference:
SNRS   Podium Presentation

Willing To Submit Poster?
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Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Child & Adolescent Health

Purpose/Aims:
To explore relationships among personal characteristics, stress, high risk behaviors, and resilience in adolescent college students.

Research Questions/Hypotheses:
What are the personal characteristics, levels of stress, high risk behaviors, and levels of resilience of college students 18 to 20 years old? What are the relationships among the personal characteristics, levels of stress, high risk behaviors, and levels of resilience of college students 18 to 20 years old?

Significance:
Adolescence is considered to be a period of vulnerability for most individuals as they partake in risky behaviors therefore resilience is an important ability. Little is known about this process in healthy, well-adjusted adolescent college student.

Methods:
Exploratory model testing was used to investigate relationships among personal characteristics, stress, high risk behaviors, and resilience. Power analysis calculation yielded a projected sample size of 165 study participants who included college students 18 to 20 years old. Study measures included a demographic questionnaire, two stress visual analog scales, the Health Behaviors Questionnaire, and the Resilience Scale. Model testing was performed using correlations, hierarchical multiple regression, and path analysis to identify the strongest predictive variables.

Findings:
The participants were mostly young, non-Hispanic, Caucasians living at home. Hispanics and eighteen-year-olds reported higher stress levels. Males were more likely to report more emotional risk behaviors while females were more likely to report behavior risks. Resilience levels were at the medium level. The strongest predictive model was Personal Characteristics and Emotional Risk to Stress in General. This model was used for path analysis and the significant variables were Ethnicity ($\beta = .165, p = .036$) and Emotional Risk ($\beta = .567, p = .000$).

Discussion:
Nursing education, at all levels, and research should focus more on stress and risk behaviors of adolescents for better recognition and earlier intervention as they transition to greater independence and risk taking.

Research Completed:
Yes

Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
-Details: preliminary findings were presented in 2007 as a student poster

Financial Disclosure:
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Abstract ID: 265

The Science of Preterm Infant Feeding

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Abstract Information
Presentation Preference:
SNRS Symposium

Willing To Submit Podium?
Yes
Willing To Submit Poster?
Yes
Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims:
Symposium Overview<br/>

Preterm infant feeding has been the object of scientific study for sometime. However, despite the efforts of researchers and clinicians, there remains much that is not clearly understood about the phenomenon. Since the acquisition of oral feeding is necessary for hospital discharge and since feeding care decisions fall primarily to nurses, further research in this area is critically important. In particular, when to initiate oral feedings and how to progress oral feedings continues to be primary issues in neonatal intensive care units. Starting and progressing oral feedings is made more complicated from a clinical perspective by the presence of complex health conditions, including those that affect breathing and neurologic integrity. In addition, there are a plethora of untested recommendations and interventions aimed at speeding up the acquisition of oral feeding skills in order to reduce length of hospitalization while the infant masters oral feeding. Concerns about the safety and efficacy of these interventions have not been empirically addressed. The three papers that comprise this symposium focus on the major areas of research and clinical concern in preterm infant feeding: determining feeding readiness, intervening
to promote feeding effectiveness in healthy preterm infants, and understanding
the challenges of feeding preterm infants with compromising health conditions.
Based on three individual but related programs of research, these papers will
provide the most current research findings in this area. The overview will
provide a synopsis of the state of the science in these areas. The objectives
of the symposium are to: 1) understand the complexity of neurobehavioral factors
to consider when examining a preterm infant’s readiness for oral feeding and
oral feeding progression; 2) appreciate the effectiveness of a neurobehaviorally
sound intervention to promote feeding effectiveness and safety; and 3) recognize
challenges associated feeding care for infants with compromising pulmonary
illness.<br />

Research Questions/Hypotheses :
overview

Significance :
overview

Methods :
overview

Findings :
overview

Discussion :
overview

Research Completed :
Yes

Abstract History:
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FDA Disclosure:
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Non-Exclusive License:
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The Science of Preterm Infant Feeding

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Abstract Information

Presentation Preference: SNRS Symposium

Willing To Submit Podium? Yes
Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Parent-Child
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims:
The Feeding Readiness and Progression in Preterms Scale (FRAPPS) is a 10 item pen-and-paper instrument designed to easily assess a variety of physiologic and behavioral parameters that appear to influence oral feeding readiness/progression. Content and face validity have been established. The purpose of this study was to examine the construct validity of the FRAPPS using physiologic and sucking measures of stability as correlates for feeding initiation, progression and success in preterm infants.

Research Questions/Hypotheses:
1. Is the FRAPPS a reliable and stable measure of feeding readiness/progression? 2. Is criterion-related validity established for the FRAPPS using physiologic/sucking measures? 3. Do FRAPPS scores correlate with the successful initiation, and progression of feeding?

Significance:
Once respiratory stability is established in the preterm infant, successful oral feeding is a major priority for discharge decision-making. Yet, no objective measures for oral feeding readiness or progression exists. Preterm infants are often encouraged to bottle feed before they are ready. Consequently, they are subjected to a trial-and-error approach that may increase stress and detract from success. Decision-making during this process seldom takes into account a full picture of the interwoven physiologic and behavioral variables.

Methods:
The study was approved by an institutional review board and parental consent obtained. Data collection began between 29 and 32 weeks post-conceptional age (PCA) for 25 infants. The FRAPPS was scored once daily while variables related to physiologic and feeding behaviors were also collected. Once oral feeding was initiated physiologic (heart rate, oxygen saturation) and sucking (pressure, counts) data were obtained at one feeding daily.

Findings:
Data were analyzed using correlations and logistic regression. Confounding variables such as the repeated measures nature of the data and infant characteristics were accounted for in the analysis.

Discussion:
Preliminary results suggest that the FRAPPS may be a sensitive measure of feeding readiness and progression during the transition to oral feeding.

Research Completed: Yes

Non-Exclusive License: Cleared: Yes
Abstract ID: 267

The Science of Preterm Infant Feeding

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Willing To Submit Podium?
Yes

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Yes

Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims:
The purpose of this analysis was a) to describe adjustments in the caregiver’s intervention strategies throughout the feeding in response to their on-going assessment of the infant’s skills, and b) to describe the effectiveness of the intervention on infant breathing regulation, physiologic stability, and infant behavioral distress.

Research Questions/Hypotheses:
1. What adjustments do caregivers make to feeding interventions in response to preterm infant cues for feeding behaviors? 2. Are cue-based interventions effective in reducing breathing difficulties, physiologic instability, and distress during preterm infant feedings?

Significance:
The gentle, cue-based approach to feeding preterm infants is based on on-going assessment of infant skills across four domains: ability to maintain engagement in feeding, oral-motor functioning, integration of swallowing with breathing, and ability to maintain physiologic stability.

Methods:
Serving as his/her own control, 20 ELBW infants were fed by the nurse or parent using the standard care approach and by the intervention study team using the gentle, cue-based approach. On average, each infant was observed feeding 4 times for a total of 77 feeding observations. Infant physiology (HR, and SaO2) was collected at 1 sample/second, breathing regulation was scored from Respitrace waveforms, and continuous infant distress behaviors were coded from videotape using an observational coding system. The study had IRB approval; parents gave informed consent.

Findings:
Intervention feedings were more commonly initiated in response to infant readiness cues, had more rest periods and more pacing events (bottle tip backs) throughout
the feeding, and were more likely to end in response to the infant’s lack of readiness. Intervention feedings had more physiologic stability, shorter breathing pauses, and less behavioral distress.

Discussion:

A gentle, cue-based feeding approach has significant short-term feeding outcome benefits. Further research is needed to determine if this approach has long-term benefits, such as shorter time to full oral feeding, improved use of calories for growth, and less development of feeding problems.

Research Completed: Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

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The Science of Preterm Infant Feeding

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The purpose of this analysis was to examine the maturation of feeding skills in preterm infants who have developed bronchopulmonary dysplasia (BPD).

Research Questions/Hypotheses:
1) How do feeding skills change over time in preterm infants who have BPD?

Significance:
Preterm infants with chronic lung disease (BPD) have great difficulty attaining skills necessary for oral feeding. Understanding skill maturation provides a basis for interventions that facilitate the acquisition of these skills.

Methods:
Feeding proficiency, percentage of volume ingested of the total feeding volume, and efficiency, volume (mL/min) ingested over the feeding period, were calculated for day-one of feeding initiation, mid-point to achieving nipple feeding, and day of feeding achievement (taking all feedings orally). The sample included 33 infants with BPD who were born preterm. The study had IRB approval; parents gave informed consent.

Findings:
Mean day-one proficiency by post-conceptual age (PCA) in weeks was 66% (+31) for infants 34-35 weeks, 70% (+38) for infants 36-37 weeks, and 55% (+30) for infants 38-41 weeks. Mean mid-point proficiency 85% (+26) for infants 34-35 weeks, 74% (+35) for infants 36-37 weeks, and 98% (+3) for infants 38-41 weeks. Proficiency was 100% on achievement of full oral feeding for all PCA groups.

Discussion:
Proficiency and efficiency improved from initiation to achievement of full oral feedings as expected. However, infants with BPD are less efficient, with 2.5-3.8 mL/min efficiency compared to healthy preterm infants at 36 weeks PCA who ingest 10.4mL/min.
Autonomy Development and Self-Care of Adolescents with Type 1 Diabetes

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Presentation Preference: SNRS Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Parent-Child
Thematic Areas: Child & Adolescent Health

Purpose/Aims:
To assess the contribution of three types of autonomy development (cognitive, emotional, and behavioral) to self-care of 11-18 year old adolescents with Type 1 diabetes.

Research Questions/Hypotheses:
1. Cognitive autonomy will be positively associated with self-care. 2. Behavioral autonomy will be positively associated with self-care. 3. Emotional autonomy will be negatively associated with self-care.

Significance:
Self-care related to management of Type 1 diabetes declines over the course of adolescence. Knowing how to foster constructive autonomy is an important issue for parents. Yet, it is unclear what type of autonomy might foster self-care. Two theoretical frameworks, attachment theory and self-determination theory, suggest that cognitive autonomy is critical.

Methods:
A convenience sample of 161 families, i.e. parental couples or single parents of adolescents between 11 and 15 years of age, and diagnosed with Type 1 diabetes for at least one year, was followed longitudinally for two years resulting in three annual waves of data. The same battery of instruments was administered at each wave. At Wave 1 the sample was 81% Caucasian; the remainder of the sample were African-American.

Findings:
Cognitive autonomy accounted for significant variance in health-related self-care, F(1,378)=59.85, p<.0001, and significant variation in disease-related self-care, F(1, 378)=8.16, p=.004. Emotional autonomy accounted for significant variance in health-related self-care, F(1, 379)=21.90, p<.0001, and disease-related self-care, F(1, 379)=6.83, p=.009. Behavioral autonomy did not account for significant variance in either type of self-care. In all the analyses ethnicity was the only uniformly significant covariate, contributing to variance in self-care.

Discussion:
Cognitive autonomy appears to provide a foundation for intervening to improve health behaviors and disease management because it was associated with better self-care. In contrast, higher levels of emotional autonomy appear to be a risk for poorer self-care. African American adolescents indicated significantly poorer self-care than Caucasian adolescents; strong efforts to strengthen self-care in this group are needed.

Research Completed: Yes
Abstract History:
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
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EFFECTS OF HOUSEHOLD SMOKING ON THE DEVELOPMENTAL AND HEALTH OUTCOMES OF AFRICAN AMERICAN, PREMATURE INFANTS

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Presentation Preference:  
SNRS Podium Presentation

Willing To Submit Poster?  
Yes

Abstract Categories:  
Interest Group: Parent-Child  
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims:  
To examine the effects of household smoking on the developmental and health outcomes of African American, premature infants, who are high-risk for poor outcomes.

Research Questions/Hypotheses:  
To what degree does household smoking affect growth (weight, height, head circumference), infant development (cognitive, motor, language), and common illnesses (asthma, otitis media)?

Significance:  
Research has suggested that exposure to environmental tobacco smoke (ETS) increases health problems in young children. However, few studies have examined longitudinal effects of smoking on growth and development in African American, premature infants.

Methods:  
191 premature infants (80 boys, 108 girls) of African American mothers with a mean gestational age at birth of 28.4 weeks and mean birth weight of 1113 grams were included in a secondary data analysis. They averaged 14.3 days of mechanical ventilation. Approximately 70% of the mothers were single and 52% received public assistance. Mothers had a mean age of 26 years and 12.6 years of education.

Findings:  
13-33% of children were exposed to smoke at 2, 6, 12, 18, and 24 months corrected age. Mothers with less education were more likely to smoke. General linear mixed models were calculated to determine the extent to which smoking affected outcomes, controlling for SES and neonatal illnesses. Smoking was associated with poorer motor and language skills at 24 months. Infants exposed to smoking initially were longer and had larger head circumferences. Their rates of growth were slower than non-exposed infants, and by 12 months were the same size as them. Infants exposed to smoking were more likely to develop otitis media. Cognitive skills, weight, and asthma were not related to smoking.

Discussion:  
Thus, smoking in the immediate environment may negatively impact development and health of premature children who are at high risk for developmental delays and illnesses. Nursing interventions targeted at household smoking could potentially improve the outcomes of these children.

Research Completed:  
Yes

Abstract History:  
Financial Disclosure:  
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?  
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FDA Disclosure:  
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The effect of co-bedding hospitalized preterm twins on selected physiologic variables and behavioral cues

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Abstract Information
Presentation Preference: SNRS Podium Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Parent-Child
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims: The purpose of this study is to determine the effect of co-bedding hospitalized preterm twins on selected physiologic variables and behavioral cues.

Research Questions/Hypotheses:
1. There is a significant increase in frequency of stability signs of preterm twins during co-bedding than during physical separation.
2. Preterm twins display significantly greater sleep-wake synchrony during co-bedding than during physical separation.
3. There is a significant difference in physiologic responses and behavioral cues among different sets of co-bedded preterm twins.

Significance: Reports in the nursing literature suggest there is benefit when hospitalized premature twins share one crib. Few studies support this practice yet many nurses implement co-bedding for premature twins during hospitalization in the NICU.

Methods:
Case study with A-B design was used to study the effects of the intervention on the units of analysis. Four sets of premature twins born at 32-35 weeks gestation were observed during inter-feeding intervals before and during co-bedding. Neonatal physiologic monitors recorded heart rate, pulse rate, respiration rate, and oxygen saturation levels. Infant behavior was continuously recorded using surveillance cameras. The Neonatal Individualized Developmental Care Assessment Program (NIDCAP) ® method was used to assess signs of stability and stress in each case before and during co-bedding.

Findings:
A significant increase in stability signs during co-bedding was found in half of the cases. Significant decreases in stress were seen more often during co-bedding than were increases in stability signs. The direction of change in the physiologic measures varied between and within the cases. Infants demonstrated increased sleep and greater sleep/wake synchrony during the co-bedding period. A different pattern of physiologic and behavioral responses to co-bedding was seen in each case.

Discussion:
Nurses must consider individual infant responses when implementing co-bedding for premature twins. Protocols for the care of preterm multiple birth infants should be based on individual physiologic and behavioral responses to care.

Research Completed:
Yes

Abstract History:
Financial Disclosure:
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EFFECTS OF GENDER AND SES ON MOTHER-INFANT INTERACTIONS

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Purpose/Aims:
This secondary analysis, using the Early Childhood Longitudinal Study - Birth cohort (ECLS-B), examined how the levels of SES affect gender-differentiated mother-infant interactions among different birthweights of infants.

Research Questions/Hypotheses:
Mother-daughter dyads were expected to interact more positively than mother-son dyads.

Significance:
Gender-differentiated mother-infant interactions may differ when SES and birthweight are considered.

Methods:
The 10,688 parents and their infants born in 2001 were divided into three groups; 7,844 normal birthweight (NBW; 73.7%), 1,647 low-birthweight (LBW; 15.5%), and 1,155 very-low-birthweight (VLBW; 10.8%). Participants were visited when the infants were approximately 9 months and 24 months. Data were obtained through the scores of the Nursing Child Assessment Teaching Scale (NCATS), the Two-Bag Task, and the Home Observation for Measurement of the Environment (HOME; Infant-Toddler version) Inventory. The SES was categorized in 5 levels.

Findings:
GLM and GEE showed that mother-daughter dyads expressed more positive interactions than mother-son dyads after controlling for their SES in all birthweight groups. In the final models, mothers of NBW and VLBW infants were more attentive to their daughters and more restrictive to their sons. These interactions were continuously observed in mothers of NBW infants over time. Interactions of mothers and their LBW infants differed by the levels of SES but not by gender of infant. In all groups, higher levels of SES induced more positive mother-infant interactions. The interaction effects of gender by SES were found only in NBW group.

Discussion:
Gender-differentiated mother-infant interactions were found even in early stages of infants. Thus, male gender is considered as a biological risk factor in establishing positive mother-infant interactions regardless of SES and birthweight. Therefore, mothers of boys, especially mothers of VLBW boys, need to receive more attention from health care providers and society in maintaining positive mother-infant interactions to reduce the infant’s negative health outcomes and to enhance child competence in many areas.

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Clear: Yes

Non-Exclusive License:
Accepted Terms: Yes
"Being a Heart Transplant Kid": Comparing Parent and Child Views

Abstract Information

Presentation Preference: SNRS Podium Presentation

Abstract Categories: Interest Group: Parent-Child
Thematic Areas: Child & Adolescent Health

Purpose/Aims: The purpose of this qualitative study was to describe the quality of life (QOL) of school-aged heart transplant recipients.

Research Questions/Hypotheses: Research questions were: 1) how do children and parents describe children’s QOL after heart transplant? and 2) how do children’s and parents’ descriptions compare?

Significance: Despite the morbidity associated with heart transplantation, few published studies describe transplanted children’s QOL.

Methods: Purposive sampling was used to recruit parent-child dyads from a transplant clinic in the Southern U.S. Children were between 6 and 12 years of age and at least 1 year post transplant. The investigator conducted separate semi-structured interviews with parents and children using parallel interview guides. Interviews were audio recorded and transcribed verbatim. Sampling ceased when saturation was achieved. Data were analyzed using constant comparison.

Findings:
Eleven ethnically diverse parent-child dyads participated in the study. Children described their lives as “mostly good” and described “activities” and being with friends and family as most important to their QOL. They also described the negative impact of the transplant regimen on their QOL, particularly aspects that were painful or frightening. Parents described the children’s QOL as “really very good” and “like a normal child’s.” The parents identified normal activities, “keeping them healthy,” and social support as most important to the children’s QOL. Parents described “struggles” associated with the transplant regimen, but did not believe these impacted children’s QOL. Parents were more positive than the children and underestimated the impact of the transplant on the children’s QOL. While parents and children agreed on the importance of activities and family and friends, parents alone identified normalcy and health.

Discussion:

Parents and children were overall positive about school-aged children’s QOL after heart transplant. The factors identified as most important to the children’s QOL provide a focus for interventions aimed at improving children’s QOL post heart transplant.

Research Completed:

Yes

Abstract History:

-This material has been submitted previously.
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

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FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

Submitted By:

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DIFFERENCES IN ANGER, STRESS, SELF-CONCEPT, SCHOOL CONNECTEDNESS AND BLOOD PRESSURE BETWEEN NORMOWEIGHT AND OVERWEIGHT CHILDREN ENROLLED IN THE FEDERALLY FUNDED PASS PROJECT

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Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? No

Abstract Categories: Interest Group: Parent-Child
Thematic Areas: Child & Adolescent Health

Purpose/Aims: Purpose: High trait anger, stress, ineffective anger expression, low school connectedness and poor self-concept are associated with risk for the development of disease and behavioral problems in children. Being overweight has implications for these risk factors and blood pressure (BP), resulting in differences from those seen in normoweight children.

Research Questions/Hypotheses: The aims of this study were to: 1) Describe levels of these variables and BP in normoweight and overweight children from baseline measurements of three PASS cohorts, and 2) Determine if there are differences between the two groups in identified variables.

Significance: If there are differences between normoweight and overweight children in anger, stress, school connectedness, and self-concept, interventions specific to each of these groups may need to be developed.

Methods: Methods: From seven schools in a southeastern state, a sample of 504 9- and 10-year-old 4th graders were enrolled: 251 males, 253 females; 253 Caucasian, 250 Black; 42.8% were normoweight and 57.2% were overweight as determined by CDC criteria for BMI. Participants had their BP measured and completed validated instruments designed to measure the variables of interest.

Findings: Findings: Approximately 9% of normoweight children had BPs at or above the 90th percentile for BP while 33% of overweight children had BPs at or above the 90th percentile. Differences between normoweight and overweight children were noted in Global Self-Worth and Social Acceptance (self-concept) and both systolic and diastolic BP.

Discussion: 
Overweight children had higher BPs and lower Global Self-Worth and Social Acceptance than normoweight children. There were no baseline differences in the other variables.

Research Completed: Yes

Abstract History:

Financial Disclosure:
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Yes

FDA Disclosure:
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Accepted Terms: Yes

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ATTACHMENT BEHAVIORS IN THAI ADOLESCENT MOTHERS

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Presentation Preference: SNRS Poster Presentation

Willing To Submit Poster? No

Abstract Categories:
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- Thematic Areas: Child & Adolescent Health

Purpose/Aims:
- To describe the maternal attachment behaviors and the infant responsiveness to their adolescent mothers during the maternal breast feeding period, and,
- To examine the relationship between the adolescent maternal attachment behaviors and infant responses.

Research Questions/Hypotheses:
- The maternal attachment behaviors of the adolescent mothers are positively related to the infant responsiveness of their three-month-old infants.

Significance:
- Attachment during the first year of life is the basis for human development. Infants who bonded with their mothers will develop positive outcomes.

Methods:
- This study was the secondary analysis of the Prospective Birth Cohort Study in Thai Children (PCTC). The total number of adolescent mothers was 330 and 150 videos of viewing pictures between mothers and infants were used. The attachment behavior was rated and analyzed using the Maternal-Infant Attachment Behavioral Observation (MIAO).

Findings:
- Majority of adolescent mothers behaviors were holding, touching, talking and responding to baby’s signals and the low frequency behaviors were praising the infant, commenting on the infants and teasing face. Most of the infants, communicated cues to their mothers about their hunger using cues such as signaling their readiness to suckle by displaying some tension at the beginning of the feeding. Moreover, most of the infants suckled continuously, with some taking a break during breastfeeding. Also, all infants looked at their mother’s face while being breast-fed. Twenty-five infants (62.5%) immediately smiled or vocalized to respond to their mothers and encourage their mothers to be close to them. In addition, there was a significant positive correlation between the total score of maternal attachment behavior and the total score of infant responsiveness (r = .692, p < .01).

Discussion:
pediatric nurses should reinforce adolescent mothers of three-month-old infants to have earliest attachment behaviors especially maternal vocalization, facial expression and response to baby’s signals. These behaviors affect infant responsiveness and lead to appropriate establishment of their attachment.

Research Completed: Yes
Abstract History: 
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
FDA Disclosure: Cleared: Yes
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New Mother's Experiences of Taking Care of Their Infants

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Abstract Information
Presentation Preference: SNRS Poster Presentation
Abstract Categories: Interest Group: Parent-Child
Thematic Areas: Women's Health
Purpose/Aims: The aim of this descriptive study is to investigate the experiences of low-income, first-time mothers in early parenthood using content analysis.

Research Questions/Hypotheses: What are the experiences of new mothers in taking care of their infants?

Significance: Becoming a mother is a life-transforming event that culminates in the formation of a maternal identity (Mercer, 2004). Mothers are key influencers to their infant’s physical, social, and developmental growth (Bornstein, 2000). Low-income mothers may be considered vulnerable as parents because of their lack of social and economic resources in their environment (Cariney, Bolye, Offord, & Racine, 2003; Mercer, 1995). Further, infants born to low-income mothers may experience increased morbidity and mortality (Aber, Jones, & Cohen, 2005). More research studies need to be conducted on low-income, first-time mothers so that parenting programs and family policy can be developed to meet their parenting needs.

Methods: A sample of convenience will include low-income, first time mothers who: 1)
give birth to full-term, healthy infants, 2) are 18 years or older, 3) are on Medicaid, and 4) can read and speak English. Participants will be recruited from a Women, Infants, & Children clinic (WIC). All interviews will take place in a private room. Questions for the semi-structured interview will be used from Ruchala and Halstad’s (1994) study on postpartum experience of low-risk women. Bandura’s (1977) Social Cognitive theory was used to develop the questions. The primary investigator added one question to the guide. Coding of categories will be developed according to Miles and Huberman. Reliability of categories will be enhanced by having two independent coders who will each code 10% of the transcripts.

Findings: In progress

Discussion: It is important to assess the parenting experiences of low-income, first-time mothers so health care professionals can develop interventions that facilitate healthy, maternal-infant relationships.

Research Completed: Yes

Abstract History: 
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

Submitted By: dcopel@lsuhsc.edu
Abstract ID: 378

Effects of Sucrose on Immunization Injection Pain in Hispanic Infants

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The study objectives were to (a) document pain scores, (b) evaluate singular analgesic benefits of sucrose, and (c) assess the confounding influence of spontaneously offered adult supportive behaviors on pain associated with multiple immunization injections in Hispanic 2, 4 and 6-month old infants.

What are the effects of intraoral sucrose on immunization injection pain in Hispanic infants? It was hypothesized that sucrose and spontaneously offered adult supports would decrease pain scores and crying.

The pain experienced by infants during three immunization injections results in potential adverse physiological effects, lasting apprehension with medical procedures, and lower adherence with future immunizations. Intraoral sucrose may decrease immunization injection pain.

This was a prospective, double blind, randomized, placebo-controlled, pilot intervention study. Pain scores were assessed using the Modified Behavior Pain Scale (MBPS) at baseline, and at 10, 30 and 120 seconds after the last injection. Crying dimensions and maximum heart rate elevation were also assessed.

Infants (N = 49) experienced severe pain (M = 8.68 ± 1.30) 10 seconds after the last injection. Two minutes after the last injection, pain scores were in optimal range for sucrose efficacy, and infants in the sucrose group were more likely to be in the low pain group than the placebo group (p = .04), demonstrating a moderate effect size. MBPS scores were 1.2 points lower (0 – 10 scale) for the sucrose than the placebo group. No differences were found in crying dimensions or heart rate elevation. Most parents (96%) spontaneously offered support to their infants during the immunization injection experience, but these had no effect on outcome measures. Supports were offered in the form of kinesthetic measures (85.7%), distraction (71%) and oral stimulation (24.5%).

The additive effects of sucrose and evidenced-based supportive measures for pain after multiple injections need to be explored in a larger sample.

-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Details: student poster 2007 SNRS Conference

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

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Maternal Caregivers of Children Undergoing Hematopoietic Stem Cell Transplant:

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Abstract Information

Presentation Preference: SNRS  Podium Presentation

Willing To Submit Poster? No

Abstract Categories: Interest Group: Parent-Child
Thematic Areas: Acute illness

Purpose/Aims: To examine inter-relations of different types of maternal caregiver distress and changes in distress over two time points.

Research Questions/Hypotheses:
1. What are the levels and types of distress in mothers providing care to a child hospitalized for a hematopoietic stem cell transplant (HSCT)?
2. How do levels of distress change across two time points from hospital admission to 14 days post transplant?
3. Do maternal demographic characteristics predict levels of maternal distress?

Significance: HSCT is now widely accepted as a therapy for many life threatening illnesses of childhood. The procedure is complicated and requires significant maternal caregiving responsibilities over the short and long-term period. The inter-relationship and pattern of change of different types of distress is not known.

Methods: A longitudinal, repeated measures design was used to explore levels and changes in levels of distress over two time points in the first year post HSCT at Duke University Medical Center. 54 mothers age 21 - 51 years were studied. Mothers completed self-report measures for depressive symptom, state anxiety, stress, post-traumatic stress symptoms and worry.

Findings: Mothers of children undergoing HSCT experience distress of varying type and intensity. Health-related caregiving stress is the best predictor of mother’s depression, anxiety, post traumatic stress, and worry even when controlling for other types of stress, such as parenting stress and personal/family related stress. Cluster analyses revealed two main clusters: high and low distress. High distress mothers rate their experience of depression, anxiety, and post traumatic stress higher than low distress mothers. Changes over time revealed decreases in levels of stress and worry from hospital admission to 14 days post transplant and increases in depression over this time period.

Discussion: This study identifies populations of mothers at risk of poorer outcomes. Findings can be used to develop interventions to improve outcomes for parental caregivers and their children undergoing HSCT.

Research Completed: Yes

Abstract History:

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

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Abstract ID: 399

Coordinating care for children with special health care needs: What do parents and nurses do and what difference does it make?

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Abstract Information

Presentation Preference: SNRS Podium Presentation

Abstract Categories: Interest Group: Parent-Child
Thematic Areas: Family Health

Purpose/Aims: The Family Nurse Care Coordination Partnership, a community-based participatory research (CBPR) study, convened parents and nurses to design an intervention to improve services for parents of children with special needs. Aim 1 of our study was to explore family and nurse care coordination functions and benefits.

Research Questions/Hypotheses: Limited research exists about how parents and nurses go about the work of coordinating and navigating systems, separately or together, to obtain services for children and how this benefits parents.

Significance: This is significant because it limits our ability to design effective nursing interventions and identify parent-relevant outcome measures.

Methods: A mixed-method design was used to address the research aim. A survey randomly
sampled 448 parents while theoretical and simple random sampling was used to select 40 parents for in-depth interviews. Descriptive and inferential statistics were used to analyze survey data and thematic analyses for interview data.

Findings:
Survey respondents were mostly mothers and grandmothers caring for children who are white (51%), Black (36%), and Hispanic (5.5%) with numerous medical conditions. Nurses helped parents to understand agency services (74%), assess needs (72%), and listen to concerns (70%) more frequently than guidance with condition (51%), funding (43-60%), access to services (40-64%), and appointments (28%). Parents communicate across providers, make appointments, find funding or services, teach, and plan for the future (78-97%). Parents benefit through information (72%) more frequently than through “saving time” or “feeling less stressed” (54-58%). Demographic, service use and service need indicators will be used to compare differences and predict care coordination outcomes. Interviews are in process.

Discussion:
Preliminary results validate that nurses help parents to coordinate care and that parents do a large share of coordination themselves. Interview findings will illuminate how parents work with nurses, how parents learn to coordinate, and how parents benefit from nurse coordination.

Research Completed:
Yes

Abstract History:

Financial Disclosure:
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Speaker’s Bureau:
Other Financial or Material Support:

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:

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Process Evaluation in Intervention Research: The Nurse Parent Support Intervention with Rural African American Mothers of Preterm Infants:

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Abstract Information

Presentation Preference: SNRS Podium Presentation

Abstract Categories: Interest Group: Parent-Child
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims: This study was a process evaluation of the helpfulness of a support intervention for African American mother of preterm infants.

Research Questions/Hypotheses: How do mothers of preterm infants enrolled in a support intervention view specific helping strategies? How do perceptions differ among control and intervention group mothers?

Significance: Understanding processes of an intervention are important in learning how an intervention works.

Methods: Rural African American mothers were recruited while the infants were hospitalized and randomized into intervention (n = 51) or control group (n = 45). Nurses in the Nursing Support Intervention helped mothers process the mothering experience and resolve distress, reduce stress, develop relationships with infants, and use resources over 18 months. Longitudinal outcomes data included questionnaires, videotaped observations of mother-child, and medical records. Process data, collected at study end involved having both control and intervention mothers rate the helpfulness of 14 helping strategies on a 4-point scale and also how they had changed as a person and as a mother.

Findings: Mean scores for the intervention mothers were 33.41 (sd – 11.44) and for the control mothers were 26.64 (sd = 13.02). Key components of the intervention endorsed by 80% or more of intervention mothers included sharing feelings, learning about the baby’s needs, how to play with and teach the baby, and getting guidance in talking with the doctors or nurses. The only item endorsed by 80% of control mothers was “feel good as a mother” also endorsed by 78% of intervention mothers. More intervention than control mothers (34% vs 24%) reported they changed as a person; however, an equal percentage of both groups (21%) reported they changed as a mother.

Discussion:
Findings support the effectiveness of key components of the intervention for intervention mothers but also suggest that control mothers gain some positive benefits from the processes of data collection.

Research Completed:
Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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FDA Disclosure:
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Non-Exclusive License:
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Methodological Issues and Challenges in Conducting Research with Mothers, Fathers, Children, Adolescents and Families (Parent Child RIG symposium)

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Abstract Information

Presentation Preference:
SNRS Symposium

Willing To Submit Podium?
No
Willing To Submit Poster?
No

Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Methods

Purpose/Aims:
Objectives:<br />
1. Identify key issues and challenges in designing and conducting research with mothers, fathers, children, adolescents and/or families.<br />
2. Discuss strategies to address issues and challenges in conducting research with these populations.<br />
3. Discuss challenges in designing studies from a developmental science perspective and/or based on a community-based participatory research approach with these populations.<br />

Research Questions/Hypotheses:
Designing and implementing studies with mothers, fathers, children, adolescents and/or families can be challenging. Among the challenges which researchers face in working with these populations are accessing, recruiting, consenting and/or assenting and retaining participants. These can be particularly problematic if the participants are both adolescents and parents. In addition, because researchers are concerned with participants at varying developmental levels and/or in multiple settings, different perspectives and approaches may need to be considered when designing studies with these populations. The purpose of this symposium is to address methodological issues and challenges in working with mothers, fathers, children, adolescents, and/or families. Presenters will discuss these issues as well as strategies to address these concerns.

Significance:

Methods:

Findings:

Discussion:

Research Completed:
Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
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Refinement of an Instrument to Measure the Needs of Parents with Seriously Ill Children

Abstract Information

Purpose/Aims:
Parental needs for supportive care when their children suffer from serious illnesses need improved instrumentation that can enhance ways to elucidate a focused dimension of parents’ needs and a scalar representation of the parent’s report. The purpose of this study was to refine an existing 56-item instrument that measures parents’ needs and the satisfaction that their needs have been met.

Research Questions/Hypotheses:
This poster will present construct validity and reliability for item reduction to define a unidimensional scale on parental needs from an inductively developed tool: (1) What constellation of questions can best reflect a scale of parental needs and unmet needs? (2) Does the reduction of items yield a stable, valid and reliable instrument that is practical for use in the clinical setting? (3) Can the measure of parents’ satisfaction of met needs be predicted from known child and/or parent variables?

Significance:
While the diseases of children with serious illness are the focus of medical treatment, the needs of their parents are equally important. The practical utility of assessing the level of parents’ needs calls for an instrument that
Methods:
A convenience sample of parents (n=103) of children with chronic, serious illnesses were recruited from two clinic populations. Parents completed an existing 56 item instrument that will be subjected to factor analysis to yield a shorter, better designed measure of parents’ level of needs (met or unmet), and will be subjected to tests of construct validity and internal consistency for the new unidimensional scale.

Findings:
Data are currently being finalized.

Discussion:
The existing questionnaire needs to be translated into a usable, robust measure of the level of parents' needs. The results of this study will be a step toward implementing a practical instrument to evaluate outcomes of providing care to meet parents’ needs when their children are seriously ill.

Research Completed: Yes

Abstract History:
- This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
- Details: SNRS 2007 Student Substudies

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
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Non-Exclusive License:
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Abstract ID: 413

Methodological Issues and Challenges in Conducting Research with Mothers, Fathers, Children, Adolescents and Families (Parent Child RIG symposium)

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Abstract Information

Presentation Preference:
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Yes

Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Methods

Purpose/Aims:
There is an increasing awareness of the importance of fathers in the development of children as well as in supporting mothers in their maternal role. Fathers are much underrepresented in nursing research, and many studies focus only on mothers with fathers excluded as participants. The purpose of this paper is to identify key methodological issues that create barriers to the inclusion of data about or from fathers in nursing research and to propose innovative approaches to increase the inclusion of fathers in research.

Research Questions/Hypotheses:

Significance:

Methods:
Findings for this presentation come from a review of research in select neonatal and child health journals over the past 5 years and examples from over 20 years of research with parents of seriously ill infants and children.

Findings:

Some of the methodological issues include: (a) Elimination of fathers as participants due to the high number of unmarried mothers, especially among low-income participants; (b) Concern that not all fathers will agree to participate, creating difficulty with recruiting even mothers; (c) Limited availability of questionnaires tested and sensitive to the issues of fathers (many developed/tested with mothers); (d) Lack of sufficient qualitative data to know enough about the perspective of fathers as a guide for urgent research questions; (e) Increased time and cost of including fathers; (f) Female researchers/team members collecting data from fathers; (f) Insufficient research funding for adequate time to recruit and retain fathers in studies; and (g) Potentially high drop-out of fathers due to insufficient time spent in designing a study that would meet the needs and match the experiences of fathers.

Discussion:

Recommendations for new, innovative approaches that will enhance the inclusion of fathers in research will be presented. It is proposed that these guidelines be debated upon and expanded leading to a consensus document for researchers on increasing the involvement of fathers in nursing research.

Research Completed:

Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

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FDA Disclosure:

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Non-Exclusive License:

Accepted Terms: Yes

Submitted By:

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Generational Differences in Sexual Communication between African-American Grandparent and Parent Caregivers

Abstract Information

Presentation Preference: SNRS Podium Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Parent-Child Thematic Areas: Healthy People 2010
Purpose/Aims: Purpose: Parental involvement in sexual communication reduces teen pregnancy, sexual permissiveness, and the likelihood of adolescents engaging in risky sexual behavior however, evidence of grandparent-grandchild communication about sexuality is virtually non-existent.
Research Questions/Hypotheses: Therefore, what generational differences exist with the sexual communication process that occurs between African-American grandparent and parent caregivers of adolescent children (11 to 13 years of age)?
Significance: It is clear that the HIV epidemic has drastically changed the structure of the African-American family, yet little research has focused on how grandparents communicate about sexuality issues with their grandchildren.
Methods: This exploratory study is a secondary analysis of data with the HIV Risk Reduction INDEX FIRST PREVIOUS NEXT LAST
Survey (HRRS) which examined the sexual communication process between African-American grandparent and parent caregivers of adolescents. The sample included 40 African-American grandparent/parent dyads for a total of 80 participants.

Findings:
Significant differences were noted in the caregivers’ perceptions of talking about sex (p = .05). In comparison to the parents, a greater number of grandparents recalled discussing birth control and AIDS and HIV prevention. Significant differences were noted in the groups’ attitudes toward discussing sexual abstinence (p = .01) with parent caregivers being more positive. Significant differences were noted in the groups’ feelings about discussing prevention of HIV (p = .02), teen pregnancy (p = .04), and sexually transmitted diseases (p = .009), with the parents being more positive.

Discussion:
Generational differences exist. This is particularly troublesome because HIV prevention programs and policies addressing the unique needs of grandparents have received little attention. Interventions designed to help grandparents learn how to discuss sexuality topics, including HIV prevention, with their grandchildren are urgently needed. Grandparents not only need factual information but opportunities to discuss and problem solve with other grandparents and professionals about these sensitive topics.

Research Completed: Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

Grants/Research Support: Y
P 20 NR008361
P 30 NR05043

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Other Financial or Material Support:

FDA Disclosure:
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Non-Exclusive License:

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The Effects of Cycled Light on Growth and Development of Preterm Infants

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Abstract Information
Presentation Preference: SNRS Poster Presentation
Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Perinatal/Neonatal/Infancy
Purpose/Aims:
The purpose of this study was to determine the appropriate time for instituting day night cycled light for the youngest preterm infants (≤ 28 weeks gestation at birth).
Research Questions/Hypotheses:
As compared to infants receiving late cycled light (at 36 weeks PCA), infants receiving early cycled light (at 28 weeks PCA) will: 1.gain weight significantly faster, 2.have significantly fewer hospital days, 3.develop retinopathy of prematurity (ROP) significantly more slowly.
Significance:
The environment in the neonatal intensive care unit has the potential to adversely effect the growth and development of premature infants.
Methods:
A longitudinal randomized two-group design was used to evaluate the effects of early (28 weeks) and late (36 weeks) cycled light on short-term health outcomes. Infants were randomly assigned to receive cycled light in an 11-hour-on, 11-hour-off pattern beginning at either 28 weeks postmenstral age (PMA) or 36 weeks PM A.
Findings:
Infants’ daily weights were summed and averaged to determine weekly weight gain for each week. Number of ventilator days and length of stay (LOS) evaluated the intervention’s potential to decrease hospital cost. Retinopathy of prematurity was evaluated through ophthalmologic examinations conducted weekly, biweekly, or monthly, beginning at 1 month of age (6 weeks of age for infants born at <25 weeks’ gestation) until the infant had mature retina or retinopathy of prematurity (ROP) disease had resolved. A mixed general linear model was used to determine whether gains in weight exhibit developmental changes over time for each intervention group. There were no differences between the intervention groups regarding ROP outcome. Growth and length of stay were related to gestational age at birth and severity of illness. Final data analysis from the other outcome variables is underway.

Discussion:

Like previous research on light exposure suggests day-night cycled light can promote health and development of preterm infants through promotion of biological rhythms.

Research Completed: Yes

Abstract History:
- This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
- Details: National Association of Neonatal Nurses Sept 2007

Financial Disclosure:
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FDA Disclosure:
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Non-Exclusive License:
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Methodological Issues and Challenges in Conducting Research with Mothers, Fathers, Children, Adolescents and Families (Parent Child RIG symposium)

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Willing To Submit Podium?
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Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Methods

Purpose/Aims:
Adolescent mothers are busy with school, friends, work and caring for their baby. They have very little “free” time. Additionally, many do not see the value in research. This paper will discuss these and other reasons why recruiting and retaining adolescent mothers in research are a major challenge. Several strategies from the literature and from this researcher’s personal experience for recruiting and retaining adolescent mothers in research will be discussed. Some of the recruiting strategies include gaining initial contact at the hospital following the birth of the baby and following up with phone calls, speaking to high school parenting classes, placing flyers in strategic locations, and enlisting the help of pediatric nurses in office settings. Some of the strategies used to retain adolescent mothers are being flexible in appointment times, calling the night before the appointment, having frequent phone and mail contact if conducting a longitudinal study, and using graduated incentives. During all phases of the study, important underlying principles are good communication, respect, cultural sensitivity, and connecting with the adolescent mother.

Research Questions/Hypotheses:
Abstract ID: 425

Methodological Issues and Challenges in Conducting Research with Mothers, Fathers, Children, Adolescents and Families (Parent Child RIG symposium)

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Student Level:
Purpose/Aims:
Rapid changes in physiology and functioning occur throughout childhood but differ dramatically between individuals. Therefore, individual differences in development must be considered whenever children are studied. Developmental science is an interdisciplinary branch of science focused on understanding complex, dynamic (nonlinear) systems associated with individual change over time. The purpose of this paper is to examine the importance of the developmental science perspective and a person-oriented approach for nursing research.

Research Questions/Hypotheses:

Significance:

Methods:
Examples from a longitudinal study of adolescents will illustrate the use of the developmental science perspective.

Findings:
Although nursing is a holistic discipline, most nursing research focuses on group averages and/or relationships among variables. Yet, to examine complex individual processes, aspects of developmental science must be considered in study conceptualization and design from implementation through data analysis. A person-oriented approach to the study of development allows for the examination of developmental trajectories of individuals and addresses processes rather than just outcomes. In this approach, the person is both the conceptual and analytic unit. This perspective also examines the interactions of individuals with their environments. This approach allows for a more holistic understanding of development in individuals than do variable-oriented approaches that focus on only parts of the individual. The choice of statistical methods to be employed is as important as the research design. Choosing a person-centered analytic approach that focuses on patterns within individuals, such as cluster analysis, allows the researcher to take this holistic and dynamic view and examine the individual’s behavior in the context of environmental systems. While variables are important in the person-centered approach, they are important only insofar as they are a part of a pattern within individuals.

Discussion:
Developmental science and person-oriented analytic approaches have the potential to help nursing science better guide nursing theory and practice.
Abstract ID: 426

Methodological Issues and Challenges in Conducting Research with Mothers, Fathers, Children, Adolescents and Families (Parent Child RIG symposium)

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Student Level:
The purposes of this paper are 1) to review current federal regulations and the role of local institutional review boards in the assent process for adolescents and 2) to explore practical solutions to commonly encountered obstacles in assenting teens.

Research Questions/Hypotheses:

Significance:

Adolescents bring diverse capacities for decision-making in the research milieu. Cognitive capacities may be similar to adults, although judgement may be immature. During the adolescent period individuals are more likely to engage in risky behaviors than during other developmental periods. Teens often experience life altering conditions, such as pregnancy, fatherhood, or drug use, and develop psychopathologies more frequently than during previous stages. However, teens are still minors, thus largely subject to parental control. This presents unique challenges in the research process. Adolescents can not consent to participate in research, but often are offered the opportunity to assent or dissent. Researchers who anticipate potential ethical conflicts and conduct the assent process with care may avoid common pitfalls.

Methods:

This paper will review HHS regulations at CFR 46.408(a) and 21 CFR 50.55 that require local IRBs to take specific actions concerning the assent of child subjects to participate in research. Issues specific to the adolescent assent process will be described, such as differential perceptions of risk between adolescents and adults, contextual influences on decision-making for teens, and potential ethical conflicts. Examples of relevant issues will be derived from the research and theoretical literature. Practical recommendations for conducting the assent process and writing assent documents will be discussed and illustrated with examples from local archives.

Findings:

Discussion:

Research Completed:

Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Submitted By:

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Methodological Issues and Challenges in Conducting Research with Mothers, Fathers, Children, Adolescents and Families (Parent Child RIG symposium)

Abstract Information

Presentation Preference: SNRS Symposium

Willing To Submit Podium? Yes
Willing To Submit Poster? No

Abstract Categories:
- Interest Group: Parent-Child
- Thematic Areas: Methods

Purpose/Aims: Research in community settings seeking to reduce health disparities among maternal child health (MCH) populations is often challenging. Health disparities in MCH populations may present special challenges due to the complexity of interacting social forces. The purpose of this presentation will be to examine methodological issues in conducting MCH community based participatory research, by an examination of exemplary nursing studies of MCH community-based participatory research.

Research Questions/Hypotheses:

Significance: Engaging community members, particularly vulnerable MCH populations, in research can be difficult. Community members can become disillusioned and feel disempowered when they feel excluded from the decision making processes. Results of the...
studies are often not useful for communities (e.g., we don’t need just another pamphlet, or what’s in it for us), and they tend to create more problems than are solved. Understanding methodological challenges and lessons learned may be helpful as nurses develop future studies to reduce health disparities in MCH populations.

Methods:
Community-based participatory research, as defined by AHRQ (2007) is a collaborative research approach that is designed to ensure and establish structures for participation by communities affected by the issue being studied, representatives of organizations, and researchers in all aspects of the research process to improve health and well-being through taking action, including social change. Methodological issues in conducting community based participatory research can create special challenges in research with MCH populations, such as scientific quality, intervention testing, inability to fully specify all aspects of the research up front, seeking a balance between research and action, and time demands. Lessons learned focusing on methodological challenges from exemplary examples from previous nursing research using a community-based participatory model in MCH populations will be examined.

Findings:
-

Discussion:
-

Research Completed:
Yes

Abstract History:

Financial Disclosure:
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FDA Disclosure:
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Recruitment & Retention Issues: Family Fitness & Nutrition Pilot Study

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Abstract Information
Presentation Preference:
SNRS Poster Presentation

Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Methods

Purpose/Aims:
Based on evaluation of a parent-child fitness and nutrition program, a pilot study was designed with the Boys & Girls Club. This paper reports on recruitment and retention issues with families – parent/child dyads over six months.

Research Questions/Hypotheses:
What recruitment and retention strategies best fit with the expectations of parents and children enrolled in the Boys and Girls Club?

Significance:
Recruitment and retention within studies are cited in the literature, particularly with groups experiencing health disparities. Building strategies into the protocol increases opportunities for participation.

Methods:
IRB approval was gained using parent informed consent/child assent. Student nurses participated with the PI on the project following completion of protection of human subjects training. The pilot study was introduced at a monthly parent meeting at the club. Parents were asked to give their name and phone number to the PI. Fourteen parents expressed interest.

Findings:
The time lag between the information session and the start date was eight weeks, due in part to children’s mandatory achievement tests in school and spring break conflicts. The PI conducted the initial phone recruitment – announcing that the PI and the student nurses would be present at the club on a designated date to complete pilot study enrollment. An additional date was scheduled to allow for flexibility in parent schedules.

Discussion:

Of the six families who participated in recruitment, one family did not begin the fitness and nutrition sessions. Another family dropped out after week two. Four families completed the first phase of the pilot study. Student nurses completed phone call reminders during each week; a reminder prior to the food diary, and evenings prior to scheduled sessions. The second phase is scheduled in June, followed by the third phase in September. The retention findings will be reported. The pilot study was funded by an intramural college research council grant.

Research Completed: Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

Grants/Research Support: Y
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FDA Disclosure:

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Stress, Adaptation & Resiliency: Comparing American and Swedish Families

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Abstract Information
Presentation Preference:
SNRS Podium Presentation
Willing To Submit Poster?
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Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Family Health
Purpose/Aims:
The purpose of this study was to explore the stresses, adaptation, and resilience in American and Swedish families.
Research Questions/Hypotheses:
What stressors do families with young children experience today and what factors influence adaptation and resiliency.
Significance:
A shortcoming of family adaptation models is that they typically emphasize pathological outcomes, or maladaptation, rather than positive outcomes and health. Little is known about specific factors that support family resiliency and perhaps buffer the potentially harmful effects of stress and strain. While adaptation models generally look for weaknesses in the family, this study provides evidence for resiliency.
Methods:
This mixed method research has a sample of 44 mothers, 14 Swedish and 30 American. The Swedish sample includes mothers who participated in a study of adaptation...
during pregnancy and childbirth that was conducted in 1993. There were 2 American samples. The first consists of fifteen Caucasian mothers from middle-class families residing in Florida. The second sample consists of fifteen African American mothers who reside in a poor urban housing project in a metropolitan city in Kentucky. All mothers completed a demographic survey, two quantitative instruments, and a private interview, which was audio-taped. Audio-tapes were transcribed and rated based on a model of family resiliency. Themes were identified, verified and appropriate identification and labeling of themes among the raters confirmed.

Findings:
Statistically significant quantitative findings regarding adaptation existed in both Swedish and Floridian mothers however; the only similarity between groups was when there had been a serious illness in the family. Protective factors outweighed vulnerability and risk factors; however protective factors manifested themselves differently. Floridian mothers depend on factors external to themselves, whereas Swedish mothers reported internal dimensions. Vulnerability occurred primarily when mothers were tired, lacked personal time, or a family member experienced serious illness.

Discussion:
Results of this study enhance the scholarly scientific knowledge about stress, adaptation, resilience in families with children.

Research Completed: Yes
Abstract History:
- This material has been published or accepted for publication.
- This material has been submitted previously.
- This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes
Grants/Research Support: Y
American Scandinavian Foundation
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Speaker's Bureau:
Other Financial or Material Support:

FDA Disclosure:
Cleared: Yes
Non-Exclusive License:
Accepted Terms: Yes
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Infant Feeding Practices of Younger and Older African-American Women

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Abstract Information
Presentation Preference: SNRS Podium Presentation
Abstract Categories: Interest Group: Parent-Child
Thematic Areas: Child & Adolescent Health
Purpose/Aims: The purpose of this secondary analysis is to examine and compare infant feeding practices of younger and older African-American women.
Research Questions/Hypotheses: What are the infant feeding practices that are commonly utilized among ‘younger” and ‘older” African-American women? How do the feeding practices compare?
Significance: Infant feeding practices can temporarily or permanently affect the well-being of the child. Considering the significance of maternal feeding customs on childhood nutrition, it is important to explore selection of food items, method of feeding, and sources of information available to mothers. With the changing family structure and grandmothers taking on more responsibility in raising grandchildren it is important to look at the difference between the older and the younger women’s ideas about infant feeding, and there is little literature available on the topic.
Methods: Four audio recorded focus groups were conducted, two with older (n= 18) and 2 with younger women (n=17). All women who participated had raised or were
raising at least one child. Content analysis was used to organize the data and to identify themes.

Findings:

Results show both groups of women introduced solids earlier than recommended. The younger women were more likely to feed baby food with a spoon. The older women were more likely to put solids in the bottle and feed a combination of baby food and home prepared foods. Both groups believed that breast milk was the best choice, however, iron fortified formula was feed most often by the younger women and Pet Milk with Karo Syrup were preferred by the older women.

Discussion:

Results of the study revealed the need for in-depth assessments of infant feeding practices and preferences of this population. Clinicians need to be aware of the difference in feeding practices that occur among different age groups of women in order to provide appropriate support and educational counseling to the women.

Research Completed: Yes

Abstract History:

Financial Disclosure:

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Yes

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

Submitted By:

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Parenting, Cognitive Autonomy and Self-Care of Adolescents with Type 1 Diabetes

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Purpose/Aims:
To test an attachment model of adolescent autonomy development in Type 1 diabetes by examining aspects of parenting that can affect the autonomy development needed for adolescent self-care.

Research Questions/Hypotheses:
A model of the influence of mother-adolescent developmental conflict, maternal separation anxiety, and maternal inhibition of autonomy and relatedness on cognitive autonomy and self-care of adolescents with Type 1 diabetes was tested.

Significance:
Understanding how strong activation of the caregiving system of parents affects the development of cognitive autonomy and self-care is an important step toward identifying interventions that might assist parents of teens with Type 1 diabetes to promote autonomy development and self-care.

Methods:
A total of 131 families with an adolescent, ages 11-15, contributed data annually across three waves. Mothers and adolescents completed paper-and-pencil measures and two interaction scenarios that were coded by trained staff from audio-tapes. The adolescent also completed a structured interview and questionnaires to assess self-care. Analysis was based on the application of structural equation modeling.

Findings:
Age exerted a direct relationship on self care (-.28). Only maternal separation anxiety had a direct relationship to cognitive autonomy (-.21). Cognitive autonomy had a direct relationship to self care (.29). The trimmed model explained 15% of the variance in self care.

Discussion:
Maternal separation anxiety when adolescents were 11-15 years of age directly predicted cognitive autonomy at one year follow-up, and cognitive autonomy was directly related to self-care one year later. Other variables that were not included in the model may be important in considering how autonomy and self-care are enhanced during adolescence.

The assessment of separation anxiety in mothers of adolescents with Type 1 diabetes is clinically relevant. Interventions to decrease maternal separation anxiety may enhance adolescent's cognitive autonomy. Attachment theory is a useful framework for examining the impact of parental emotional experience about parenting on autonomy development of adolescents with Type 1 diabetes.
Parental Perceptions of Body Weight in Preschool Children

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Abstract Information

Presentation Preference:
SNRS Student Poster Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Child & Adolescent Health

Purpose/Aims:
The purpose of this study is to examine relationships between parental perceptions of preschool child body weight and psychosocial factors such as parental efficacy and health literacy. Specific aims include: 1) examining the association between parental perceptions of body weight for their preschool child and level of parental efficacy and health literacy, 2) examining the association between parental perception of the preschooler’s body weight and concern regarding the child’s weight, and 3) examining the associations between parental efficacy and health literacy and concern regarding the preschool child’s body weight.

Research Questions/Hypotheses:
Research questions include: 1) what is the parent’s perception of the preschool child’s body weight? and 2) what factors are associated with the parent’s perception of the preschool child’s body weight?

Significance:
Approximately 20% of US preschoolers are obese. Examining parental perceptions of child body weight is crucial because successful prevention and treatment
of childhood obesity has been linked to parental awareness of child body weight and involvement in treatment. Although recent studies have demonstrated that parents of preschoolers often have incorrect perceptions of their child’s body weight, little is known about factors that may be associated with these perceptions.

Methods:
Participants for this descriptive-correlational study are being solicited at a pediatrician's office and health department. A power analysis was conducted to determine the sample size needed to achieve acceptable correlations at p<.05. Participants will complete four surveys and answer two open-ended questions. SPSS is being used for quantitative analyses, which will include descriptive statistics, correlations, and regression analyses. Answers to the open-ended questions will be analyzed using content analysis.

Findings:
It is anticipated there will be significant correlations between parental efficacy and health literacy and parental ability to correctly identify weight status in their preschool child. Open-ended questions will yield information on parental thoughts on child body weight.

Discussion:
The study is in progress.

Research Completed:
Yes

Abstract History:
Financial Disclosure:
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Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
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Maternal Concerns: A Preliminary Study

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Abstract Information
Presentation Preference:
SNRS Student Poster Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Women's Health

Purpose/Aims:
To describe concerns in a small but diverse sample of mothers and to examine
the relationship between selected demographic variables and level of concern.

Research Questions/Hypotheses:
What common problems worry or upset mothers most frequently and with greatest
intensity? Is there a relationship between demographic variables (age, number
of children, income, race) and level of concern?

Significance:
In order to meet maternal role demands, women need to be healthy. Unresolved
maternal concerns have the potential to impact the health of the mother, her
child, and her family. Nurses encounter mothers in multiple settings and are
uniquely positioned to assess maternal concerns and design effective interventions
to reduce their impact.

Methods:
Forty mothers of children between the ages of 1 and 17 participated. Mean maternal
age was 29.18 years; mean number of children was 2.23. 50% of the mothers were Caucasian, 15% were African-American, and 12.5% identified themselves as other races (Asian, Hispanic, American Indian). Participants completed the Everyday Stressors Index (ESI), a twenty item instrument designed to measure the degree to which common problems bother, worry, or upset mothers on a daily basis.

Findings:

The mean ESI score was 17.78. Concerns reported most frequently and with greatest intensity included not enough time for personal interests and having too many responsibilities. A small negative correlation (r=-.34, p < .01) was measured between maternal age and level of concern. A significant difference (t=3.26, p=.002) was identified in level of concern by family income status.

Discussion:

The primary concerns identified focus on role overload. Implications for nursing research include measuring maternal concerns in larger diverse samples, identifying patterns of concern according to position on the maternal life trajectory, and identifying interventions that enable mothers to cope effectively with their concerns. Implications for practice include recognizing the need for assessment of maternal concerns and the need to link mothers with supportive resources.

Research Completed: Yes

Abstract History:

Financial Disclosure:

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Yes

FDA Disclosure:

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Accepted Terms: Yes

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Abstract ID: 533

The role of parental autonomy support in the motivation of diet and exercise in older adolescents

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Student Level:
Purpose/Aims:
The primary objectives of this study are to examine the relationship between parental autonomy support and the motivation for health promotion practices, specifically diet and exercise behaviors of adolescents ages 18-19. An additional aim of this study is to evaluate the impact of self determination of the adolescent on the relationship between parental autonomy support and their motivation related to diet and exercise behaviors in adolescents ages 18-19.

Research Questions/Hypotheses:
1. Is there a relationship between parental autonomy support and motivation for a healthy diet and/or exercise behaviors? 2. Does autonomous motivation mediate the relationship of parental autonomy support and diet behaviors/exercise behaviors?

Significance:
The increase of autonomy is considered a milestone of healthy adolescent development. Prior research has established a linkage between parental autonomy support and academic performance in the adolescents; however, the relationship between parental autonomy support and health related behaviors, specifically diet and exercise, have not been studied.

Methods:
Subjects will be recruited from a college setting. A $15.00 incentive will be provided for each participant. A sample of at least 52 (N = 52) will be obtained. Parental Autonomy Support will be assessed utilizing the Perceptions of Parents Scale (POPS) developed for the college-aged adolescent. Self determination will be examined utilizing the Self Determination Scale (SDS). Motivation for both diet and exercise behaviors will be measured via the Treatment Self Regulation Questionnaire (TROQ). A correlated cross-sectional design will be utilized. Hierarchical multiple regression shall be utilized to assess significance of findings.

Findings:
Findings pending study completion.

Discussion:
If hypotheses are supported, this study will provide a foundation for linking health in the adolescent population and their need for autonomy. Results may provide insight to adolescent behavior and be incorporated into parental education in an effort to improve the health of youth.

Research Completed:
No

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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Social Support and Help Seeking in Postpartum Women

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Abstract Information
Presentation Preference:
SNRS Student Poster Presentation
Willing To Submit Poster?
Yes
Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Perinatal/Neonatal/Infancy
Purpose/Aims :
Postpartum depression affects 10-15% of all postpartum women, usually in the first 6-12 months (Holopainen, 2002). A Lack of social support has been associated with an increased risk of postpartum depression (Beck, 2001; Boyce & Hickey, 2003; Dennis & Letourneau, 2007; Surkan, Peterson, Hughes & Gottlieb, 2006). Women with inadequate social support may not seek help when experiencing depressive symptoms. Help seeking behavior is influenced by a variety of factors including recognition of the problem, available resources, adequate social support, and perceived stigma (Barney, Griffiths, Jorm, & Christensen, 2006; Beck, 2001; Dennis & Letourneau, 2007; Hung & Chung, 2001; Outram, Murphy, & Cockburn, 2004). The purpose of this review is to discuss the state of the science of social support and help seeking in postpartum women.

Research Questions/Hypotheses :
What is the influence of social support on help seeking in postpartum women with depressive symptoms?

Significance :
Untreated postpartum depression is associated with maternal distress and childhood
emotional, behavioral, and developmental problems (Righetti-Veltema, Bousquet, & Manzano, 2003).

Methods:
A search of primary source documents was conducted in the Medline, CINAHL, and Psyc Info databases using the key words of "help seeking, social support, and postpartum." Fifteen articles focusing on social support and help seeking in postpartum women were reviewed.

Findings:
Unsatisfactory social support is associated with a lack of help seeking and an increased risk for postpartum depression. Postpartum women with adequate support demonstrate fewer depressive symptoms.

Discussion:
Women with unsatisfactory social support systems may not seek help when experiencing depressive symptoms. Nursing interventions aimed at strengthening social support may improve help seeking in postpartum women and improve maternal-infant outcomes. Few studies were found on the links between social support and help seeking in postpartum women with depressive symptoms.

Research Completed: No

Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
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Non-Exclusive License:
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Abstract ID: 600

Mother-Infant Synchrony during Feeding

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Abstract Categories: Interest Group: Parent-Child
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims: To identify the range of synchronous patterns between a mother and her preterm infant during feeding.

Research Questions/Hypotheses: Can patterns of mother-infant synchrony during feeding be observed and classified?

Significance: Synchrony is an essential component of the interaction between a mother and her infant and is fundamental to the attachment relationship. Researchers have attempted to develop a description of mother-infant synchrony that is measurable, reliable and valid. The patterns of dyadic interactions between mothers and their infants can provide insight into their social relationship. A mother’s sensitivity in response to her infant and the infant’s behaviors in response to feeding attempts by the mother have also been proposed as important to the developing relationship. In addition, maternal sensitivity during early infant feedings may be an antecedent to later feeding problems.

Methods: As part of a larger study examining maternal feeding competence, 43 mothers were videotaped while feeding their preterm infants. The videotapes were coded for maternal and infant behaviors using the Mother-Infant Feeding Tool (MIFT). In this study, a secondary analysis using selected behaviors from the MIFT was conducted using five of the coded videos. The Noldus Observer software was used to determine periods during the interaction where synchronous behaviors occurred; synchronous behaviors selected for inclusion were defined by literature search. The secondary analysis resulted in a responsivity score based on the ratio of total frequency of behaviors to simultaneously occurring behaviors. In addition, the range of maternal behaviors exhibited by the mother in response to her infant’s negative and positive feeding behaviors are described.

Findings: The findings will be used to develop a tool to measure mother-infant synchrony during feedings.

Discussion: Understanding mother-infant synchrony of feeding will contribute to our overall understanding of preterm infant feeding as well as the effect the dyad has on this process.

Research Completed: Yes

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Abstract ID: 602

Adolescent Inhalant Use: Analysis and Assessment Using the Middle Range Theory of Adolescent Vulnerability to Risk Behaviors

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Abstract Information
Presentation Preference:
SNRS Student Poster Presentation
Willing To Submit Poster?
Yes
Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Child & Adolescent Health
Purpose/Aims:
The purpose of this poster is to demonstrate the use of the middle range theory of Adolescent Vulnerability to Risk Behaviors in directing an evidence-based assessment of adolescent inhalant use.
Research Questions/Hypotheses:
Will the theoretical model provide the framework for assessment of adolescents who use inhalants?
Significance:
Inhalants, purposeful sniffing, bagging, inhaling or huffing of solvents, aerosols, and gases, are frequently one of the first substances used by young adolescents. Nine percent of teens have used inhalants at least once. Recovery can be complicated by developmental immaturity, permanent residual cognitive impairment, and poor family, school, and peer structures.
Methods:
The middle range theory of Adolescent Vulnerability to Risk Behaviors, derived
from Neuman’s Systems Theory, was developed from multidisciplinary literature review and empirical research findings. Adolescent vulnerability occurs when external stressors penetrate through all available lines of defense and resistance resulting in increased risk for dangerous behaviors when the adolescent inner core is left unprotected. From the context of the model, assessing an adolescent from the “outside-in” provides the clinician a logical and thorough method to assess for the evidence-based factors relevant to inhalant use.

Findings:
Using the theoretical model to direct an assessment of adolescent inhalant use reveals: 1) unhealthy parent-adolescent relationship involving poor communication, discipline, and monitoring; 2) negative and deviant peer influence; 3) poorly developed inner assets of emotional and intellectual functioning, coping efficacy, behaviors, and personal identity; and 4) immature neurobiology. Even without the presence of external stressors, these factors can render adolescents vulnerable to inhalant use.

Discussion:
To better assess and develop interventions for adolescents who use inhalants, clinicians can use this theory to understand the influences that contribute to this risk behavior. This adolescent vulnerability theory can be utilized as a comprehensive and methodical assessment of adolescents with any high risk behavior leading to the development of appropriate primary, secondary, and tertiary prevention interventions.

Research Completed:
Yes

Abstract History:
-This material has been published or accepted for publication.
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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Perceptions of size and health among mothers of overweight toddlers

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The purpose of this investigation is to explore maternal perceptions of their child’s weight and the factors that influence the weight of the child. The specific aims of this study are to: 1) examine mother’s perceptions of their child’s size; 2) explore maternal beliefs about the characteristics of a healthy child and an obese child; 3) explore the diet and activity of the child; and 4) describe interactions and influences of the health care provider on the child’s nutrition and size.

Research Questions/Hypotheses:
No hypotheses in qualitative research

Significance:
Obesity is the most common chronic disease of childhood and the prevalence of childhood obesity in the United States is rising dramatically. Approximately 22 million children under 5 years of age are overweight across the world.

Methods:
An exploratory descriptive design has been chosen as the tradition of inquiry appropriate to collect the desired data. A purposive sample of 10 mothers of infants and toddlers have been invited to participate in a one-time semi-structured interview. Data collection is on-going. Content analysis strategies will guide data analysis. The computer software, Atlas.ti will be used in the analysis.

Findings:
Preliminary findings indicate mother’s of overweight toddlers view their child as being an average weight child looking about the same as other children the child’s age. Preliminary findings also indicate that mother’s rely more on information received from family about nutrition than following medical recommendations.

Discussion:
In order to help prevent children from becoming obese, it is imperative that health care providers are aware that mothers may not view their child’s size accurately and feel that healthy children should be heavier than recommended. Little success has been made toward developing strategies to reduce childhood obesity. This study will provide information to develop preventive interventions that can be implemented early in children’s lives to help reduce their risk of becoming overweight.

Research Completed: Yes

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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State of the Science: Parental Engagement and Early Childhood Weight

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Abstract Information
Presentation Preference:
SNRS Student Poster Presentation

Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Child & Adolescent Health

Purpose/Aims :
The dynamic interactions of parent and child have been developed into the concept parental engagement; parental engagement is attentive guidance dictated at creating a stimulating environment for the child. The purposes of the review are to: analyze the emerging nursing concept of parental engagement, discuss methodologies used to measure parental engagement, present empiric findings related to parental engagement and weight of children, identify knowledge gaps in existing literature, and provide recommendations for future research.

Research Questions/Hypotheses :
Does decreased home cognitive stimulation increase overweight and obesity in early childhood? Does increased home cognitive stimulation decrease the body mass index (BMI) of overweight and obese children?

Significance :
The United States has witnessed a dramatic increase in childhood obesity in the last three decades. The significance of conducting research on childhood weight and parental engagement may allow healthcare providers to prevent childhood overweight and obesity by: understanding the effect of parental engagement on obesity, recognizing homes with inadequate parental engagement, identifying interventions that may improve home stimulation, and implementing interventions
Methods:
An exhaustive literature search was conducted using, CINAHL, Medline, ERIC, and PsycINFO databases. Studies meeting inclusion criteria were reviewed and synthesized using the Matrix Method.

Findings:
An association between decreased home stimulation and increased childhood weight has been identified. The body of evidence is inadequate to determine the existence and magnitude of causal relationship between decreased home stimulation and increased weight to support preventive services and health outcomes. More knowledge is needed to understand the impact of parental engagement on the weight of the child.

Discussion:
Environmental factors have been found to influence childhood obesity however the extent of influence is unclear. Experimental designs that introduce control over intervening variables would broaden the body of knowledge and strengthen the causal relationship, eventually supporting the integration of preventive services into nursing practice.

Research Completed:
No

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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Abstract ID: 624

Parent and Significant Others Influence on Late Adolescents Diabetes Self-Management

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Abstract Categories:
  Interest Group: Parent-Child
  Thematic Areas: Child & Adolescent Health

Purpose/Aims:
The purpose of this qualitative descriptive study was to develop an in-depth understanding of late adolescents with type 1 diabetes perceptions of parents' and significant others' influence on the development of diabetes self-management.

Research Questions/Hypotheses:
  Who do late adolescents regard as significant in fostering their diabetes self-management? How are these individuals helpful? How significant are parent figures during this transition compared to others?

Significance:
Adolescents with type 1 diabetes must learn to self-manage their diet, exercise, and insulin needs. Poor diabetes self-management can lead to both acute and chronic negative health outcomes. A clear understanding of late adolescents’ perceptions in relation to the helpfulness of important others’ support in this transition may lead to an increase in positive health outcomes.

Methods:
A convenience sample of 23 adolescents with type 1 diabetes, aged 15 to 18 years participated. Adolescents were included if they were diagnosed with type 1 diabetes for > 12 months. Adolescents who lived in two parent-or-single parent households and households headed by a designated legal guardian were included. Semistructured interviews were audiotaped and transcribed verbatim. Qualitative content analysis or line-by-line data coding was performed. Coding categories were established separately by two coders. Reliability based upon data coded individually by two graduate students and the principal investigator was good. Qualitative themes were summarized both descriptively and numerically. Research rigor was ensured by the use of a detailed audit trail.

Findings:
When compared to others, it is anticipated that late adolescents with type 1 diabetes will perceive their parent figures’ support as the most important facilitator for their development of diabetes self-management. Preliminary data analysis indicates that in many two parent households the father figure is a primary resource person for the adolescent’s development of diabetes self-management. Extant quantitative measures of parental involvement in diabetes self-management may not capture the contribution of fathers.

Discussion:

Research Completed: No

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

Grants/Research Support: Y
Dean's Award, School of Nursing, University of Alabama at Birmingham awarded to Dashiff

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Speaker's Bureau:

Other Financial or Material Support:

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

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Abstract ID: 628

Parental caregiver roles and perspectives about diabetes self-management of their late adolescents: A qualitative descriptive study.

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Purpose/Aims:
Parents are the principal managers of the complex regime of children’s type 1 diabetes care, and parental involvement continues through adolescence. During late adolescence, parents may experience particular urgency about handing over management, and control of diabetes in preparation for launching their adolescent. Facing the imperative that their adolescent be responsible and effective in diabetes management, parents may resort to methods of promoting self-management that compete with their adolescent’s developing autonomy, such as using parental authority and control. However, a parental consultative stance is more desirable to stimulate self-management during this time. The purpose of this study is to describe the little known area of parental caregiver roles and perspectives about diabetes self-management of their late adolescents.

Research Questions/Hypotheses:
What are the experiences of parent(s)/caregivers of late adolescents with type 1 diabetes regarding their role in adolescents’ self-care management over the previous year?

Significance:
Since adolescents desire autonomy, and suffer reduced self-care adherence and metabolic control that worsens with age, it is important that parents use methods, which support adolescent autonomous motivation for assuming effective diabetes self-management, particularly in late adolescence.

Methods:
This qualitative descriptive study implementation followed IRB approval with a convenience sample of parents from 23 families of 15-18 year old adolescents with type 1 diabetes. One researcher interviewed parents in a non-clinical setting, using a semi-structured interview with open-ended questions and probes. At least two coders separately, then collaboratively, analyzed the transcripts using qualitative interpretive description techniques and templates, and prepared comprehensive summaries capturing communication. Methods used ensured descriptive and interpretive validity, as well as inter-rater reliability.

Findings:
Findings reveal diverse parental management, and feelings, when transitioning diabetes care to their adolescents. Findings will increase understanding the role of parents stimulating effective diabetes management, and assist nurses in designing interventions for parents motivating adolescent self-management of type 1 diabetes.

Discussion:
Analysis is in progress.

Research Completed:
Yes

Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

Grants/Research Support:
Dean's Award, School of Nursing, University of Alabama at Birmingham awarded to Carol Dashiff, PhD, RN, LMFT

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Adaptation & Resiliency in African American Mothers

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The purpose of this study was to explore the experience of motherhood, including childbirth experiences, stressors, modes of adaptation, and resilience in inner-city African American families.

Research Questions/Hypotheses:
1) What is the experience of motherhood for inner-city African American mothers of children aged 10-11 years? 2) What common themes emerge regarding stressors experienced, modes of adaptation, and resilience of families during the past 10-11 years? 3) What relationship exists between select family dynamic variables, the Family APGAR, and the Family Adaptation Inventory: Mother’s Perception of Family Adaptation?

Significance:
The potential social benefits from this research includes development of realistic family interventions based on knowledge gained regarding family resiliency and the protective factors identified by the families that helped them remain intact and resilient through the times that the family experienced stress.

Methods:
The study design was a mixed model using both survey data and a phenomenological method where women answered some directed questions and described their experiences as mothers. Purposive sampling was used to recruit English-speaking African American mothers of 10-11 year old children who live in a low income neighborhood of a metropolitan city. After ascertaining the mother’s ability to read, the interviewer asked mothers to complete a Demographic Inventory and three brief surveys; a Family Dynamics Questionnaire, Family APGAR, and Family Adaptation Inventory. Mothers who had difficulty reading had the questions read aloud from the documents. Semi-structured interviews with detailed written field notes were transcribed, coded, and themes identified.

Findings:
Although data analysis is not complete, major themes arising from the interviews relate to neighborhood safety, protection of children, financial burdens, role of father in the family, function of family and friends, and maternal happiness.

Discussion:
Preliminary findings indicate that stressors, modes of adaptation, and resilience in inner-city African American families relate strongly to their lifestyle and environment.
Abstract ID: 638
Maternal/Fetal Attachment: A Revised Model for Research and Practice

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SNRS Student Poster Presentation
Willing To Submit Poster?
Yes
Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims:
The primary aim of this study (in progress) is to evaluate the relationships among family relationships, maternal health practices, and antenatal attachment within the theoretical Model of Maternal/Fetal Attachment.

Research Questions/Hypotheses:
The specific research questions are: 1. Do relationships exist among the three concepts of family relationships, maternal health practices, and antenatal attachment? 2. What are the predictors, if any, of maternal health practices? 3. What are the predictors, if any, of antenatal attachment? 4. How do maternal characteristics relate to family relationships, maternal health practices, and antenatal attachment?

Significance:
Research indicates that maternal/fetal attachment is associated with positive neonatal outcomes but how this occurs is still unknown. Research based on an empirically supported theoretical framework is more likely to generate consistent findings and promote interventions toward healthy neonatal outcomes.

Methods:
Four WIC Clinics and a hospital outpatient obstetrics clinic in a rural area of a Mid-Atlantic state are recruitment sites for this study. A convenient sample of 100 pregnant women (18 years old+) who are at least five months pregnant are included in this study. Family relationships will be measured using the FACES IV scale developed by Olson. Maternal health practices will be measured using the HPPQ-II developed by Lindgren while antenatal attachment will be evaluated using the MAAS developed by Condon.

Findings:
A descriptive correlational design is used to evaluate the proposed relationships between family relationships, maternal health practices, and antenatal attachment. Data collection is nearly complete. Findings from the pilot study (n = 30) provide preliminary support for the proposed relationships among these variables. Antenatal attachment was positively correlated with family relationships and health practices in pregnancy. Higher antenatal attachment was associated with healthy family relationships and positive maternal health practices.

Discussion:
The revised (more comprehensive) Model of Maternal/Fetal Attachment is based on family and attachment theory providing a strong broad theoretical base for research.

Research Completed: Yes
Abstract History: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Financial Disclosure: Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
Submitted By: Debfacello@aol.com
Abstract ID: 649

**Childbirth Program Effects on Self-Efficacy in Coping with Labor Pain in Thai Primiparas**

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The purpose of this study is to determine the effect of childbirth program on self-efficacy in coping with labor pain in Thai primiparas.

Research Questions/Hypotheses:
Does the level of self-efficacy in coping with labor pain differ significantly between Thai women who attend childbirth program and those who receive standard prenatal care?

Methods:
This is a quasi-experimental design using pretest-posttest repeated measures. The non-probability convenience sample consisted of sixty Thai primiparas assigned to either a control or an experimental group (30 in each group). The control group participants received standard care. Participants in experimental group attended three childbirth classes over three consecutive weeks following standard care. Childbirth Self-efficacy Inventory (Lowe, 1993) which measures outcome expectancy and self-efficacy expectancy was used to collect data at the beginning of the week 1 (O1), at the end of the intervention (O2), and at 24-48 hour after delivery (O3).

Findings:
Independent samples t-test was used to determine the difference on self-efficacy in coping with labor pain at the completion of the intervention. The experimental group had a higher mean score of self-efficacy expectancy (M=97.40, SD=20.53) than the control group (M=87.17, SD=18.66), t(58)= -2.02, p<.05. The experimental group also had a higher mean score of outcome expectancy (M=112.9, SD=18.80) than the control group (M=104.53, SD=20.67), t(58)= -1.640, p=.106. We anticipate completed data analysis at the time of poster presentation. We plan to use repeated measures ANOVA to determine a difference in self-efficacy in coping with labor pain among these two groups across the three time periods.

Discussion:
These findings are consistent with previous studies that have demonstrated the effective of childbirth program in enhancing the level of self-efficacy in coping with labor pain in Thai women.
Obesity, Asthma, and Secondhand Smoke Exposure in Preschool Children

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Willing To Submit Poster? Yes

Abstract Categories:  
Interest Group: Parent-Child
Thematic Areas: Child & Adolescent Health

Purpose/Aims: The purpose of the study is to examine the relationship between obesity, asthma, and secondhand smoke exposure (SHS) in a preschool population.

Research Questions/Hypotheses: What is the relationship that exists between obesity, asthma, and secondhand smoke in preschool population?

Significance: Studies of pediatric populations have clearly established the relationship between obesity and asthma, as well as poor asthma outcomes among children exposed to secondhand smoke. Childhood obesity is increasing at an alarming rate, and the prevalence among preschool children has doubled. The recent US Surgeon General Report (2006) concluded that approximately 60% of children are exposed to SHS.

Methods: This study is a secondary analysis of two databases. Variables included age, gender, ethnicity, asthma diagnosis, asthma symptoms, school days missed, SHS exposure (by questionnaire and urine cotinine), maternal smoking status, and height and weight (to calculate BMI).

Findings: The sample consisted of 240 children and mothers. SHS exposure, respiratory symptoms/disease/morbidity prevalence, school absences and health care use were high in this preschool population. By biological measures (cotinine), approximately 67% of the children had SHS exposure. By maternal report, 27% of children were reported as having a MD diagnosis of asthma (31% lifetime history of asthma). Current history of respiratory symptoms by maternal report ranged from 30% with wheeze, 26% with cough, 25% with nighttime respiratory symptoms, 17% with morning respiratory symptoms and 21% with activity limitations due to respiratory symptoms. SHS exposure resulting in respiratory symptom complaints was reported in 18% of the population. Data analysis is underway to examine the relationship between asthma, obesity and SHS.

Discussion:
Asthma morbidity and SHS exposure has been clearly linked, though the relationship between asthma morbidity, SHS exposure and obesity in young children is not clearly understood. This study will provide support for developing risk reduction interventions.

Research Completed: Yes
Abstract History:
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
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Health-Related Quality of Life in Children and Adolescents Diagnosed with Spinal Muscular Atrophy: Measuring the Child’s Perception

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Abstract Categories:  
Interest Group: Parent-Child  
Thematic Areas: Child & Adolescent Health

Purpose/Aims:  
Cross-sectional comparative study designed to examine health-related quality of life among children and adolescents diagnosed with Spinal Muscular Atrophy (SMA).

Research Questions/Hypotheses:  
The aims of this study were to: 1) determine the feasibility of this pediatric population providing a self-reported quality of life score using the Pediatric Quality of Life Inventory Version 4.0 Generic Core Scales (PedsQL 4.0); 2) compare the reported quality of life scores in this population to a healthy population; and 3) determine the congruency between a parent-proxy reported score and the child’s self-reported score.

Significance:  
One in 6,000 babies born will be diagnosed with SMA. Although rare, SMA is the most common fatal neuromuscular disease of infancy and the third most common diagnosis of neuromuscular diseases seen in clinics for children younger than 18 years of age. Despite the high incidence of the disease, SMA has received relatively little attention among researchers who study neurodegenerative diseases. There have been no studies to evaluate the quality of life in this pediatric population.

Methods:  
Participants attending the annual Families of Spinal Muscular Atrophy conference were recruited. During the conference, 20 dyads (parent/guardian and child) completed the PedsQL4.0 and provided demographic data. The PedsQL 4.0 measures four domains: physical, emotional, social and school functioning. This valid and reliable tool has been used in a variety of pediatric populations. The instrument consists of an age-appropriate child form and a parent-proxy form.

Findings:  
Currently in the data analysis phase. Preliminary findings indicate it is feasible for this chronically ill pediatric population to use the PedsQL 4.0 to self-report a quality of life score. Also indicated - a lack of congruency between the self-reported score of the child and that of the parent. This finding is consistent with other chronically ill pediatric populations.

Discussion:  
Measuring the child's perception of their quality of life is essential when making clinical decisions.

Research Completed:  
No

Abstract History:  
Financial Disclosure:  
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes  
Grants/Research Support : Y  
Christopher Reeves Foundation, Quality of Life Grant  
Consultant :  
Stock/Shareholder :  
Speaker's Bureau :  
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FDA Disclosure:  

Abstract ID: 748
Symptoms to Diagnosis: A Timeline of Autism Spectrum Disorder

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Willing To Submit Poster?
Yes
Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Child & Adolescent Health

Purpose/Aims:
The purpose of this study was to analyze the path that parents took during the interval from earliest observation of symptoms to diagnosis of the disorder so that improvements can be made with the diagnostic process.

Research Questions/Hypotheses:
Clinical questions included: What is the chronology of early diagnosis for children with ASD? How many symptoms are noticed by parents and do number of symptoms correlate to length of diagnostic process? What was the timeline from parental concern to formal diagnosis?

Significance:
A 3 year old is non-verbal and has self abusive behaviors. Parents have talked to their pediatrician but have been given no answers and no recommendations. What is the nurse’s responsibility? ASD (Autism Spectrum Disorder) is a disorder that has far reaching affects on the individual, the family, and the community as a whole. Current research states that early diagnosis and intervention are crucial for best outcome. The American Academy of Pediatrics recommends pediatricians consider using screening tools specific for ASD.

Methods:
This descriptive study utilized the Parental Questionnaire about the Development of ASD in their Children (Goin-Kochel, 2006) to evaluate the parents’ experience of chronology of early diagnosis for children. Following IRB approval, parents of children with ASD were recruited from a treatment center located in Southeastern United States, by email through a nonprofit organization, and by social networking.

Findings:

Preliminary findings (n = 34) indicate that the delay in the diagnostic process occurs after the pediatrician is presented with the problem. The mean age from concern to notifying doctor was 6 months and from doctor to diagnosis was 30 months. The mean difference was 19.4 months with 27/31 reporting longer time to diagnosis.

Discussion:

Nurses can aid the diagnostic process by early recognition of symptoms of ASD, implementation of screening tools, and expedited referral to specialist.

Research Completed: Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

Submitted By:

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Gender Differences in Learning Capabilities Among Preterm Infants: A Preliminary Study

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The purpose of this preliminary study is to describe gender differences in learning capabilities (detection of small cardiac deceleration or cardiac orienting response) in preterm infants exposed to maternal voice.

Research Questions/Hypotheses:
Are there gender differences in learning capabilities among preterm infants?

Significance:
Preterm infants lack exposure to normal intrauterine stimulation. Evidence supports gender differences in neurological functioning in preterm infants.

Methods:
This study is taken from a larger study entitled Heart Rate Variability and Learning in the Premature. In this preliminary study, thirty-eight low-risk premature infants, 28 weeks post-menstrual age were recruited and randomly assigned to one of two groups. Group 1 was exposed to a recording of a nursery rhyme recited by their mother from 28-to-34 weeks and Group 2 heard the CD recording from 32-to-34 weeks. Developmental changes in learning capabilities (detection of a small cardiac deceleration or cardiac orienting response) to the rhyme were assessed each week.

Findings:
Data analyses are currently underway. A nonparametric sign test will be used to determine whether differences exist based on gender between the groups.

Discussion:
Research has demonstrated numerous benefits to positive auditory stimulation in the Neonatal Intensive Care Unit (NICU). If gender differences in learning capabilities are noted, this may warrant variations in exposure to auditory stimulation based on gender.

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes
Grants/Research Support : Y
National Institute of Health
General Clinical Research Center
Southern Nursing Research Society
Consultant :
Stock/Shareholder :
Speaker's Bureau :
Other Financial or Material Support : 
Various Effects of Exposure to Maternal Voice in Preterm Infants: A Preliminary Study

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Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Parent-Child
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims: The purpose of this preliminary study is to describe the effect of the maternal voice on weight gain, length of stay, and respiratory support in the preterm infant in the neonatal intensive care unit (NICU).

Research Questions/Hypotheses: It is hypothesized that infants in Group 1 will have a shorter length of stay in the NICU, greater weight gain, and fewer days on respiratory support than the infants in Group 2.

Significance: It has been theorized that the maternal voice can stimulate maturation of the sensory systems and promote normal development. To date, however, little is known about how exposure to the maternal voice affects preterm infant development while cared for in the NICU.

Methods: Thirty-eight preterm infants were randomly assigned to one of two groups: Group 1, heard a CD recording of their mother reciting a nursery rhyme twice a day from 28-34 weeks post-menstrual and Group 2, heard the CD recording from 32-34 weeks post-menstrual age. Outcome variables were length of stay in the NICU, weight gain, and number of days on respiratory support.

Findings: Data collection is currently underway therefore no results are available at this time and the hypothesis has neither been accepted nor rejected.

Discussion: If the hypothesis is accepted then the findings would suggest that early exposure to the maternal voice does have positive effects on the development of the preterm infant in the NICU. If supported, this finding is important because while in the NICU the infant is exposed to unfiltered stimuli and elevated levels of auditory stimulation, which can have a negative effect on the preterm
infants' developmental status and neurobehavioral outcome. Therefore, the mother's voice can potentially counteract this and create an environment with benefits similar to those an infant would experience while in the uterus.

Research Completed: Yes

Abstract History:
- This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure:
- Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
  Yes
- Grants/Research Support: Y
  NIH
  General Clinical Research Center
  SRNS
- Consultant:
- Stock/Shareholder:
- Speaker's Bureau:
- Other Financial or Material Support:

FDA Disclosure:
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- Accepted Terms: Yes

Submitted By: shanauf@ufl.edu
Abstract ID: 756

Vagal Tone and Nutrition in the Premature Infant: A preliminary Study

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Presentation Preference: SNRS  Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Parent-Child
- Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims:
Previous research has demonstrated changes in heart rate variability (vagal tone) during feeding based on the maturity and health status of premature infants. A higher base line vagal tone is associated with maturity and improved health status.

Research Questions/Hypotheses:
In the larger study entitled Heart Rate Variability and Learning in the Premature, an increased vagal tone was noted in infants who experienced longer exposure to maternal voice. The purpose of this preliminary study is to determine the impact of exposure to maternal voice on days to full enteral feedings and episodes of feeding intolerance in premature infants.

Significance:
Does exposure to maternal voice impact days to full enteral feedings and episodes of feeding intolerance in premature infants.

Methods:
This preliminary study is taken from a larger, quasi-experimental study. A convenience sample of 38 infants delivered during the 27th to 28th gestational week was randomly assigned to one of two groups. In group 1, infants listened twice a day to a CD recording of their mother reciting a rhyme until their 34th week. In group 2, infants received standard NICU care from the 28th to 32nd post-menstrual week, and then began listening twice a day to a CD recording of their mother reciting a rhyme until their 34th week. This preliminary study will compare differences in days to full enteral feedings and episodes of feeding intolerance between groups.

Findings:
To be determined. A t-test analyses will be used to compare differences between groups regarding days to full enteral feedings and episodes of feeding intolerance.

Discussion:
Previous research suggests relationships between heart rate variability (vagal tone) and feeding, maturity, improved health status, and exposure to maternal voice. Based on the findings of this study, further investigation into use of the maternal voice as a component of nutritional interventions may be warranted.

Research Completed: Yes

Abstract History:
- This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
- Details: A portion of this study was presented at SNRS in 2006

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
Grants/Research Support: Y
NIH
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Speaker's Bureau:
Other Financial or Material Support:

FDA Disclosure:
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Non-Exclusive License:

Accepted Terms: Yes

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Abstract ID: 775

What is Pediatric Palliative Care?- How Do Pediatric Nurse Practitioners Define and Refer Children for Palliative Care Services?

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Abstract Categories:
- Interest Group: Parent-Child
- Thematic Areas: End of life issues

Purpose/Aims:
To survey pediatric nurse practitioners who belong to their professional national organization on their (a) definitions of pediatric palliative and hospice care, (b) who and when to refer for palliative care and supportive services, (c) barriers to palliative care services, and (d) confidence in pain management related to children with life-limiting conditions (LLC).

Research Questions/Hypotheses:
1. How do pediatric nurse practitioners define the terms and rank the order of importance related to palliative care services, hospice care and supportive care for children with LLCs? 2. Are there differences in perception and/or biases in referrals to palliative care services related to geography, proximity to hospice services, age, length in practice, areas of specialization, or race/ethnicity?

Significance:
More than 500,000 children live with life-limiting illnesses today, but palliative care services are often reserved for late stage, last choice referrals. Advance practice nurses who work with children who may benefit from palliative care earlier in their disease processes are potentially biased in their understanding of how palliative care can assist the child and family. Educating providers on the clinical, psychosocial and economic benefits of earlier referrals for palliative care for children is essential.

Methods:
The investigators will purchase a random sampled mailing list of 1,000 NAPNAP (National Association of Pediatric Nurse Practitioners) members in active practice, anticipating a 30% return rate (n=300). Participants will be mailed a questionnaire developed for the project. Items on the survey have been developed in collaboration with a larger study and have been reviewed by a panel of experts for content validity. Descriptive statistics will be calculated on surveys to answer the research questions.

Findings:
To be analyzed.

Discussion:
Professionals in primary care need an understanding of the full range of palliative care services for children with LLCs. Findings from this survey will be discussed in the context of early education of pediatric professionals.

Research Completed: Yes

Submitted By: emuf2004@ufl.edu
Abstract ID: 779

Transgenerational Meanings and Experiences of Body Size and Obesity as a Health Risk Factor for African American Adolescent Females and their Mothers

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Abstract Information

Presentation Preference: SNRS   Student Poster Presentation

Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Child & Adolescent Health

Purpose/Aims:
The purpose of the study is to contribute to the body of knowledge concerning adolescent obesity in socioeconomically depressed rural Mississippi. The specific aim of this study is to develop a hermeneutic understanding of transgenerational obeseogenic patterns among MS adolescent females and their mothers to inform subsequent culturally-specific nursing interventions.

Research Questions/Hypotheses:
Experiences of overweight African American females and their mothers (female guardians) are explored and three research questions are addressed: 1. What is the lived experience of overweight/obese adolescent females and their mothers in the MS Delta? 2. What are the shared meanings between African American females and their mothers in regard to body size, shape and being overweight or obese? 3. What is the relevance of the mother/daughter relationship to body size acceptance and health-preservation/risk behaviors?

Significance:
Overweight and obesity disproportionately affects minority populations and those of lower socioeconomic status. At-risk for overweight and obesity approaches 46% among African American female adolescents in MS. In the MS Delta, two-thirds of the population are African American and 60% live below the poverty level. Effective interventions should start early. Nursing research is uniquely positioned to generate and implement specific cultural and environmental strategies.

Methods:
In this hermeneutic approach, interviewing is used to extract a vivid picture of the lived experience through story telling and narratives. Sampling is purposeful; using snowball and chain techniques. African American females, age 11-17, and their mothers living in the MS Delta are included. Participants are interviewed separately and conjointly. Sampling occurs until saturation with 10-25 dyads anticipated. Interviews are audio-taped and field notes are kept. After transcription, the data will be analyzed by a multi-ethnic team to assure warranted representation of the data.

Findings:
A pilot study has been approved by the IRB. One dyad has been interviewed with transcription in progress.

Discussion:
Findings will contribute to understanding transgenerational experiences of obesity.

Research Completed:
No

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

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Abstract ID: 791

Low-Income Mothers with Depressive Symptoms: Are they likely to target negative behaviors in their children?

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Abstract Information

Presentation Preference: SNRS   Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Women's Health

Purpose/Aims:
Purpose: Low-income mothers with depressive symptoms may display angry, irritable affect toward the most available individual when faced with economic hardship and negative life events. The child is often this individual. These reactions reduce the mother’s parenting effectiveness over time. This poster presents a descriptive exploratory examination of mothers’ discussions of irritability toward their children using data from an intervention study of depressive symptoms in low-income mothers of infants and toddlers in Early Head Start (Beeber, 2001).

Research Questions/Hypotheses:
Do low-income mothers with depressive symptoms target negative behaviors in their children?

Significance:
Low-income mothers with depressive symptoms affect the socio-emotional development of the child.

Methods:
Method: The primary author analyzed 1,050 field notes from face-to-face and phone sessions between the intervention nurses (advanced practice mental health (APMH) nurses) and low-income mothers. The intervention sessions consisted of discussions relating to four interpersonal problem areas using modules [skill sheets] for these mothers (Beeber, 2001). Out of 1,050 field notes, 194 mothers selected “Dealing with negative behaviors of the child”. A content analysis of the field notes using codes indicated that a large percent of the mothers who reported negative behaviors of their child did not describe problems with the child’s conduct but instead expectations of how the child should behave.

Findings:
Findings: Although this particular skill sheet focused on the negative behaviors of the child, the analysis indicated that the mothers and nurses did not focus the discussion on the negative behaviors, but instead, the APMH nurses focused on the mothers’ negative perceptions of the child that affected their parenting practices.

Discussion:
Discussion: A mother with depressive symptoms who displays parenting in an erratic and ineffective way can be helped to change these patterns of behaviors by advanced practice mental health nurses. The outcome can affect maternal self-efficacy as a parent and the socio-emotional development of the child.

Research Completed: Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
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Submitted By: jdowell@email.unc.edu
Teen Mothers’ Feeding Practices and Childhood Overweight

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Student Level:
The purpose of this pilot study is to explore the use of an innovative method of self-video documentation as a means of examining the feeding practices of low-income teen mothers of preschool-age children. The goal is to describe mothers' feeding practices, as they occur routinely for the child, which may allow a better understanding of the factors involved in the preschool child’s feeding environment.

Research Questions/Hypotheses:
What are the feeding practices of low-income mothers who were teens at the birth of their preschool child?

Significance:
Parental feeding practices are important to study as research has supported the theory that parental feeding practices can be a risk factor for some children who develop childhood overweight. Childhood overweight is a growing, national, public-health problem. Teen mothers were targeted for this study because children born to teen parents are at increased risk for health problems; and previous research using self-video has been successful with this age group. Targeting the preschool-age group is also important because preschool-age children are in the early stages of developing health habits and it is an ideal time for prevention. Teen mothers from the non-Hispanic Black and Mexican American racial/ethnic groups are also targeted.

Methods:
The data for this qualitative study are self-made videos of teen mothers feeding practices. This technique provides an ability to study a wide variety of factors that might have an effect on the teen mothers' food choices and feeding practices. The methods are based loosely on Video Intervention/Prevention Assessment (VIA) which began in 1994 at Boston Children’s Hospital. VIA uses qualitative data analysis techniques derived from “visual anthropology”, a method for studying human behavior using photographs and motion pictures. With the help of NVivo qualitative data analysis computer software, videos texts are transcribed and visual data analyzed.

Findings:
Pending further data from the study.

Discussion:
Pending further data from the study.

Research Completed:
No

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

Grants/Research Support: Y
National Research Service Award, National Institute of Nursing Research

Consultant:

Stock/Shareholder:

Speaker's Bureau:

Other Financial or Material Support:

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Abstract ID: 826

"It's Not Really a 'Decision,' it's my Child:" Parents as Living Kidney Donors for their Sons or Daughters

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Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Parent-Child
- Thematic Areas: Family Health

Purpose/Aims:
This study-in-progress will quantitatively explore characteristics, concerns, and beliefs of parents who donate kidneys to their children. This analysis of a subset of a larger NIH-funded long-term study of living kidney donors’ decision making and outcomes seeks to explore the decision control preference, pre-operative education, family stressors, and post-operative reflections on the living donation experience for parents donating to their children (2-21 yrs).

Research Questions/Hypotheses:
What are the characteristics, decision making practices, and beliefs of parents who elect to be living donors for their children? What are the needs of donor parents regarding transplant education and pre- and post-operative support?

Significance:
Since living donor organs are seen to bring about the best outcomes in those requiring kidney transplants, the need for exploration of the characteristics of these living donors and the data to support how best to support these patients is apparent. Parents who are donors must carefully balance the management of their critically ill child’s health and post-operative recovery, their own health and post-operative recovery, and the everyday needs of their families.

Methods:
A subset of data from a larger study will be used, capturing survey data reflecting parent donors’ responses during the pre-operative evaluation process as well as three months after the donation surgery (n=12). The statistical package SPSS will be used to summarize descriptive statistics.

Findings:
Anticipated findings include preferences for shared decision-making with spouse.

Discussion:
Findings of this study will help enrich the literature that guides transplant health care providers in providing the best possible care to parents who are living kidney donors for their children.

Research Completed: Yes

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By: mhoffm10@son.jhmi.edu
Labor Support: A Study of Relationships between Intrapartum Nurses and Doulas

Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster?: Yes

Abstract Categories: Interest Group: Parent-Child
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims: The purpose of this study was to explore the importance of continuous labor support as perceived by nurses and doulas and to investigate the perceived relationships between intrapartum nurses and doulas in providing effective support to the laboring woman.

Research Questions/Hypotheses: How do intrapartum nurses and doulas perceive their roles in providing labor support? What factors influence nurses’ and doulas’ attitudes toward working together? What do intrapartum nurses and doulas suggest to work toward that change?

Significance: Continuous labor support has been shown to have benefits for the childbearing mother. The intrapartum nurse plays a large role in satisfying needs, but in addition, a woman may hire a doula, or individual trained in childbirth support, to provide individualized support. There is a need to clarify misconceptions of intrapartum nurse and doula roles. By understanding the importance of labor support, the birthing process may be enhanced.

Methods:
A mixed quantitative-qualitative descriptive approach was used to measure the importance of labor support in practice to intrapartum nurses and doulas as well as to determine their relationships with each other in providing labor support. The Labor Support Questionnaire (Sauls, 2004) and eight open-ended questions were used to evaluate attitudes and perceptions of their own and each others’ roles.

Findings:
Findings from nurses (n=17) indicated they perceived their roles as supportive and ensuring safety to patient and fetus. Doulas’ responses (n=13) focused on providing physical and emotional support for a satisfying birth experience. Quantitative results indicated both populations viewed labor support behaviors as important but certain behaviors showed significant differences (p<0.05). Both groups identified communication as a key to working together.

Discussion:
Findings demonstrated that labor support is multidimensional; each role has its specific focus of care. However, if each complementary role is recognized and respected, more effective support can be given to laboring women.

Research Completed: Yes
Abstract History:
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
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Preliminary Development of a Pain Assessment Tool for Autism: Establishing Content Validity

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The purpose of this study is to extend a previously completed pilot study and continue developing a pain assessment instrument for use in autism. Review of the literature, examination of existing tools, and caregiver interviews generated a comprehensive list of potential pain indicators. This study aims to examine the item pool, and establish the content validity of a final set of items.

The main question is how to determine if children with autism are in pain. A related question, the focus of this study, is whether it is possible to develop a pain assessment tool for use in this population.

The prevalence of autism is 1 in 150 children. Little is known about how children with autism express pain. Deficits in communication and social interaction render them unable to self-report pain. Furthermore, there is currently no pain assessment tool available specifically for this population. Children with autism traverse all settings, including healthcare environments. Nurses interacting with these children are directly involved in pain assessment. Without a valid tool for this population, the presence of pain in children with autism might go unrecognized and untreated.

Six experts in autism will review a list of potential pain indicators and rate each item on a 4-point scale (1 indicating irrelevant, and 4 indicating extremely relevant). An item-level content validity index (I-CVI) will be calculated for each item, and items with an index greater than .8 will be retained. Additionally, a scale-level content validity index (S-CVI) will be calculated.

The content validity process developed for this study will be described. The items retained will comprise the newest version of the instrument. This version will be presented.

A thorough approach to instrument development ensures that tools are psychometrically sound. This initial step in the overall process aims to ultimately help assess pain in this complex population.

Yes

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Accepted Terms: Yes

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Abstract ID: 881

Prenatal Secondhand Smoke Exposure and Birth Outcomes

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Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Parent-Child
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims: The purpose of this study was to examine the adverse health effects of prenatal SHS exposure on birth outcomes using hair nicotine analysis.

Research Questions/Hypotheses:
There were two hypotheses: 1) nonsmoking women exposed to prenatal SHS (NS/PE) will be more likely to experience preterm birth; labor and delivery complications; postpartum complications and cesarean births than nonsmoking, nonexposed women (NS/NE); and 2) infants of NS/PE women will be more likely to be born premature; have decreased birthweights and birthlengths; and have more respiratory complications than infants of NS/NE women.

Significance: A mother’s decision to quit smoking during pregnancy is often motivated by her concern for the health of the baby. However, high postpartum relapse rates suggest that mothers are less aware of the adverse effects of secondhand smoke (SHS) on their babies (Bottoroff et al., 2000).

Methods: A cross-sectional, non-experimental study using quota sampling was used to recruit a multiethnic sample of 210 mother-baby couplets. Non-parametric tests assessed the differences between maternal hair nicotine level and birth outcome variables. Multiple linear regression determined the predictors of maternal hair nicotine and continuous variables; while logistic regression was used to determine which demographic and smoking status variables predicted birth outcomes.

Findings: Level of maternal hair nicotine was significantly different among the three groups: NS/NE; NS/PE; and smoking (Kruskal-Wallis; $X^2 = 116.67; p < .0001$). Five infant outcomes were significantly different between the NS/NE and NS/PE groups: decreased birthlength and birthweight; increase risk for preterm birth, RDS; and NICU. Women exposed to prenatal SHS were also more likely to have
a labor and delivery complications (cesarean birth; fetal distress; or fetal malpresentation).

Discussion:

Health care practitioners should inquire about SHS exposure at a women’s first prenatal appointment; encourage avoidance of SHS both during and after pregnancy; and provide education on the adverse maternal and infant health effects of SHS exposure.

Research Completed: Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

Grants/Research Support: Y

*University of Kentucky/National Institute for Health: General Clinical Research Center Grant ($23,000)

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Other Financial or Material Support:

FDA Disclosure:

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Screening Newborns for Infection Using C-Reactive Protein

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Mothers with unknown Group B Streptococcus (GBS) status have presented a challenge for treating newborns. Currently all newborns of these mothers are screened with C-reactive protein (CRP) levels. CRPs above 1.7 warrant the collection of blood cultures; however, the efficacy of this practice has not been established. Therefore, this study was undertaken to evaluate the sensitivity and specificity of using CRP levels to routinely screen newborns for sepsis.

Research Questions/Hypotheses:
What is the efficacy of using routine C-Reactive Protein levels to screen for newborn sepsis?

Significance:
The use of routine CRP levels as a screen potentially increases the length of stay and/or unnecessary exposure to antibiotics which may increase the cost of care. Results from this study will help elucidate the need for this screen.

Methods:
Retrospective review of medical records of newborns born between January 1, 2005 and December 31, 2005 will be done. Data obtained include: demographic data (race, gender, type of birth, zip code, gestational age, and birth weight), clinical data (GBS status of mother, use of antibiotic therapy, clinical signs of infection and transfer to the NICU), and laboratory data (CRP levels and blood culture). Statistical analysis will include descriptive data and inferential analysis, including sensitivity and specificity.

Findings:
At this time, 119 charts have been reviewed. Preliminary demographic data show there were 56 males (47%) and 63 females (53%), 69% were African American, 23% Hispanic, and 0.5% were Caucasian. Gestational age showed 17% less than or equal to 37 weeks gestation and 83% greater than 37 weeks. We anticipate 2500 charts will be reviewed.

Discussion:
Data from this analysis will be used to assess or support if a routinely conducted clinical screening protocol is efficacious.

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Pilot Study of Fathers’ Experiences in the Neonatal Intensive Care Unit (NICU)

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Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Perinatal/Neonatal/Infancy
Purpose/Aims:
The study purpose is to assess the an interview guide and recruitment procedures to be used in a subsequent study.

Research Questions/Hypotheses:
1. Will recruitment procedures result in a sufficient number of informants to achieve data saturation? 2. Will the proposed methods produce quality data? 3. What are the experiences of fathers with children in the NICU; what meaning do they attach to these experiences?

Significance:
Conceptualizations of paternal role attainment have been modeled upon what is known about maternal role attainment (Mercer, 1981; Mercer & Ferketich, 1994; Ferketich & Mercer, 1995a; Ferketich & Mercer, 1995b). Research into the paternal role and how fathers experience the early days of their child’s life is sparse. The small amount of research focusing on the father-infant relationship has been limited to those studies involving fathers of healthy infants (Anderson, 1996; Jordan, 1990; Mercer & Ferketich, 1990; Ferketich & Mercer, 1995a; Ferketich & Mercer, 1995b). Research examining the relationship of fathers with children...
that were medically fragile in early life is essentially absent. It is suspected that the environment of the neonatal intensive care unit (NICU) presents a number of barriers to the development of the father-infant relationship (Griffin, 1990; Dudek-Shriber, 2004; Perehudoff, 1990).

Methods:
This is a descriptive, exploratory study of fathers’ experiences during their child’s NICU stay. Unstructured interviews of five fathers will use the interview guide: 1. Tell me what it was like having a baby in the NICU. 2. Tell me about NICU experiences that were positive. 3. Tell me about experiences that were not positive. Interviews will be recorded, transcribed, and coded. Themes will be identified. Data and analysis will undergo member checks. Informants will be fathers who had infants in the NICU 3 to 24 months prior to the interview. Each informant must describe himself as the father of the infant and 18 years or older. Informants will be recruited from professional contacts.

Findings:
Pending.

Discussion:
Pending.

Research Completed:
Yes

Abstract History:

Financial Disclosure:
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Yes

FDA Disclosure:
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THE EFFECTS OF MATERNAL VOICE ON DAYS TO ORAL FEED: A PRELIMINARY STUDY

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Abstract Categories: Interest Group: Parent-Child
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims: The purpose of this study is to compare the number of days to full oral feed between infants exposed to maternal voice from 28-34 weeks and those exposed from 32-34 post-menstrual weeks of age.

Research Questions/Hypotheses: Will the number of days to full oral feed be shorter for those infants exposed to maternal voice earlier (28 weeks)?

Significance: Contact with the mother is hypothesized to impact many developmental outcomes, possibly feeding.

Methods: This preliminary study is taken from a larger study entitled Heart Rate Variability and Learning in the Premature Infant. Thirty-eight low risk premature infants have currently completed the study. Infants were enrolled to one of two groups. Group 1 began exposure to a recording of a nursery rhyme recited by their mother at 28 weeks and group 2 began at 32 weeks. Weekly chart reviews will be conducted to determine the number of days to full oral feed.

Findings: Results are to be determined.

Discussion: If maternal voice has an impact on the number of days to full oral feed, this may impact total weight gained and resultant length of stay in the neonatal intensive care unit. This could be a positive outcome for both the premature infant and their mother. When the premature infant can successfully oral feed, the mother can have greater contact with her infant (possibly breast feed) potentially resulting in improved developmental milestones for the infant.

Research Completed: Yes

Abstract History: -This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
-Details: This study is a preliminary study taken from a larger study which was presented at SNRS in 2007.

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes
Grants/Research Support : Y
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FDA Disclosure:
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Abstract ID: 913

Social competencies and behavioral problems of youth being reared by grandmothers

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An increasing number of children are being reared by kin, particularly among African American families. The key reasons revolve around maternal substance use, illness, incarceration, death, and parenting issues such as child abuse and neglect. Children entering kin care tend to bring with them a host of problems based upon their difficult life experiences and inadequate parenting. Older children are particularly challenging developmentally and may also have more behavioral problems. Such issues can cause many parenting challenges to kin caregivers, primarily grandmothers. The purpose of this paper is to describe behavioral problems and social competencies of children being reared by grandmothers.

Research Questions/Hypotheses:
What are the social competencies and behavioral problems of the youth being cared for by custodial grandmothers? How do these reports of social competencies and behavioral problems differ for grandmothers and the youth in their care?

Significance:
Findings are important in understanding the social and behavioral problems of custodial grandchildren so that interventions can address these problems, decrease parenting stress and improve child outcomes.

Methods:
Data was collected as part of the Grandparenting Program, a Kellogg-funded support group for custodial grandparents in Forsyth County, North Carolina. Participants for this study are 41 grandparents and their custodial grandchildren aged 6 to 18 years of age. Data are from Achenbach’s Child Behavior Checklist (CBC) as completed by grandparents and the matching Youth Self-Report (YSR) questionnaire completed by the grandchildren. Numerous studies support the reliability and validity of these tools.

Findings:
Mean individual item and subscale scores (social competencies and behavior problems) on the CBC and YSR will be summarized and compared to reported norms for the tool. Then, t tests will be used to compare the grandparent scores on the CBC with the youth scores on the YSR.

Discussion:
Findings are unique in presenting the viewpoints of both grandmothers and the children in their care.
Abstract ID: 935

EVALUATING FAMILY MANAGEMENT STYLES IN TREATMENT OF CHILDHOOD ASTHMA

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Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Parent-Child
Thematic Areas: Chronic illness

Purpose/Aims: The purpose of this pilot project is to describe the family management style for families dealing with childhood asthma care and identify whether the management style predicts asthma morbidity issues.

Research Questions/Hypotheses:
1. What are the management styles families utilize in treatment of childhood asthma?
2. Is the family’s management style predictive of asthma morbidity (ED visits, hospitalizations, school days missed, and caregiver work days missed)?

Significance: Pediatric asthma is a chronic disease that affects the entire family. The prevalence of asthma and asthma-related morbidity outcomes has progressively increased among children. Therefore, as the chronic nature of the disease processes, families of children are exposed to a variety of management stressors over extended periods of time.

Methods: The study participants include families (caregiver-child dyad) of school-aged children diagnosed with asthma. Individual family interviews are being conducted using the Family Management Style Measure (FaMM, Knafl & Deatrick) with caregivers who have children (7-12 years) with asthma. The FaMM is designed to measure the family’s style of management with chronic illnesses. Self-report data are also collected regarding asthma morbidity for each child. Participants are being recruited from a southeastern Lung Health Center database and an outpatient Interdisciplinary Asthma Clinic.

Findings: Data collection is ongoing (completion date December 2007).

Discussion: Previous research identifies the need to evaluate the effectiveness of management styles within families dealing with chronic illness. Secondly, family management styles may affect child asthma morbidity outcomes. This research strives to answer such questions.

Research Completed: Yes

Abstract History:

Financial Disclosure:
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Non-Exclusive License:
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Providing Social Support to Mothers of Mentally Ill Children

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Abstract Categories:
- Interest Group: Psych/ Mental Health
- Thematic Areas: Chronic illness

Purpose/Aims:
The purpose was to compare support offered through two interventions, a web-based chat room intervention (CHAT) and telephone social support (TSS).

Research Questions/Hypotheses:
1. Are there major differences in the support influenced by the delivery method? 2. Do the mothers describe similar problems in both interventions?

Significance:
In the US, 20% of children have mental health problems, with increasing responsibility for care placed on mothers. These mothers often suffer from serious stress. In prior studies, mothers asked specifically for more support and information. The model guiding this study is Lazarus and colleagues’ Stress, Appraisal and Coping theory.

Methods:
An ongoing randomized controlled investigation is testing the two types of support. This paper reports an exploration of interactions between nurses and mothers from each group. Qualitative description was used for analysis, since these data were collected for another purpose. Forty-one transcripts from 11 nurse--mother pairs were analyzed by coding at the descriptive level. The analysis was done by a nurse who was not involved with the study to increase credibility.

Findings:
The mothers reported significant emotional strains. Mothers experienced concerns, fear for the child’s future, frustrations with the various agencies, and guilt. A second theme was advocating through perceiving what was going on with their children, protecting the child to the extent possible, viewing their child as positive in some way, and planning for the future. The nurses assumed the roles of teacher, affirmer, clarifier, and encourager in providing social support.

Discussion:
The problems and actions the mothers described were similar in both groups. The nurses in the two interventions had different styles but both provided all role functions described in the findings. While the chat rooms lasted longer than the phone calls, the time it took to type and transmit messages meant the interactions were about the same duration. Both interventions appear to provide good social support.

Research Completed: Yes

Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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FDA Disclosure:
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Abstract ID: 236

The effects of depressive symptoms and anxiety on quality of life: Testing dyadic dynamics using Actor-Partner Interdependence Model

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Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Psych/ Mental Health
- Thematic Areas: Chronic illness

Purpose/Aims:
To examine the effect of patient and partner depressive symptoms and anxiety on quality of life (QoL) in patient-spouse dyads using an Actor-Partner Interdependence Model (APIM). In APIM, actor effect is the impact of a person’s emotional distress on his or her own QoL. Partner effect is the impact of a person’s emotional distress on his or her partner's QoL.

Research Questions/Hypotheses:
Interaction between patients and caregivers is an essential component of heart failure (HF) management. Depressive symptoms and anxiety are common in heart failure (HF) patients. Such emotional distress is contagious and transmittable between close individuals. Although depressive symptoms and anxiety are associated with patients' and caregivers' own QoL, it is not known whether their emotional distress contributes to their partner's QoL.

Significance:
This study used the APIM, an innovative statistical method that determines how outcomes are influenced by both patients and caregivers.

Methods:
Patients with HF and spousal caregivers were recruited at one outpatient clinic of academic medical center. Depressive symptoms and anxiety were assessed using the Brief Symptom Inventory. QoL was assessed using the Minnesota Living with HF Questionnaire. Dyadic data were analyzed using APIM dyad-based regression model.

Findings:
A total of 39 dyads (HF patient: 61% males, mean ejection fraction 33.6%, 41% NYHA III-IV) participated. Depressive symptoms exhibited both actor (p = .003) and partner (p = .02) effects. Patients and spouses with higher depressive symptoms had poorer QoL. Patient and spouses whose partner had higher depressive symptoms were more likely to indicate their own QoL was poorer. Actor and partner
effects for anxiety were marginally significant (p = .06 for both actor and partner effect).

Discussion:

Both patients' and spouses' depressive symptoms influenced both their own and their partner's QoL. This suggests that interventions to reduce depression and improve patients' QoL should include both patient and spousal caregive r.

Research Completed:
Yes

Abstract History:
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Financial Disclosure:
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Anger in the Trajectory of Healing from Child Maltreatment

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During abusive treatment in childhood, a child may not experience anger. The child may feel helpless or numb; defenses such as dissociation or repression may be employed. Only later does anger surface. Little is known about evolving changes in anger cognitions and behaviors as they occur across the years of the healing trajectory. The purpose of this qualitative study was to examine narratives of adult female survivors of childhood maltreatment for anger experiences.

Research Questions/Hypotheses:
We assessed when anger enters the story, how it is expressed, and outcomes of anger expression.

Significance:
Findings are relevant to extant theories of women's anger and feminist therapies.

Methods:
From a set of narratives of 27 adult survivors, 6 women were purposefully selected for in-depth case analysis (Yin, 2003). All women had participated in 3 audiotaped interviews, spaced across 6-12 months. All had experienced multiple forms of maltreatment during childhood. 4 women were White, 2 Latina; mean age was 43.

Findings:
The earliest overt anger in narratives occurred at age 13, but overt anger did not surface until age 35 for one participant. Anger experiences were quite diverse, ranging from nonproductive rages ("I was nuts because of the anger") and self-castigation ("I was stupid, stupid, stupid, stupid") to righteous anger that motivated (1) confrontation of perpetrators, (2) advocacy for abused children, and (3) self-protection from sexual harassment. Participants described anger metaphorically as fire or volcano and elucidated its bodily sensations vividly. The heaviness of long-held anger at a perpetrators, mixed with hatred, could cause a woman to become weary. One such participant decided to forgive her abuser, to "wash away the anger from my heart."

Discussion:
Anger was often a catalyst in a woman's recovery, mobilizing a fighting spirit. Participants found ways to release excess anger through poetry, art, dance, journaling, talking to friends or therapists, and writing letters to perpetrators.

Research Completed:
Yes

Abstract History:
Financial Disclosure:
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Cognitive-Behavioral Strategies: The Body of Evidence Grows

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Abstract Categories:
Interest Group: Psych/ Mental Health
Thematic Areas: Adult Health

Purpose/Aims:
There is a growing body of research that supports the use of cognitive-behavioral strategies to improve health. The way an individual thinks can impact both their mental and physical health. In his seminal work with depressed individuals, Beck proposed that the central cognitive changes in clinical depression involve negative perceptions of the self, world, and future (the cognitive triad). Beck theorized that the content of conscious thoughts led to specific emotional responses. Therapeutic interventions developed by Beck included using behavioral strategies that re-involve patients in pleasurable social and physical activities, teaching problem solving techniques, and using cognitive techniques that identify negative thoughts and replace them with more accurate and helpful views. Cognitive-behavioral strategies are now being tested with individuals who have physical problems.
The purpose of this symposium is to demonstrate how cognitive-behavioral strategies used in a variety of clinical populations have been effective in improving health. Hall and colleagues will describe a negative thoughts intervention that has been tested in college women at-risk for depression and low-income single mothers with high levels of depressive symptoms. Moser and colleagues will present findings from three studies that tested a cognitive-behavioral intervention in patients with heart failure. Hahn and colleagues will describe an integrated cognitive-behavioral intervention designed to help pregnant smokers quit and remain abstinent. The challenges of translating these encouraging findings into clinical practice will be addressed.

Research Questions/Hypotheses:
Overview

Significance:
Overview

Methods:
Overview

Findings:
Overview

Discussion:
Overview

Research Completed:
Yes

Abstract History:

Financial Disclosure:
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FDA Disclosure:
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How Patients and Nurses Experience the Acute Care Psychiatric Environment

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Purpose/Aims:
The study explored the acute care psychiatric environment by eliciting descriptions of psychiatric nurse and patient experiences of their shared space. The aim was to understand elements of the inpatient unit that nurses could focus their energies on, to better satisfy both the needs of those who work in and those who seek help from the psychiatric hospital.

Research Questions/Hypotheses:
How do patients and nurses experience the acute care psychiatric environment?

Significance:
The concept of the therapeutic milieu in psychiatric nursing care was developed when patients’ hospitalizations were long, medications were few, and one-to-one nurse-patient interactions were the norm. However, it is not clear how the notion of “therapeutic milieu” is experienced in the acute psychiatric environment of today by those who occupy it.

Methods:
This phenomenological study explored the experiences of patients and nurses by asking them, “What stands out to you about this psychiatric hospital environment?”

Findings:
Three figural themes emerged, contextualized by time, which was a source of stress to both groups: for patients there was boredom, and for nurses, pressure and chaos. Though they shared some themes, nurses and patients experienced them differently. For instance, nurses felt caged in by the plexiglas enclosed nursing station, and patients felt caged in by the locked doors of the unit.

Discussion:
The findings do not support the existence of the therapeutic milieu described in the literature. Further, while the nurse-patient relationship was yearned for by nurses, it was nearly absent from patients’ descriptions. The caring experienced by patients was mainly derived from interactions with other patients.

Research Completed:
Yes

Financial Disclosure:
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Community-Based Participatory Research: Engaging Communities and Academicians in Research Partnerships

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Abstract Information

Presentation Preference: SNRS Symposium

Willing To Submit Podium? Yes
Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Psych/ Mental Health
- Thematic Areas: Health Disparities

Purpose/Aims:
The purpose of this study was to examine through a community-based participatory research (CBPR) approach, the individual, organizational, and community level factors affecting access, use, and perception of mental health services for Spanish-speaking Latina women.

Research Questions/Hypotheses:
What are the mental health service needs of Spanish-speaking Latina women?

Significance:
Mental illness affects women disproportionately. In minority women, the risk of mental illness can be exacerbated by other factors such as racism, discrimination, income and education levels. Latinos in the U.S receive fewer mental health services than other groups. The National Institute of Mental Health/NIH, the Department of Health and Human Services and Healthy People 2010, have all identified a need to address this disparity. The need is especially acute given the prediction that Latinos will constitute 24.4% of the U.S. population by 2050.

Methods:
This study used qualitative methodology implemented through a CBPR approach. Data was collected by community researchers in focus groups with Spanish-speaking adult Latina women. Data was analyzed by the CBPR team using Qualitative Description.

Findings:
This paper reports the mental health service needs of Spanish-speaking Latina women in this local community.

Discussion:
Implications of the findings will be presented. Advantages of a CBPR approach will be discussed.

Research Completed: Yes

Abstract History:
Financial Disclosure:
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The Effects of Age and HIV Status on Vigor and Psychological Well-being

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Presentation Preference: SNRS Podium Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Psych/ Mental Health
Thematic Areas: Chronic illness

Purpose/Aims: There are more than 100,000 adults with HIV over 50, yet little is known about the complex issues surrounding the synergistic effects of aging with HIV. The purpose of this study was to provide some of the first data to examine such issues.

Research Questions/Hypotheses: This study asks what are the psychosocial differences between older and younger adults with and without HIV.

Significance: With the increasing number of older adults with HIV, information to promote wellness in this population is needed.

Methods: Adults (N = 146) with and without HIV were assessed on a variety of psychosocial factors: Profile of Mood States subscales (anger, fatigue, vigor, depression, confusion, tension), Lubben Social Network Scale, Proactive Coping Scale, and Ironson-Woods Religiosity Index. These measures parallel Parker and colleagues’ (2003) concepts of psychosocial and spiritual aspects of successful aging. A 2x2 multivariate analysis of covariance (MANCOVA) was conducted. The two independent variables were HIV status and age (below 50 years old, 50 and older). Covariates included education, income, minority status, sexual orientation, and gender.

Findings: Results indicate that HIV-positive adults reported higher levels of anger (p = .02). Results also indicate that age group differences emerged for Lubben Social Network Scale (p = .02), POMS – fatigue (p = .05), and POMS – vigor (p = .03); older adults reported reduced social networks, more fatigue, and less vigor. Results indicate that an HIV x age interaction emerged; older adults with HIV reported less vigor (p = .04).

Discussion: Findings suggest older adults with HIV may be more vulnerable to declines in energy which may be explained by the mitochondrial damage that occurs in both aging and with HIV. The synergistic effects of aging with HIV may produce additional mitochondrial damage resulting in low energy levels. Methods for improving energy/vigor should be considered as those with HIV continue to age.

Research Completed: Yes

Abstract History:

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

Submitted By:
Abstract ID: 330

Religiosity and Biopsychosocial Outcomes in HIV: A SEM Comparison of Gender, Race, and Sexual Orientation

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Purpose/Aims: Highly Active Antiretroviral Therapy (HAART) is dramatically extending the lifespan for many infected with HIV, transforming HIV into a chronic disease alongside other treatable medical conditions. Yet little is known about this growing population such as how religiosity facilitates successful aging in different groups with HIV.

Research Questions/Hypotheses:
This study investigated which factors impact religiosity and biopsychosocial functioning in African Americans, Caucasians, men, women, heterosexuals, or homosexuals.

Significance:
This study provides insight into the role religiosity plays in facilitating wellness in diverse groups with HIV.

Methods:
In the 2003 AIDS Alabama State-wide Survey, 395 adults with HIV provided data on their age, health status, disease duration, education, social support, mood, and religiosity. These factors were specified in a structural equation model for each of the six groups where religiosity mediated the effects of age, education, and chronicity on the biopsychosocial outcomes of health, social support, and mood.

Findings:
For African Americans, those who were older had higher levels of religiosity which was positively associated with social support (GFI = .96). For Caucasians, religiosity did not mediate these factors (GFI = .93). For men, religiosity did not play a mediating role (GFI = .96). For women, those who were older had higher levels of religiosity which was positively associated with good health status (GFI = .95). For heterosexuals, those who were older had higher levels of religiosity but religiosity did not mediate any of the biopsychosocial outcomes (GFI = .96). For homosexuals, age was not related to religiosity; however, religiosity was positively related to social support (GFI = .96).

Discussion:
Explanation as to why some groups benefit more from age-related religiosity and positive outcomes more than others is based upon the historical importance of religiosity in each groups’ lives which can provide understanding into the complex dynamics of aging with this chronic disease.

Research Completed:
Yes

Abstract History:
Financial Disclosure:
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Cognitive-Behavioral Strategies: The Body of Evidence Grows

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Willing To Submit Podium? Yes
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Abstract Categories: Interest Group: Psych/ Mental Health
Thematic Areas: Adult Health

Purpose/Aims: To determine the impact of cognitive-behavioral therapy on: 1) heart failure rehospitalizations or cardiac mortality; 2) quality of life; 3) perceived control, anxiety and depression; and 4) heart rate variability and plasma norepinephrine.

Research Questions/Hypotheses:
Cognitive-behavioral therapy will result in decreased heart failure rehospitalizations or cardiac death, improved quality of life, increased perceived control, decreased anxiety and depression, improved heart rate variability, and decreased plasma norepinephrine.

Significance: Heart failure has been called the most important public health problem facing cardiovascular clinicians and researchers because of its high and increasing incidence, prevalence, morbidity and mortality. Despite substantial advances in pharmacologic therapy, clinical improvements seen among patients are modest. Nonpharmacologic therapy, including cognitive-behavioral therapy, has received relatively little attention, yet has potential to serve as an important adjunct to pharmacologic therapy.

Methods: In a series of three studies, more than 400 patients with advanced heart failure were randomized to intervention or usual care control groups. The intervention consisted of individual 6-week cognitive-behavioral therapy training sessions. Data were collected at baseline, 3 and 12 months and analyzed using survival analysis and repeated measures analysis of variance.

Findings: After training, intervention patients had a shorter time to the combined endpoint and 25% fewer rehospitalizations for heart failure than controls (p <0.05). Quality of life was improved as were depression, anxiety, and perceived control in the intervention group compared to the control group (p < 0.05 for all). Heart rate variability response to standardized physical stressor was improved in intervention patients but not in controls (p< 0.05). Norepinephrine level was unchanged in intervention patients across time, but increased in controls (p<0.01).

Discussion: Cognitive-behavioral therapy may be a safe and effective nonpharmacologic adjunct in the management of the high morbidity seen in patients with advanced heart failure.

Research Completed: Yes

Abstract History: Financial Disclosure:
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FDA Disclosure: Yes
Abstract ID: 448

Cognitive-Behavioral Strategies: The Body of Evidence Grows

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Abstract Information

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Abstract Categories: Interest Group: Psych/ Mental Health
Thematic Areas: Women's Health

Purpose/Aims: To describe a cognitive-behavioral technique designed to decrease negative thinking through the use of thought stopping and affirmations and to summarize the affect of this intervention in two studies.

Research Questions/Hypotheses: It was hypothesized that depressed women randomized to receive this cognitive-behavioral intervention would show greater improvement in depressive symptoms and negative thinking compared with participants in the control group.

Significance: Cognitive-behavioral strategies involve the use of self-management techniques to alter thoughts, feelings, and behaviors. Cognitive-behavioral strategies focus on teaching individuals skills to regulate negative thoughts and moods.

Methods: This cognitive-behavioral intervention was tested in college women at-risk for depression (N = 92) and low-income single mothers with high levels of depressive symptoms (N = 136). The intervention was designed to incorporate cognitive-behavioral techniques to assist in reducing negative thinking in depressed women. Thought stopping and affirmations were the primary strategies taught. Components of the intervention included affirmations and direct actions adapted from Verona Gordon’s Insight program; information on thought stopping, affirmations, and distorted thinking styles; and STOP technique developed by Meichenbaum. These techniques are referred to as covert assertion and include thought interruption; they are designed to help people change their thinking styles. The intervention is delivered in a group format to provide contact with peers with similar problems, reduce isolation, promote change, and be cost-effective. Each participant received an audiotaped relaxation exercise protocol and a notebook that contains all handouts, homework assignments, and the group schedule to be distributed at the first group meeting.

Findings: In each of these randomized controlled trials, the intervention was effective in reducing negative thinking and depressive symptoms and improving mental health.

Discussion: The successful application of this intervention in two groups of at-risk women provide evidence of its efficacy in these vulnerable populations. The challenges of translating these findings into clinical practice will be discussed.

Research Completed: Yes

Abstract History:

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose
An Examination of Pediatric Psychiatric Emergency Services: A Pilot Study

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Abstract Categories:
Interest Group: Psych/Mental Health
Thematic Areas: Child & Adolescent Health

Purpose/Aims:
The purpose of this pilot project was to evaluate the feasibility of the proposed data measurement and collection procedure for identifying emergency department (ED) pediatric psychiatric service characteristics.

Research Questions/Hypotheses:
This study involved the collection of survey data related to service structure, process, and outcomes of emergency department pediatric psychiatric services (EDPES). More specifically, this study: 1) Pilot tested the ED Pediatric Psychiatric Services Survey – a 31-item questionnaire that was developed by the researcher to obtain information about EDPES characteristics. 2) Evaluated the measurement of structure (staff and space), process (assessment tools, collaboration, caregiver/family interaction), and outcome (perceived effectiveness) factors to adequately capture the interorganizational variability.

Significance:
Approximately one in five children experiences symptoms of a psychiatric disorder during the course of any given year. Although researchers have begun to examine aspects of EDPES, they have focused almost exclusively on adult populations. Despite the significant benefits of acute screening and early intervention, evidence indicates less than 20% of pediatric clients who suffer from mental
disorders are receiving appropriate treatment. With EDs serving as the primary access, there is a critical need for research related to pediatric EDPES.

Methods:
This study used a cross-sectional design that retrospectively examined pediatric EDPES. The sampling frame was a census of all nongovernmental hospitals that offer emergency services in Virginia (n=71). ED nurse managers were solicited to participate as the respondent for the organization, as well as an additional administrator from a third of the hospitals was asked to assess reliability.

Findings:
Analyses include descriptive statistics, correlations, chi-square and analysis of variance tests to identify and compare hospitals' pediatric EDPES characteristics.

Discussion:
Upon completion, the results will provide essential preliminary data for the development of a larger study of pediatric EDPES that will examine associations of proposed “best practice” structural and process components of EDPES with patient and organizational outcomes.

Research Completed: Yes
Abstract History: Financial Disclosure:
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Cognitive-Behavioral Strategies: The Body of Evidence Grows

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Yes

Abstract Categories:  
Interest Group: Psych/ Mental Health  
Thematic Areas: Women's Health

Purpose/Aims :  
To explore the efficacy of a cognitive-behavioral intervention originally designed for depressive symptoms with pregnant smokers. The intervention was combined with a telephone intervention for smoking cessation during and after pregnancy and home exposure assessments for secondhand smoke.

Research Questions/Hypotheses :  
It was hypothesized that the intervention group would have fewer depressive symptoms and negative thoughts and greater quit attempts and smoking abstinence post-intervention, compared to controls.

Significance :  

One-third of pregnant women who stop smoking during pregnancy remain smoke-free one year after delivery. Depressed women are less confident about quitting than non-depressed women. The efficacy of traditional smoking cessation interventions in pregnancy is minimal.

Methods:
An exploratory, quasi-experimental design tested the efficacy of the integrated intervention. Data on smoking and quit rates, urine cotinine, nicotine dependence, air quality, depressive symptoms, negative thinking and chronic stressors were collected at baseline, one month after the group intervention and two and four months postpartum. The treatment group (n = 11) received the intervention during and immediately after pregnancy. The control group (n = 5) only responded to in-person interviews. The TSI Sidepak was used to assess fine particulate matter in homes.

Findings:
While the groups were similar on demographics and outcome variables at baseline, the treatment group had fewer depressive symptoms and thoughts of hopelessness than controls at the first post-intervention interview. Cigarette use, nicotine dependence, and urine cotinine did not change significantly from baseline to the first post-intervention interview. Subject attrition postpartum precluded quantitative analysis of data collected at the third and fourth interviews. Participants reported less home smoking following the exposure assessments.

Discussion:
This exploratory study supports the potential effectiveness of a cognitive-behavioral intervention in decreasing depressive symptoms and hopelessness among pregnant smokers. A larger trial is needed to test the effectiveness of this integrated mental health intervention in promoting quit attempts and smoking abstinence among pregnant smokers.

Research Completed: Yes

Abstract History:

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Factors Influencing HIV Risk among Young African American Females Living in a Resource-Poor Community

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Abstract Categories:
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Thematic Areas: Health Disparities

Purpose/Aims:
To explore factors that influence young AA females to participate in risky sexual behaviors and encourage them to become pregnant.

Research Questions/Hypotheses:
1. Is a perceived lack of power in sexual relationships leading to unprotected sex and pregnancy? 2. How does desire for pregnancy or concern about risk for HIV influence sexual decision making? 3. What future orientation do young AA women in a poor community experience?

Significance:
Health statistics in Alabama indicate that young AA females are at high risk for pregnancy and HIV. In 2001, 77% of newly diagnosed HIV cases among women of childbearing age were African American. The birth rate (per 1000 females in the 15-19 age group) was 67 for black and other race teens, and 48 for white teens.

Methods:
Fifty sexually active (by self-report), AA females were interviewed by an AA female research assistant, using street intercept and referral techniques for recruitment. The study took place in an inner-city resource poor neighborhood.
Theory-based domains suggested open-ended questions about the meaning of getting pregnant, family, and marriage; fatalism and future orientation; strengths and problems of the AA community; issues of control within male/female relationships; knowledge of STDs risk and prevention. Two researchers analyzed data independently for major themes, then compared and negotiated the resulting findings.

Findings:
Half of the respondents had children. Pregnancy was rarely planned, but children were highly valued. The relationship with their male partner was often a negative one. Most had correct information about HIV. Most had positive expectations for the future: going back to school, getting jobs, attaining stability. The women did not report a perceived lack of autonomy in their sexual relationships, and were often serially monogamous.

Discussion:
Effective HIV programs for AA females must first deal with their desire for motherhood and their unsatisfying and unsatisfactory relationships with the males who father their children.

Research Completed: Yes

Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
-Details: APHA, 12/10-14/05 Philadelphia

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

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Factors Influencing Depressive Symptoms among Thai Adolescents

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Psych/ Mental Health
Thematic Areas: Child & Adolescent Health

Purpose/Aims: The purpose is to explore the relationships of cognitive styles, parental and peer attachment, everyday stressors with depressive symptoms in Thai adolescents. The specific aim is to examine whether cognitive styles, everyday stressors and parental and peer attachment are related to depressive symptoms.

Research Questions/Hypotheses: The higher the negative cognitive styles, poor parental and peer attachment, and everyday stressors, the higher the level of depressive symptoms.

Significance: In Thailand, the prevalence of depressive symptoms in adolescents ranged from 18% to 44%. Depressive symptoms have negative consequences such as a risk factor for suicide. In Western studies, cognitive styles, everyday stressors, and parental and peer attachment strongly predicted depressive symptoms. These variables have not been fully investigated in relation to depressive symptoms in Thailand.

Methods: Cross-sectional data were collected from 950 adolescents in Thailand. Depressive symptoms were measured using the Center of Epidemiologic Studies-Depression Scale (CES-D). Cognitive styles were measured using the Adolescent Cognitive Style Questionnaire (ACSQ). Everyday Stressors Index Adolescent version (ESI-A) and the Inventory of Parent and Peer Attachment (IPPA) measured stressors and attachment. Descriptive statistics, correlation, and multiple regressions were used to analyze data. An alpha level of .05 was used.

Findings: Prevalence of high depressive symptoms was 33%. The mean score on CES-D was 19 (SD=9), with higher scores indicating greater depressive symptoms. The mean score on ESI-A was 50 (SD=11), with higher scores indicating more stress. The mean score on ACSQ was 197 (SD=48), with higher scores indicating more negative cognitive styles. The mean score on IPPA of father, mother, and peer attachment score were 87 (SD=17), 94 (SD=17), and 92 (SD=14), respectively, with higher scores indicating more attachment. Peer attachment, everyday stressors, cognitive styles, parental attachment each predicted depressive symptoms score.

Discussion: These findings suggest that interventions aimed at promoting positive peer-parental relationships and cognitive styles but decreasing everyday stressors among Thai adolescents may be beneficial in decreasing depressive symptoms.

Research Completed: Yes

Abstract History:

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure: Cleared: Yes

Non-Exclusive License:
Individual and Family Adaptation to Mental Illness in Taiwanese Families

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Student Level:
The purpose of this study, which was guided by the Family Resiliency Model of Family Stress, Adjustment, and Adaptation, was to examine the relationships among pile-up of demands (i.e., family caregiver’s awareness of patient suicidality, family history of mental illness, chronicity of mental illness, and stressful life events), social support, and family adaptation (i.e., family caregiver burden and family functioning) in Taiwanese families of individuals with mental illness.

Research Questions/Hypotheses:
(a) What are the relationships among pile-up of demands, social support, and family adaptation? (b) Does social support mediate the impact of pile-up of demands on family adaptation?

Significance:
Mental illness is not only an individual disease but also a family affair. Taiwan, along with many other countries, is making a transition from institutionalization to community-based mental health services. However, most communities currently lack sufficient mental health services to meet the needs of individuals with mental illness. As a result, families are expected to be a primary source of ongoing support for their family members with mental illness.

Methods:
A convenience sample of 157 individuals from 84 Taiwanese families was recruited from two psychiatric outpatient clinics in Taiwan. Data collection was done by mail. Family members completed a packet of self-report questionnaires designed to assess perceived stress, perceived social support, family caregiver burden, and family functioning. Data analysis consisted of descriptive statistics, principal component analysis, and mixed linear modeling.

Findings:
The results indicated that pile-up of demands and social support were significantly related to family adaptation. Social support partially mediated the relationship between pile-up of demands and family adaptation.

Discussion:
Findings from this study will facilitate the development and testing of tailored, culturally sensitive individual and family-centered interventions for families that include individuals with mental illness.

Research Completed:
No

Submitted By:
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Methamphetamine and Acute Inpatient Psychiatry

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Abstract Information
Presentation Preference:
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Willing To Submit Poster?
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Abstract Categories:
Interest Group: Psych/ Mental Health
Thematic Areas: Acute illness

Purpose/Aims:
Psychiatric hospitalization occurs for many patients with active suicidal ideation and methamphetamine-related psychosis and/or severely disturbed mood. The aim of this study was to describe the clinical course of these patients.

Research Questions/Hypotheses:
We theorized that common clinical characteristics would be found in our sample of methamphetamine-abusing patients.

Significance:
Between 6 and 18% of all psychiatric emergency department patients have methamphetamine-related disorders. These patients are often admitted to inpatient psychiatric units for stabilization.

Methods:
We retrospectively reviewed medical records for all methamphetamine-abusing patients, (N=48) admitted to the psychiatric units between May and October 2006, collecting data about demographics, daily mental status exams, and daily medications administered. The research setting was a large hospital in Hawaii.
located in an area with severe methamphetamine infiltration. Tables were constructed to document daily mental status changes and changes in daily medications.

Findings:

Thirty-two of the 48 patients in the sample had co-morbid psychiatric conditions. Seventeen patents with co-morbid thought disorders, had significantly longer hospital length of stay, required greater poly-pharmacy for management, and were more often discharged from the hospital with unresolved psychiatric symptoms. In all cases, suicidal ideation was no longer acute by the end of the third hospital day. Trends in the data suggest that clinical presentations for patients with no underlying psychiatric diagnosis resembled the presentation of patients with co-morbid thought disorders.

Discussion:

Nurses that care for patients that abuse methamphetamine will improve care when they anticipate the variable rates of symptom resolution for patients with and without co-morbid psychiatric illness. Care plans might be developed for methamphetamine-related morbidity: the focus of care should be to manage suicidality and to reduce psychosis, particularly in the first three days of hospitalization.

Research Completed:  Yes

Grant Support: Yes

Abstract History:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

Grants/Research Support: Yes

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Other Financial or Material Support: 

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Non-Exclusive License: 

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Women Survivors of Childhood Abuse: A Community Participatory Research Project

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Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Psych/ Mental Health
Thematic Areas: Women's Health

Purpose/Aims: This study was phase one of a study aimed at understanding the lives, transitions, and health care of women survivors of child abuse and developing research protocol sensitive to these women.

Research Questions/Hypotheses:
Relative to women survivors of childhood abuse: 1. What are the factors and forces influencing their life patterns and transitions? 2. What are the key issues and concerns related to health care delivery? 3. What research approaches are most sensitive to them?

Significance: This study supports the elaboration of a research protocol and health promoting interventions for women survivors of childhood abuse that integrate their perspectives and experiences. It addresses key issues associated with health related consequences of child abuse.

Methods: A participatory research design was used for the creation of a research advisory team consisting of women who had experienced child abuse as co-researchers. This team developed focus group recruitment strategies and questions sensitive to women in similar situations. Eight women participated including five Caucasian, three African American, and one Latina. The group met for 7 sessions over a three month period discussing issues and concerns related to the lives of women who had survived child abuse. Sessions were tape recorded and transcripts are being analyzed for themes.

Findings: Specific recruitment strategies and the questions for focus groups were developed. Preliminary emerging themes included exploration of the power of language and terms to define women’s experience, concerns for perpetuating child abuse in families, a call for dignity, respect, and sensitivity from health care providers, and a desire for more groups that address their concerns.

Discussion: Participatory research provides a unique opportunity to empower women abused as children to develop research sensitive to their needs and concerns. The second phase will use the findings and the team will continue to guide and participate in the project.

Research Completed: Yes

Abstract History: Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

Submitted By: mkauf188@bellsouth.net
DEPRESSION AND NIGERIAN-BORN IMMIGRANT WOMEN IN THE USA: A PHENOMENOLOGICAL STUDY

Abstract Information

Presentation Preference: SNRS Student Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Psych/Mental Health
Thematic Areas: Women's Health
Purpose/Aims: The purpose of this phenomenological study is to describe the perceptions of depression and barriers in seeking treatment of Nigerian-born immigrant women currently living in the USA for five years or less. Few studies have examined depression in immigrant women, no studies have examined depression and help-seeking behaviors associated with this illness in this population.
Research Questions/Hypotheses: What are the perceptions of depression among Nigerian-born immigrant women?
Significance: Examining the women's perceptions and meaning of depression will provide valuable information for developing culturally competent care and interventions.
Methods: Husserl's (1962) phenomenological design will be used in this pilot study to allow insight and meaning of the women’s perceptions to emerge. A purposive sample of Nigerian-born immigrant women will be recruited from a community...
located in a southwestern USA state in fall 2007. Inclusion criteria are (a) age 25 years and older, (b) emigration directly from Nigeria to the USA, (c) living in the USA for 5 years or less and (d) English-speaking. Recruitment will be done through personal contact, flyers posted in the Nigerian community center, businesses and networking with sample participants. Semi-structured interviews will be conducted by an advanced psychiatric nurse practitioner who is Nigerian-born. Interview questions will delve into the meaning of depression, attitudes about depression, perceptions about help seeking, and perceptions about receiving treatment for depression. Probes will be used to facilitate obtaining in depth responses. Interview session will last 90 to 120 minutes and will be audio-tape recorded, transcribed, organized into clusters of themes and categories, and coded through thematic analysis to formulate meanings (Collazzi, 1978).

Findings:

Preliminary findings will be available in February 2008. Themes will be clustered around how the women define depression, their attitudes and perceptions toward depression and the barriers encountered in seeking and receiving treatment.

Discussion:

More focused research is needed to illuminate issues surrounding depression in Nigerian immigrant women.

Research Completed: Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

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FDA Disclosure:

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Stress: A Concept Analysis

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Psych/ Mental Health
- Thematic Areas: Adult Health

Purpose/Aims:
The intent of this concept analysis is to describe the concept “stress” and how identification of this concept is not only beneficial to the practitioners of nursing, but also to the recipients of nursing care.

Research Questions/Hypotheses:
What are the defining characteristics of stress? How will the identification of stress be beneficial to practitioners and patients?

Significance:
Stress can happen to anyone at any point in his or her lifespan. It is unique in that events that very well may be perceived as good can have a negative impact leading to a disparity. It has been noted that nurses must be able to discriminatingly gauge the onset of stress and competently incorporate procedures to promote personal coping, as well as to institute stress management methodologies (Potter and Perry, 2005). Confusion about what stress is has led to two problems: inadequate identification and improper implementation of interventions.

Methods:
This concept analysis was conducted using the eight step process described by Walker and Avant (2005). Following the selection of the concept and determining the purpose, a review of literature was conducted. The review of literature revealed the history as well as the modern usage of the concept stress. The defining attributes were determined. Model, borderline, contrary, and related cases were constructed.

Findings:
As determined by this concept analysis, in order for stress to be present there must be a stimulus, a perception of impact, and a coping mechanism.

Discussion:
Stress, whether good or bad, recognized or unrecognized, happens to everyone.
Understanding how to recognize stress and initiate early interventions can lead to better outcomes for the nursing discipline. Studies conducted on stress in the field of nursing research have far reaching implications to the future of nursing education as well as nursing practice. Effectively recognizing stress and properly initiating interventions result in reducing stress to a level that is manageable.

Research Completed: Yes

Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure:
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FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

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The Struggle to Maintain Equilibrium: The Evolution of Self-Injury Behavior in the Adolescent

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Abstract Information
Presentation Preference: SNRS Student Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Psych/ Mental Health
Thematic Areas: Child & Adolescent Health
Purpose/Aims : The purpose of this poster is to examine the historical and cultural examples of self-injury documented in literature in order to bring some glimpse of understanding into the current behavior practiced by many adolescents.
Research Questions/Hypotheses :
What is the historical evolution of self-injury behavior? How is self-injury behavior defined and described in current research? Who is self-injuring and why are they doing it? Are there emerging patterns in the self-injury behavior of the adolescent?
Significance : Self-injury behavior is not a new phenomenon as it has been documented for centuries in many religious and cultural societies. It is, however, becoming more prevalent in our adolescent population. Data suggest that approximately 13% of adolescents deliberately injure themselves, although statistics are difficult to obtain due to the private nature of the behavior. Nurses who care for adolescents need the knowledge to understand the characteristics of the
adolescent who self-injures, to comprehend the expressivity of the behavior, and more readily identify the adolescent at risk for this behavior.

Methods:
A review of current, selected literature will define self-injury behavior and describe the characteristics of its participants and the patterns of their behavior. Religious and cultural examples recorded throughout history will be examined. Lastly, and through a theoretical framework of caring, the need for further research and implications for nursing will be examined in order to begin to understand why our children feel they must scar their bodies to give voice to their pain.

Findings:
There is ample evidence of self-injury behavior throughout history and this may serve to expand our understanding of the phenomenon in today’s adolescent culture.

Discussion:
It is desired that a discussion of emerging patterns of the self-injury behavior will be a focus of discussion.

Research Completed: Yes
Abstract History:
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
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Abstract ID: 945

Identifying Resources for Depressed Latino Women Using Geographic Information System (GIS)

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Presentation Preference:  
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Willing To Submit Poster?  
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Abstract Categories:  
Interest Group: Psych/ Mental Health
Thematic Areas: Health Disparities

Purpose/Aims:  
This honors project is associated with the study Community Based Participatory Interventions: Depression in Latino Women. The specific aims are to: (1) review literature for appropriate interventions available to treat depressed Latino populations, (2) generate a list of community services to treat depression in Alachua and Ocala, Florida, and (3) to create a map with services available in the community, by using Geographic Information System (GIS).

Research Questions/Hypotheses:  
What community-based interventions are describes in the literature to treat depression among Latinos? What are the community services in Alachua and Ocala areas that provides treatment for Latinos, specific to depression?

Significance:  
Through the use of Geographic Information System (GIS), services available to the Latino women population will be located and lead to future collaboration and assessment of appropriate community based interventions for Latino women in the Alachua and Ocala areas.

Methods:  
This project gathered its review of literature by searching through databases. Several community mental health services are being contacted throughout the Alachua and Ocala area to find what traditional and non-traditional interventions that are being used to aid the depressed Latino population. Geographic Information System (GIS) will be used to compose a map of the Alachua and Ocala communities and the community services pertaining to each.

Findings:  
The project is still in progress. It anticipates that the Alachua and Ocala communities will have few mental health services to support Latino populations and there will be more non-traditional support services available such as churches and support groups.

Discussion:  
By collecting data on the available mental health services and community-based interventions for Latinos with depression, the project will determine what interventions are lacking and in turn show what needs improvement. By establishing this, the project will contribute with research towards decreasing the health disparities that exist between Latinos and their access to health care.

Research Completed:  
Yes

Abstract History:  
Financial Disclosure:
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FDA Disclosure:  
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Non-Exclusive License:  
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Submitted By:  
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Abstract ID: 77

**The Development of the Normalization Assessment Measure (NAM)**

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**Abstract Information**

Presentation Preference:
SNRS Podium Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Psychometrics/Instrumentation
Thematic Areas: Chronic illness

Purpose/Aims:
Normalization is an adaptation mode commonly used among chronically ill individuals and occurs when cognitive and behavioral coping strategies are used in order to maintain typical life patterns despite the effects of the chronic illness. The purpose of this research was to develop a measure of normalization and to ascertain the psychometric properties of the instrument.

Research Questions/Hypotheses:
The research questions were: (1) Is the developed measure better described as a unidimensional or a multidimensional measure? (2) What are the psychometric properties of the measure? (3) What is the relationship between scores on the measure and measures of the following constructs: perceived control, disease intrusiveness, quality of life, and social ties? (4) Are these relationships consistent with the proposed conceptual framework? Additionally, twelve hypotheses were tested based upon the research questions.

Significance:
Due to the lack of a quantitative measure for normalization, the current state of the science is based primarily upon qualitative research. In order to further
refine the normalization concept and to clarify previous contradictory findings, an instrument to measure normalization was needed. Quantifying this concept will provide the answers to questions that can only be investigated quantitative research. With greater knowledge, nurses will intervene more appropriately with chronically ill individuals thus leading to better outcomes.

Methods:

In a cross-sectional design, 152 individuals (diagnosed with rheumatoid arthritis, osteoarthritis, lupus, or fibromyalgia) were mailed questionnaires including measures for the constructs listed in the research questions. This sample size met the criteria for a desired power of .80 with alpha set at .05.

Findings:

A 20 item unidimensional normalization measure was developed (alpha = .86). Content, convergent, discriminant and construct validity was established with the constructs above.

Discussion:

Thus, this new internally consistent and valid measure of normalization will facilitate the use of quantitative research for further exploring the conditions under which normalization leads to optimum outcomes.

Research Completed: Yes

Abstract History:
Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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FDA Disclosure:

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Submitted By:
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Computer-Based Versus Face-to-Face Interview Administration of Eleven Instruments

Purpose/Aims:

This methodological study examined the psychometric effects, costs, and benefits of methods of administration (computer-based versus face-to-face) of 11 instruments. The research was conducted within the context of a longitudinal study on nursing student stress.

Research Questions/Hypotheses:

1. What are the effects of method of administration (computer-based versus face-to-face) on reliability and validity?
2. What are the effects of method of administration on data collected, costs, and benefits?

Significance:

As computer-based instruments are now widely available, researchers need to evaluate effects of web-based methodologies. Previously reported advantages included lower cost and convenience; disadvantages included technological difficulties. In addition, previous respondents to computer-based instruments were more likely to choose socially undesirable options. Face-to-face interview, the gold standard for mental health instrument administration, involves both positive and negative aspects of personal relationships.

Methods:
For the longitudinal study, 20 faculty members completed interviews with 54 assigned students. A research assistant entered data into SPSS. For the computer-based study, researchers transformed these same instruments to computer-based assessments, which were administered to 158 senior nursing students. These student participants were anonymous. All responses were immediately downloaded into databases for SPSS analysis.

Findings:
Face-to-face interview required an hour for each student. Two faculty members administered computer-based versions of the same instruments to 158 students in 8 hours (4 hours each semester). Cronbach’s alpha, subscale correlations, and instrument-instrument correlations for web-based instruments were comparable to values obtained from faculty-student interviews. Software programming ensured that all computer-based questionnaires were complete without missing data. Qualitative analysis of student comments is in process.

Discussion:
Web-based instrument administration to students could produce less bias in student responses. This method was cost-effective and reliable, with resulting statistical analyses similar to face-to-face interview administration. No students reported difficulty completing web-based surveys. The server accommodated responses without difficulty. Response data sets were exported to investigators within 24 hours of completion.

Research Completed: Yes

Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes
Grants/Research Support: Y
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FDA Disclosure:
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**Pediatric Instruments to Measure for Children’s Emotional Responses to Hospitalization**

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**Abstract Information**

Presentation Preference:  
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Abstract Categories:  
Interest Group: Psychometrics/Instrumentation  
Thematic Areas: Child & Adolescent Health

Purpose/Aims:  
A literature review was conducted to identify the types of emotions that are measured by pediatric instruments for hospitalized children and to examine psychometric properties of those instruments.

Research Questions/Hypotheses:  
The purpose of the literature review were (1) to describe pediatric instruments used for measuring children’s emotional responses to hospitalization, (2) to examine their psychometric properties.

Significance:  
According to recent report of Agency for Healthcare Research and Quality, 6.3 million pediatric populations have experiences of hospitalization in the United States. Sixty to 88% of hospitalized children go through maladaptive emotional and/or behavioral responses following hospitalization. Children’s emotional status is related to patient’s outcomes including prolonged recovery, increased pain, and increased susceptibility to infection.

Methods:  
A search was conducted of published English literature during 1990-2003 using MEDLINE, and CINAHL and original published literature describing the pediatric
instruments was obtained. Additionally, the investigator searched PsycINFO to find additional published research articles related to the pediatric instruments to examine their validity and reliability.

Findings:

First, the items for these instruments range from 20 to 80 questions to measure only one emotion. Considering children’s attention span during hospitalization and illness, it may not be clinically feasible for hospitalized children to answer 20 to 80 questions. Second, most instruments were not designed for pediatric patients in a hospital setting. Third, most instruments have been criticized with respect to reliability and validity. For example, the most widely used instrument, the STAIC, Revised Children’s Manifest Anxiety Scale (RCMAS), and Fear Survey Schedule for Children- Revised (FSSC-R), were incapable of distinguishing between anxiety and other emotions.

Discussion:

Despite the importance of assessment of children’s emotion, there is no clinically feasible instrument to measure children’s emotional responses to hospitalization based on the review. We need instruments to communicate with hospitalized children and to know how to take care of several millions of hospitalized children in the United States.

Research Completed: Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

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FDA Disclosure:

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Non-Exclusive License:

Accepted Terms: Yes

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Abstract ID: 495

Evaluation of Antecedents of Cultural Competence

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Abstract Information
Presentation Preference:
SNRS   Student Poster Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Psychometrics/Instrumentation
Thematic Areas: Health Disparities

Purpose/Aims :
The purpose of this descriptive study is to identify attributes of cultural competence identified by international nurse researchers to evaluate extant cultural competence instruments and to initiate testing of Harper’s revised model of ethical multiculturalism.

Research Questions/Hypotheses :
1. What are the key attributes of cultural competence? 2. Do extant instruments that measure cultural competence measure the key attributes identified by the expert panel of participants? 3. Are the antecedents of cultural competence in Harper’s revised model of ethical multiculturalism consistent with the attributes identified by international nurse researchers?

Significance :
A standardized conceptualization of cultural competence in nursing is lacking. Evaluation of extant instruments may allow valid and reliable measurement of progress toward the legislated goal of providing culturally competent care. Cultural and linguistic competence of health care providers, with a concomitant goal of providing quality care to all, is one mechanism to help reduce health
disparities. Ultimately, this research may contribute to development of a global nursing ethic.

Methods:

E-mail and an on-line survey site will be used to conduct a Delphi study with 30 nurses who have conducted international cross-cultural research identified through professional organizations, publications, and university directories. Repeated surveys will be conducted until consensus is achieved as evidenced by statistical testing for central tendency and dispersion. Findings will be tested for reliability using an on-line threaded discussion focus group that will be analyzed using content analysis.

Findings:

This study has been approved by the University of Central Florida Institutional Review Board. The pilot study is in progress. Results of the Delphi rounds will be presented.

Discussion:

The current lack of a standardized, valid instrument to measure cultural competence is a problem facing nursing scientists, health care administrators, nursing educators, and various accreditation and governmental agencies. Without reliable and valid instruments, progress toward the goal of teaching and delivering culturally competent health care cannot be measured.

Research Completed:

No

Abstract History:

-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

-Details: Transcultural Nursing Society, September 2007, Bournemouth, United Kingdom

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

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Submitted By:

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Psychometric Properties of Measures of Illegal Behavior and Threat of Physical Injury:
Secondary Analysis of the 2005 Youth Risk Behavior Survey

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The purposes of this study are to: develop measures of illegal behavior and threats of physical injury using survey questions from the 2005 YRBS and test the psychometric properties of these scales.

Research Questions/Hypotheses:
What are the psychometric properties of the measures illegal behavior and threats of physical injury?

Significance:
Adolescents’ health is influenced by the behaviors in which they engage. The Youth Risk Behavior Survey (YRBS) has been used to examine risk behaviors that lead to morbidity, mortality, disability, and social problems of adolescents.

Methods:
A representative sample of adolescents in grades nine through 12 participated in this study. Items from the YRBS were used to measure the constructs: illegal behavior, threats to physical injury, and depressive symptoms. Statistical analysis was used to examine the dimensionality of three scales, internal consistency, and construct validity.

Findings:
A total of 13,917 (86%) adolescents completed the YRBS. Most students were male, Caucasian, and in the ninth grade. Principal component analysis indicated that two factors stemmed from the items relating to illegal behaviors and threats of physical injury. The items relating to depressive symptoms formed a single dimension. Cronbach’s alphas ranged from .65 to .76 for each scale. The correlations among the scales were weak to moderate in magnitude. Threats to physical injury predicted depressive symptoms and anxiety.

Discussion:
The psychometric properties of the illegal behavior and threats to psychical injury measures are quiet sound. Further analysis is needed to examine the reliability of each scale. Reliable and valid instruments will help researchers explore health risk behaviors among adolescents.

Research Completed:
Yes

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Sexual Relationship Power in Belizean Women; Psychometric Evaluation of the Sexual Relationship Power Scale

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Abstract Information
Presentation Preference:
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Abstract Categories:
Interest Group: Psychometrics/Instrumentation
Thematic Areas: Women's Health

Purpose/Aims:
The purpose of this pilot study was to determine the psychometric properties of the subscales of the SRPS.

Research Questions/Hypotheses:
If sexual relationship power (SRP) proves to be an important variable in the decision to use condoms for HIV/AIDS protection, then interventions may be developed to empower women to suggest condom use and attenuate the spread of HIV/AIDS.

Significance:
Belize has the highest rate of HIV/AIDS in Central America. The majority (68%) of the cases result from heterosexual exposure. Condoms are available to most citizens, yet the reason for their use/non-use is not clear. The level of perceived power in a sexual relationship has been shown to be a factor in determining condom use. The Sexual Relationship Power Scale (SRPS) has been demonstrated to be valid and reliable for use with African American and Latina women in the United States. Development of this scale with Belizean women may provide insight into condom use among this group.

Methods:
Convenience sampling was used to collect data from 69 diverse 18-37 y/o women in Belize in March 2007. Demographics, the SRPS and questionnaires regarding condom use and HIV/AIDS knowledge were collected. The subscales of the SRPS; Relationship Control (RC) and Decision-Making Dominance (DMD) were evaluated individually.

Findings:

The resulting Cronbach’s Alphas were .897 and .510 respectively. Internal consistency improved in the DMD subscale (.548) with the removal of 1 item. Construct validity of the scales was examined by testing the association of the subscales with education level and HIV knowledge. A significant difference was seen with the RC based on education level and HIV knowledge (F=7.192, p=.000, F=1.985, p=.028). The relationship was not statistically significant with the DMD.

Discussion:

The RC subscale appears to be a valid and reliable tool which may provide insight into predicting condom use among Belizean women. The DMD may require further refinement prior to implementation.

Research Completed: Yes

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
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Non-Exclusive License: Accepted Terms: Yes

Submitted By: wanash01@louisville.edu
Abstract ID: 563

Application of Tools Used for Measuring Stress in Adult Family Members of the Critically Ill

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Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories:
Interest Group: Psychometrics/Instrumentation
Thematic Areas: Family Health

Purpose/Aims: Purpose: To determine which tool used for measuring anxiety or stress is best suited for a study on stress experienced by adult family members of the critically ill.

Research Questions/Hypotheses:
Research Question: What psychometric tool is most appropriate to evaluate stress experienced by adult family members of the critically ill?

Significance:
Significance: A variety of psychometric tools are available and have been used to assess stress felt by adult family members of the critically ill and presented a variety of options for the researcher. However, the best tool needed to be determined to ensure the most accurate testing in future research.

Methods:
Methods: A literature review was conducted using Mental Measurements Database, CINAHL, and manual searches at a university medical library and the researcher’s personal library. Search terms used were ‘stress’, ‘anxiety’, ‘family’, ‘psychometrics’, and ‘measurement’. Articles on a total of seventy tools were derived from the review. Employing inclusion/exclusion criteria, the selection was decreased to sixteen, at which time a more extensive review began through use of a table. The final selection consisted of five tools which were evaluated in detail.

Findings:
Findings: The tools that met criteria were the Multidimensional Anxiety Questionnaire, the State-Trait Anxiety Inventory, the Derogatis Affects Balance Scale, the Brief Symptom Inventory 18, and the Acute Stress Disorder Scale.

Discussion:
Discussion: A comparison of the five indicated the most qualified instrument for use in studying adult family members of the critically ill is Spielberger’s State-Trait Anxiety Inventory.

Research Completed: Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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FDA Disclosure:
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Non-Exclusive License:
Accepted Terms: Yes

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The Protective Nurse Advocacy Behaviors Scale: A Pilot Study

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Abstract Information
Presentation Preference: SNRS Student Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Psychometrics/Instrumentation
Thematic Areas: Methods
Purpose/Aims: The purpose of this pilot study of the Protective Nursing Advocacy Behaviors Scale (PNABS) was to determine the psychometric properties of the new developed instrument.
Research Questions/Hypotheses: The reliability coefficient will be ≥.70 and items will have significant loads of .30 onto factors.
Significance: Although nursing advocacy is considered to be a critical component of nursing practice from both the legal and ethic standpoint, the published literature regarding nursing advocacy is largely philosophical rather than based on actual nursing research. The nursing research conducted on nursing advocacy is largely qualitative, with few quantitative studies published. The lack of quantitative research on nursing advocacy may be related to the lack of published nursing advocacy instruments. Additionally, there is a paucity of research regarding nursing advocacy and the medical-surgical nursing specialty.
Methods: 
The PNABS was distributed to 500 registered nurses in Texas with a minimum of 1 year experience in medical-surgical specialty. 110 surveys were returned, resulting in a response rate of 16.4%. The exploratory factor analysis using principle axis extraction with varimax rotation was used to determine the common variance among the variables.

Findings:
Five factors were extracted that were congruent with the theoretical underpinnings of the PNABS. The resulting analysis demonstrated an overall Cronbach’s alpha of .72; with each the following factor alphas: Acting as Advocate .81; Environment and Advocacy .65; Protecting Patients Through Advocacy .55; Work Status and Advocacy Actions .788; and Protecting Patient Rights .48.

Discussion:
The PNABS loaded onto five factors, and has an acceptable level of internal consistency. The potential uses of the PNABS include providing a quantitative measure of protective advocacy provided by nurses for their patients and improving nursing advocacy for patients in the practice setting. The PNABS can be used as a quantitative measure of evaluating nursing education about nursing advocacy.

Research Completed: Yes
Abstract History:
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
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Abstract ID: 727

Psychometric Properties of the Antiretroviral General Adherence Scale (AGAS)

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Presentation Preference:
SNRS   Student Poster Presentation

Willing To Submit Poster?
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Abstract Categories:
Interest Group: Psychometrics/Instrumentation
Thematic Areas: Chronic illness

Purpose/Aims:
To report the development and psychometric properties of the Antiretroviral General Adherence Scale (AGAS) from two NIH funded studies. The AGAS, assessed adherence to highly active antiretroviral therapy (HAART) over 30-days. The AGAS is a 5-item, Likert-type scale with total scores ranging from 5-30 (higher scores = higher adherence).

Research Questions/Hypotheses:
N/A

Significance:
HAART has numerous side effects making adherence difficult. Reliable and valid self-report measures of adherence are needed for use in HIV research. Sample: Participants from both studies were recruited from HIV treatment sites. Get Busy Living (GBL, n = 247) piloted an intervention to promote adherence to HAART. Most participants (87.4%) were single, African American males. KHARMA (n = 207) is an ongoing clinical trial testing a medication adherence and risk reduction behavior intervention in HIV positive women with (93.2 %) African Americans.

Methods:
Baseline data were used. The AGAS was examined for internal consistency reliability and content, construct, and criterion validity. Content validity was established by a panel of experts and construct validity using, factor analysis (FA). For criterion-related validity, AGAS scores were correlated (Pearson’s r) with other valid measures of adherence such as Medication Event Monitoring System (MEMS).

Findings:
Internal consistency for AGAS was &.80 (GBL) and &.85 (KHARMA). FA analysis revealed one factor in both samples with factor loadings ranging from .56-.71 (GBL) except one item (24), and .69-.89) (KHARMA) The single factor explained 57.2 % variance in GBL and 64.9% in KHARMA. Higher AGAS scores were associated with better adherence with the MEMS cap ( r = .31, p = .01) and another self report measure (r = .50, p=.01). Clinical indicator data are currently under analysis.

Discussion:
The AGAS is a reliable and valid unidimensional measure of adherence. Easy to administer instruments are important to assess outcomes of clinical interventions to improve adherence.

Research Completed:
Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Abstract ID: 801

Reliability and Validity of the Organizational Climate Questionnaire among Hospital Nurses in Taiwan

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Student Level:
To test psychometric properties of the Chinese LSOCQ (C-LSOCQ) when used on hospital nurses in Taiwan.

What are the reliability and validity of the C-LSOCQ?

Nursing shortage has been a global issue. Organizational climate is an important measure to predict nurses’ intention to leave their current job. The Litwin and Stringer’s Organizational Climate Questionnaire (LSOCQ) has been translated and widely used to measure organizational climate in industrial settings, but not in healthcare settings.

The C-LSOCQ (50 items) was tested with 492 nurses in 8 hospitals in Taiwan. Three nurses’ data were not analyzed due to high missing rate. Of 489 participants, 98.4% were female, 75.5% were younger than 36, 51.6% were single, 48.1% worked within 4 years, and 64% worked in public hospitals. The reliability of the C-LSOCQ was tested with Cronbach’s α; and item-total correlation, whereas factor analysis was used for validity.

Results showed a satisfactory reliability (α=.87). The item-total correlation coefficients were satisfactory (.23-.56) except for 12 items (<.20). Using original C-LSOCQ, 15 factors were emerged and explained 42.18% of the variance of organizational climate. However, 4 factors contained only 1 item. Excluding those 12 items, 11 factors were emerged and explained 42.40% of the variance of organizational climate. These factors were named affective tone toward organization (α=.75, 9 items), policy/authority (α=.71, 6 items), interpersonal milieu (α=.69, 4 items), responsibility (α=.70, 3 items), organizational identity (α=.73, 2 items), openness (α=.58, 2 items), structure/proceeds (α=.64, 3 items), reward (α=.51, 2 items), affective tone toward people (α=.58, 3 items), belonging (α=.48, 3 items), and conflict (1 item). All factors were statistically correlated (r=.13-.52).

Factors emerged in this study were different from those in the original instrument. Different population and cultural background may cause this difference. Items that showed low item-total correlation and other types of validities should be examined further.
Psychometric Properties of the Modified Version of a Worksite Harassment Tool: Preliminary Findings

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Presentation Preference:  SNRS  Student Poster Presentation

Willing To Submit Poster?  Yes

Abstract Categories:  Interest Group: Psychometrics/Instrumentation
                      Thematic Areas: Women's Health

Purpose/Aims:  To examine the psychometric properties of the modified version of a worksite harassment tool including internal consistency and construct validity.

Research Questions/Hypotheses:  Is the modified version of worksite harassment tool a valid and reliable measure of intimate partner violence at the workplace?

Significance:  Intimate partner violence (IPV) is a growing public health problem that exceeds the boundaries of the home. IPV follows women to work resulting in workplace violence. Efforts to develop and revise measures of IPV have not emphasized IPV at the workplace as a separate and unique type of IPV.

Methods:  A cross-sectional design using quantitative method was used to collect data from 180 long-haul female drivers. Principal components analysis was used to investigate the tool’s dimensionality. Cronbach’s alpha was used to assess internal consistency and construct validity was investigated using correlation analysis.

Findings:  Cronbach’s alpha for the scale was .88. Principal components analysis indicated the presence of two factors; Factor I represented consequences of IPV on a woman’s employment and Factor II represented abuse and bothering tactics inflicted by an intimate partner. Two items were dropped due to poor factor loadings. Cronbach’s alpha for the short version (7-item) was .86 and Cronbach’s alpha for factors I and II were .90 and .77, respectively. Construct validity was established by significant correlations between abuse scores and certain physical and psychological health indicators. Higher abuse scores were associated with poorer health and greater nervousness and stress. The greater the level of abuse the less the women’s feeling of being on top of things and the poorer their ability to sleep well.

Discussion:  The 7-item version of the worksite harassment tool is a valid and reliable measure. It is short, easy to understand, and the reading level is the 7th grade. In addition, it measures two dimensions of IPV and does not interfere with a woman’s time at work.

Research Completed:  Yes

Abstract History:

Financial Disclosure:  Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure:  Cleared: Yes

Non-Exclusive License:  Accepted Terms: Yes

Submitted By:  hmalmo2@email.uky.edu
Use of Cognitive Interviewing in the Development of a Spanish-language Genetic Knowledge Instrument

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Abstract Information

Presentation Preference: 
SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: 
Interest Group: Psychometrics/Instrumentation
Thematic Areas: Chronic illness

Purpose/Aims: 
The purpose is to develop a Spanish-language instrument to measure genetic knowledge relevant to type 2 diabetes. The specific aims of the current study were to 1) use cognitive interviewing to field test items with Latinos of Mexican, Central and South American, and Cuban heritage; and 2) select and refine instrument items that are culturally and linguistically appropriate for use with the ethnically heterogeneous US Latino community.

Research Questions/Hypotheses: 
What are the linguistic and culturally conceptual equivalencies of instrument items developed to measure genetic knowledge relevant to type 2 diabetes across an ethnically heterogeneous sample of US Hispanics?

Significance: 
Genetic advances are significantly impacting healthcare, yet recent studies of ethnic group participation in genetic services demonstrate low rates of utilization by Latinos. Limited genetic knowledge has been a major barrier. The instrument under development will be used in the future to measure knowledge
levels of Latinos as a guide for educational initiatives.

Methods:
Three phases of cognitive interviews were conducted with Latinos of Mexican, Central and South American, and Cuban heritage to field test 44 instrument items. Twelve Latinos, including four persons representative of each cultural group, participated in each phase. Text narratives from transcriptions of audiotaped interviews were qualitatively analyzed to guide item revision at the end of each phase.

Findings:
Seven males and 29 females, aged 22 to 60, participated. Inter-cultural and cross-cultural themes associated with difficulties in item wording and interpretation were identified, guiding item revision in each phase. Six items were deleted, resulting in a 38-item instrument. Of retained items, 89% were revised.

Discussion:
Item revision based on analyses of cognitive interview data resulted in identification of wording understood across cultures and increased clarity in item interpretation. The outcome suggests initial content validity of a Spanish-language instrument to measure genetic knowledge relative to type 2 diabetes. The instrument will be psychometrically tested in the future.

Research Completed: Yes
Abstract History:
Financial Disclosure:
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Yes
FDA Disclosure:
Cleared: Yes
Non-Exclusive License:
Accepted Terms: Yes
Submitted By:
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The Lived Experience of Nurses Providing Care to Victims of the 2005 Hurricanes

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Purpose/Aims:

The magnitude of destruction experienced in the 2005 hurricanes has been a devastating experience. The purpose of this research is to gain a comprehensive understanding of these experiences through the eyes of the nurses providing the care for victims.

Research Questions/Hypotheses:

The study addressed the question, “What were the lived experiences of nurses assisting in the hurricane affected areas of the south eastern United States?"

Significance:

Most research on nurses responses during natural disasters uses survey design, hence limits the depth of understanding of how this experience impacted them. This research can provide insights as to the needs and coping strategies of nurses, which should assist policy makers when formulating plans for future disasters.

Methods:

A phenomenological approach was employed, with a semi structured interview guide utilized to facilitate conversation with the participants relative to their experiences related to providing care during the hurricanes. Permission to conduct the study was obtained from the appropriate Institutional Review Board. The target population included all nurses who provided care during the hurricanes of 2005 in the southeast United States. Nurses who responded via email to advertisements for participants via the Internet (such as state board of nursing websites) and through personal connections were then contacted by phone. Informed consent was obtained. Scheduled interviews were conducted via telephone and tape recorded. The final sample size, will be achieved when saturation is reached.

Findings:

Data analysis is expected to be completed by August, 2007. Analyses will follow van Kamm’s methodology. From this analytic method, themes will come forth and a hypothetical definition of the phenomenon will evolve.

Discussion:

Understanding the experience of these nurses from their perspective should provide an in-depth, meaningful contribution to our knowledge regarding disasters and their impact on the nurses who are care providers.

Research Completed:

Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

Grants/Research Support: Y

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FDA Disclosure:

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Non-Exclusive License:

Accepted Terms: Yes

Submitted By:

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Laughing: A Parse Research Study

Abstract Information

Presentation Preference: SNRS Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Qualitative
Thematic Areas: Basic science
Purpose/Aims: The purposes of this study were to discover the structure of the lived experience of laughing, add to the body of knowledge on laughing, and expand the theory of human becoming.
Research Questions/Hypotheses: The research question was: What is the structure of the lived experience of laughing?
Significance: Laughing is a universal experience of health and quality of life, inherent in being human. New information will expand the knowledge base for further investigation on laughing, enhance understanding of laughing related to persons’ perspectives of health and quality of life, foster new ways of interrelating with persons, and explicate unique ways of becoming related to laughing.
Methods: The human becoming school of thought was the theoretical perspective and the Parse research method was the method used to conduct the study.

Findings:
The central finding of this study was "the lived experience of laughing is invigorating unburdening amid adversity as delightful contentment arises with affable alliances."

Discussion:

These findings substantiate that laughing is a human experience of health and quality of life. Laughing was described as liberating fortification of pushing-resisting while moving onward with the shifting familiar-unfamiliar. Laughing was important for facing fears and moving on through difficult, painful conditions. Participants described the jubilant plenitude as they explicitly recognized the personal meaning of laughing, while abiding with diverse situations. Simultaneously, participants expressed the rhythmical patterns of relating with and apart from others all-at-once. This connecting-separating was described with both close friends and new acquaintances. Laughing as invigorating unburdening amid adversity, as delightful contentment arises with affable alliances was their way of incarnating their becoming as quality of life. Participants invented new ways of becoming while living the patterns of powering transforming in the imaging of connecting-separating. Laughing, a universal lived experience, was an incarnation of chosen value priorities, signifying the importance of laughing for health and quality of life.

Research Completed: Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

Submitted By:
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The VIN Journey: The trajectory and it’s influences

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Purpose/Aims: The purpose of this study was to explore women’s experiences with vulvar intraepithelial neoplasia (VIN) from disease recognition through post-treatment.

Research Questions/Hypotheses: Our research questions were: (1) what are women’s experiences recognizing and receiving treatment for VIN and (2) what are the influences on women’s disease experience.

Significance: In the last decade, the incidence of VIN, a precancerous condition of the vulva, has doubled for women of all ages and tripled in women younger than 50. Standard treatment for VIN is excision, which commonly causes interruption of normal vulvar structures. There is a lack of research on the experiences of women with VIN.

Methods: A convenience sample of women at a local urban cancer center was recruited for participation in one of 2 focus groups. Questions focused on experiences they had from first recognizing a problem through treatment and its’ effects, including effects on quality of life, sexual functioning, body image, and well-being. Focus groups were audi-taped, transcribed verbatim, and independently analyzed by two researchers for themes regarding participants’ experiences. Limitations include only Caucasian participants recruited from one site.

Findings: Six Caucasian women (age 22-72 years) participated. Time from vulvar excision ranged from 1 month to over 20 years. Participants’ experiences from initial recognition through post-treatment changes took a circular trajectory with all experiencing recurrent disease. People were the main influences on this journey. Spirituality and attitude influenced how participants responded to and interacted with others. The main positive influence for women was significant others. Health care providers were primary negative influences, but they were sometimes positive influences.

Discussion: Understanding women’s experiences may help healthcare providers better appreciate the social context of women with VIN who have undergone a vulvar excision and help providers be more sensitive and creative in approaching healthcare of these women. A prospective study evaluating these challenges is currently underway.
Empowerment in School Nursing Practice: A Grounded Theory Approach

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Abstract Information
Presentation Preference:
SNRS Poster Presentation

Willing To Submit Poster?
No

Abstract Categories:
Interest Group: Qualitative
Thematic Areas: Workforce Issues

Purpose/Aims:
The purpose of this presentation is to describe a grounded theory study on professional empowerment experienced by school nurses.

Research Questions/Hypotheses:
1. What is the process of empowerment in school nursing practice? 2. What are the factors, as well as the personal and professional characteristics, that impact this process?

Significance:
Nurses practicing in the school setting are often supervised by non nurses, and are providing care in an environment in which health is not the priority. Many school nurses experience frustration and powerlessness within their professional practice. This study was designed to describe the empowerment process using an inductive approach in order to gain a better understanding of the factors that impact this process.

Methods:
An eclectic approach using methods described by Glaser, as well as Strauss and
Corbin, was used in the study. The constant comparison method of data analysis revealed codes, categories, and constructs, as well as the identification of a basic social process which comprised a situation-specific theory describing professional empowerment in school nursing practice.

Findings:
Findings resulted in the development of a situation specific theory of school nurse empowerment: Making a Difference: The School Nurse’s Role in the Health of Children in the School Setting. Four theoretical constructs were the basis for the theory: enlisting support, getting through the day, maintaining control over practice, and adjusting to challenges.

Discussion:
School nurses experiences challenges on a daily basis, and must learn to work within a complex system. Despite these obstacles, participants in the study felt an overall sense of empowerment due to their ability to make a difference in the health of the children that they cared for. It was the knowledge at the end of each day that they had had a positive impact on the health of these children that provided them with a sense of value, worth, and power.

Research Completed: Yes

Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
-Details: SNRS, 2006, Poster, National Association of School Nurse Conference, June 2007, Podium

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

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Southern Rural Registered Nurses' Interpretation of Health Literacy

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The purpose of this phenomenological qualitative study was to describe southern rural care registered nurses' interpretation of health literacy.

The guiding questions were: think back and describe to me a time where you learned about health literacy; what does health literacy mean to you; think back and tell me about a patient that you suspected had a problem of understanding healthcare teaching or information.

A registered nurse has an ethical responsibility to provide healthcare information that is understandable and enables a patient to make informed decisions regarding their healthcare. The ability of registered nurses to be aware of and accurately assess a patient’s health literacy status is fundamental.

A phenomenological lens was used to examine the data collected in this study. Interviews were conducted with eight registered nurses in a southern rural acute care setting. Data analysis was conducted according to Moustakas's Van Kaam Method. Trustworthiness was established by data triangulation, member checks, and a clear and detailed methodology that would allow for replication.

Findings from this study revealed that the majority of the southern rural care registered nurses had limited knowledge of health literacy and were not aware of available health literacy assessment tools. Registered nurses thought that health literacy meant: patient teaching and education; patients being informed about their health care; patients performing self care activities; and patient understanding about their diseases and medications. The patients that registered nurses suspected had difficulty understanding healthcare information were: the elderly; patients with multiple health problems such as cardiac diseases, diabetes, pulmonary diseases, and renal diseases; and those with multiple repeating visits to the acute care setting.

Recommendations are as follows: educational programs for practicing registered nurses focusing on health literacy; incorporating health literacy into nursing curriculum. Additional research is needed to examine the health literacy of all southern registered nurses.
Abstract ID: 188

Heuristic Inquiry: Discovering Human Experience

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Abstract Information

Presentation Preference: SNRS Poster Presentation

Willing To Submit Podium?
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Willing To Submit Poster?
Yes
Abstract Categories:

Interest Group: Qualitative
Thematic Areas: Methods

Purpose/Aims: The nature of heuristic inquiry is phenomenological, originating as a process of internal search through which one discovers the nature and meaning of human experience (Moustakas, 1994). The heuristic methodology seeks to discover the heart and depths of a person’s experience – portraying events and relationships, thoughts and feelings, values and beliefs – recreating the lived experience from the frame of reference of the experiencing person (Moustakas, 1990).

Research Questions/Hypotheses: While qualitative methodology is gaining in scientific importance, few nursing studies are published that represent the heuristic mode of inquiry.

Significance: The heuristic research method is different from other qualitative methods that guide human science research. It begins with the self-searching of the researcher, a reflective and passionate awareness of and personal experience with the phenomenon of interest.

Methods:
There are six steps to the process: initial engagement, immersion, incubation, illumination, explication, and creative synthesis. In addition, heuristic inquiry is not limited to first-person narratives, but may also include a collection of stories, poems, personal diaries, music, artwork, and other personal documents that depict personal experience.

**Findings:**

The presenter will discuss each step of the process, using examples from completed research on the experience of the act of praying. Furthermore, the presenter will demonstrate the use of imagination and insight in assembling an aesthetic rendition of the themes and essential meanings of the phenomenon through poetry and music.

**Discussion:**

The purpose of this presentation is to discuss how heuristic inquiry is a valid methodology for nursing research which allows the researcher to become intimately and autobiographically related to the research question, ultimately creating an atmosphere of connection and engagement that inspires participants to express, explore, and explicate the meanings that are within their experience.

**Research Completed:**

Yes

**Abstract History:**

**Financial Disclosure:**

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**FDA Disclosure:**

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**Non-Exclusive License:**

Accepted Terms: Yes

**Submitted By:**

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A Formative Study of Decision Making Patterns of Physically Active Older Mexican American Women

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Abstract Information

Presentation Preference:
SNRS Poster Presentation
Willing To Submit Poster?
Yes
Abstract Categories:
Interest Group: Qualitative
Thematic Areas: Women's Health
Purpose/Aims:
The specific aim is to enhance our understanding of how cultural attitudes, beliefs, and values form and shape decisions about physical activity (PA) behavior in older physically active Mexican-American women residing in an urban barrio.

Research Questions/Hypotheses:
What is the sociocultural context that mediates the decision to initiate and maintain physical activity in the lives of a sample of physically active older Mexican-American women residing in an urban barrio in the Southwest United States?

Significance:
Despite evidence that structured, theory-informed interventions can have a positive effect on promoting PA and may even succeed in promoting long-lasting effects, most interventions have samples that were overwhelmingly highly educated and non-Hispanic White. Relatively few research studies have focused on the adoption and maintenance of PA in low-income, older, Mexican American women. My prior formative work with a sample of physically inactive older Mexican American
women suggested that their sociocultural context, specifically the cultural theme of the “being there aspect of caregiving” may mediate their decisions to initiate and maintain a physically active lifestyle. Expanding my qualitative formative work of the sociocultural context, patterns, and process of physically active, low income older Mexican American women living in an urban barrio would examine the sociocultural influences that they use to maintain their behavior relative to PA. In particular relative to whether “being with aspect of caring” remains a cultural theme and, if so, how these women maintain physical activity as a life choice.

Methods:
I will apply quantitative and qualitative data to map and draw conclusions about this group of women’s decision making sociocultural context as it relates to their participation in PA. This will include life history interviews and acculturation, physical activity, and social class measures.

Findings:
To be determined

Discussion:
The sociocultural context appears to place high value on resourcefulness and problem solving in the maintenance of physical activity.

Research Completed:
Yes

Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
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Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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Abstract ID: 223

Conducting Qualitative Research in Online Environments

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Abstract  Information

Presentation Preference: SNRS  Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Qualitative
Thematic Areas: Methods

Purpose/Aims: The purpose of the study was to describe nurse faculty development or training prior to, during, and after teaching their first course online and perceived level of preparedness to teach online.

Research Questions/Hypotheses: How do nurse faculty members describe development or training prior to, during, and after teaching their first course online? How do nurse faculty members describe their perceived level of preparedness to teach online?

Significance: Understanding the needs for faculty development specific to online teaching is important in a time where there are faculty shortages, large projections for faculty retirements, and transitions to new faculty expected to teach using online environments.

Methods: Descriptive phenomenology was the qualitative tradition selected to explore the lived experience of nurse faculty. Criteria was that nurse faculty must have taught a minimum of 1 course online during the last three academic years while employed fulltime with teaching responsibilities in an academic setting. A commercial online research system was used to engage participants electronically while maintaining confidentiality. The first interaction was to gain participant consent and gather general information, a second interaction included completion of open-ended qualitative questions, and the third interaction was a clarifying engagement to insure the researcher understood and interpreted participant meaning. Thus three iterations completed the initial data gathering process.

Findings: The responses were aggregated with other respondents and formulated meanings extracted. The formulated meanings extracted will be returned to all participants for collective review and validation, again using the Zoomerang system while keeping the data anonymous. Participants will have an opportunity to respond to the formulated meanings with clarifying comments and then return them to the researcher for further analysis into thematic clusters across all participant responses.

Discussion: Use of commercial online systems for collection of qualitative data is a cost effective and effective means of conducting research. The plan of research must be thought out in advance.

Research Completed: Yes

Abstract History: -This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

Submitted By: greera@ecu.edu
Abstract ID: 234

The End-of-Life Period (EOLP) in the Newborn Intensive Care Unit (NICU)

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Abstract Information
Presentation Preference:
SNRS Podium Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Qualitative
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims:
The purpose of this study was to characterize the structure and elements of the NICU EOLP.

Research Questions/Hypotheses:
Using the EOL experiences of parents, nurses and physicians in the NICU, what are the elements of the EOLP?

Significance:
The EOLP describes the time between the decision to withdraw further aggressive treatment and death, when interactions between healthcare providers and parents are highly influential. To date, no studies which have defined and characterized the EOLP. In doing so, important elements of this period can be identified, which may help create synergy for past research as well as provide direction for future research.

Methods:
A hermeneutic phenomenology approach was used. The experiences of parents whose infants had died in the NICU and the nurses and physicians who provided EOL
care for those infants were obtained through semi-structured interviews. Physicians and nurses were interviewed shortly after an infant’s death. Parents were interviewed 6-9 weeks after the death. Data were collected according to our Human Investigation Committee approved protocol and after obtaining informed consent. Trustworthiness was established through data triangulation and use of an independent coder. The data were analyzed by participant type (nurse, physician, or parent) using a hermeneutic circle approach.

Findings:
During the study period, 21 infants died. Eleven physicians, 21 nurses and 8 parents were interviewed. Themes from participant experiences were ultimately categorized into two distinct phases including preparation, and withdrawal/death. Identified elements included describing the dying process to parents, creating a peaceful scene, being present with the family, and creating memories.

Discussion:
Each participant group contributed unique elements to the EOLP. For instance, nurses described creating memories as a critical element, physicians described autopsy and communicating with parents as important elements, and parents described trust and healthcare provider presence as helpful. Each group’s experiences were necessary in order to more fully understand the structural elements of the EOLP.

Research Completed: Yes

Abstract History: Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

Copyright: copyright currently in process

Submitted By: meg4u@virginia.edu
Abstract ID: 261

The Experience of Pediatric Registered Nurses Caring for Children

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Abstract Information
Presentation Preference: SNRS Poster Presentation
Abstract Categories:
Interest Group: Qualitative
Thematic Areas: Workforce Issues
Purpose/Aims:
Purpose of the study: to describe the experience of registered nurses providing general medical or surgical health care to the child or adolescent diagnosed with a mental health disorder (DSM IV).

Research Questions/Hypotheses:
What is the experience of registered nurses providing general medical or surgical health care to the child or adolescent diagnosed with a mental health disorder (DSM IV).

Significance:
There is very little published research regarding nurses’ attitudes toward having persons with mental health disorders admitted to general hospitals for care of a medical-surgical problem. The research that has been done was conducted primarily in England and South Africa and involves adult care units. The nurses’ perception of these patients were negative. These factors led the nurses to avoid the patients, thus effectively segregating the mentally ill. Only one study (Ramritu et al., 2002 conducted in Australia) addressed the experiences of the generalist nurse caring for adolescents. Sixty-seven percent (n = 30) of the nurses interviewed “felt inadequately prepared to deal with this group” (p. 229). Although no studies conducted in the United States were found during
the review of literature, it is not unreasonable to propose that the findings would be similar.

Methods:
The descriptive phenomenological study will be conducted in the Husserlian methodological tradition as interpreted by Pollio and Thomas (2002). The interview is an individual, in-depth, non-directive interview. The interviewer asks participants to describe the experience of caring for children with mental health disorders in a general pediatric hospital or emergency room setting. An interdisciplinary phenomenology group consisting of faculty and students that meets weekly in the College of Nursing will be used for data analysis.

Findings:
Transcripts of the interviews will be analyzed to identify common themes describing the nurses’ experience.

Discussion:
Findings will assist in identifying both basic and continuing education needs of registered nurses involved in providing care.

Research Completed: Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

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Double Secret Probation: Nurse Managers’ Control of Nurses’ Error Data

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Abstract Information

Presentation Preference: SNRS Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Qualitative
Thematic Areas: Health System

Purpose/Aims: This research examines how nurse managers cope with the conflicting demands of using errors to maintain professional accountability and promote learning.

Research Questions/Hypotheses: Our research question was how managers use double bookkeeping to cope with competing demands for use of error data.

Significance: Nursing managers control filing and use of error data, yet their perspectives have not been systematically studied.

Methods: Data were generated from a longitudinal qualitative study of 3 tertiary care teaching hospitals that examined how hospitals learn from their experience to improve medication safety. We used a semi-structured interview protocol, with audiotaped interviews lasting from 30 minutes to >12 hours (average = 60 minutes), interviewing a total of 29 nurse managers across the 3 hospitals. We conducted thematic analysis; 2 researchers coded the data and a third evaluated the coding. Although a small sample, managers demonstrated consistency in using error data and double bookkeeping.

Findings: Managers kept a formal file and simultaneously maintained a second informal, secret file to record all a nurse’s mistakes. Their idiosyncratic guidelines determined which errors “counted” for documentation in which file, taking into account the perceived severity of the error and potential mitigating circumstances. Managers described conflicts in determining whether to document in the nurse’s official file. Informally, recording errors and warnings in a secret file helped them maintain a record of less significant infractions. Recording all warnings in a nurse’s formal file was described as hazardous because: nurses could be discouraged from reporting important, potentially dangerous errors and the file could undermine the nurse’s professional reputation and misrepresent a history of errors should the nurse at some time be reported to a Review Committee.

Discussion: Simultaneously using the same information for maintaining accountability and learning is a critical tension constraining managers’ efforts to promote patient safety. It is important to understand secretive controls of error data.

Research Completed: Yes

Abstract History:

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

Grants/Research Support: Y
AHRQ
Consultant:
Stock/Shareholder:
Speaker's Bureau:
Other Financial or Material Support:

FDA Disclosure: Cleared: Yes

Non-Exclusive License:
Abstract ID: 340

Community-Based Participatory Research: Engaging Communities and Academicians in Research Partnerships

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Abstract Information
Presentation Preference:
SNRS Symposium
Willing To Submit Podium?
Yes
Willing To Submit Poster?
No
Abstract Categories:
Interest Group: Qualitative
Thematic Areas: Methods
Purpose/Aims:
The purpose of the study was to generate preliminary knowledge of the impact of childhood abuse on women’s lives and their health care using a participatory method.

Research Questions/Hypotheses:
1. What are the factors and forces influencing life patterns and transitions for women survivors of childhood abuse? 2. What are the key issues and concerns regarding health care delivery affecting women survivors of childhood abuse? 3. What are the best focus group research protocols that are sensitive to women survivors of childhood abuse?

Significance:
The study incorporated participatory mechanisms to enhance the role of women survivors of childhood abuse in the design of a woman survivor-centered inquiry. It also provided information about creating research methods that are sensitive
to the needs of women survivors of child abuse.

Methods:

Two phases of a community participatory research design were employed. The first created a research group (8 women survivors, 3 research assistants, and researcher) that developed focus group protocol and recruitment materials for targeted populations. In the second phase, focus groups with women survivors of childhood abuse were conducted and data analyzed.

Findings:

The focus group data revealed insights into the ways in which being abused as a child influenced the lives of women as well as key health care issues and concerns. Active participation of women survivors yielded critical information about research protocol sensitivity.

Discussion:

Community participatory research is an important strategy to incorporate the voices of women who are abused as children into meaningful understandings of their lives and health care concerns. While active participation of these women creates challenges for conducting research, these are the quality of the data generated by such efforts has great potential for more emancipating interventions.

Research Completed:

Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

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Abstract ID: 345

Community-Based Participatory Research: Engaging Communities and Academicians in Research Partnerships

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The purpose of this symposium is to describe benefits and challenges of community-based participatory research.

What are the benefits and challenges of community-based participatory research (CBPR) approaches? What are some examples of how these approaches have been used with groups of marginalized women?

Community-based participatory research, with its roots in action research, empowerment, critical theory, and constructivism, is not a method but “an orientation to research” (Minkler & Wallerstein, 2003, p. 4). Israel, Shultz, Parker, and Becker (1998) define CBPR as “a collaborative approach to research that equitably involves, for example, community members, organizational representatives, and researchers in all aspects of the research process. The partners contribute ‘unique strengths and shared responsibilities’ to enhance understanding of a given phenomenon and the social and cultural dynamics of the community, and integrate the knowledge gained with action to improve the health and wellbeing of community members” (p. 177). Community-based participatory research challenges “both positivist notions of knowledge and traditional top-down processes of academia” (Minkler, 2006, p. 29).

In this symposium, we will present studies that used three different versions of community-based participatory inquiry. One paper will report a study which used participatory inquiry with women survivors of child abuse; a second paper will describe a peer-research/participatory action method that was used to study HIV prevention behaviors in lesbian and bisexual women; and a third paper will describe a community-based participatory research study of mental health needs of Spanish-speaking Latina women.

The advantages of CBPR are “the development of more pertinent research questions, user-friendly instruments, acceptable interventions, thorough data analysis, and effective dissemination strategies” (White, Suchowierska, & Campbell, 2004, p. S3).

Symposium objectives: 1) describe benefits and challenges of CBPR approaches to research 2) describe three successful research partnerships in studies with marginalized women.

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes
Hepatitis C Psychosocially: Ingonorance is Not Bliss

Abstract Information

Presentation Preference: SNRS Poster Presentation

Abstract Categories: Interest Group: Qualitative
Thematic Areas: Chronic illness

Purpose/Aims: Advanced Practice Nurses and clinicians need to explore the psychosocial factors affecting clients infected with HCV relating to Self-care and health seeking behaviors.

Research Questions/Hypotheses: HCV clients experience negative psychosocial factors and are stigmatized against by society, which may influence their selfcare actions and health seeking behaviors.

Significance: Hepatitis C (HCV) is an epidemic; more than 4.5 million people are infected in the US. HCV is a pandemic throughout the world, unfortunately these numbers are increasing daily.

Methods: qualitative pilot study, consisting of 20 participants diagnosed with HCV in the southeastern region of the US. participants completed the Barker Hepatitis C Awareness Questionnaire and participated in focus group discussion sessions.
HCV clients had negative feelings and experiences; common themes includes death, guilt, fear, alienation, depression, sadness, anxiety, and delayed health seeking behavior and self-care deficit related to lack of disease process knowledge.

Discussion:
Being diagnosed with HCV is a life changing event. Research needs to focus on ways to decrease the negative impact this disease has on client's quality of life. HCV clients face emotional struggles, but these emotional factors can be minimized through support and education efforts instituted by caring and knowledgeable clinicians, thus facilitating positive outcomes both psychosocially and physically when dealing with clients diagnosed with chronic Hepatitis C.

Research Completed: Yes
Abstract History:
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
FDA Disclosure: Yes
Non-Exclusive License: Cleared: Yes
Accepted Terms: Yes
Submitted By: melinda.barker@hamptonu.edu
Abstract ID: 359

ISSUES OF CONDUCTING QUALITATIVE RESEARCH WITH PERSONS WITH DEMENTIA

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SNRS member? Yes
Student Level:

Abstract Information
Presentation Preference:
SNRS Poster Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Qualitative
Thematic Areas: Methods

Purpose/Aims:
The purpose of this paper is to discuss the issues concerning consent/assent, communication challenges, and trustworthiness of data when conducting a qualitative study of persons with dementia.

Research Questions/Hypotheses:
1. How is capacity determined for consent/assent of research with cognitively impaired persons? 2. What are the obstacles in qualitative interviews with persons with dementia? 3. How does a researcher ensure trustworthiness of a study with persons with dementia?

Significance:
Little is known about the impact of living with Alzheimer’s or how persons cope with their cognitive impairment. Consequently, there is a growing interest in conducting qualitative studies to capture the perspective of persons with dementia. However, conducting qualitative research with individuals who have dementia presents unique challenges. Literature lacks descriptions of these challenges or suggestions to overcome the.

Methods:
This researcher shares personal experience of the challenges faced and the lessons learned while conducting a qualitative study of 15 persons with early stage Alzheimer’s disease.

Findings:
Determining capacity is a key component of the consent/assent process. Understanding communication challenges due to dementia is important to develop effective communication strategies, such as simplifying the structure of questions, allowing ample time for participant’s response, using reminiscence, and redirecting the dialogue. Qualitative research literature that suggest guidelines to ensure trustworthiness of data are feasible in application of Alzheimer’s research.

Discussion:
Qualitative research can capture the meaningful experiences and life values of persons with dementia not reported in quantitative studies. Addressing issues of consent/assent, communication challenges and trustworthiness will ensure future studies’ contributions to the body of knowledge about Alzheimer’s.

Research Completed: Yes
Abstract History: Yes
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
Submitted By: beuscherlindam@uams.edu
Abstract ID: 368

Becoming Tied: A Theory of Adolescent Maternal-Infant Interaction

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Abstract Information
Presentation Preference:
SNRS Podium Presentation

Willing To Submit Poster?
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Abstract Categories:
Interest Group: Qualitative
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims:
The purpose of this Grounded Theory study was to describe the interaction that occurs between adolescent mothers and their newborns while situated together in the immediate postpartum period.

Research Questions/Hypotheses:
1. What are the interactive processes that occur between adolescent mothers and their newborns while situated together in the immediate post partum period? 2. What categories emerge from the adolescent's descriptions of the mother infant situation? 3. How do the emergent categories relate?

Significance:
This study attempted to fill in gaps in the nursing literature by using a method not previously employed, to develop a theory explicating the process(es) of interaction between adolescent mothers and their infants.

Methods:
Ten primiparous adolescent mothers age 17 years or less were purposively sampled to participate in this qualitative Grounded Theory study. Face-to-face interviews
Findings:
The adolescent mothers described a distinct process that begins at the moment of birth and encompassed them forming a relationship with their newborn, recognizing self-change based on that relationship, and moving forward with their baby as the central component of their life. Three core concepts, "Connecting Together," "Taking Baby into the Inner Being," and "Embarking Together," centered around the core category "Connecting Together," emerged from the rich descriptions provided by the participants to represent the theory "Becoming Tied."

Discussion:
The findings in this study are both congruent and incongruent with findings from previous nursing research pertaining to adolescent maternal-infant interaction and maternal role attainment. The theory "Becoming Tied" provides a new lens through which to view the process of how adolescent mothers and their newborns relate in the immediate postpartum period.

Research Completed: Yes
Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes
Non-Exclusive License:
Accepted Terms: Yes

Copyright: in process
Submitted By:
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Abstract ID: 370

The Cultural Impact on the Health Practices of Women with HIV/AIDS

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SNRS member? Yes
Student Level:

Abstract Information

Presentation Preference:
SNRS   Poster Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Qualitative
Thematic Areas: Women’s Health

Purpose/Aims:
The purpose of this research is to examine the cultural impact on health practices of women with HIV/AIDS.

Research Questions/Hypotheses:
What is the impact of culture on the health care practices of African American and European American women with HIV/AIDS?

Significance:
In providing health care to women with HIV/AIDS, cultural differences must be addressed to ensure their health care needs are met.

Methods:
Ethnographic methods such as in-depth interviews and participant observation were used to determine health care practices of women with HIV/AIDS.

Findings:
Differences in medication use and adherence, health care provider interactions, diet practices, disclosure, and existential meanings were identified.

Discussion:
The findings from this study should guide nurses in their actions and decisions in providing appropriate cultural care to women with HIV/AIDS.

Research Completed: Yes

Abstract History: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Financial Disclosure: Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

Submitted By: rcarr@uscupstate.edu
Multidisciplinary Method for the Identification of Racial Variations in Accounts of Diabetes Control

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SNRS member? Yes
Student Level:

Abstract Information
Presentation Preference:  SNRS  Poster Presentation
Abstract Categories:  Interest Group: Qualitative
                      Thematic Areas: Health Disparities
Purpose/Aims :  To identify predictors and correlates of glycemic control in patient communication for use in intervention development for translational research.
Research Questions/Hypotheses :
  What patterns and predictors of behavior are found in patient-generated accounts of living with diabetes when comparing Black and White patients with Type 2 diabetes who map their experience?
Significance :
Systematic review of diabetes self-management RCTs reveals persistent gaps in previous interventions, attributed to a lack of information about the social, cultural, and behavioral predictors and correlates of glycemic control. This qualitative study applies sociolinguistic methods in health service research to produce two types of accounts of diabetes experience. First, the interpersonal process of care can be depicted from the patient’s perspective in ways that can categorize self management behaviors (per AADE Self-Care Guidelines). Secondly, discourse evidence can categorize underlying agency, social positioning, decision making capacity, certainty, and emotions involved in living with diabetes.

Methods :
This qualitative discourse study will generate digital recordings of 10 Black persons and 10 White persons with Type 2 diabetes discussing their experiences with health services and diabetes self-management. Racially concordant interviewers will use cognitive mapping techniques as elicitation devices to assist participants to diagram and discuss the geographic, temporal, and social network landmarks of living with diabetes. Based on the theoretical framework of social ecology and adaptation of the chronic care model, the interview approach produces patient-driven agendas and accounts. Narrative process coding and stance analysis is applied to resulting transcriptions to identify similarities and differences in patterns of expectations, intentions, perceived motives, and cultural models based on discourse practices.

Findings:
Stance analysis produces evidence of strength of patterns to be sorted for subsequent intervention development in nursing communication research that target disparities in the interpersonal process of care.

Discussion:
Comparisons of patterns by race will generate hypotheses for testing and areas for tailored interventions to improve diabetes self-management and eliminate diabetes.

Research Completed: Yes
Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
FDA Disclosure:
Cleared: Yes
Non-Exclusive License:
Accepted Terms: Yes
Submitted By: popec@musc.edu
Abstract ID: 531

Depressive Symptoms in Patients with Heart Failure

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Student Level:
Abstract Information

Presentation Preference:  
SNRS Student Poster Presentation

Willing To Submit Poster?  
Yes

Abstract Categories:  
Interest Group: Qualitative  
Thematic Areas: Chronic illness

Purpose/Aims :  
To describe the experience of living with depressive symptoms in patients with heart failure (HF).

Research Questions/Hypotheses :  
How do persons with HF describe their depressive symptoms? What strategies do they use to reduce depressive symptoms?

Significance :  
Heart failure is a chronic syndrome that affects 5 million people in the United States. Depressive symptoms adversely impact survival and health-related quality of life in patients with HF. Researchers have not described the experience of living with depressive symptoms from the patient’s perspective.

Methods :  

This study used a qualitative descriptive design. Ten outpatients with chronic HF (NYHA Class II-IV) participating in a clinical trial of biofeedback and cognitive therapy were invited to participate in a one-time, in-depth interview. Patients were included if they were able to discuss depressive symptoms and had a score $\geq 13$ on the Beck Depression Inventory. Purposeful sampling ensured equal numbers of men and women and equal representation from the intervention and control groups. Taped, semi-structured, 30-60 minute interviews were conducted in the participants’ homes. Examples of questions asked to elicit depressive symptoms are: “Tell me about a recent stressful situation,” and “What warning signs let you know that you are about to feel depressed?” All data have been transcribed verbatim and verified for accuracy. Content analysis is ongoing using ATLAS ti (v.5). Trustworthiness will be established by presenting findings to several participants.

Findings:

Preliminary findings indicate that depressive symptoms varied among individuals; however, negative thinking was present in all participants. The participants described multiple stressors—financial, social, and health problems—that impacted depressive symptoms. The participants suggested exercise, spirituality, “staying busy,” and positive thinking as strategies for reducing depressive symptoms.

Discussion:

The positive strategies described may provide direction for the development of interventions to address negative thinking and stressors for persons with HF who are experiencing depressive symptoms.

Research Completed: Yes

Abstract History: Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

Submitted By: rdekker@uky.edu
Abstract ID: 565
An Ethnographic Pilot Study of the Meanings of Breast Cancer Screening and Detection among African American Women

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SNRS member? Yes
Student Level: Doctoral

Abstract Information
Presentation Preference:
SNRS  Student Poster Presentation
Willing To Submit Poster?
Yes
Abstract Categories:
Interest Group: Qualitative
Thematic Areas: Health Disparities
Purpose/Aims :
To explore and describe the meanings and significance that African American women ascribe to screening and early detection for breast cancer
Research Questions/Hypotheses :
1. What are African American women's beliefs about screening and early detection for breast cancer?
Significance :
An estimated 178, 480 new cases of breast cancer will occur in 2007 and 40,000 will die. African American women have a lower incidence of breast cancer than Caucasian women but the mortality rate for this group of women is higher. African American women are more often diagnosed at a later stage of disease. Various factors have been investigated as to the reasons for this late diagnosis, however, there are no qualitative research to elicit and understand the African American woman's subjective views about breast cancer early detection and screening

Methods :
An ethnographic pilot study will be used to answer the research question posed in this study.

Findings:

incomplete

Discussion:

Ethnographic research may enable us to effectively evaluate phenomenon related to health beliefs and practices of African American women. We should be able to determine themes and develop variables and methodology for interventions aimed at reducing the burden of mortality from breast cancer in African American women.

Research Completed: Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:

Non-Exclusive License:

Accepted Terms: Yes

Submitted By:

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Abstract ID: 566

The Special Heart: Southern Rural Women's Explanatory Models of Cardiovascular Disease

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SNRS member? Yes
Student Level: Doctoral

Abstract Information
Presentation Preference: SNRS Student Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Qualitative
Thematic Areas: Women's Health
Purpose/Aims:
The purpose of this pilot study was to explore the explanatory models (EMs) of cardiovascular disease (CVD) of southern rural black and white women aged 50 and older.
Research Questions/Hypotheses:
What are older southern rural black and white women’s explanatory models of CVD?
Significance:
Cardiovascular disease is the number one killer of older southern rural women with low educational levels and income. Understanding EMs of CVD may help researchers develop tailored CVD prevention interventions.
Methods:
The researcher used Kleinman’s EMs as a sensitizing concept to conduct semi-structured interviews and developed a demographic and CVD risk factor form in this descriptive ethnographic study. The researcher used content analysis and constant comparison to analyze data.
Findings:
The purposive sample consisted of 1 white and 2 black women aged 82, 64, and 57 with at least one self-reported risk factor for CVD, i.e., hypertension, diabetes, etc. Results of this pilot study indicated that these women had similar EMs of CVD, albeit their EMs only partially reflected the medical model of CVD. The data clustered into four factors: 1) Risk factors for/ Causes of heart disease; 2) Prevention; 3) The Heart is Special; and, 4) Lack of understanding/ Desire for information about heart disease. One overarching theme emerged: Making Sense of Heart Disease.

Discussion:

While these women had some understanding of risk factors for CVD, they were unclear on how risk factors affected their risk for developing CVD. Further, they were unsure how preventive actions affected their risks. Studies are needed that examine the nexus between women’s EMs of CVD and their health behaviors. This pilot study provided a beginning understanding of black and white women’s EMs of CVD and laid the groundwork for a future study examining EMs of CVD and the nexus between EMs and health behaviors in southern rural black women.

Research Completed: Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

Submitted By:
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Abstract ID: 572

The ICU Nurses' Experience With Delivering Terminal Care

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Qualitative
Thematic Areas: End of life issues

Purpose/Aims: The purpose of this research is to explore the lived experience of ICU nurses who conduct terminal care in the ICU.

Research Questions/Hypotheses:
What is the lived experience of intensive care nurses who conduct terminal care in an intensive care unit setting?

Significance:
In a retrospective study of all nonfederal hospitals in six states in 1991, one in five Americans died using ICU services. Moreover, recent studies indicate that the majority of these ICU deaths involved withholding or withdrawing life-sustaining treatments. The decision to withhold or withdraw life support increased dramatically from 51% of all ICU deaths in 1987 to 90% in 1993. With the increasing aging population the need for ICU services will only increase.

Methods:
A descriptive phemenological qualitative research design will be used for this study. This descriptive qualitative study will utilize individual interviews and focus groups consisting of ICU registered nurses who deliver terminal care to identify themes within the context of nursing.

Findings:
Colaizzi’s method of data analysis will be utilized for this study. Colaizzi describes seven steps which are the following: read all participant’s descriptions of the phenomenon under study; extract significant statements that pertain directly to the phenomenon; formulate meaning for these significant statements; categorize the formalized meaning into clusters of themes; integrate the findings into an exhaustive description of the phenomenon being studied; validate the exhaustive description by returning to some of the participants to ask them how it compares with their experiences; and incorporate any changes offered by the participants into the final description of the essence of the phenomenon.

Discussion:
The hospice and palliative care nurses typically receive specialized support to cope with death and dying. ICU nurses typically do not receive this support. In order to improve terminal care in the ICU setting we must first understand the experience of the ICU nurse.

Research Completed: No

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

Grants/Research Support: Y
The Methodist Hospital Research Institute
Texas Woman's University

Consultant:
Stock/Shareholder:
Speaker's Bureau:
Other Financial or Material Support:
Abstract ID: 582

A Pilot Study of Sibling Memories about their Relationship after a Childhood Burn Injury

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SNRS member? Yes
Student Level: Doctoral

Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories:
Interest Group: Qualitative
Thematic Areas: Child & Adolescent Health

Purpose/Aims:
The purpose of this pilot study was to understand siblings’ memories of their relationship after a major childhood burn injury and to understand how health care professionals may help.

Research Questions/Hypotheses:
The following research questions will guide this research: 1. How does a major childhood burn injury impact sibling relationships? 2. What healthcare providers behaviors help or harm the sibling relationship?

Significance:
Ninety-nine thousand children younger than 14 years are treated in emergency departments for a burn related injury each year. The sibling of a child receiving a major burn injury must adjust to many changes. The siblings who remain at home deal with the uncertainty of whether their brother or sister will live, while roles within the family are readjusted to meet ongoing needs.

Methods:
Implemented was a qualitative, life history method to obtain the child's perspective...
of their past experience. Verbatim transcriptions were used in within and across cases thematic analysis.

Findings:
The sample consisted of eight sibling pairs. Five of eight sibling pairs described their relationship after the major burn injury as being close. Other themes were embarrassment of their appearance and the importance of being considered normal. Healthcare providers’ behaviors described as helping the healthy sibling were the importance of having open communication, encouraging patience, not being afraid, taking one day at a time, and keeping a close watch on younger children.

Discussion:
Burn survivors and their siblings want to keep their communication open. Nurses at the burn center or at the sibling’s school can facilitate this exchange of information. By identifying sibling or family needs, referrals to interdisciplinary team members are made. A major trauma such as a severe childhood burn injury may alter the way burn survivors and their siblings view their relationship. Healthcare providers could play important roles supporting the sibling relationship for healthy siblings, burn survivors, and their families.

Research Completed: Yes
Abstract History: Yes
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
Submitted By: clehna@shrinenet.org
Abstract ID: 587

Culture Clash: The Biomedical Perspective and Effective Chronic Pain Care

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Abstract Information
Presentation Preference:
SNRS Student Poster Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Qualitative
Thematic Areas: Health Disparities

Purpose/Aims:
To summarize published evidence on the culture of the health care system and how it affects the management of non-malignant chronic pain, and to link this to known racial and ethnic disparities in the healthcare system.

Research Questions/Hypotheses:
What are the key research findings about the ways in which the culture of the health care system affects the treatment of chronic pain patients?

Significance:
Chronic pain is a severe health problem affecting 76.5 million Americans, with cost estimates at $100 billion dollars per year. Identification of factors impacting treatment will facilitate development of more effective interventions.

Methods:
Research published between 1990 and 2007 whose primary aim was to examine the influence of the beliefs, values, or behaviors of providers in the healthcare system and how they affect the management of chronic pain, especially for minority
patients, was reviewed. Databases searched were CINAHL, Medline, Pubmed, PsychInfo, Sociology Abstracts, Cochrane Library Database, Proquest Dissertation and Thesis, and EmBase. Key words used alone and combined with each other were chronic pain, healthcare providers, culture, attitude, beliefs, behaviors, communication, minority, ethnicity, disparities, and medically unexplained symptoms.

Findings:
The biomedical model driving the healthcare system hinders effective chronic pain care. When no observable evidence of pathology is present, patients have difficulty being taken seriously in the system. Pain management education is under-addressed, and societal opioid-phobia and fear of regulatory scrutiny permeates the culture of medicine. Evidence-based guidelines for treatment and medication use are often ignored. When these system problems are added to the known healthcare disparities for minority populations, the problems are intensified.

Discussion:
An expanded research and education agenda for chronic pain which deals with minority healthcare issues and focuses on individual patient factors, as well as healthcare system factors, is desperately needed.

Research Completed: Yes
Abstract History: Yes
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
FDA Disclosure: Yes
Non-Exclusive License: Cleared: Yes
Accepted Terms: Yes
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Abstract ID: 599

Exploring the experience of benefit finding in parents of children with cancer: A grounded theory study

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Abstract Information
Presentation Preference:
SNRS  Student Poster Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Qualitative
Thematic Areas: Family Health

Purpose/Aims :
To explore benefit finding in parents of children with cancer.

Research Questions/Hypotheses :
What is the process by which parents of children with cancer come to find benefit within this experience?

Significance :
The ability of parents to cope with and adapt to the multiple stressors associated with the diagnosis and treatment of cancer in their child affects the child’s and parent’s quality of life. Research often focuses on the negative aspects of stress adaptation but systemic reverberations may be positive and adaptive as well. Research is needed on positive health concepts so that we may develop interventions to support them.

Methods :
Grounded theory method was used to develop a theoretical model that organized and depicted the constructs and structures related to benefit finding. The participants were parents of a child diagnosed with cancer currently in the
maintenance phase of treatment being treated at the pediatric oncology clinic. Data were obtained through interviews, participant observations, documents, field notes, personal journals, and literature reviews. Theoretical sampling was used to gather data and analyzed by the constant comparative analysis method (Glaser and Strauss, 1967).

Findings:
A conceptual model was developed in which “Being a Parent” was the context within which the process of benefit finding occurred. The Basic Psychosocial Problem was “Being Overwhelmed with Fear,” with the fears identified as fear of losing control, fear of the unknown, and fear of losing my child. The Basic Psychosocial Process was “Managing the Fear.” Intervening conditions of support, hope/faith, and knowledge helped them “turn a corner” in their fear management. Benefit finding emerged as both a strategy and a result within this process.

Discussion:
Benefit finding is empowering in that it increases the sense of inner strength and growth that helps one transform the fear. This occurs over time in connection with support, hope, and understanding.

Research Completed: Yes
Abstract History: Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
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The Experience of Mothers of Preterm Infants during the Month after the Infant's Hospital Discharge

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Qualitative
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims: To generate a description and understanding of the lived experience of mothers of preterm infants during the first month after the infant’s hospital discharge.

Research Questions/Hypotheses: What is the lived experience of mothers of preterm infants during the transition from the hospital to home?

Significance: The rate of infants born prematurely has increased from 9.4% of live births to 12.3% over the past decade. Prematurity influences the quality of life of infants and their families, resulting in psychological stress in many cases. The transition from hospital to home may increase the stress and tax the family’s resources as they attempt to adjust to twenty-four hour care of their fragile infant.

Methods: Phenomenology, which is both a philosophy and a methodology, was used to understand the human lived experience of mothers of preterm infants during the early post-discharge period. The sample included 10 mothers who had a preterm infant and were at least 18 years of age. Prior to data collection, IRB approval and informed consents were obtained. The mothers described phenomena they experienced and perceived via an in-depth interview. Interviews were audio taped and transcribed verbatim. Data were analyzed using the Colaizzi method, a seven step process that results in an in-depth description of mothers’ lived experience.

Findings: Preliminary analysis has revealed five themes: social support; conflicting emotions; living with unexpected events; sleep deprivation; and acceptance of mothering responsibilities.

Discussion: Experiences told from the participant’s voice enable health care providers to understand the type of support needed to help prepare mothers for their infant’s hospital discharge. These findings may also lead to interventions that assist mothers in their adjustment during the first few weeks of the transition to home.

Research Completed: Yes

Abstract History:

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

Submitted By: jgriffin2@vcu.edu
Caseworker experiences with foster care youth who are aging out of foster care

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Presentation Preference:          SNRS   Student Poster Presentation

Willing To Submit Poster?        Yes

Abstract Categories:            Interest Group: Qualitative
                                Thematic Areas: Health Disparities

Purpose/Aims:                   The study explored caseworkers' experiences who have worked with children aging out of the foster care system.

Research Questions/Hypotheses:  The research explored factors that impact successful transition for children aging out of foster care. Caseworkers were asked to describe their experiences with a child who had aged out of the foster system including their perceptions of the challenges the child faced, support mechanisms to ease the transition, and perceptions of the needs of children aging out of foster care.

Significance:                   Children who are abused, neglected, or abandoned may be required to enter foster care. Five hundred and fifty thousand children live in foster care each day in the United States. Every year, 20,000 children age out of the system at the age of eighteen and research has demonstrated that they are at great risk for drug addiction, homelessness, underemployment, lack of access to medical care, and incarceration. Support systems for children aging out of the system are important to evaluate in order to develop interventions to improve outcomes of this vulnerable and at risk population.

Methods:                      A qualitative approach was used. Five case workers were interviewed. Audiotapes of the interviews were transcribed and analyzed. Using a hermeneutical approach, themes were identified in the data.

Findings:                     Caseworkers identified educational needs, housing, the need for supportive relationships, financial resources, and ongoing support were needed for these youth. Four major themes emerged from the data analysis: having support, building connections with others, finding inner strength and resilience, losing their way.

Discussion:                   This qualitative study suggests that the needs of children aging out of the foster care system are multi-faceted and will likely require multidisciplinary approaches to address their multiple health and psychosocial issues.

Research Completed:           Yes

Abstract History:             

Financial Disclosure:         Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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FDA Disclosure:               Cleared: Yes

Non-Exclusive License:        Accepted Terms: Yes

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INDEX FIRST PREVIOUS NEXT LAST
Abstract ID: 666

Why Have All The Nurses Gone?

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Student Level:
The purpose of this pilot study was to understand the perceptions of registered nurses (RNs) who no longer practice clinical nursing.

“What are the perceptions of registered nurses who no longer practice clinical nursing?”

Currently, the registered nursing shortage is at an all time high. Although significant scholarly work has been done surrounding nursing attrition and nursing retention, few studies have explored the perceptions of why RNs elect to no longer practice clinically. To truly understand the current nursing shortage, voice must be given to RNs who are no longer practicing so that changes may be made to retain RNs in clinical practice.

A phenomenological design was chosen for this study because of its usefulness in revealing complex, taken for granted phenomena such as the choice about leaving clinical nursing.

Interviews were conducted with ten RNs no longer practicing clinically. Time in clinical practice ranged from 2-15 years. The majority of nurses experienced physical, sexual or verbal abuse in the workplace and perceived this abuse as a norm of being a nurse. Nurses reported feelings of crushing isolation, leading them to believe that no recourse was available to them. This perceived abuse and ensuing feelings caused overwhelming fatigue, anger, and anxiety resulting in the RNs leaving clinical practice.

Further research is required to fully explore specifically why certain populations of clinical RNs perceive abuse to be an accepted part of nursing. Issues related to moral distress, workforce oppression and gender power issues appear to play a role in nursing attrition for certain populations. Administrators, managers and other health care leaders may benefit from fully exploring practices and perceptions of RNs who perceive abuse to be the standard of practice in the clinical setting.

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Yes

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Abstract ID: 696

Decision Making Related to Treatment in Women with Rheumatoid Arthritis

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Abstract Information

Presentation Preference:
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Willing To Submit Poster?
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Abstract Categories:
Interest Group: Qualitative
Thematic Areas: Chronic illness

Purpose/Aims:
The research question to be answered is: How do women with rheumatoid arthritis describe the process used when deciding to participate in an evidence-based treatment regimen?

Research Questions/Hypotheses:
The specific aims of the project are to: 1) develop a grounded theory of decision-making used by women with rheumatoid arthritis; and 2) to examine the socio-demographic variables that affect this decision-making process.

Significance:
Rheumatoid arthritis is the most common disease seen in rheumatology. Seventy-five percent of patients with rheumatoid arthritis are women. Despite great improvements in the medications available to treat rheumatoid arthritis, many individuals choose not to participate in evidence-based treatment. Not available in the literature are studies that describe the decision-making process that rheumatoid arthritis patients use when deciding whether or not to adhere to evidence-based treatment.

Methods:
Semi-structured, individual interviews will be conducted with 30 women recruited using theoretical sampling. Using qualitative methodology, the study will begin with interviews of 10 African-American women. Interviews also will be conducted with 10 females who are 65 years of age or older and 10 women living in a rural setting. To assure adequate description of this process, it is likely that health care providers will be interviewed. All interviews will be audio-taped and transcribed. Accuracy of transcription will be assured prior to coding the data. Coding during the grounded theory analysis will involve a three step process including identifying substantive codes, using constant comparative methods of coding, and collapsing codes into central themes. A grounded theory of decision-making will be developed. The trustworthiness of the data will be addressed using three of the eight verification procedures described by Creswell (1998) and data verification interviews.

Findings:
In a pilot study, two African American women were interviewed. From these interviews, a description of their decision-making process emerged, and a preliminary model was developed.

Discussion:
Data collection is on-going.

Research Completed: No

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

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Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By: egsalt0@uky.edu
"I Wish They Would Have Told Me": Exploring Adolescent Mothers' Perceptions of School-based Sexuality Education

Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Qualitative
Thematic Areas: Child & Adolescent Health

Purpose/Aims: To explore adolescent mothers’ perceptions of school-based sexuality education (SBSE).

Research Questions/Hypotheses: What do adolescent mothers perceive as important about the structure, composition, and presentation of SBSE?

Significance: Despite 800,000 adolescent births per year in the United States, SBSE remains one of the nation’s most controversial issues. Rarely is there a forum for adolescent participation in the debate. When adolescent perspectives are included, they are usually limited to closed-ended surveys, effectively silencing the stories they have to share. Interviewing adolescent mothers could provide the insider perspective through true-to-life examples and meaningful stories about their SBSE experiences.

Methods:
The researcher conducted in-depth interviews for this qualitative feministic research study. The purposive sample consisted of three adolescents between the ages of 15-19 who were pregnant or had birthed a child and self-reported attendance in SBSE. The researcher used content analysis and constant comparison for data analysis.

Findings:
Participants’ stories compared and contrasted the actual content, structure and presentation of SBSE they received with what they desired. All subjects repeated phrases such as “I wish they would have told me” and “They don’t tell you that”. They all shared the same “wish” for more knowledge about the sex act and openness in the classroom. Also resonating, was the frustration of being told to “use protection” without being told how. Of further interest were their accounts of peer influence on sexual decision-making. Two subjects identified “peer pressure” as the primary reason they decided to have sex.

Discussion:
Findings from this study indicate that young mothers can provide healthcare professionals, educators and policy makers with insight into the strengths and weaknesses of current SBSE programs. Additional research examining the impact of peer and parental influence on adolescent sexual decision-making could prove beneficial to the development of SBSE programs.

Research Completed: Yes
Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
-Details: Sigma Theta Tau International, Baltimore, Maryland, November 2007
Financial Disclosure:
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Multiple Sclerosis and Marriage: Caregiver Strain and its Effect on the Marital Relationship

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Abstract Categories:
Interest Group: Qualitative
Thematic Areas: Chronic illness
Purpose/Aims:
The purpose of this study was to assess levels of independence and caregiver strain in multiple sclerosis (MS) and the effect strain may have on the marital relationship.

Research Questions/Hypotheses:
What are the strain levels of caregivers caring for a spouse with MS? Are strain levels typically higher for male caregivers or for female caregivers caring for a spouse with MS? Is there a relationship between caregiver strain and degree of dependence of recipient? What effect does caregiver strain have on the marital relationship?

Significance:
MS is a common neurodegenerative disorder affecting young adults today. Manifestations vary from extremity numbness to complete functional loss. MS is a chronic disorder requiring assistance in self-care, and often spouses must expand their role as husband or wife to include that of caregiver. This role shift contributes to strain and stressors on the marital relationship experienced by spouses who now must care for their partners.

Methods:
This IRB approved, descriptive, correlation study utilized the Modified Barthel Index, ADL Self-Care Scale for Persons with Multiple Sclerosis, and Caregiver Strain Index. Participants were recruited from a MS clinic, a local support group and internet posts.

Findings:
Average dependence among care recipients was found to be mild, while average level of strain among caregivers was moderate with 38% reporting high strain. Care recipients expressed concerns about fatigue/inability affecting participation in activities with their spouse and change in libido interfering with sexual intimacy. Caregivers noted more responsibilities since spouse’s MS diagnosis.

Discussion:
MS had both positive and negative effects on the marital relationship. Nursing interventions should focus on ways to help couples improve their sexual intimacy and to help them adjust their activities conserve energy and minimize fatigue. Nurses may act as communication facilitators to help couples discuss difficult issues before they develop into problems.

Research Completed:
Yes

Abstract History:
Financial Disclosure:
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Yes

FDA Disclosure:
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Submitted By:
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The Lived Experiences of the Spouses of Transplant Recipients: A Pilot Study

Abstract Information

Presentation Preference: SNRS Student Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Qualitative
Thematic Areas: Family Health
Purpose/Aims: Studies have been with transplant recipient experiences, although there is a paucity in the literature regarding the spouses' experiences. Caregiver burden is now being reported with this group. The purpose is to explore the lived experiences of these caregivers.

Research Questions/Hypotheses: "What is the lived experience of moving through the transplant experience as the spouses of a transplant recipient?"

Significance: To increase awareness for nurses of the issues surrounding this informal caregiver group in order to address their specific needs and implement interventions on their behalf.

Methods: Individual 30-60 minute audio-taped interviews with three participants. Interviews were transcribed by the research to ensure accuracy. Coding was done and themes identified.

Findings:
The preliminary findings revealed the feelings of the spouses of liver and kidney transplant recipients were similar. Themes were vulnerability, fear, stress, coping, hope, and relief.

Discussion:
The early results support the need for continued research in the area of spousal and informal caregiver experiences. The themes discovered were not unlike those experienced by the recipients or informal caregivers of persons with other medical issues such as Alzheimer's, cancer, or cardiac disease. This study leads itself to better understanding the experiences of informal caregivers. This area is one in which nurses must increase their awareness in order to implement interventions to aid informal caregivers moving through this experience.

Research Completed: No
Abstract History:
- This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
- Details: 2006 NATCO annual meeting
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
FDA Disclosure:
Cleared: Yes
Non-Exclusive License:
Accepted Terms: Yes
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The lived experience of Mothers of Adult Children with Bipolar Disorder

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Abstract Information
Presentation Preference: SNRS Student Poster Presentation
Willing To Submit Poster?
Yes
Abstract Categories:
Interest Group: Qualitative
Thematic Areas: Women's Health
Purpose/Aims :
Purpose: The purpose of this pilot study was to describe the lived experience of mothers of adult children with bipolar disorder.
Research Questions/Hypotheses :
What is the lived experience of mothers of adult children with bipolar disorder.

Significance :
The National Institute of Mental Health (2006) reports that 5.7 adults suffer from bipolar disorder. There is a known lack of support for primary caregivers, especially for those caring for persons with mental health disorders. Additionally, 75-86% of caregivers are mothers of adult bipolar patients. There is almost no research on the experience of mothers caring for adult children with bipolar disorder.

Methods :
Methods: An existential qualitative design was utilized. Indepth interviews were conducted with three mothers. Interviews were audio-recorded and transcribed verbatim. Field notes were taken during interviews and incorporated into the
written transcripts. Data were analyzed by qualitative content analysis. Line by line coding was conducted. Important quotes and statements were highlighted and placed into broad categories which were then organized into themes. Findings were presented back to study participants who confirmed that the findings represented their lived experiences.

Findings:
Findings: Four overall themes emerged from the three interviews: Fear of losing their child; perils of dealing with mental illness; a lack of understanding; and mothering.

Discussion:
Implications/Conclusions: Findings from this pilot study have implications for nursing research, practice and education. Further research is urgently needed if we are to support mothers caring for their adult children with bipolar disorder and to educate healthcare workers who work with these families.

Research Completed: Yes
Abstract History:
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes
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Taking Control of the Experience of Pregnancy and Birth

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Purpose/Aims:
The purpose of this pilot study was to understand the attitudes of women who requested a primary elective cesarean delivery when no medical indication was present.

Research Questions/Hypotheses:
“What are the experiences of women who requested primary elective cesarean delivery when no medical indication was present?”

Significance:
Since 1996 there has been a 40% increase in cesarean delivery in the United States. Estimates of maternal request are widely disputed and range from 4-18% of all cesarean deliveries. While consumer choice may contribute to the rise in elective cesarean, other research suggested that growth of elective cesarean may reflect physician, rather than maternal, preferences. Increases in cesarean deliveries potentially increases maternal and infant complications.

Methods:
A phenomenological design was chosen for this study because it is helpful in understanding the experiences of women who request a primary cesarean delivery.

Findings:
Interviews were conducted with 7 women (ages 34-38) who self identified as requesting a primary elective cesarean. Without exception, women reported that they requested a cesarean in an attempt to control the unknown aspects of birth. Controlling the birth allowed the woman to choose the time of birth, the people who were present, and minimize the unexpected. Fear of their potential behavior during labor and birth in response to pain was the driving force for their choosing a cesarean, despite knowing risks associated with a surgical delivery. Four of the seven women interviewed were registered nurses who witnessed a birth in their professional role which they found distressing.

Discussion:
Further research is needed to examine the phenomena of women choosing an elective cesarean. The implication of the study suggests women feel the need for control in all aspects of birthing. The perception of cesarean birth as more controlled and with less uncertainty may be more likely with registered nurses.

Research Completed:
Yes

Abstract History:
Financial Disclosure:
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Yes

FDA Disclosure:
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Accepted Terms: Yes

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Advantages and Disadvantages of Focus Group Interviews: Participant and Researcher Perspectives

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Student Level:
The purpose of this study is to analyze data collected during focus group interviews with parents of children with autism (n = 23), cerebral palsy (n = 8), Down syndrome (n = 10), and sickle cell disease (n = 16). Data were collected in the original study to learn more about how parents communicate with family members about the genetic disorder and the resources available to parents and their children.

Secondary analysis of these data will be conducted to identify advantages and disadvantages of the focus group process for participants and the interviewer/researcher.

Focus groups, sometimes referred to as focus group interviews, are tools that have been extensively used in research. Focus groups can explore new research areas or examine well-known research questions from the participant’s point of view. They can be used in conjunction with quantitative studies to provide preliminary research on specific issues or to follow up research to clarify findings from another study. Compared to individual interviews, focus groups offer such as synergism, snowballing, stimulation, security, and spontaneity (Hess, 1968).

Data were collected during audio taped semi-structured focus group interviews with parents (N = 57). Transcribed interview data were imported into NVivo7 and coded. Emerging categories were analyzed to identify themes.

Preliminary results indicate that parents received and offered support to other parents, learned from each other, and began reframing their thoughts about their own family and child with a genetic disorder. Parents discussed ways to create new supports and services for themselves and their children.

Focus groups offer benefits to the researcher and participants and can serve to identify areas needing further attention and development by participants and the researcher. Advantages, disadvantages, and ethical issues will be discussed.
Nurses’ Experiences with Providing End-of-Life Care in the ICU

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Purpose/Aims:
To explore nurses’ definitions of optimum end-of-life care and to identify system factors that affect nurses’ ability to provide end-of-life care to ICU patients and their families. Nurses were asked to describe attributes of nurses who provided quality care and examples of those who did not.

Research Questions/Hypotheses:
What is the experience of ICU nurses in providing end-of-life care?

Significance:
Nurses are in a pivotal position to improve care for dying patients and their families by challenging current end-of-life practices. However, ICU nurses report a lack of preparation, experience and education when providing this care.

Methods:
Convenience sampling was used to select ICU nurses at a large teaching hospital in the southeastern US. Nurses were interviewed individually about their definition of optimum end-of-life care as well as barriers to providing this care. They were asked to describe a situation in which they felt optimum end-of-life care was achieved and a situation in which it was not achieved, as well as the characteristics of the nurses providing this care. Nine adult critical care nurses were interviewed, ranging in age from 26 to 56, with an average of 10.3 years of clinical experience in an adult ICU. The interviews were transcribed and analyzed using Bowen’s Value-Behavior Congruency model adapted to ICU nursing.

Findings:
Using Bowen’s model of value-behavior congruency, several examples of the personal, environmental, and relational factors were identified that facilitate or hinder the nurses’ ability to provide end-of-life care in the ICU. Nurses used strategies such as “balancing”, “trial and error”, “coaching the physicians”, and “taking a step back” to improve the delivery of end-of-life care.

Discussion:
The attitudes and behaviors identified by the nurses as well as personal, environmental, and relational factors identified in this study may be useful in determining factors related to improving the care delivered in the ICU at the end of life.
Promoting a Peaceful Death for Thai Dying Patients in ICU: A Pilot Study

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Abstract Information
Presentation Preference: SNRS Student Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories:
Interest Group: Qualitative
Thematic Areas: End of life issues
Purpose/Aims: To explore the processes of promoting a peaceful death in ICU that is suitable for Thai patients who are critically ill at the end of life.
Research Questions/Hypotheses:
How did Thai critical care nurses promote a peaceful death to the dying patients in the ICU? Initial interview questions such as: - How did you know the patient is dying or near death? - What did you do when you know death is imminent? Focus interview questions such as: - Was the process of promoting a peaceful death different between chronic and acute case? - Did you guide dying patients to recognize their goodness?
Significance: The study can benefit critical care nurses in implicating the processes of promoting a peaceful death as an appropriate practical guideline. Thai patients who are dying in the ICU will receive a good quality of care in order to have a peaceful death.

Methods:
The grounded theory method (Strauss & Corbin, 1998) guided this qualitative study. Data were collected from three Thai critical care nurses through individual telephone in-depth audiotape interviews. Data analysis was concurrent with data collection. Coding and categorizing involved constant comparison. Theoretical sampling, memos, and sorting were performed on this study. Methodological rigor was established by feeding back a summary of findings to participants in order to validate them and establish credibility.

Findings:
The participants promoted a peaceful death by entering into five main dimensions within the processes: awareness of dying, creating caring atmosphere without prolonging life, managing care and promoting comfort, preparing death, and caring after death.

Discussion:
This pilot study presented a loose structure of the processes of promoting peaceful death in the ICU in Thailand. The researcher needs more data to make the structure firm.

Research Completed: Yes
Abstract History: Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
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Caregiving for Patients requiring Left Ventricular Assist Device Support

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Qualitative
- Thematic Areas: Chronic illness

Purpose/Aims:
The purpose of this qualitative study was to describe the experiences of caregivers of patients requiring left ventricular assist device therapy in the home setting.

Research Questions/Hypotheses:
The burden of caregiving for patients requiring left ventricular assist device (LVAD) support may be significant however little is known about this experience. The research question was to describe the lived experience of caregivers of patients with LVADs.

Significance:
The use of this advanced technology in the management of end stage heart failure is expected to continue, suggesting that increased involvement of family and significant others will be required.

Methods:
Semi-Structured interviews allowed participants to describe their experience as caregivers. Interviews were audiotape-recorded and transcribed verbatim. Analysis was conducted in accordance with Sandelowski’s three-step process for analysis of phenomenological data: data dwelling, open coding, and data reduction.

Findings:
Two overarching themes emerged: sacrifice and moving beyond. Caregivers sacrificed relationships with friends and family, jobs and livelihood, health and piece of mind in their roles as caregivers. Moving beyond reflects coping and adaptation to the sacrifices of being a caregiver.

Discussion:
Experiences described by participants suggest that they successfully incorporate the role of caregiver for a complex therapeutic regimen (LVAD) into their daily lives. While the personal sacrifice that is necessary for each individual to make in order to assume the caregiving role is evident, examples of moving beyond their circumstances despite these sacrifices also emerged. Attention to these findings should guide health care professionals in their efforts to support caregivers in this transition.

Research Completed: Yes

Abstract History:
- This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
- Details: Heart Failure Nurses Society, April 2007, San Francisco CA

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

Grants/Research Support: Y
Sigma Theta Tau
Consultant:
Stock/Shareholder:
Speaker's Bureau:
Lesbian Self-disclosure of Sexual Orientation in Acute Care: A Grounded Theory Study

Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Qualitative
- Thematic Areas: Women's Health

Purpose/Aims:
Lesbians have described seeking health care as a dangerous action that compounds their vulnerability to heterosexist bias and discrimination. The resulting fear often prompts lesbians to withhold information about their sexual orientation, even when that information is crucial to their health. Reducing heterosexist bias in primary care has been well-researched, but little is known about how lesbians manage self-disclosure of sexual orientation in acute care settings.

Research Questions/Hypotheses:
What are the conditions under which lesbians disclose sexual orientation to acute care providers? What are the strategies lesbians use to manage relationships with acute care providers? What are the consequences they have experienced or expect to experience when they self-disclose? How do these consequences affect health seeking behavior?

Significance:
Understanding how lesbians self-disclose to acute care providers and the consequences
of this disclosure can enhance communication, improve quality of care, and insure that care is culturally appropriate for a group of vulnerable women.

Methods:
The grounded theory method as described by Strauss and Corbin will be used in this study. A purposive sample of at least 15 women who self-identify as lesbian or gay will be interviewed. Tape-recorded interviews, field notes, and memos will be analyzed using a constant comparative method. Theoretical sampling of the literature will be guided by the emerging theory.

Findings:
The resulting grounded theory will be shared with participants to confirm goodness of fit.

Discussion:
The results of this study are pending.

Research Completed:
No

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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Abstract ID: 848

Thriving after Childhood Maltreatment: A Comparison of the Concepts of Resilience and Becoming Resolute

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Presentation Preference: SNRS Student Poster Presentation

Abstract Categories:
- Interest Group: Qualitative
- Thematic Areas: Women's Health

Purpose/Aims:
The aim of this poster is to compare and contrast conceptual elements of resilience and becoming resolute and to discuss the context in which these concepts were developed.

Research Questions/Hypotheses:
This study examines two conceptual frameworks for understanding thriving after childhood maltreatment: (a) resilience as a process in childhood for successful adaptation in the face of adversity, and (b) becoming resolute as a process into adulthood for women who experienced childhood maltreatment.

Significance:
The phenomenon of people doing well after adversity is of interest to nursing science. Understanding the process of surviving and thriving potentially leads to identifying and designing interventions that promote positive outcomes.

Methods:
The focus of resilience research (via Garmezy’s Project Competence beginning in the 1970’s) has been on variables that measure individual attributes of children, qualities of parenting and social relationships, and community systems that provide support and resources for positive childhood experiences. Becoming resolute is a concept that arose from a qualitative study of adult women (Hall, 2007) who identified themselves as doing well after childhood maltreatment. Narrative accounts were analyzed and themes emerged that described the process of struggling successfully to move beyond a history of abuse.

Findings:
Researchers identified six dimensions of becoming resolute that characterized tasks enabling women to transition to a pattern of thriving. While resilience was originally studied in children (and later in adults) and becoming resolute in adult women, they share a common focus on positive outcomes after adversity.

Discussion:
The process of becoming resolute offers new understanding of what worked for women and what did not work, and this perspective broadens the field of psychosocial support for surviving and thriving after childhood maltreatment.

Research Completed: Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
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Non-Exclusive License:

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Health Care Decisions Reported as Important by Patients with Terminal Illness

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Abstract Categories: Interest Group: Qualitative
Thematic Areas: End of life issues

Purpose/Aims: This study is part of a larger study of preferences of terminally ill patients for involving their family and physician in care decisions ranging from no involvement to reliance upon family or physician.

Research Questions/Hypotheses: To describe health care decisions important to terminally ill patients and functional health status and quality of life (QOL) dimensions associated with these decisions.

Significance: Health care institutions seek to adhere to the Patient Self-Determination Act by asking for patients’ preferences for resuscitation and nutrition and hydration at the end of life. Few studies have explored the health care decisions that terminally ill patients report as important.

Methods: 147 patients diagnosed in the terminal phase of cancer, CHF, or amyotrophic lateral sclerosis (ALS) from 2 academic medical centers were surveyed. This study presents a cross-sectional description of health care decisions important to patients near the time of diagnosis with terminal illness.

Findings: The most common types of decisions were medical interventions (50%), surgical procedures (26%), and identification of a provider (14%). Illness-based differences existed for decisions regarding providers and surgical treatments. Patients making decisions about surgical interventions scored higher on spiritual and social support dimensions of QOL. Those considering palliative care had a higher QOL and fewer physical and psychological symptoms. Patients considering transition to reliance on others had fewer psychological symptoms and greater social support.

Discussion: The health care decisions of terminally ill patients are more diverse than resuscitation and nutritional support. Provider and treatment decisions are most commonly identified as important by patients with terminal illness. Decisions about palliative care and the need to rely on others are far less common. Patients making these decisions are experiencing less physical and psychological distress than those who were not making these decisions. Health policy and institutional practice should reflect the more diverse health care decision making process by patients at the end of life.

Research Completed: No

Abstract History:

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes
Abstract ID: 868

The Influence of Faith on Perceptions of Stress

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Abstract Information

Presentation Preference: SNRS   Student Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories:
Interest Group: Qualitative
Thematic Areas: Health Disparities
Purpose/Aims:
To examine the influence of faith on the individual’s perceptions of stress
Research Questions/Hypotheses:
What is the influence of faith on an individual's perception of stress?

Significance:
Chronic illnesses such as cardiovascular disease have been examined in the context of stress. Stress is a recognized component of cardiovascular risk, and may influence the development of cardiovascular disease. The influence of personal factors such as social support, optimism, and locus of control has been examined in relation to stress, but the concept of faith has been minimally explored. Faith influences a person's health, including health seeking and health promoting behaviors and decision making, but little is known about the influence of faith on the perception of stress or the use and choice of coping behaviors.

Methods:
This qualitative study uses focus groups to compare three culturally diverse United Methodist churches in central NC, one church primarily Caucasian, one Latino, and one African American. Two focus groups with 8 to 12 participants, sampled by gender and age, will be held in each church. Interviews will be recorded and transcribed for analysis. The first focus group will include exploration of the concept of faith in relation to the barriers and facilitators of personal efforts at cardiovascular risk reduction, including stress. Participants will be encouraged to reflect and share their personal views and experiences, within the context of the views of other participants and their cultural backgrounds, about their faith and the impact that it has on perceived stress and coping behaviors. The final focus groups will encourage participant feedback on the analysis and summary of their perspectives from the first focus groups. The findings from this study will add to what is known about the meaning of faith in relation to stress in ethnically diverse samples.

Findings:
Incomplete

Discussion:
Incomplete

Research Completed:
Yes

Abstract History:
Financial Disclosure:
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Yes

FDA Disclosure:
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Non-Exclusive License:
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Submitted By:
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Access to Health Care for Vulnerable Individuals in the Aftermath of Hurricane Katrina

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Student Level: Doctoral

Abstract Information
Presentation Preference: SNRS Student Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Qualitative
Thematic Areas: Health Disparities

Purpose/Aims: The purpose of this qualitative research study is to describe and understand the lived experience of vulnerable individuals and their ability to access health care in the aftermath of Hurricane Katrina.

Research Questions/Hypotheses: The overarching question in this research is, "What is the lived experience of vulnerable individuals attempting to access health care in the aftermath of Hurricane Katrina?"

Significance: Without in-depth knowledge of the qualitative nature of vulnerable individuals' experience in accessing health care in the aftermath of Hurricane Katrina, nurses can have only limited appreciation of the needs of these individuals. This research will give nurses accurate information and the expert perspective they need as a foundation for effective treatment and promotion of health for vulnerable individuals and populations in the aftermath of disasters.

Methods:
The study will employ an applied phenomenological research method articulated by Thomas and Pollio (2002). Participants, ages 18 and over, will be recruited from a New Orleans Disaster Relief Clinic and will be asked to describe a significant experience in accessing health care in the aftermath of Hurricane Katrina. There is no pre-set number of interviews and data collection will continue until ongoing analysis reveals no new themes that add to the phenomenon description. Trustworthiness of the study will be established by asking participants to verify transcripts of interviews; by conducting line-by-line analysis of transcripts that identify key words, phrases, and themes illuminating the essence of living as a member of a vulnerable population and attempting to gain access to health care in the aftermath of Hurricane Katrina; and by enhancing transferability through rich description and purposive sampling (Siegle, 1996). Limitations of the study includes the possibility of different interpretations of the data.

Findings :

It is anticipated that analysis of interview transcripts may reveal common themes among participants as purposive sampling will be employed.

Discussion :

This study is currently "in-progress"

Research Completed : Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

FDA Disclosure:

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Abstract ID: 902

Perspectives of Nurse Managers and Information Technology Staff About Nurses' Information Literacy

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Presentation Preference: SNRS  Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories:
  - Interest Group: Qualitative
  - Thematic Areas: Workforce Issues

Purpose/Aims: The specific aims of this study were to identify the perspectives of nurse managers and information technology (IT) staff about the information literacy training of staff nurses and how nurses’ information literacy attitudes, knowledge, and skills translate to nursing practice and patient care outcomes.

Research Questions/Hypotheses:
  - This person-centered qualitative study explored the question: What are the perceptions of nurse managers and IT staff about staff nurses’ information literacy training and incorporation of information literacy skills in patient care?

Significance: Although nurses require information literacy competencies to retrieve and synthesize evidence-based research to improve patient care, several studies highlight the limited understanding of information literacy knowledge and skills among nurses. Nurse managers and IT staff are a rich source of data as a result of their unique perspective and familiarity with nursing at the operational level. Qualitative studies reflecting the important perspectives of nurse managers and IT staff about nurses’ information literacy are non-existent.

Methods: Audio-tape recorded interviews were conducted using a standardized open-ended interview format with follow-up and probing questions. The transcribed interviews were read and re-read, with identification of key words, phrases, and statements for each question organized into themes. Similar themes were then grouped into categories across interviews.

Findings: Analysis is ongoing, however, at this point, the most frequent themes include (a) participants’ perceptions that nurses demonstrate limited use of online information resources, (b) nurse managers and IT staff hold differing interpretations of computer literacy and information literacy, and (c) the age of a nurse influences how enthusiastically the nurse embraces computerized documentation.

Discussion: Understanding managers and IT staff perceptions helps reveal the observations of two groups of people who have influence on information literacy training and usage within institutions. These perceptions may give insight into why nurses experience challenges related to information literacy in the workforce.

Research Completed: Yes

Abstract History:

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

FDA Disclosure: Cleared: Yes

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Theory Guided Evolution of an Idea for Dissertation Research

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Abstract Information

Presentation Preference:
SNRS Student Poster Presentation

Willing To Submit Poster?
Yes

Abstract Categories:
Interest Group: Qualitative
Thematic Areas: Methods

Purpose/Aims:
The purpose of this analysis is to share the evolution of a dissertation idea through three phases of development.

Research Questions/Hypotheses:
Does Compassion Fatigue in nurses progress to Compassion Energy in formal and informal caregivers?

Significance:
Compassion Fatigue connotes negative outcomes leading to burnout in the caregiving experiences of formal and informal caregivers. The risk for nurses developing compassion fatigue related to practice issues and the workplace environment can contribute to the nursing shortage. Formal and informal caregiver stress, burden and compassion fatigue are negative outcomes contributing to the caregiver’s inability to nurture. As the population ages and the need for informed caregiver’s increases, Compassion Energy continues to evolve. It is conceptualized as the intention, wholeness, uniqueness and patterning of individuals as a transformation of compassion, promoting health and well-being as positive outcomes.

Methods:
Nursing as Caring and Health as Expanding Consciousness Theories provided a meaningful view of the original concept strengths and weaknesses in reformulating Compassion Fatigue to Compassion Energy through immersion in theoretical conceptualization.

Findings:
A model was created at a middle range level of discourse to enable application to populations other than the one from which it emerged. The model initially represented the interconnectedness between nurse and patient whom successfully regenerates compassion by answering the call and being present in the moment. The model has the potential to expand to formal and informal caregivers and care recipient encounters, intentionally regenerating interconnectedness and transforming to a higher level of consciousness. Data collection for dissertation research will be guided by this model.

Discussion:
There are future implications for formal and informal caregivers to explore Compassion Energy patterning of human behavior whereby energy is exchanged and patterns can be reshaped to enhance quality of life for the caregiver and care recipient.

Research Completed: No
Abstract History: Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes
FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
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Family Hardiness: An Evolutionary Concept Analysis

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Willing To Submit Poster?
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Abstract Categories:
Interest Group: Qualitative
Thematic Areas: Family Health
Purpose/Aims:
To present a concept analysis of family hardiness from an evolutionary perspective. A state of the science definition of family hardiness will be synthesized.
Research Questions/Hypotheses:
What degree of hardiness is exhibited in families in the aftermath of a natural disaster?
Significance:
There is a need for further development of the concept of family hardiness from an evolutionary perspective. It is imperative that nursing promotes an understanding of the need to foster “hardy” family foundations by identifying gaps in the literature.
Methods:
Analysis of family hardiness entailed a succinct review of the literature from over 20 years. Entrez-PubMed, CINAHL, ERIC, and MedLine databases were searched with assistance of the INNOPAC retrieval system. The concept was analyzed using the evolutionary method: (a) review of literature, (b) findings, (d)
clustering of attributes, (e) antecedents and consequences, (f) surrogate and related concepts, and (g) implications for future analysis and research. A state of the science definition and development of a model resulted from the analysis.

Findings:
Clustering of attributes from the literature revealed the following definitive descriptors: resistance resource, support mechanism, resilience, and proactive energy. Primary antecedents and consequences were identified according to the evolutionary analysis method as well as, surrogate and related concepts. The proposed state of the science definition was synthesized. Family hardiness is a proactive resistance resource in which strength and resilience supports the family’s framework or foundation.

Discussion:
Research of family hardiness consistently reveals that it is a preexisting characteristic of the family. To whatever degree or level, a family is challenged with the task of utilizing their proactive resistance resources in the event of natural disaster, life changes, crisis, or illness. Cultivation of family hardiness should be an integral part of nursing research discovery. Questions for future research of hardiness in families in post-natural disaster crisis will be posed and synthesized in the model.

Research Completed:
No

Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
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Abstract ID: 71

Nurses' Use of Hazardous Drug Safe Handling Precautions and Awareness of National Safety Guidelines

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Purpose/Aims: To determine current patterns of personal protective equipment (PPE) use by oncology nurses while handling hazardous drugs (HDs) and their knowledge of the 2004 National Institute for Occupational Safety and Health (NIOSH) Alert.

Research Questions/Hypotheses: To determine the: Use of safe handling precautions by oncology nurses during HD handling. Relationship between demographics, work site and safe handling practices. Effect of the NIOSH Alert on safe handling practices.

Significance: HD exposure is an occupational risk for oncology nurses. Exposure can occur during drug preparation, administration, or when handling patients' wastes. PPE reduces exposure.

Methods: Survey using a convenience sample of 330 nurses who handle chemotherapy. The Revised Chemotherapy Handling Questionnaire measures PPE use.

Findings: Respondents were well educated (57% >= BSN); experienced (X=19+/− 10.2 years in nursing and X=12+/− 7.9 years in oncology) with 70% certified (majority OCN). 47% were aware of the NIOSH Alert. 34.5% of all participants and 93% of nurses in physician private practice settings reported preparing chemotherapy. Glove use (95-100%) for handling activities was higher than in earlier studies. Gown use was 65% for drug preparation, 50% for drug administration, and 23% for handling excretions. This was similar to earlier studies. Double gloving was rare (11-18%) and occurred most often in setting where policies were updated since the Alert. Nurses in private practice settings were less likely to: have chemotherapy-designated PPE available; use PPE for all handling activities; and use spill kits for HD spills.

Discussion: In 20 years since OSHA guidelines, nurses have adopted glove use for HD handling. Gown use is lower than expected based on recommendations. Chemotherapy-designated gowns and gloves, which provide the best protection, are not always provided by employers. Lack of awareness of NIOSH recommendations indicates a need for alternative methods of dissemination. Nurses and their employers must understand the risks of HD exposure and be knowledgeable about ways to reduce work-related exposure.

Research Completed: Yes

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

Grants/Research Support:
Consultant: Y
Cardinal Health
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FDA Disclosure: Cleared: Yes

Non-Exclusive License:
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**Inflammatory Profiles are Different in Heart Failure Patients with and without COPD**

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Presentation Preference: SNRS Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Researchers in Clinical Settings
Thematic Areas: Adult Health

Purpose/Aims: The purpose of this preliminary analysis was to compare inflammatory profiles of HF patients with and without COPD.

Research Questions/Hypotheses: HF patients with COPD will have a greater concentration of pro-inflammatory cytokines compared to those without COPD.

Significance: Inflammation is an important feature in the development and trajectory of both heart failure (HF) and chronic obstructive pulmonary disease (COPD). Concentrations of pro-inflammatory cytokines and cytokine receptors are independent predictors of mortality in patients with HF and are significantly correlated with changes in dyspnea and FEV1 in patients with COPD. Up to 1/3 of patients with HF also exhibit some degree of COPD. There are no studies that compare inflammation in HF patients with and without COPD.

Methods: One hundred ten patients with HF (67% male, 85% Caucasian, 57% NYHA class III-IV, EF 35 ± 14%, age 61 ± 12 years) completed spirometric pulmonary function testing and provided blood samples for evaluation of inflammatory profiles. Pro-inflammatory (TNF-alpha, sTNF-R1, sTNF-R2, IL-2, IL-6, IL-8, and anti-inflammatory cytokines and cytokine receptors (IL-1ra, IL-4, IL-10) were measured using ELISA and Luminex techniques. Raw data were log transformed to normalize the distributions.

Findings: Slightly more than a third (36%) of patients demonstrated some degree of COPD based on spirometric evaluation (Gold stage I = 8%, stage II = 23%, stage III = 2%). Patients with COPD exhibited significantly lower concentrations of IL-1ra, IL-2, IL-4 and IL-10 (p < 0.05). Other inflammatory mediators and receptors were similar between HF patients with and without COPD.

Discussion: Patients with concomitant HF and COPD had significantly lower concentrations of anti-inflammatory cytokines and cytokine receptors; concentrations of pro-inflammatory cytokines were similar between the groups. Patients with HF and COPD demonstrated a blunted anti-inflammatory response suggesting that the combination of these co-morbid conditions produced a further shift in the balance of pro and anti-inflammatory responses in favor of inflammation.

Research Completed: Yes

Abstract History: Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes
Abstract ID: 138

Prevalence of Traditional Biomarkers of Met-S in Adult Sickle Cell Disease

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Abstract  Information
Presentation Preference: 
SNRS   Student Poster Presentation
Willing To Submit Poster? 
Yes
Abstract Categories: 
Interest Group: Researchers in Clinical Settings
Thematic Areas: Chronic illness
Purpose/Aims : 
Sickle Cell Disease (SCD), a single gene hemoglobinopathy affects 1 in 400 African-Americans (AA), characterized by high mortality rates due to underlying sickle process resulting in micro-vascular occlusions. Metabolic Syndrome (Met-S) associated with micro/macro vascular insults and AA’s have a high prevalence of Met S.

Research Questions/Hypotheses : 
This pilot study estimated the prevalence of biomarkers of Met-S in an adult SCD population.

Significance : 
It is unknown if AA with SCD have Met-S, further increasing possible end-organ damage.

Methods : 
Review of clinic-generated data from a regional adult center was used to abstract data on markers of Met-S: central obesity operationalized (BMI=kg/m2), hypertension, glucose, triglyceride and high-density lipid. Inclusion criteria: SCD by ICD 9 codes, > 18 years, and visits between 2/1/2005 and 4/30/2007.

Findings : 
N=182 charts were reviewed, 19 charts were misdiagnosed, 46 charts had a general diagnosis of SCD. Final sample size n = 115. 

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No data for triglyceride levels or high-density lipid levels were found. The remaining three traditional biomarkers are presented in the SS and SC patients. 

BMI: 
- SS: n=76, SC: n=29
- <18.5 (underweight): 19 (25.0) 12 (41.4)
- 18.5-24.9 (healthy): 46 (60.5) 12 (41.4)
- 25-29.9 (overweight): 11 (14.5) 7 (24.1)
- 30+ (obese): 4 (5.3) 7 (24.1)

Blood Pressure: 
- SS: n=78, SC: n=35
- Systolic: 118.17 +/-15.82 124.91 +/-15.90
- Diastolic: 68.58 +/-11.74 75.31 +/-7.6

Non-fasting Glucose: 
- SS: n=56, SC: n=29
- 95.38 +/-14.58 110.45 +/-35.96

Discussion : 
The Met-S is the presence of three of the five biomarkers. This population does not meet the definition of Met-S. There was an increased prevalence of central obesity: SS=19.8% and SC=48.2%. The SC patients may be at risk, since their BMI is more likely to reflect the general AA population. Further research of non-traditional biomarkers maybe useful in characterizing this population.

Research Completed : 
Yes
Abstract History: 
Financial Disclosure: 
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure: 
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Non-Exclusive License: 
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Abstract ID: 139

Predictors of the end of life in chronic kidney disease: A pilot study

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The aim of this study was to describe indicators which changed over time in chronic kidney disease (CKD) patients at the end of life (EOL).

Research Questions/Hypotheses:
What are the indicators (physiological, functional, and demographic) present in the final 4 hospital admissions (including death admission) in CKD patients? What indicators significantly changed over time?

Significance:
Many CKD patients' deaths are characterized by a diminished quality of life and medical futility. More importantly, few CKD patients receive hospice and palliative care. The lack of EOL care may be related to the inability to clearly identify the dying trajectory.

Methods:
A retrospective study of 10 CKD patients was conducted at a large southeastern hospital. The medical records from their death admissions and up to three previous admissions were examined. A total of 34 records were reviewed for demographic, physiological, and functional indicators.

Findings:
Five persons with CKD required hemodialysis, and 5 persons were in stage 3-4 CKD, and not yet on hemodialysis. Variables were compared across the 4 admission times using a repeated measures ANOVA. Differences between patients on hemodialysis and those not yet on hemodialysis were not statistically significant. The mean arterial pressure, Braden Scale, and the Palliative Performance Scale (PPS) were all significantly different (p< 0.05) over time, although only the PPS (F= 78.92 (3, 18); p< 0.001) and the Braden Scale (F= 8.26 (3, 17); p= 0.001) showed significant differences between the death admission and the admission just prior to death.

Discussion:
Both the PPS and the Braden Scale have functional indicators. Therefore, functional measures may provide greater predictive indication of impending death than physiological indicators. Trending changes may assist nurses in determining the dying trajectory in patients with CKD. Further research is needed to validate the predictive impact of functional status on EOL and the effect of early palliative care within the CKD population.

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Abstract ID: 145

Caregiver and Nurse Expectations Regarding the Recovery of the Patient with Acquired Brain Injury

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Student Level:
The purposes of this study are to explore caregivers' hope for recovery of their loved one who has experienced an acquired brain injury (ABI) and to compare the nurse's goals for the patient with ABI to those of the caregiver.

Research Questions/Hypotheses:
Do caregivers and nurses of ABI patients have similar hopes for the patient's future? Does a personal sense of hope influence the caregiver's hope for the patient's future?

Significance:
Seven million persons experience ABI each year with approximately 5.3 million Americans living with the uncertain future after ABI. Hope has been conceptualized as a buffer for stress and necessary for effective coping. No studies about hope were identified with caregivers of ABI patients.

Methods:
The design uses triangulation of data from multiple sources (nurses and family caregivers) and methods (interviews and surveys) to gather information related to hope for recovery of ABI patients within three months following injury. Caregivers of patients with ABI (12 at RANCHO level 1-3 and 12 at RANCHO level 4-6) in an inpatient rehabilitation setting will be asked to participate in 3 interviews (within one week of admission, week of discharge, and one month following discharge) and complete surveys on personal hope (Herth Hope Scale) and hope for their loved one with ABI (Modified Hope Scale). Primary nurses of the ABI patients also were interviewed during the week of admission and the week of discharge from the rehabilitation setting. Data analysis will include extraction of themes from the qualitative interviews and use of non-parametric statistics to compare caregiver and nurses perceptions of hope on questionnaires.

Findings:
Data collection is ongoing with, 14 caregivers and primary nurses currently enrolled. Preliminary analysis revealed inconsistencies between the hopes of caregivers and nurses.
These data will contribute to understanding professional and family caregivers of hope for recovery in the context of ABI.

Research Completed: Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

Grants/Research Support: Y
Georgia State University
Rehabilitation Nurses Foundation
The Shepherd Center

Consultant:
Stock/Shareholder:
Speaker's Bureau:
Other Financial or Material Support:

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

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Abstract ID: 162

From Vision to Reality: Bringing Evidence-Based Practice to the Bedside Nurse

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Abstract Information

Presentation Preference: SNRS Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Researchers in Clinical Settings
Thematic Areas: Health System

Purpose/Aims: The purpose of this presentation is to share how a children’s hospital is infusing the tenets and tools of Evidence-Based Practice (EBP) with staff nurses.

Research Questions/Hypotheses: There are two educational tracks offered to staff and advance practice nurses. The first are stand alone 1-hour sessions that discuss the use of and exemplars of EBP in nursing. The second series includes personalized coaching and mentoring to support staff who have a targeted project.

Significance: Although EBP is resource intensive, barriers can be reduced when a commitment is made to provide staff with tangible support with the ultimate goal; improved patient outcomes.

Methods: We will measure out success by the number of projects generated by staff who participate in these educational sessions.

Findings: The sessions are well attended and currently there are 3 individual projects underway.

Discussion: We are committed to EBP within this institution. Even the most dynamic organization needs structures and processes in which EBP can flourish. This work not only empowers staff nurses but it conveys to our patients and families that nursing is not only a healing art but a discipline based on science as well.

Research Completed: No

Abstract History: Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose
products may be mentioned in this material?

Yes

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

Submitted By:

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Abstract ID: 184

A Comparison of Hospitalized Adults with Type 2 Diabetes: Does Living in Medically Underserved Areas Make a Difference?

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Presentation Preference: SNRS Poster Presentation

Abstract Categories:
- Interest Group: Researchers in Clinical Settings
- Thematic Areas: Health Disparities

Purpose/Aims:
To determine the differences between hospitalized adults with type 2 diabetes who live in medically underserved areas (MUAs) and hospitalized adults with type 2 diabetes who live in non-medically underserved areas (as defined by zip code).

Research Questions/Hypotheses:
What are the differences between hospitalized adults with type 2 diabetes who live in MUAs and hospitalized adults with type 2 diabetes who do not live in MUAs in the following: demographics; HbA1c; blood sugar; antidepressant medication use; diagnoses of depression, coronary artery disease, hypertension, retinopathy, neuropathy, nephropathy, peripheral vascular disease with or without ulcers, and amputation?

Significance:
The prevalence of type 2 diabetes in the U.S. is in epidemic proportions and a widely recognized cause of mortality, morbidity, and excess costs in the health care system. Rural disparities, including limited availability of preventive and medical resources, lack of insurance, poverty, and lower educational status may adversely affect this population’s ability to adhere to diabetic regimens, and diabetes care remains suboptimal. Patients with type 2 diabetes who do not adhere to anti-hyperglycemic medications are at a higher risk of hospitalization and hospital lengths stays are lengthened because of increased morbidity and mortality.

Methods:
The study is a retrospective comparative descriptive design. Data is collected retrospectively from 100 inpatient charts of adults with type 2 diabetes.

Findings:
Study in progress.

Discussion:
Rising health care costs associated with type 2 diabetes and underserved rural populations affects chronic disease management in U.S. hospitals. Health care providers must recognize complexities of compliance with diabetes self-care regimens and possible barriers, such as money for medications and equipment.

Research Completed: Yes

Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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Critical Incident Coping and Critical Care Nurse Personality

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Student Level: Masters
Purpose/Aims: Identify the personality traits of critical care nurses and distinguish coping methods considered therapeutic for resolving critical incident stress (CIS).

Research Questions/Hypotheses:
What personality traits and methods of coping are most common in critical care nurses? What relationship exists between critical care nurse personality and preferred methods of coping after a critical incident?

Significance: CIS is a phenomenon resulting from emotional or traumatic events that overwhelm one's ability to function and cope. In critical care environments, CIS impairs performance, increases errors, and increases absenteeism and workforce attrition. The research provides evidence for policies and practice of benefit to critical care nursing staff and managers dealing with CIS.

Methods: This descriptive, correlational research focused on critical care nurse personality traits, measured by Gerard Saucier’s Mini-Marker inventory, and ways of coping with CIS, as measured by the researcher-developed Preferred Methods of Stress Reduction inventory. Following a pilot study (March 2007), data were collected from approximately 900 critical care nurses attending the NTI conference (May 2007). Data analysis includes use of descriptive statistics and correlations.

Findings: The pilot study (n=46) revealed critical care nurses commonly have the following Mini-Marker personality characteristics: agreeableness (45%), conscientiousness (36%), extraversion (17%), intellectual openness (10%), and emotional stability (2%). Most commonly utilized methods of coping were: talk to family, talk to significant other, talk to peer/friend, find ways to laugh, perform a hobby, help coworkers cope, pray/meditate, eat comfort food, and keep very busy. The correlation between primary personality type and most common methods of coping was low (rho = .29, p = .06).

Discussion: Pilot study data indicate that personality is not a good determinant of preferred methods of coping with CIS. A number of simple coping methods are valued, however, and should be supported.
Abstract ID: 206

Bitter Tears: Parental Grief & Growth

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Abstract Information

Presentation Preference:  
SNRS Podium Presentation

Willing To Submit Poster?  
Yes

Abstract Categories:  
Interest Group: Researchers in Clinical Settings
Thematic Areas: End of life issues

Purpose/Aims:  
The purpose of this pilot study was to explore differences in grief response in married couples who were recently bereaved. Mothers and fathers’ grief responses following the death of a child under 21 years old were compared including optimism, dispositional coping, grief reactions, symptoms of complicated grief, and perceptions of personal growth and positive change.

Research Questions/Hypotheses:  
Gender differences will be found in parental grief response with mothers reporting more negative outcomes. Mothers will report more intense grief reactions, more complicated grief symptoms, and more depressive symptoms than fathers. In addition, mothers will perceive more personal growth and positive change than fathers following the death of a child.

Significance:  
Knowledge of possible gender differences in parental grief response may improve communication between bereaved parents as well as the efficacy of supportive intervention.

Methods:  
Conceptualizing parental grief as a psychosocial transition, this cross-sectional study evaluated positive and negative dimensions of bereavement in a small sample of married parents bereaved less than 30 months (N=11)

Findings:  
Fathers were significantly more optimistic (p=.04) and habitually used more positive reframing coping (p=.05) than mothers. Mothers reported significantly more depressive symptoms (p=.004), more intense grief reactions (p=.001) and more symptoms of complicated grief (p=.02) than fathers. No significant differences in parents’ perceived personal growth or positive change were found.

Discussion:  
These findings may increase understanding of important differences in parents’ grief response soon after the death of a child. Further study of differences in parental grief over time and continued evaluation of positive dimensions of bereavement are needed to accurately describe this complex process of adjustment and change.

Research Completed:  
Yes

Abstract History:  
Financial Disclosure:  
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:  
Cleared: Yes

Non-Exclusive License:  
Accepted Terms: Yes

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Holistic Stress Management for Caregivers: Using an Evolving Framework of Coping for a Program Structure

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Family caregiving is a challenging endeavor requiring strength and endurance from physical, emotional, financial, spiritual, psychological, and social realms. It is often an unsought position for which people are not well prepared and involves significant stress. The purpose is to describe the conceptual framework and some outcomes of a program designed to meet caregivers’ need for assistance with this role.

Research Questions/Hypotheses:
1. Description of conceptual framework
2. How do participants describe changes in coping after completion of the program?

Significance:
Family caregivers are an important force in society. It is estimated that there are 44.4 million caregivers of adults involving almost 23 million households, and 59% of the adult population either is or expects to be a family caregiver.

Methods:
The program provides caregivers education on recognizing and managing stress and is the intervention of a larger study measuring stress levels. For this sub-study, 30 participants were audio-tape interviewed after completion of program to gain their subjective assessment of outcomes. We used qualitative description analysis of the interviews.

Findings:
Self-described changes in participants covered many facets and often directly reflected incorporation of program material. Being broader than the emotional and problem-focused coping of the original framework, the qualitative data support the new holistic framework model. Four categories of the approaches to coping were described: an intellectual approach; use of relaxation techniques and physical care of self; an increased use of social support; and expansion of the self.

Discussion:
Program review and analysis provided opportunity to recognize a change in conceptual framework that reflected a holistic approach. Participants expressed overwhelmingly positive regard for changes that had taken place in assisting them in coping with stressors. These changes reflected the new conceptual framework. Although most useful for program development, results highlight the plight of caregivers and the need for support that can be recognized in nursing practice and education.

Research Completed: Yes
Abstract History: 
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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Palliative Care: Family Caregivers and Family Meetings

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Abstract Information

Presentation Preference: SNRS Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Researchers in Clinical Settings
Thematic Areas: End of life issues
Purpose/Aims:
1. To describe the helpfulness of family meetings from family caregiver and Palliative Care (PC) team member perspectives.
2. To explore the helpfulness of family meetings for the family caregivers in addressing “unresolved issues” with their terminal family member.

Research Questions/Hypotheses:
1. What are family caregivers’ descriptions of the helpfulness of family meetings?
2. How do these compare with the PC team members’ purposes for the meetings?
3. Do the meetings assist the family caregivers in addressing “unresolved issues”?

Significance:
Palliative Care is comprehensive specialized care provided by an interdisciplinary team aimed to relieve suffering and improve quality of life for patients with advanced illness and their families. A mainstay of PC is in facilitating communication between patient/family and care providers, among family members, and among different medical specialties providing comprehensive care. One means is through family meetings, in which clarifications of diagnosis, prognosis, and patients’
personal values are made and goals of care established. Currently there is little research analyzing the effect that family meetings lead by PC consultation teams have. A difficulty experienced with terminal patients is finding resolution of emotional/spiritual issues with family. Inability to do so complicates family relationships.

Methods:
This pilot is employing a convenience sample of 10 family caregivers of hospitalized patients in a VA hospital who received care from the Palliative Care service which included a family meeting, and the PC team members who led the meetings. Audio-taped semi-structured interviews are held one to two days after the meetings. Transcripts are analyzed using qualitative description.

Findings:
Initial findings of this study in progress indicate caregiver satisfaction with family meetings, which is congruent with PC provider perceptions. However, caregiver recall of topics discussed seems to be much less than provider. Discussion of end of life communication at family meetings seems to facilitate unresolved issues.

Discussion:
Withheld until study complete.

Research Completed:
Yes

Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

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SNRS member? No
Purpose/Aims:

The purpose of this study was to characterize intravenous medication administration in intensive care units. These data will be used to design information system decision support to decrease medication administration errors in these settings.

Research Questions/Hypotheses:

What are the characteristics of intravenous medication administration in cardiovascular surgical intensive care, medical intensive care, surgical intensive care, neurological intensive care, and coronary intensive care.

Significance:

It is estimated that adverse drug events (ADEs), resulting in injury or death, affect more than 770,000 people annually. Error is particularly prevalent in highly technical specialties such as critical care.

Methods:

Nurses were observed during the course of their work and their intravenous medication administration process was recorded on an electronic data collection tool. The data collection tool allowed rapid coding of workflow in terms of medication event duration, preparation, delivery, and access device. Data were also collected on the medication order source, references used, calculation method, and interruptions.

Findings:

Data were collected on 553 intravenous medication administration events over the course of six months. The duration of medication preparation and administration ranged from 4.33 minutes for one medication to 42.23 minutes for ten medications including the administration of blood. The most frequent classification of drugs given across all the intensive care units were anti-infectives (26.2%), gastrointestinal agents (13.5%), electrolytes (11%), and analgesics (6.5%). Nurses were interrupted at least once 65.6% of the time during the preparation and administration of medications. They sought additional drug information 20% of the time and were most likely to seek information from physicians (7.1%) and other nurses (5.2%). Medication orders were accessed via computer 70% of the time and almost 20% of administered drugs were based on standing protocols.

Discussion:

Knowing the types of drugs and methods of administration in different critical care settings allows us to identify specific content needed for contextually correct decision support.
Abstract ID: 342

An Exploration of The Relationship of Cue Identification and Problem Framing in Nurses' Clinical Decision Making

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Abstract Information
Presentation Preference:
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Willing To Submit Poster?
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Abstract Categories:
Interest Group: Researchers in Clinical Settings
Thematic Areas: Workforce Issues

Purpose/Aims:
To explore in a realistic setting and in real time how medical surgical nurses framed a problem in clinical decision making.

Research Questions/Hypotheses:
What cues are acquired and interpreted when presented two common clinical scenarios? How are cues used in framing the problem? How do nurses categorize the problem as a diagnosis? What heuristic reasoning strategies are used?

Significance:
Since identifying the problem is the most important aspect of problem solving, learning more about the cognitive processes that nurses use can assist educators in developing programs for basic and on-going education to assist nurses in gaining expertise in these skills.

Methods:
Protocol Analysis of Think Aloud data was employed. Thirteen nurses listened to a taped report and then assessed the Human Patient Simulator (HPS) which
was used to create a realistic setting while controlling for uniformity and consistency.

Findings:
Nurses identified and interpreted cues from report to frame a problem, which directed their search for additional cues, which they used to make a diagnosis. Nurses used a heuristic to shorten the search process and used critical thinking skills in their decision making.

Discussion:
The volunteer sample of 13 medical surgical nurses with 1-5 years experience provided preliminary observations of possible differences by years of experience. After listening to report, nurses with 1-2 years experience performed a head-to-toe assessment, whereas the more experienced nurses performed a focused assessment having framed the problem as cardiac or pulmonary. More experienced nurses (3-5) gathered more relevant cues and sought additional information to differentiate among possible diagnoses. All nurses sought additional subjective information from the patient. Recent experience with patients similar to the scenarios appeared to influence the diagnoses. The use of a heuristic shortened the search, but an accurate diagnosis depended on the procedural and declarative knowledge of the nurse. The HPS was an effective intervention to study the cognitive processes of nurses.

Research Completed: Yes

Abstract History: -This material has been published or accepted for publication.

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

Submitted By: krmullenb@radford.edu
The Relationship between Health Perception and Compliance in Heart Transplant Recipients

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Purpose/Aims: The purposes of this study is to explore the relationship between health perception and compliance in heart transplant recipients.

Research Questions/Hypotheses:
What is the perceived change in health perception from before to after heart transplantation? Is there a relationship between health perception and compliance? What factors do patients feel would help improve compliance with their prescribed therapeutic regimen?

Significance: Heart transplant recipients are prescribed complex therapeutic regimens involving medication, diet, exercise, physical activity, and lifestyle modifications. Compliance, defined as “the extent to which the patient’s behavior coincides with the clinical prescription”, is an extremely important factor to consider in the transplant population. Research has shown that failure to comply with a prescribed regimen can be detrimental to the success of post-transplant recovery and is highly correlated with rejection and mortality in transplant recipients. Health perception, defined as “the individual’s subjective evaluation of physical and mental completeness, proper function, and well-being”, is also an important psychological factor to consider in heart transplant recipients.

Methods: A descriptive correlational approach and mixed methodology was used to elicit an in depth analysis of health perception and compliance. The quantitative questionnaire used was a modified version of The Health Perception Questionnaire (HPQ). This was followed by an interview conducted by the researcher using the Compliance Questionnaire (CQ).

Findings: Findings from 7 participants showed that a poorer health outlook prior to transplantation was associated with a higher level of compliance in the post transplant period (p<.005, correlation coefficient -.9). Furthermore, a high health outlook in the post transplant period was positively correlated with a high level of compliance (p approached .066, correlation coefficient .72).

Discussion: Medication compliance was found to be the highest of all the areas addressed. Diet and exercise were found to be the most difficult areas of compliance. Interestingly, health worry/concern remained relatively the same when comparing pre/post transplant.

Research Completed: Yes

Submitted By: savage24@uab.edu
Abstract ID: 441

Diagnosis Specific Emergency Department Discharge Instructions for Actual or Suspected Community Acquired Methicillin Resistant Staphylococcus aureus Skin or Soft Tissue Infections

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The purpose of this study is to improve individual and community health outcomes related to actual or suspected CA-MRSA skin or soft tissue infections by implementing a change in the emergency department (ED) discharge instruction process. A second aim is to describe factors that may influence decision making for using diagnosis specific discharge instructions in these patients, by emergency department nurses.

Research Questions/Hypotheses:
- Did the educational interventions contribute to employees’ intention to change their behavior?

Significance:
The prevalence of community-acquired methicillin resistant Staphylococcus aureus (CA-MRSA) has steadily increased during the past decade and is the major pathogenic source of skin and soft tissue infections in emergency departments.

Methods:
A single group pre-test post-test design was utilized through a convenience sample of sub-urban emergency department employees in Atlanta to complete a 23 item survey. The collected data were analyzed for pre and post differences using the Spearman correlation coefficient and the Wilcoxon signed rank two-sided test.

Findings:
A total of 57 pairs of surveys were completed. The strongest relationships were observed with behavioral beliefs \( r = 0.513, \ p < 0.001 \) and control beliefs \( r = 0.628, \ p < 0.001 \). The paired relationship between the subjects’ responses before and after the intervention showed a significant relationship between each quality. Subjects tended to increase their scores from the pre-test to the post-test.

Discussion:
The evaluation of the diagnosis specific discharge instructions and influences of health care providers’ willingness to change will assist in hospital policy making regarding implementing changes in discharge processes. In addition, the information provided by this study will open new avenues for future research regarding implementing new processes in hospitals.
Patterns and Predictors of Physical Functioning at 5 to 10 years after Heart Transplantation

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The purposes of this study were to describe physical functional disability over time and identify predictors of physical functional disability from 5 - 10 years after heart transplantation (HT).

Research Questions/Hypotheses:
What are the predictors of physical functioning at 5 -10 years after HT?

Significance:
There are few studies of long-term physical function after HT. Studies were cross-sectional, and no studies were found that used multivariate analyses to examine physical function from 5 to 10 years after HT.

Methods:
Prospective data were collected from a non-random sample of HT patients (pts), transplanted between 7/1/90 - 6/30/99 at 4 medical centers in the U.S. Pts. completed the following tools: Sickness Impact Profile, Compliance with HT Regimen, Jalowiec Coping Scale, Cardiac Depression Scale, Positive and Negative Affect Schedule, and chart review data were gathered. Statistical analyses included measures of central tendency ± standard deviation and multiple regression coupled with repeated measures.

Findings:
Pts. (n=555) were 78% male, 90% white, and mean age at time of HT = 54 ± 9 years. At 5-10 years after HT, mean physical functional disability scores were low (mean=0.06±0.09, 0=no functional disability to 1=most functional disability), and 34-45% of patients reported having no physical functional disability. Predictors (with a partial R2 &#8805; 1%) of more physical functional disability were more neuromuscular symptoms, depression, more co-existing illnesses, higher New York Heart Association Class, rejection/infection/and/or CAD, female, not employed, increased body mass index, and orthopedic problems, accounting for 42% of variance (F= 84.75, p<0.0001).

Discussion:
Most pts. who are 5 - 10 years post HT have low levels of physical functional disability. Predictors of physical functional disability include demographic variables, co-morbidities, complications of HT, symptoms, and depression. These findings provide direction for the development of strategies to assist pts to reduce their level of disability or function within their level of disability and receive assistance.

Research Completed:
Yes

Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
-Details: International Heart and Lung Transplant Society, 2006

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes
Abstract ID: 541

**Influence of a Safety Culture of Reporting of Medication Administration Errors**

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**Abstract Information**

Presentation Preference:

SNRS Student Poster Presentation

Willing To Submit Poster?

Yes

Abstract Categories:

Interest Group: Researchers in Clinical Settings
Thematic Areas: Health System

Purpose/Aims:

The purpose of this review is to discuss the state of the science of patient safety and medication administration errors.

Research Questions/Hypotheses:

Is there a difference between non-magnet and magnet hospital nurses reported barriers to disclosing medication errors and near misses? Is there a difference in the perceived culture of patient safety between magnet and non-magnet hospitals?

Significance:

Health care systems use medication administration errors as indicators of patient safety. Nurses directly affect medication error rates and subsequently impact patient safety. Ensuring patient safety and error reduction are central concerns for the profession and a responsibility of each nurse. Reporting barriers contribute to the difficulty of ensuring patient safety. The literature reports that error disclosure is influenced by the organizations’ culture. Magnet hospitals, with an emphasis on “concern for the patient”, impact patient safety culture.

Methods:
A literature search was conducted for the years 1995-2007 using CINAHL, Academic Search Premier, Medline, Clinical Pharmacology, and Health Sources: Nursing/Academic databases using the key words “medication error,” “patient safety,” “nursing,” and “adverse events”. Limits were set to include only research articles written in English; bibliographies were reviewed and additional pertinent articles were retrieved.

Findings:
The study instruments have documented psychometric properties but generalizability of the studies is a limitation. Studies conducted occurred in limited geographic areas; Midwest, California, and Taiwan, further limiting their generalizability. There was a lack of knowledge of the influence of safety culture on willingness to report errors in the literature.

Discussion:
Organizations where a culture of safety theoretically exists would be expected to have more accurate error rates; such as Magnet classified hospitals. A study addressing the relationship between error reporting and safety culture with nurses working in non-magnet and magnet classified hospitals is warranted. Results of the study can be used to identify areas for improved patient safety.

Research Completed: No
Abstract History:
Financial Disclosure:
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Yes
FDA Disclosure:
Cleared: Yes
Non-Exclusive License:
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Abstract Information
Presentation Preference: SNRS  Student Poster Presentation
Abstract Categories: Interest Group: Researchers in Clinical Settings
Thematic Areas: Chronic illness
Purpose/Aims: Compliance with immunosuppressant medication regimens is critical in adult renal transplant recipients. Given the multidimensional nature of noncompliance, assessment must go beyond the single measurement of medication intake. The purpose of this paper is to explore the use of current electronic monitoring technology in medication compliance research and determine the potential for use of the Med-eMonitor system in the adult renal transplant population.
Research Questions/Hypotheses: Does a relationship exist between the use of the Med-eMonitoring system and medication compliance rates?
Significance: Approximately 28% of adult renal transplant patients do not comply with immunosuppressant regimens. Twenty percent of late rejections and 16% of graft losses are associated with noncompliance (DeGeest et al, 2006). Failure to comply with IST can potentially influence graft function, quality of life, morbidity and mortality, and healthcare costs.
Methods: 

Abstract ID: 545
A search of the literature was conducted within the disciplines of nursing, medicine, and psychiatry using CINHAL, PsychInfo, and PubMed databases. Over 600 articles resulted from the initial literature search. Twenty-two articles were selected for analysis within the HIV/AIDS, renal transplant, heart failure, and schizophrenic populations. Analysis was performed to determine the use of existing technology, contributions to existing knowledge, future research recommendations, and user experiences.

Findings:

Current electronic monitoring technology, while not without limitations, has identified patterns of medication taking behavior that can be targeted by compliance enhancing interventions. Limited studies exist that test the relationship between the use of the Med-eMonitor system and medication compliance rates. A single study using the device within the congestive heart failure population identified a 94% medication compliance rate but failed to identify a relationship between use of the device and enhanced compliance.

Discussion:

The Med-eMonitor system exceeds current electronic monitoring technology capabilities by providing educational, behavioral, and social support interventions while simultaneously recording patterns of medication taking behavior. Potential application within the renal transplant population and recommendations for research are proposed.

Research Completed: Yes

Abstract History:

Financial Disclosure:

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Yes

FDA Disclosure:

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Accepted Terms: Yes

Submitted By:

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Safety Practices Used by Critical Care Nurses in the Care of Patients Receiving Mechanical Ventilation

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Presentation Preference: SNRS  Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Researchers in Clinical Settings
Thematic Areas: Acute illness

Purpose/Aims: To describe critical care nurses’ safety practices in the care of patients who require mechanical ventilation.

Research Questions/Hypotheses: What are the safety practices of critical care nurses related to mechanical ventilation?

Significance: Daily around 12,000 patients receive mechanical ventilation in US hospitals. Since January 2002, there have been 23 reports of injury due to mechanical ventilator adverse events; death was the ultimate consequence in 83% of these cases. The appropriate use of ventilator safety protocols may reduce patient risk for injury or death. There are no studies that describe ventilator safety practices used by critical care nurses.

Methods: A random sample of critical care nurses (n = 793) from the American Association of Critical Care Nurses completed the Mechanical Ventilation Survey. Most respondents were Caucasian (78%) females (88%) aged 46 (SD 9) years, employed in a community hospital (74%) with 17 (SD 9) years of critical care experience.

Findings: A majority of respondents reported a lack of attention to ventilator safety that included absence of a policy to identify alarm ranges and nursing response to alarms, absence of criteria to establish ventilator alarms and criteria for alarm range changes with changing patient condition. Respondents reported that they consider that one third of ventilator alarms are false alarms. Although a majority reported use of a sedation protocol, restraints were used more than half the time with ventilated patients.

Discussion: Critical care nurses frequently employ sedation and physical restraint to increase patient safety; however, there is little attention to the use of ventilator alarms as a means to improve patient safety.

Research Completed: Yes

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure: Cleared: Yes

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Submitted By: ashley.wellman@uky.edu
Abstract ID: 607

A Case Study: Critical Care Nurses’ Role in the Interception of Medication Errors

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Abstract Information
Presentation Preference: SNRS Student Poster Presentation
Willing To Submit Poster? Yes
Abstract Categories: Interest Group: Researchers in Clinical Settings
Thematic Areas: Health System
Purpose/Aims: The purpose of this descriptive research study is to describe the factors that impact the interception of a medication error by the registered nurse, including reporting the potential medication error. <br />
Research Questions/Hypotheses:
1. What are the decision steps made by the adult intensive care nurse in the process of intercepting a medication error? 2. How does the interception of a medication error impact future adult intensive care nursing practice decisions, including error reporting?
Significance: Of the estimated 44,000 to 98,000 deaths attributed to medical errors, 7000 of those deaths are the result of medication errors (Kohn, Corrigan, & Donaldson, 2000). Nurses are more likely to intercept a medication error than other disciplines involved in the medication process (Leape et al., 1995). Medication errors are more prevalent in adult intensive care settings than on general medical surgical units (Bates et al., 1995) due to work intensity and unpredictability of many critical patient events (Wheeler & Wheeler, 2006).

Methods:
A case study design will be utilized to capture information about decisions on intercepting medication errors, including 1) why the decision was made, 2) how the decision was implemented, and 3) the result of the decision (Yin, 2003). A convenience sample of 10 - 15 adult critical care nurses who have intercepted medication errors will be recruited from two ICUs located on dual campuses in one metropolitan city of Louisiana. Using data triangulation methods, data will be collected using 1) participant interviews, 2) fieldwork observations, and 3) historical medication error interception reports.

Findings:
This study is in the proposal stage, therefore no findings are available to report.

Discussion:
Health care professionals require scientifically-based information on factors that will identify interventions and strategies to prevent and avert medication errors. As a result of this case study, future research could include theory development and interventional research to enhance medication error interception (Rothschild, 2006).

Research Completed: No
Abstract History:
Financial Disclosure:
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FDA Disclosure:
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Submitted By: cathygriffiths@bellsouth.net
Abstract ID: 611

Performance Obstacles During Medication Administration by Hospital Nurses

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Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Researchers in Clinical Settings
- Thematic Areas: Workforce Issues

Purpose/Aims: The purpose of this observational study is to identify the performance distractions experienced by registered nurses (RNs) during medication administration.

Research Questions/Hypotheses:
1. What are the number of times RNs are distracted during medication administration? 2. Describe the types of performance distractions do RNs experience during medication administration.

Significance: Recent research has focused on events leading to medication errors or adverse events that occurred due to distractions or interferences with nursing responsibilities. The nurses’ lack of concentration and distractions led to approximately 50% of medication errors. Moreover, it is unknown what specific distractions result in insufficient patient care.

Methods:
This is an observational study. We will observe RNs who work on general medical-surgical units in a large university-based hospital setting during routine medication administration. The RNs must have at least two years work experience on their current unit. Analysis will consist of descriptive, chi-square, and T-test statistics.

Findings:
Study in progress.

Discussion:
Patient care distractions may lead to errors in medication administration and adverse events that result in an increase in patient’s hospitalization stay and poor patient outcomes. There is a need for nurses to recognize the prominent distractions to decrease the rate of errors and improve patient outcomes.

Research Completed:
No

Abstract History:
Financial Disclosure:
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FDA Disclosure:
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Abstract ID: 648

Barriers to Conducting Research in a Non-Academic/Non-University Affiliated Hospital

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Abstract Information
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Willing To Submit Poster?
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Abstract Categories:
Interest Group: Researchers in Clinical Settings
Thematic Areas: Adult Health
Purpose/Aims:
NOTE: The poster that I want to present is on the barriers I encountered as
I conducted the following research study, A Comparison Study of the Efficacy of Continual Lateral Rotation Therapy (CLRT) on Nosocomial Pressure Ulcers and Nosocomial Pneumonias.

Research Questions/Hypotheses:
Will the use of nursing practice protocols with CLRT reduce the following:
- Nosocomial pressure ulcers
- Nosocomial pneumonias
- Hospital LOS
- ICU LOS
- Ventilator days

Significance:
Nosocomial pressure ulcers and pneumonia present a major problem for health care facilities. It is estimated that 2.5 million patients develop nosocomial pressure ulcers each year while in acute-care facilities. The cost can be as much as 11 billion dollars per year (Ready 2006). According to the Center for Disease Control Guidelines (1997), nosocomial pneumonia accounts for mortality rates from 20% - 50% in hospitalized patients and prolongs hospitalization by 4–9 days at a direct cost of $1.2 billion per year (MMWR, 1997). CLRT has been shown to reduce hospital-acquired pneumonia, but there have been very few studies looking at the use of CLRT in the reduction of pressure ulcers. This study was to designed to address this issue.

Methods:
A quasi-experimental study using a convenience sample of patients admitted into the Medical-Surgical Step-down Unit was conducted. Nursing practice protocols developed by a multidisciplinary team were used to ensure the proper utilization of the CLRT. The Braden Risk Scale and the Pulmonary Predicus Risk Tool were used to risk assess every patient admitted to the unit, and if found at risk, then the CLRT Protocol Order set was initiated.

Findings:
Inaccurate data collection prevented quality data analysis, resulting in an inability to assess the study’s goals and objectives.

Discussion:
The research study conducted was hampered by many problems. Even though the study was completed, the data was questionable. The barriers encountered are the essence of this poster presentation.

Research Completed:
Yes

Abstract History:

Financial Disclosure:
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Yes

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FDA Disclosure:
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Overcoming Barriers to Research Participation amongst Racial/Ethnic Minority Populations

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Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Researchers in Clinical Settings
Thematic Areas: Health Disparities

Purpose/Aims: To explore methods to improve research study participation in racial/ethnic minority populations.

Research Questions/Hypotheses: What strategies do HIV+ racial and ethnic minority community members believe will be most effective in recruitment of ethnic/minority research study participants?

Significance: Racial/ethnic minorities are disproportionately affected by HIV and AIDS in the U.S. Randomized clinical trials are utilized to evaluate the safety, efficacy and tolerability of medical interventions. However, racial/ethnic minority research study participation has generally not reflected the U.S. HIV/AIDS demographics.

Methods: A written survey and verbal responses were collected during a single focus group session of primarily African American Washington, D.C. community members, 22-65 years old, living with HIV/AIDS, and primarily African American D.C. community healthcare providers/case managers.

Findings: Most frequent responses included: Get the word out about HIV/AIDS clinical trials; use plain language; provide adequate financial compensation; locate trial sites in/near communities of interest; utilize community recruiters, express genuine interest in community members; give something back.

Discussion: HIV+ members of Washington D.C.’s racial/ethnic minority communities are interested in learning about and participating in HIV/AIDS clinical trials. Incorporating suggestions/concerns of racial/ethnic minority community members into recruitment efforts may yield improved recruitment/retention of potential racial/ethnic minority research subjects.

Research Completed: Yes

Abstract History:

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

Submitted By: mdegrezia@msn.com
Abstract ID: 680

The effect of nutritional support on weaning outcome in adult patients receiving mechanical ventilation

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Researchers in Clinical Settings
Thematic Areas: Acute illness

Purpose/Aims: To describe the nutritional support practices and determine the effect of nutritional support on weaning outcome in patients supported by mechanical ventilation

Research Questions/Hypotheses:
H1. Patients who receive nutritional support will be more likely to successfully wean from ventilation.  H2. Ventilated patients with a positive cumulative fluid balance will be more likely to be unsuccessful during weaning.

Significance: Nutritional support is a major issue for critically ill ventilated patients because as many as 40% of intensive care patients are malnourished. Nutritional support for patients who require mechanical ventilation improves patient outcome by enhancing immune function, respiratory muscle function and ventilatory drive. There are no recent studies that evaluate nutritional support and weaning outcome.

Methods:
This is a retrospective medical records review being conducted at an academic medical center. A random sample of 225 patients was chosen from a list of all patients who received mechanical ventilation (n = 613) during January 1 through June 30, 2007. Nutritional support, defined as enteral or parenteral solutions administered, will be evaluated by calories prescribed and administered, route administered, biomarkers of nutritional state and cumulative fluid balance. Nutritional state will be evaluated during the time the patient received ventilation and weaning outcome will be determined. Descriptive statistics will characterize nutritional support practices. T tests and chi square analysis will be used to compare nutritional support between patients who were successfully weaned and those who were not.

Findings:
Data collection is anticipated to be completed by January 1, 2008.

Discussion:
These data will provide information about the current practices related to nutritional support for patients who require mechanical ventilation and determine the effect of nutritional support on weaning outcome.

Research Completed: Yes

Abstract History:

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

Submitted By:
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Effects of Music Therapy on Preterm Infants in the Neonatal Intensive Care Unit

Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Researchers in Clinical Settings
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims: To examine the effects of a 15-minute live music therapy intervention on heart
rate, oxygen saturation, level of motor activity, behavioral distress, and sleep states in premature infants in the NICU.

Research Questions/Hypotheses:
1. Infants will exhibit a greater decrease in heart rate, level of motor activity, and signs of behavioral distress during and for 10 minutes after exposure to a 15 minute live music intervention compared to no-music condition.
2. Infants will exhibit a greater increase in oxygen saturation during and for 10 minutes after exposure to a 15 minute live music intervention compared to no-music condition.

Significance:
Infants born prior to 37 weeks of gestational age are considered preterm, and infants born prior to 32 weeks gestational age are considered very preterm. During an average week in the United States in 2006, 9,776 infants were born preterm and 1,570 were born very preterm. Medical and technological advances in the care of the preterm infant have greatly increased infant survival over the past decade. Researchers have noted that medical and nursing procedures and the excessive noise and other stimulation in the NICU environment are stressful for the preterm infant. The focus of the highly trained staff in the NICU has been body system physiologic support as well as neuroprotective strategies and neurodevelopmental support, although preterm children consistently experience a higher rate than fullterm controls of sensory impairments.

Methods:
One-group repeated measures crossover design. The sample included 20 preterm infants who were hospitalized in a neonatal intensive care unit in the southern United States. Infants served as their own controls. Data were collected on four occasions over a 3 week period. On two occasions the infants received 15 minutes of live music provided by a music therapist, and on the other two occasions the infants did not receive the music intervention.

Findings:
Not yet completed

Discussion:
Not yet completed

Research Completed:
Yes

Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

Submitted By:
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Abstract ID: 776

**Innovative Methodology for Nursing Research**

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Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Researchers in Clinical Settings
Thematic Areas: Methods

Purpose/Aims: The purpose is to present the mixed methodology employing single subject designs within an experimental arm of a between groups study.

Research Questions/Hypotheses: None.

Significance: Single subject methodology (SSM) is a quantitative, experimental methodology. SSM was originally employed within the Behavioral Analysis field of Psychology and has only recently been used within the clinical research setting. SSM has greater tolerance for heterogeneous populations, more detailed data, and all data obtained is retained. Randomized group designs have long been used in clinical trials yet the researcher loses data due to regression to the mean, outliers or influential cases. Thus, a methodology that could soundly combine both techniques warrants further investigation.

Methods: Propose a mixed methodology using between group design with a SSM within the experimental arm. The control group may be a random group or a matched control group. RATIONALE- For use with pilot, small sample experimental studies when the research question involves time, repeated measurements of a target variable, a nested variable, a heterogeneous population, and/or outlier/influential cases that may yield useful information.

Findings: With the proposed methodology the combined visual and statistical analysis will yield the most robust, detailed information available from the data obtained. Data analysis will occur in three tiers. The initial tier will be visual analysis which provides three essential components: trend analysis, change analysis, and variability analysis. The second tier will examine each individual subjects’ data and the third tier will examine between groups data, both tiers will be conducted via statistical analysis. The combination of visual and statistical analysis will be illustrated withinin this presentation.

Discussion: The proposed innovative application of established experimental designs has the potential to yield a greater depth of knowledge than either traditional random control group designs or single subject designs. It is especially useful for pilot studies and those evaluating new interventions or treatments in applied natural settings.

Research Completed: Yes

Abstract History: -This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.
-Details: UF CON Research Day 2007

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

Grants/Research Support: Y
University of Florida
Veteran’s Health Administration
Consultant:
Stock/Shareholder:
Speaker’s Bureau:
Abstract ID: 856

Effects of Systemic Inflammation on Development of Nosocomial Infections

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Presentation Preference: SNRS  Student Poster Presentation

Willing To Submit Poster?  Yes

Abstract Categories: Interest Group: Researchers in Clinical Settings
Thematic Areas: Acute illness

Purpose/Aims: Nosocomial infections (NI) affect more than 2 million Americans annually, with approximately 35% occurring in the ICU. Although the central role of the inflammatory response is to control infections, an exaggerated response may play a role in the development of NI. There is some evidence that cytokines, mediators of the inflammatory response, may enhance bacterial growth and that anti-inflammatory cytokines may promote development of infections. An exaggerated inflammatory response may be harmful, resulting in shock and organ failure. One evolutionary mechanism that has evolved to protect the host from harm is the inhibition of Toll-like receptor signaling by IL-1 receptor associated kinase-M. Toll-like receptors recognize bacterial components and this may serve as a mechanism for development of NI. The purpose of this study is to determine the impact of baseline systemic inflammation (SI) on the development of NI among patients within the first 14 days of ICU stay.

Research Questions/Hypotheses:
Rates of NI developed within the first two weeks of ICU stay will be higher among sepsis patients who present with higher SI (IL-6 4th quartile) versus lower SI.

Significance:
The findings of this study may bring awareness to additional risk factors for development of nosocomial infections, and promote earlier detection and treatment.

Methods:
Prospective observational study. Consenting patients meeting inclusion (SIRS with identified or suspected infection) without exclusion (immunosuppressed, age > 90) criteria will be included. A sample of 78 is estimated to detect a 30% difference of NI rates with a power of 80. All participants will be monitored with equal diligence for NI development daily using CDC Guidelines. Plasma cytokine measurements will be measured in duplicate at baseline. Statistical analyses will include Chi-square analysis, Pearson correlations, and logistic regression, and an alpha of 0.05 will be considered significant.

Findings:
None.

Discussion:
None.

Research Completed:
No

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:

Submitted By:
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Abstract ID: 883

Pressure Ulcer Incidence in Surgical Patients

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Abstract Information

Presentation Preference: SNRS  Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Researchers in Clinical Settings
Thematic Areas: Adult Health

Purpose/Aims:
The first aim of the study is to further our understanding of the incidence of pressure ulcers occurring in patients undergoing surgeries lasting longer than four hours. The secondary aim is to determine patients' risk for acquiring a pressure ulcer in the operative setting through thermographic imaging, PHI (patient health indicators), age, sex, height, BMI, surgical procedure, length of procedure, patient position, mattress surface used during surgery, medications that effect skin integrity, medical diagnosis, MAP, oxygenation, and blood glucose during surgery, level of consciousness, postoperatively, and PUSH (pressure ulcer scale for healing) scores.

Research Questions/Hypotheses:
1). To investigate the incidence of pressure ulcer occurrence in patients undergoing surgeries lasting longer than four hours. 2). To determine if measures from thermographic skin images, PHI, and PUSH scores predict the incidence of pressure ulcer occurrence in patients undergoing surgery lasting longer than four hours.

Significance:
The use of preventative approaches such as early assessment of risk, introducing pressure relieving modalities, and repetitive skin assessment may help to reduce the incidence of hospital acquired pressure ulcers (Braden & Bergstrom, 1987). Thermography as a predictor of sacral pressure sores can provide a more precise indication of risk of early development of sacral pressure sores (Newman, P & N.H. Davis, 1981).

Methods:
Fifty-four patients scheduled for surgeries estimated to last longer than four hours will be included in this study. The patients are selected from a computerized scheduling system. Inclusion criteria for patients in this study are: inpatients scheduled for surgeries lasting more than four hours, between the ages of 45-75, and positioned in the supine position during surgery. A convenience sampling technique will be used to select study subjects. Study observations of skin assessment using the PUSH tool and sacral images (digital and thermal) will be obtained and documented at four time intervals.

Findings:
Study in progress.

Discussion:
Study in progress.

Research Completed: No

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

Submitted By: wilsot@shands.ufl.edu
Abstract ID: 884

A Descriptive Study of Emergency Pain Management of Long Bone Fracture Patients in the
Emergency Department

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Abstract Information

Presentation Preference: SNRS Student Poster Presentation

Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Researchers in Clinical Settings
Thematic Areas: Adult Health

Purpose/Aims: The purpose of this descriptive study is to determine the degree of pain management for patients with long bone fractures (LBFs) in the emergency department (ED). Findings from this study will provide the first step to develop effective interventions and protocols to improve the management of pain for patients presenting with LBF in hospital EDs.

Research Questions/Hypotheses:
How is pain managed for patients with LBF in the ED? What type of pain assessment is conducted initially? What is the interval between time of admission and the time of initial pain medication? What type of pain medication is administered? What is the dose and route of administration? What type of re-assessment of pain is conducted (if any) after the administration of pain medication? Is a second pain medication administered?

Significance: A comprehensive literature review revealed that each year nearly two million people are admitted to the ED with LBF. Most patients present with moderate to severe pain associated with these fractures. Although regulations exist on the assessment and treatment of pain, research reflects that almost half of patients with LBF are not adequately medicated for pain in the ED.

Methods: Research Design and Methods Retrospective patient record reviews were conducted on adult patients who presented to the ED in a large hospital in Georgia. 205 medical records of adult patients (>18 years old) who presented to the ED with LBF comprised the sample. Instrument. Data were collected including time of admission, patient diagnosis, co morbidities, whether pain was assessed, what assessment instrument was used, pain score, medication administered including dose, time and route and whether the patient was assessed for the degree of pain relief, whether the patient received a second analgesic, and the patient demographic information.

Findings: Data analysis is underway and will be completed prior to the meeting.

Discussion: Study is currently in progress.

Research Completed: Yes

Abstract History:
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure: Cleared: Yes

Non-Exclusive License:

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Pain Control after Cardiac Surgery: Results of a Randomized, Double-Blind, Clinical Trial

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SNRS member? No
The authors investigated the efficacy of a continuous local infusion of 0.5% bupivacaine at the sternotomy for 72 hours after coronary artery bypass surgery (CABG) in reducing pain intensity and narcotic analgesic requirements.

Research Questions/Hypotheses:
There will be a reduction in pain intensity and narcotic analgesic requirements in patients recovering from CABG during the first 72 postoperative hours.

Significance:
Pain after CABG is most often related to the sternotomy. Patients who experience sternal incisional pain are reluctant to perform activities that are essential for successful postoperative recovery. Continuous infusion of local anesthetics has been described as effective in reducing incisional pain, yet few studies have explored this strategy after CABG.

Methods:
In this prospective, randomized, placebo-controlled, double-blind clinical trial, 120 consenting patients undergoing CABG will have two indwelling infusion catheters placed at the sternotomy. Patients will be randomly assigned to receive a control or bupivacaine via an elastomeric infusion pump at a constant rate of 4ml/hr for 96 hours. All patients will receive intravenous narcotics via patient-controlled pump. Pain intensity and narcotic analgesic usage will be assessed through postoperative day (POD) 3.

Findings:
Preliminary descriptive statistics from 84 patients suggest that during weaning from mechanical ventilation and on POD 3, morphine equivalents (ME) for treatment and control groups were comparable. ME usage for the control group was 1.1 times higher on POD 1 and 1.3 times higher on POD 2. Pain intensity scores were comparable for both groups on POD 1-3.

Discussion:
The preliminary analysis indicates an incremental effect on ME reduction in the treatment group. In the final analysis, ME and pain scores will be studied in four groups: on-pump and off-pump CABG with treatment and control groups. Based on preliminary results, there is strong evidence that continuous infusion of a local anesthetic is having some effect on postoperative pain control.
Abstract ID: 950

Towards an Understanding of Incorrect Counts in the Operating Room

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Abstract Information
Presentation Preference:
SNRS Student Poster Presentation

Abstract Categories:
Interest Group: Researchers in Clinical Settings
Thematic Areas: Acute illness

Purpose/Aims:
The purpose of this pilot study is to explore the experiences of registered nurses (RN) and surgical technologists who are assigned to a surgical procedure when an incorrect count occurs.

Research Questions/Hypotheses:
What do RNs and STs identify as factors that influence incorrect counts?

Significance:
"At a large academic facility, a female patient was scheduled to undergo a vaginal repair. A new surgical technologist was in orientation and a surgical resident scrubbed in on the case. The surgeon was teaching and explaining the procedure in detail to the resident and surgical technologist as he performed the surgery. The RN circulator noted a count discrepancy during the wound closure count and reported it to the surgeon. The surgeon ordered the patient x-ray and identified a retained radiopaque sponge along the left margin of the vaginal wall. Following the positive x-ray, the surgeon removed a portion of the closing sutures and retrieved the retained sponge.” (AORN, 2006). RNs in the operating room (perioperative nurses) work in an environment that has a great potential for errors. The complexity of this environment is manifested in
the patient and their condition, and in, the sophistication of instrumentation and technology. Surgical procedures vary in length and complexity during which perioperative personnel must process high volumes of information. The urgency and uncertainly with which decisions and interventions must be made, only increases the complexity of working in this environment.

Methods:
This phenomenological study interviewed 22 RNs and surgical technologists one time from 2 hospitals. Operative personnel assisted in identifying individuals who were assigned to surgeries when incorrect counts occurred. Analysis included the reading and rereading of the transcribed interviews. Multiple categories and themes are identified through this iterative process.

Findings:
Presentation of the findings includes implications for operating room personnel.

Discussion:
The discussion concludes with the identification of processes that influence incorrect counts.

Research Completed:
Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

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Index Of Symposium:

Acculturation, Emotional Distress, Neuroendocrine & Immunologic Changes Related to Preterm Birth in African American and Hispanic Women

Cognitive-Behavioral Strategies: The Body of Evidence Grows

Community-Based Participatory Research: Engaging Communities and Academicians in Research Partnerships

LA VERDAD EN LAS PALABRAS / LA VERDAD EN LAS ACCIONES

Lessons Learned While Studying Quality Home Health Care

Methodological Issues and Challenges in Conducting Research with Mothers, Fathers, Children, Adolescents and Families (Parent Child RIG symposium)

Methods in Research to Reduce Drinking in College Students who are High-Risk Drinkers

Preparing the Future Nursing Workforce: A 2-Year Longitudinal Study Examining Stressors and Nursing Student Success

Such interventions are recommended by the National Highway Traffic Safety Administration (NHTSA) as a key component of prevention in the college student population.

The Science of Preterm Infant Feeding
### Acculturation, Emotional Distress, Neuroendocrine & Immunologic Changes Related to Preterm Birth in African American and Hispanic Women

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### Cognitive-Behavioral Strategies: The Body of Evidence Grows

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PROMOTING NURSING RESEARCH IN THE SOUTH
## Community-Based Participatory Research: Engaging Communities and Academicians in Research Partnerships

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<td>W. Cowling</td>
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Lessons Learned While Studying Quality Home Health Care

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Methodological Issues and Challenges in Conducting Research with Mothers, Fathers, Children, Adolescents and Families (Parent Child RIG symposium)

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</table>
Methods in Research to Reduce Drinking in College Students who are High-Risk Drinkers

<table>
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<th>Abstract ID</th>
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<tr>
<td>377</td>
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<td>A Content Analysis of Brief Interventions to College Students’ Drinking</td>
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### Preparing the Future Nursing Workforce: A 2-Year Longitudinal Study Examining Stressors and Nursing Student Success

<table>
<thead>
<tr>
<th>Abstract ID</th>
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<td>Ann Malecha</td>
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Such interventions are recommended by the National Highway Traffic Safety Administration (NHTSA) as a key component of prevention in the college student population.

<table>
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<tr>
<td>389</td>
<td>Mary Lou Sole</td>
<td>Symposium</td>
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</table>
## The Science of Preterm Infant Feeding

<table>
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<th>Abstract ID</th>
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Abstract ID: 412

Acculturation, Emotional Distress, Neuroendocrine & Immunologic Changes Related to Preterm Birth in African American and Hispanic Women

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In spite of many attempts to address the problem of preterm birth (PTB), the rate has been increasing and in 2004 reached an all time high of 12.5% nationally. There is also a major disparity of the PTB rate between African American (AA) and Hispanic women, as compared to Caucasian women. One explanation for the failure to influence PTB rates is provided by a growing body of evidence suggesting that PTB, rather than an acute event, may be the end point of subacute or chronic pathophysiologic changes that occur before clinical symptoms are present (Freda & Patterson, 2001). Recently, researchers have provided new clues on how disturbances of bodily processes, which are often influenced by psychosocial factors, may lead to PTB (Wadhwa et al., 2002). A connection appears to exist between prenatal stress, the biochemical effects of stress, and PTB. Prenatal maternal stress appears to promote PTB through two possible biochemical pathways: 1) a neuroendocrine pathway through which prenatal stress may lead to early and/or a greater degree of activation of the maternal-placental-fetal endocrine systems that promote labor; and 2) an immune/inflammatory pathway through which stress may alter immunity thereby increasing susceptibility to intrauterine infection/inflammation that promotes labor. This symposium presents research findings related to pregnant African American women’s emotional distress. We also present findings related to Hispanic women’s level of emotional distress as related to acculturation (English or Spanish proficiency, years in the US, and country of birth) during the second trimester. Pathways to explore the phenomenon of PTB will also be discussed. Lastly, research investigating the effects of relaxation-guided imagery on stress variables will be presented.
Abstract ID: 421

Acculturation, Emotional Distress, Neuroendocrine & Immunologic Changes Related to Preterm Birth in African American and Hispanic Women

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Abstract Information
Presentation Preference:
SNRS Symposium

Willing To Submit Podium?
Yes
Abstract Categories:
Interest Group: Minority Health
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims:
This study investigated the effects of acculturation on emotional distress, social support, gestational age and infant birth weight in Hispanic women.

Research Questions/Hypotheses:
What are the effects of acculturation on distress, support, and birth outcomes?

Significance:
The Hispanic paradox is that despite adverse economic and living conditions, the new immigrants have birth outcomes similar to their Caucasian counterparts. The acculturation paradox is that risk factors and health outcomes become unfavorable with greater acculturation. The effect of acculturation may present a major problem with this growing population.

Methods:
In this cross-sectional study at 22-24 weeks gestation, we measured emotional
distress (the Perceived Stress Scale, PSS, the State-Trait Anxiety Inventory (STAI), and the Center for Epidemiological Studies of Depression (CES-D). We measured social support (Family Cohesion and Father’s Support). We measured acculturation by the Bidimensional Acculturation Scale. We conducted medical record reviews to obtain birth outcomes for length of gestation (term vs. preterm birth) and infant birth weight. We conducted correlations and Structural Equation Modeling (SEM).

Findings:

Emotional distress correlated with English proficiency ($r = +.162, p < .05$) and negatively with Spanish proficiency ($r = -.225$). Emotional distress was negatively correlated with social support ($r = -.63, p<.05$). Spanish proficiency was correlated with support ($r = +.31, p<.05$), and correlated with increasing gestation ($r = +.18, p < .05$), and correlated to birth weight ($r = +.11, p <.05$). English proficiency was negatively correlated with gestational age ($r = -.14, p <.05$) and negatively correlated with birth weight ($r = -.11, p <.05$). We used SEM to theoretically test these same variables, and had an excellent model fit ($CFI = 0.98, TLI = .96.$)

Discussion:

Findings provide evidence of the Hispanic and acculturation paradox, better mental health scores, more social support, and better birth outcomes in the lesser acculturated women. Acknowledgement: NINR R01NR00789-04 made this study possible.

Research Completed:
Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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FDA Disclosure:
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Abstract ID: 427

Acculturation, Emotional Distress, Neuroendocrine & Immunologic Changes Related to Preterm Birth in African American and Hispanic Women

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Abstract Information
Presentation Preference:
SNRS Symposium

Willing To Submit Podium?
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Abstract Categories:
Interest Group: Minority Health
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims:
This study investigated the effects of acculturation (English vs., Spanish proficiency) to predict increases in inflammation in Hispanic pregnant women.

Research Questions/Hypotheses:
What are the effects of acculturation to predict inflammation in Hispanic pregnant women?

Significance:
Certain pro-inflammatory cytokines (Tumor Necrosis Factor-alpha (TNF-α) and Interleukin 1 Ra (IL-1 Ra) are associated in the literature with atherosclerosis, and Insulin resistance as well as preterm birth. Hispanics have an increased propensity to diabetes and as a result to heart disease. Little is known about the effect of acculturation on these inflammatory markers, especially in pregnancy.

Methods:
In this cross-sectional study at 22-24 weeks gestation, we measured acculturation
by the Bidimensional Acculturation Scale (BAS) giving scores for English, Spanish and bilingual language proficiencies. We measured TNF-α and IL-1Ra in serum via a high sensitivity ELISA technique from R&D systems. We ran linear regressions comparing acculturation (English proficiency) to acculturation (Spanish proficiency) to predict TNF-α and IL-1Ra.

Findings :

Acculturation (English Proficiency) significantly positively predicts TNF-α (Coefficient of Regression = .13, p <.05) and IL-1 Ra (Coefficient of regression = .24, p <.05). In contrast, acculturation (Spanish proficiency) does not significantly predict TNF-α. Acculturation (Spanish proficiency) negatively predicts IL-1Ra (coefficient of regression = -.19, p <.05).

Discussion :

Findings provide evidence that there is a different physiologic response of the English proficient women related to inflammation as compared to the Spanish proficient women. This may be part of the explanation of better birth outcomes with the less acculturated women, as their inflammatory response is different from their more acculturated counterparts. Acknowledgement: NINR R01NR00789-04 made this study possible. Contents are the authors’ responsibility and do not necessarily represent the views of NINR, or NIH.

Research Completed: Yes

Abstract History:

Financial Disclosure:
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Cleared: Yes

Non-Exclusive License:
Accepted Terms: Yes

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Acculturation, Emotional Distress, Neuroendocrine & Immunologic Changes Related to Preterm Birth in African American and Hispanic Women

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SNRS member? Yes
Student Level:
Purpose/Aims: This study investigated the effects of relaxation-guided imagery (R-GI) on perceived stress, anxiety, depression, and corticotropin releasing hormone (CRH) levels in pregnant African American (AA) women.

Research Questions/Hypotheses: Describe the effects of relaxation and guided imagery on maternal stress in African American women during the second trimester of pregnancy.

Significance: Preterm birth (PTB) is an acute problem. A connection exists between prenatal stress, the biochemical effects of stress, and PTB. Based on the mind-body connection between stress and PTB, a mind-body intervention, such as R-GI, may be effective in reducing stress and excessive neuroendocrine levels that may lead to PTB.

Methods: This longitudinal study used a controlled randomized two-group [R-GI and usual care (UC)] experimental design. The intervention was 3 R-GI CDs designed to enhance study outcomes. Study measures collected at baseline and weeks 8 and 12 included the Perceived Stress Scale (PSS), State Anxiety Inventory (STAI), Center for Epidemiologic Studies-Depression (CES-D) and maternal plasma CRH levels. All participants completed a daily Numeric-Rating-Scale-of-Stress (NRSS), and the R-GI group completed a daily Practice Log that provided information on perceived benefits.

Findings: STAI scores decreased significantly over time (baseline, 8, 12 weeks) for the R-GI group but not for the UC group (F = 7.28, p<.05). The change in daily stress scores (NRSS) from pre-to-post use of R-GI decreased significantly (p<.05), indicating an immediate effect of the intervention. PSS scores, a more general measure of stress, and the CES-D scores did not differ between groups over time. The entire R-GI group reported perceived benefits on the Practice Log. There were no differences in CRH over time.

Discussion: Findings support the effectiveness of the R-GI intervention in reducing anxiety and daily stress levels in pregnant AA women. Perceived benefits suggest the acceptance of this mind-body intervention. Acknowledgement: This study is made possible by NINR NRSA-1-F31-NR008977, and NCCAM K-30-AT00062.
Abstract ID: 430

Acculturation, Emotional Distress, Neuroendocrine & Immunologic Changes Related to Preterm Birth in African American and Hispanic Women

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SNRS member? Yes
Student Level:
Abstract Information

Presentation Preference:  
SNRS  Symposium

Willing To Submit Podium?  
Yes

Willing To Submit Poster?  
No

Abstract Categories:  
Interest Group: Minority Health  
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims:  
The purpose of this study was to assess the levels of maternal stress in African American (AA) women longitudinally during the second trimester.

Research Questions/Hypotheses:  
Describe the patterns of stress in African American women during the second trimester of pregnancy.

Significance:  
Preterm birth (PTB) rates are increasing and there are notable disparities in these rates with African American (AA) women experiencing highest rates of PTB. Although stress is a risk factor for PTB and AA women experience a higher rate of PTB, there is limited information about the patterns of stress in AA women during this time.

Methods:  
This prospective 12 week longitudinal study used three repeated measures. Study measures collected at baseline (14-17 weeks) and 8 and 12 weeks later included the Perceived Stress Scale (PSS), Numeric Rating of Scale of Stress (NRSS), State Anxiety Inventory (STAI), and Center for Epidemiologic Studies-Depression (CES-D)

Findings:  
Pregnant AA women during the second trimester demonstrated high levels of stress, anxiety, and depression. Perceived stress and depression scores remained consistently high and anxiety levels increased during the second trimester.

Discussion:  
Patterns of perceived stress, anxiety and depression in AA pregnant women during the second trimester are concerning as they are risk factors for PTB. Results of this study suggest nurses should assess stress levels at the initial prenatal visit and throughout pregnancy and provide stress reduction strategies. Acknowledgement:  
This study is made possible by NINR NRSA-1-F31-NR008977, and NCCAM K-30-AT00062.

Research Completed:  
Yes

Abstract History:  
Financial Disclosure:  
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FDA Disclosure:  
Cleared: Yes

Non-Exclusive License:  
Accepted Terms: Yes

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Cognitive-Behavioral Strategies: The Body of Evidence Grows

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Presentation Preference:  
SNRS  Symposium

Willing To Submit Podium?  
Yes
Willing To Submit Poster?  
Yes

Abstract Categories:  
Interest Group: Psych/ Mental Health  
Thematic Areas: Adult Health

Purpose/Aims:  
There is a growing body of research that supports the use of cognitive-behavioral strategies to improve health. The way an individual thinks can impact both their mental and physical health. In his seminal work with depressed individuals, Beck proposed that the central cognitive changes in clinical depression involve negative perceptions of the self, world, and future (the cognitive triad). Beck theorized that the content of conscious thoughts led to specific emotional responses. Therapeutic interventions developed by Beck included using behavioral strategies that re-involve patients in pleasurable social and physical activities, teaching problem solving techniques, and using cognitive techniques that identify negative thoughts and replace them with more accurate and helpful views. Cognitive-behavioral strategies are now being tested with individuals who have physical problems.
The purpose of this symposium is to demonstrate how cognitive-behavioral strategies used in a variety of clinical populations have been effective in improving health. Hall and colleagues will describe a negative thoughts intervention that has been tested in college women at-risk for depression and low-income single mothers with high levels of depressive symptoms. Moser and colleagues will present findings from three studies that tested a cognitive-behavioral intervention in patients with heart failure. Hahn and colleagues will describe an integrated cognitive-behavioral intervention designed to help pregnant smokers quit and remain abstinent. The challenges of translating these encouraging findings into clinical practice will be addressed.

Research Questions/Hypotheses:
Overview

Significance:
Overview

Methods:
Overview

Findings:
Overview

Discussion:
Overview

Research Completed:
Yes

Abstract History:

Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
Yes

FDA Disclosure:
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Non-Exclusive License:
Accepted Terms: Yes

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Cognitive-Behavioral Strategies: The Body of Evidence Grows

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Student Level: 

**Abstract Information**

Presentation Preference:  
SNRS Symposium

Willing To Submit Podium? Yes
Willing To Submit Poster? Yes

Abstract Categories:  
Interest Group: Psych/ Mental Health
Thematic Areas: Adult Health

Purpose/Aims:  
To determine the impact of cognitive-behavioral therapy on: 1) heart failure rehospitalizations or cardiac mortality; 2) quality of life; 3) perceived control, anxiety and depression; and 4) heart rate variability and plasma norepinephrine.

Research Questions/Hypotheses:  
Cognitive-behavioral therapy will result in decreased heart failure rehospitalizations or cardiac death, improved quality of life, increased perceived control, decreased anxiety and depression, improved heart rate variability, and decreased plasma norepinephrine.

Significance:  
Heart failure has been called the most important public health problem facing cardiovascular clinicians and researchers because of its high and increasing incidence, prevalence, morbidity and mortality. Despite substantial advances in pharmacologic therapy, clinical improvements seen among patients are modest. Nonpharmacologic therapy, including cognitive-behavioral therapy, has received relatively little attention, yet has potential to serve as an important adjunct to pharmacologic therapy.

Methods:  
In a series of three studies, more than 400 patients with advanced heart failure were randomized to intervention or usual care control groups. The intervention consisted of individual 6-week cognitive-behavioral therapy training sessions. Data were collected at baseline, 3 and 12 months and analyzed using survival analysis and repeated measures analysis of variance.

Findings:  
After training, intervention patients had a shorter time to the combined endpoint and 25% fewer rehospitalizations for heart failure than controls (p <0.05). Quality of life was improved as were depression, anxiety, and perceived control in the intervention group compared to the control group (p < 0.05 for all). Heart rate variability response to standardized physical stressor was improved in intervention patients but not in controls (p <0.05). Norepinephrine level was unchanged in intervention patients across time, but increased in controls (p<0.01).

Discussion:  
Cognitive-behavioral therapy may be a safe and effective nonpharmacologic adjunct in the management of the high morbidity seen in patients with advanced heart failure.

Research Completed: Yes

Abstract History: 
Financial Disclosure:  
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?  
Yes

FDA Disclosure:  
Yes
Abstract ID: 448

Cognitive-Behavioral Strategies: The Body of Evidence Grows

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Willing To Submit Podium? 
Yes
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Yes

Abstract Categories:  
Interest Group: Psych/ Mental Health 
Thematic Areas: Women's Health

Purpose/Aims:  
To describe a cognitive-behavioral technique designed to decrease negative thinking through the use of thought stopping and affirmations and to summarize the affect of this intervention in two studies.

Research Questions/Hypotheses: 
It was hypothesized that depressed women randomized to receive this cognitive-behavior intervention would show greater improvement in depressive symptoms and negative thinking compared with participants in the control group.

Significance:  
Cognitive-behavioral strategies involve the use of self-management techniques to alter thoughts, feelings, and behaviors. Cognitive-behavioral strategies focus on teaching individuals skills to regulate negative thoughts and moods.

Methods: 
This cognitive-behavioral intervention was tested in college women at-risk for depression (N = 92) and low-income single mothers with high levels of depressive symptoms (N = 136). The intervention was designed to incorporate cognitive-behavioral techniques to assist in reducing negative thinking in depressed women. Thought stopping and affirmations were the primary strategies taught. Components of the intervention included affirmations and direct actions adapted from Verona Gordon’s Insight program; information on thought stopping, affirmations, and distorted thinking styles; and STOP technique developed by Meichenbaum. These techniques are referred to as covert assertion and include thought interruption; they are designed to help people change their thinking styles. The intervention is delivered in a group format to provide contact with peers with similar problems, reduce isolation, promote change, and be cost-effective. Each participant received an audiotaped relaxation exercise protocol and a notebook that contains all handouts, homework assignments, and the group schedule to be distributed at the first group meeting.

Findings: 
In each of these randomized controlled trials, the intervention was effective in reducing negative thinking and depressive symptoms and improving mental health.

Discussion: 
The successful application of this intervention in two groups of at-risk women provide evidence of its efficacy in these vulnerable populations. The challenges of translating these findings into clinical practice will be discussed.

Research Completed: 
Yes

Abstract History: 
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Cognitive-Behavioral Strategies: The Body of Evidence Grows

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Willing To Submit Podium?  
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Abstract Categories:  
Interest Group: Psych/ Mental Health  
Thematic Areas: Women's Health

Purpose/Aims:  
To explore the efficacy of a cognitive-behavioral intervention originally designed for depressive symptoms with pregnant smokers. The intervention was combined with a telephone intervention for smoking cessation during and after pregnancy and home exposure assessments for secondhand smoke.

Research Questions/Hypotheses:  
It was hypothesized that the intervention group would have fewer depressive symptoms and negative thoughts and greater quit attempts and smoking abstinence post-intervention, compared to controls.

Significance:  

INDEX FIRST PREVIOUS NEXT LAST
One-third of pregnant women who stop smoking during pregnancy remain smoke-free one year after delivery. Depressed women are less confident about quitting than non-depressed women. The efficacy of traditional smoking cessation interventions in pregnancy is minimal.

Methods:
An exploratory, quasi-experimental design tested the efficacy of the integrated intervention. Data on smoking and quit rates, urine cotinine, nicotine dependence, air quality, depressive symptoms, negative thinking and chronic stressors were collected at baseline, one month after the group intervention and two and four months postpartum. The treatment group (n = 11) received the intervention during and immediately after pregnancy. The control group (n = 5) only responded to in-person interviews. The TSI Sidepak was used to assess fine particulate matter in homes.

Findings:
While the groups were similar on demographics and outcome variables at baseline, the treatment group had fewer depressive symptoms and thoughts of hopelessness than controls at the first post-intervention interview. Cigarette use, nicotine dependence, and urine cotinine did not change significantly from baseline to the first post-intervention interview. Subject attrition postpartum precluded quantitative analysis of data collected at the third and fourth interviews. Participants reported less home smoking following the exposure assessments.

Discussion:
This exploratory study supports the potential effectiveness of a cognitive-behavioral intervention in decreasing depressive symptoms and hopelessness among pregnant smokers. A larger trial is needed to test the effectiveness of this integrated mental health intervention in promoting quit attempts and smoking abstinence among pregnant smokers.

Research Completed: Yes
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Community-Based Participatory Research: Engaging Communities and Academicians in Research Partnerships

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Presentation Preference: SNRS Symposium

Abstract Categories:
Interest Group: Community/Public Health
Thematic Areas: Methods

Purpose/Aims:
Explain a peer-research, participatory action project for HIV prevention among lesbian and bisexual women and how it might be adapted for use in other groups. Project identified common beliefs, practices and planned prevention behavior by women, as well as providing HIV prevention education.

Research Questions/Hypotheses:
What do lesbian/bi women believe about HIV transmission, and prevention, woman-to-woman (WTW) and woman-to-man (WTM)? What responses do they have to education from peers about HIV?

Significance:
Knowledge is sparse on WTW HIV transmission but it occurs. We need to know what lesbian/bi women believe about transmission in order to tailor interventions. If education is provided, do women plan to change behavior?

Methods:
Peer researchers provided humorous demonstration of HIV-prevention to women, mostly aged 20-40, at women’s events. Peer researchers conducted 1000+ field interviews and 55 HIV-prevention skits to 3000+ attendees. Misconceptions were
corrected after interviews. Content analysis was used to identify frequent themes and information about obstacles to risk reduction.

Findings:

WTM sexual contact was more frequent than expected. Perceived morality and trust were believed to be indicators of HIV status. Many thought WTW transmission was not possible. Barrier methods were taught in the consciousness-raising skits and often needed after individual interviews. The project was hailed as successful given the demand for the skits at new events, and women’s comments in interviews about plans to change behavior.

Discussion:

It is recommended that these humorous, dramatic consciousness-raising and research methods might continue to work if adapted to each locale, and for adolescents. Education should now include information about other pathogens, eg, HPV, and contraception. Problems anticipated, such as lack of privacy and how this was handled at public venues will be discussed.

Research Completed: Yes

Abstract History:

Financial Disclosure:

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Community-Based Participatory Research: Engaging Communities and Academicians in Research Partnerships

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The purpose of this study was to examine through a community-based participatory research (CBPR) approach, the individual, organizational, and community level factors affecting access, use, and perception of mental health services for Spanish-speaking Latina women.

Research Questions/Hypotheses:
What are the mental health service needs of Spanish-speaking Latina women?

Significance:
Mental illness affects women disproportionately. In minority women, the risk of mental illness can be exacerbated by other factors such as racism, discrimination, income and education levels. Latinos in the U.S receive fewer mental health services than other groups. The National Institute of Mental Health/NIH, the Department of Health and Human Services and Healthy People 2010, have all identified a need to address this disparity. The need is especially acute given the prediction that Latinos will constitute 24.4% of the U.S. population by 2050.

Methods:
This study used qualitative methodology implemented through a CBPR approach. Data was collected by community researchers in focus groups with Spanish-speaking adult Latina women. Data was analyzed by the CBPR team using Qualitative Description.

Findings:
This paper reports the mental health service needs of Spanish-speaking Latina women in this local community.

Discussion:
Implications of the findings will be presented. Advantages of a CBPR approach will be discussed.

Research Completed:
Yes

Financial Disclosure:
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Abstract Categories:
Interest Group: Qualitative
Thematic Areas: Methods

Purpose/Aims:
The purpose of the study was to generate preliminary knowledge of the impact of childhood abuse on women’s lives and their health care using a participatory method.

Research Questions/Hypotheses:
1. What are the factors and forces influencing life patterns and transitions for women survivors of childhood abuse? 2. What are the key issues and concerns regarding health care delivery affecting women survivors of childhood abuse? 3. What are the best focus group research protocols that are sensitive to women survivors of childhood abuse?

Significance:
The study incorporated participatory mechanisms to enhance the role of women survivors of childhood abuse in the design of a woman survivor-centered inquiry. It also provided information about creating research methods that are sensitive
to the needs of women survivors of child abuse.

Methods:
Two phases of a community participatory research design were employed. The first created a research group (8 women survivors, 3 research assistants, and researcher) that developed focus group protocol and recruitment materials for targeted populations. In the second phase, focus groups with women survivors of childhood abuse were conducted and data analyzed.

Findings:
The focus group data revealed insights into the ways in which being abused as a child influenced the lives of women as well as key health care issues and concerns. Active participation of women survivors yielded critical information about research protocol sensitivity.

Discussion:
Community participatory research is an important strategy to incorporate the voices of women who are abused as children into meaningful understandings of their lives and health care concerns. While active participation of these women creates challenges for conducting research, these are the quality of the data generated by such efforts has great potential for more emancipating interventions.

Research Completed: Yes
Abstract History: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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Community-Based Participatory Research: Engaging Communities and Academicians in Research Partnerships

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Abstract Categories:
- Interest Group: Qualitative
- Thematic Areas: Methods

Purpose/Aims:
The purpose of this symposium is to describe benefits and challenges of community-based participatory research.

Research Questions/Hypotheses:
What are the benefits and challenges of community-based participatory research (CBPR) approaches? What are some examples of how these approaches have been used with groups of marginalized women?

Significance:
Community-based participatory research, with its roots in action research, empowerment, critical theory, and constructivism, is not a method but "an orientation to research" (Minkler & Wallerstein, 2003, p. 4). Israel, Shultz, Parker, and Becker (1998) define CBPR as "a collaborative approach to research that equitably involves, for example, community members, organizational representatives, and researchers in all aspects of the research process. The partners contribute 'unique strengths and shared responsibilities' to enhance understanding of a given phenomenon and the social and cultural dynamics of the community, and integrate the knowledge gained with action to improve the health and wellbeing of community members" (p. 177). Community-based participatory research challenges "both positivist notions of knowledge and traditional top-down processes of academia" (Minkler, 2006, p. 29).

Methods:
In this symposium, we will present studies that used three different versions of community-based participatory inquiry. One paper will report a study which used participatory inquiry with women survivors of child abuse; a second paper will describe a peer-research/participatory action method that was used to study HIV prevention behaviors in lesbian and bisexual women; and a third paper will describe a community-based participatory research study of mental health needs of Spanish-speaking Latina women.

Findings:
The advantages of CBPR are "the development of more pertinent research questions, user-friendly instruments, acceptable interventions, thorough data analysis, and effective dissemination strategies" (White, Suchowierska, & Campbell, 2004, p. S3).

Discussion:
Symposium objectives: 1) describe benefits and challenges of CBPR approaches to research 2) describe three successful research partnerships in studies with marginalized women

Research Completed: Yes

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LA VERDAD EN LAS PALABRAS / LA VERDAD EN LAS ACCIONES

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No
Abstract Categories:
Interest Group: Minority Health
Thematic Areas: Methods

Purpose/Aims:
OVERVIEW: Latinos are the fastest growing population group in the USA. To provide high-quality health care, the communities that welcome Latinos must find inventive ways to provide intervention for critical health issues. Partnering with Latino communities to test these interventions raises methodological issues of accurate measurement, particularly of the outcomes of the interventions being tested. One health issue of concern for nursing is that of depressive symptoms in newly-immigrated, Spanish-speaking, low-income Latina mothers. These mothers report very high rates of severe depressive symptoms which may compromise the development of their USA-born infants and toddlers. Yet, they are unlikely to receive timely intervention due to stigma, fear and a limited supply of qualified, linguistically-competent providers. A team of nurse researchers developed and conducted a randomized clinical trial of in-home psychotherapy delivered by partnering an advanced practice psychiatric nurse and a trained interpreter who reached the mothers by working with Early Head Start, a federal child enrichment program. Measurement of the intervention fidelity and critical maternal-child outcomes raised methodological issues that were studied as well. This symposium will present three different
methodological issues - observation of maternal-child interactions using Latina and non-Latina behavioral coders, development of a system to measure the accuracy of interpreted content, and methods to improve the reliability of ordinal self-report scales with low-literate Latina mothers. The symposium will promote discussion of how these issues were addressed in the course of this study and the implications for health disparity-reduction research with diverse populations.

Research Questions/Hypotheses:
See Overview

Significance:
See Overview

Methods:
See Overview

Findings:
See Overview

Discussion:
See Overview

Research Completed:
Yes

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Presentation Preference: SNRS Symposium

Willing To Submit Podium? Yes
Willing To Submit Poster? No

Abstract Categories: Interest Group: Minority Health
Thematic Areas: Methods

Purpose/Aims: Disparities in mental health care for Spanish-speaking populations arise from a shortage of fully fluent, Spanish-speaking mental health providers. The use of interpreters can fill this gap. Accurate interpretation is crucial to the safety and quality of intervention outcomes. In creating a suitable mental health interpreting system to deliver in-home psychotherapy to Spanish-speaking, depressed mothers, a team of nurse researchers corrected the factors that have lowered the accuracy of information transfer from the health professional to the client and back. This study was conducted to develop and test the feasibility of a system to validate the accuracy of interpreted information transferred between the English-speaking intervention nurse and the intervention mothers.

Research Questions/Hypotheses: See purpose

Significance: See purpose

Methods: Laws and colleagues (2004) created 22 codes to capture interpretation errors in 66% of client-interpreter-provider “conversation segments.” The coding system was difficult to replicate and contained overlapping categories. Using a de-centering technique, we reduced the Laws system to 6 categorical codes that were not overlapping and exhaustively captured all of the systematic and random interpretation errors that had been identified in the literature on healthcare interpreting. We tested the system by using scripted interactions in which an English-speaker and a fluent Spanish speaker read from a prepared interaction script that deliberately contained words and phrases commonly used in the mental health intervention. We tested the system on untrained interpreters before and after receiving a manualized training program. The interactions were taped and transcribed. Two coders coded each transcript using the 6-code system and reached 95% agreement.
Findings:
The shortened coding system captured interpretation errors in 100% of the conversation segments and was sensitive to increased accuracy in the post-course performance of the interpreters.

Discussion:
This coding system has shown preliminary accuracy and ease of use. Analysis of inter-rater reliability using actual intervention transcripts is underway and will be presented.

Research Completed:
Yes

Abstract History:
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Purpose/Aims: Mother-child interactions are commonly scored by systematic coding (scoring the occurrences of specific behaviors) and rating scales. Interactions of Spanish-speaking mothers are rarely studied due to a shortage of Spanish-speaking coders and the difficulty of comparing data from Spanish- and English-speaking mothers whose data were scored by different coders. This study described the accuracy of combining English- and Spanish-speaking coders to score interaction data.

Methods: The sample included videotapes from two studies of depression in low-income mothers: 67 Spanish-speaking mother-child dyads; 41 English-speaking dyads. Spanish-speaking mothers averaged 27.0 years of age and 8.8 years of education. Mean child age was 17 months; 55% were boys. English-speaking mothers averaged 26.4 years and 12.1 years of education. Mean child age was 20 months; 68% were boys. In systematic coding, English-speaking coders scored behaviors every 10 seconds, and then Spanish-speaking coders corrected verbal behavior coding. For ratings, two coders, at least one with the same language as the mother, rated maternal interaction quality; their consensus was used.

Findings: Inter-rater reliabilities for systematic coding were good (kappas .53-.89). Spanish coders made relatively few changes: e.g., 641 corrections in 10,114 episodes of mother talk (3.0%) and affect was corrected on 227 episodes (1.6%); 103 changes in 15869 episodes of play with mother (0.7%); 266 changes in 642 episodes of mother teach (38.9%); 1227 changes in 3552 episodes of child talk (34.6%). Agreement with the consensus maternal ratings was good (kappas .71-1.00). Spanish-speaking coders had slightly better agreement with the consensus than the English-speaking coders for Spanish-speaking mothers, but agreement did not differ for English-speaking mothers.

Discussion: Combining English and Spanish coders was an efficient method of coding interactions. English-speaking coders had greater difficulty in making discriminations that required understanding the content of speech, whereas Spanish-speaking coders were equally accurate at coding in English and Spanish.

Research Completed: Yes

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

FDA Disclosure: Cleared: Yes
LA VERDAD EN LAS PALABRAS / LA VERDAD EN LAS ACCIONES

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No

Abstract Categories:
Interest Group: Minority Health
Thematic Areas: Methods

Purpose/Aims:
Flaskerud (1988) and others have warned that the typical Likert-type ordinal scales used in many self-reports are not adequate for Spanish-speaking populations, especially those who are newly-immigrated and who are challenged in their reading ability in Spanish. As part of a larger intervention study of newly-immigrated Spanish-speaking mothers of infants and toddlers, this study was conducted to analyze the effectiveness of specific safeguards put into place to create readable, linguistically-congruent instruments administered with procedures to assist participants to answer in a way that best represented their perceptions.

Research Questions/Hypotheses:
See purpose

Significance:
See purpose

Methods:
80 Spanish-speaking mothers participated. Average age was 26 years, SD 5.9; 92% were from Mexico and were newly-immigrated (4.7 years in US, SD 2.3) with an average of 9 years of formal education (SD 2.9). Seven ordinal-scale instruments were administered: The Center for Epidemiological Studies Depression Scale (CES-D), the Child Behavior Checklist (CBCL), the Parenting Stress Index (PSI), the Marin scale (language acculturation), the Psychological Acculturation scale (PAS), the General Self-efficacy Scale (GSE) and the Family Environment Scale, conflict subscale (FES). Instruments were carefully checked for accuracy of translation and if translated, were front and back-translated using community samples of mothers close to the target population. Visual response cards were given to mothers for each scale and bilingual data collectors were trained to read all instruments aloud in Spanish and supply pre-determined explanations for complicated items. Continuous quality-control procedures were in place.
to maintain accuracy of data collection procedures.

Findings:
On all but one of the ordinal measures, the Cronbach alphas ranged from .80 to .95. The 5-item Family Environment Conflict subscale yielded a .76 which was deemed acceptable.

Discussion:
The procedures put into place to assure accurate translation and support participants’ capabilities were sufficient and resulted in adequate reliability of the ordinal self-report measures used.

Research Completed: Yes
Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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FDA Disclosure:
Cleared: Yes
Non-Exclusive License:
Accepted Terms: Yes
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Lessons Learned While Studying Quality Home Health Care

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SNRS Symposium

Willing To Submit Podium?
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No

Abstract Categories:
Interest Group: Administration
Thematic Areas: Health System

Purpose/Aims:
Home health care is not only the fastest growing segment of health care in the United States, it is the fastest growing of all service industries in the United States. One of every 15 patients discharged from hospitals now receives home health services. While the overall amount spent on home health is relatively small in comparison to other health services, its phenomenal increase (3000%) is noteworthy and establishes home health as a significant component of the US health care system. While we must be able to assure patients that the care exchange between nurse and patient is of the highest quality possible, evaluation of the quality of home health care has historically been idiosyncratic or unstandardized and, in many agencies, it was simply ignored until the1990s. The overall aim of the CLOUT-HH study was to test a proposed model as a basis for understanding how its components evaluate quality of care in the home health environment. The papers in this symposium address some of the early lessons learned in the CLOUT-HH project. Included in this symposium will be papers addressing the qualitative work that launched the study (Lynn), measures developed and tested in the study (Lynn), obstacles faced in a multi-site study (Farrar)
and preliminary results (Morgan).

Research Questions/Hypotheses:
Overview

Significance:
Overview

Methods:
Overview

Findings:
Overview

Discussion:
Overview

Research Completed: Yes

Abstract History:
Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?
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Other Financial or Material Support:

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Purpose/Aims: Understanding the linkages between Donabedian’s structure, process and outcome elements in home health care is essential to improve the quality of care. This paper seeks to use a new measure of process, patient’s evaluations of the care received (PAQS-HHV), to assess the link between process and changes in patient health status between baseline and discharge from home health care.

Research Questions/Hypotheses: see above

Significance: see above

Methods: The process subscales were originally developed using qualitative instrument development strategies and have acceptable reliability estimates in this patient population (.68 to .83). Data were gathered from patients using in-home interviews at three points in time --- admission, discharge and 1 month after discharge with 430 patients being in the multivariate analytic sample.

Findings: Between baseline and discharge, substantial positive change was seen on the following SF-36 subscales: physical functioning, role limitations due to physical health, social functioning, and pain. Minimal to no change was seen on measures of role limitations due to emotional problems, energy/fatigue, emotional well-being, and general health. Controlling for patient characteristics including demographic characteristics, presence of informal caregiving, and insurance status, it was found that patient’s perceptions of care was significantly negatively related to change in social functioning, energy/fatigue, role limitations due to emotional problems, and physical functioning. The structure measure that measured intensity of effort and concern on the nurse’s behalf was the most consistently related to change.

Discussion: The intensity of nurse effort is likely related to severity of the patient’s illness; this relationship will be further explored in this paper. In order to understand the mechanisms by which structure and process influence outcomes such as nursing care quality, measures need to be developed that adequately operationalize the complexity of the nurse-patient interaction. The PAQS-HHV appears to be able to perform in this role. Implications for further research in this area will also be discussed.

Research Completed: Yes

Abstract History: Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

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FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

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Abstract ID: 442

Lessons Learned While Studying Quality Home Health Care

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SNRS member? Yes
Student Level:

Abstract Information
Presentation Preference: SNRS Symposium
Willing To Submit Podium? No
Willing To Submit Poster? No
Abstract Categories: Interest Group: Administration
Thematic Areas: Health System
Purpose/Aims:
Despite home health care being the fastest growing segment of health care, quality
monitoring has been slow to develop there. No aspect of quality monitoring
has been slower to develop than assessment of the process of care. To address
this a qualitative study of the process of care in home health care was undertaken.

Research Questions/Hypotheses:
n/a

Significance:
see purpose

Methods:
Interviews started with a single grand tour question --- “How do you describe
or define good home health care?” Questioning proceeded until there were no
further areas to explore. Each interview was taped and transcribed. Interviews
continued until data saturation occurred. Nine patients and seven nurses were interviewed. The central theme identified was “negotiated care.” This differs markedly from the care process in acute care settings where the nurse is largely in control. In the home, the nurse is the “guest”. While she/he has the “authority” in the care exchange, the patient and family are empowered by their familiar surroundings and their ability to “do or not do” as they choose. Therefore, the nurse must help patients decide what care regimen is best for them and how to enact it. Additionally, the nurse must be able to work effectively with the family or other caregivers.

Findings:

The components of negotiated care identified were advocacy, tailoring, “doing with,” and mutual goal setting. Details of these components follow with a quote from an interview:

Advocacy - Prodding the health care system when needed.  
Tailoring - Being flexible.  
Doing With - Doing with is when patient and nurse work together.  
Mutual Goal Setting - Having to work with the patient where he/she and the family are with the illness and/or patient’s response to the illness.

Discussion:

The data bits from the interviews were the basis for two subsequent instruments. The paper will include more detailed description of the interviews/results.
Lessons Learned While Studying Quality Home Health Care

Abstract Information

Presentation Preference: SNRS Symposium

Willing To Submit Podium? No
Willing To Submit Poster? No

Abstract Categories: Interest Group: Administration
Thematic Areas: Health System

Purpose/Aims: No more is known about how to measure the process of care in home health care than is known for other venues of health care. This paper will report on the development and testing of the scales developed from the qualitative work included in this symposium.

Research Questions/Hypotheses: n/a

Significance: see above

Methods: A total of 71 items were generated for the Patients’ Assessment of Quality Scale – Home Health Version (PAQS-HHV) and 81 items for the Nurses’ Assessment of Quality Scale - Home Health Version (NPQS-HHV). Content validity of each scale was assessed by experts. The scales were then used in a large-scale study.
Each PAQS-HHV item has three response options—Never, Sometimes, and Always. The reading level of the PAQS-HHV was Grade 6. The PAQS-HHV was administered to 706 home health patients. The typical patient was a 69 year old white (65%) female (64%) who completed the 12th grade. The instrument was subjected to principal axis factoring with direct oblimin rotation. Twenty six items remained on four factors which accounted for 63% of the variance in the total scores. Reliability of the factors ranged from .68 to .83. The NAQS-HHV items have four response options, “Strongly Disagree” to “Strongly Agree” and was completed by 1,066 home health nurses. The typical participant was a 45 year old, white, female, baccalaureate-prepared nurse who had worked in home health for 7 years. PAF (direct oblimin rotation) resulted in 48 items comprising five factors accounting for 64% of the variance in the total scores. Reliability of the factors ranged from .78 to .97.

Findings:
see above

Discussion:
The paper will include a full discussion of the derived factors and how each of these instruments can be used in the evaluation of the process of care in the home health care arena.

Research Completed: Yes

Abstract History:

Financial Disclosure:
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FDA Disclosure:
Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

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Lessons Learned While Studying Quality Home Health Care

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Student Level:
When HCFA mandated the use of OASIS in home health agencies, there was a promise of home health data collection that was both inclusive and standardized. However, there it is questionable as to whether the use of the OASIS adequately addresses the elements needed to assert that quality home health care was delivered. The purpose of this paper is to explore the challenges involved in using OASIS-B1 for research purposes.

Research Questions/Hypotheses:
see above

Significance:
OASIS-B1 is mandated for use in these agencies for Medicare and Medicaid patients. It contains sections that address safety and adequacy of the patient’s home, the severity of primary and other diagnoses, knowledge about medications and needed equipment, activities of daily living (ADLs), and instrumental activities of daily living (IADLS).

Methods:
n/a

Findings:
During the course of the CLOUT-HH study, several challenges have arisen using OASIS-B1. First, the form has undergone several revisions over the last eight years. For longitudinal studies like CLOUT-HH, data gathered in the early years of the study will not be consistent with data gathered in subsequent years. Second, the OASIS-B1 forms vary across agencies. HCFA only provides guidelines as to what information home health agencies are to gather from patients, i.e. each agency has the right to adapt OASIS-B1 in a way that is relevant and useful for their particular agency. For a study based in multiple agencies, the use of different forms creates problems in standardizing data across patients, data entry and analysis. Lastly, home health agencies are only required to report OASIS information for patients who receive Medicare or Medicaid insurance. Therefore, data is often unavailable for patients with other types of insurance.

Discussion:
Because OASIS was not developed with research use in mind, researchers hoping to use OASIS in home health research should be mindful of the aforementioned difficulties and adjust their methodology accordingly.

Research Completed:
Yes

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Abstract ID: 411

Methodological Issues and Challenges in Conducting Research with Mothers, Fathers, Children, Adolescents and Families (Parent Child RIG symposium)

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Student Level:

Abstract Information

Presentation Preference:
SNRS Symposium

Willing To Submit Podium?
No
Willing To Submit Poster?
No
Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Methods

Purpose/Aims:
Objectives:
1. Identify key issues and challenges in designing and conducting research with mothers, fathers, children, adolescents and/or families.
2. Discuss strategies to address issues and challenges in conducting research with these populations.
3. Discuss challenges in designing studies from a developmental science perspective and/or based on a community-based participatory research approach with these populations.

Research Questions/Hypotheses:
Designing and implementing studies with mothers, fathers, children, adolescents and/or families can be challenging. Among the challenges which researchers face in working with these populations are accessing, recruiting, consenting and/or assenting and retaining participants. These can be particularly problematic if the participants are both adolescents and parents. In addition, because researchers are concerned with participants at varying developmental levels and/or in multiple settings, different perspectives and approaches may need to be considered when designing studies with these populations. The purpose of this symposium is to address methodological issues and challenges in working with mothers, fathers, children, adolescents, and/or families. Presenters will discuss these issues as well as strategies to address these concerns.

Significance:
- 

Methods:
- 

Findings:
- 

Discussion:
- 

Research Completed:
Yes

Abstract History:

Financial Disclosure:
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Yes

FDA Disclosure:
Cleared: Yes

Non-Exclusive License:

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Abstract ID: 413

Methodological Issues and Challenges in Conducting Research with Mothers, Fathers, Children, Adolescents and Families (Parent Child RIG symposium)

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Student Level:

Abstract Information
Presentation Preference:
SNRS Symposium

Willing To Submit Podium?
Yes
Willing To Submit Poster?
Yes
Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Methods

Purpose/Aims:
There is an increasing awareness of the importance of fathers in the development of children as well as in supporting mothers in their maternal role. Fathers are much underrepresented in nursing research, and many studies focus only on mothers with fathers excluded as participants. The purpose of this paper is to identify key methodological issues that create barriers to the inclusion of data about or from fathers in nursing research and to propose innovative approaches to increase the inclusion of fathers in research.

Research Questions/Hypotheses:

Significance:

Methods:
Findings for this presentation come from a review of research in select neonatal and child health journals over the past 5 years and examples from over 20 years of research with parents of seriously ill infants and children.

Findings:

Some of the methodological issues include: (a) Elimination of fathers as participants due to the high number of unmarried mothers, especially among low-income participants; (b) Concern that not all fathers will agree to participate, creating difficulty with recruiting even mothers; (c) Limited availability of questionnaires tested and sensitive to the issues of fathers (many developed/tested with mothers); (d) Lack of sufficient qualitative data to know enough about the perspective of fathers as a guide for urgent research questions; (e) Increased time and cost of including fathers; (f) Female researchers/team members collecting data from fathers; (g) Insufficient research funding for adequate time to recruit and retain fathers in studies; and (h) Potentially high drop-out of fathers due to insufficient time spent in designing a study that would meet the needs and match the experiences of fathers.

Discussion:

Recommendations for new, innovative approaches that will enhance the inclusion of fathers in research will be presented. It is proposed that these guidelines be debated upon and expanded leading to a consensus document for researchers on increasing the involvement of fathers in nursing research.

Research Completed: Yes

Abstract History:

Financial Disclosure:

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FDA Disclosure:

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Non-Exclusive License:

Accepted Terms: Yes

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Methodological Issues and Challenges in Conducting Research with Mothers, Fathers, Children, Adolescents and Families (Parent Child RIG symposium)

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Abstract Information

Presentation Preference:
  SNRS Symposium

Willing To Submit Podium?
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Willing To Submit Poster?
  Yes

Abstract Categories:
  Interest Group: Parent-Child
  Thematic Areas: Methods

Purpose/Aims:
Adolescent mothers are busy with school, friends, work and caring for their baby. They have very little “free” time. Additionally, many do not see the value in research. This paper will discuss these and other reasons why recruiting and retaining adolescent mothers in research are a major challenge. Several strategies from the literature and from this researcher’s personal experience for recruiting and retaining adolescent mothers in research will be discussed. Some of the recruiting strategies include gaining initial contact at the hospital following the birth of the baby and following up with phone calls, speaking to high school parenting classes, placing flyers in strategic locations, and enlisting the help of pediatric nurses in office settings. Some of the strategies used to retain adolescent mothers are being flexible in appointment times, calling the night before the appointment, having frequent phone and mail contact if conducting a longitudinal study, and using graduated incentives. During all phases of the study, important underlying principles are good communication, respect, cultural sensitivity, and connecting with the adolescent mother.

Research Questions/Hypotheses:
Abstract ID: 425

Methodological Issues and Challenges in Conducting Research with Mothers, Fathers, Children, Adolescents and Families (Parent Child RIG symposium)

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Presentation Preference: SNRS Symposium

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Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Methods

Purpose/Aims: Rapid changes in physiology and functioning occur throughout childhood but differ dramatically between individuals. Therefore, individual differences in development must be considered whenever children are studied. Developmental science is an interdisciplinary branch of science focused on understanding complex, dynamic (nonlinear) systems associated with individual change over time. The purpose of this paper is to examine the importance of the developmental science perspective and a person-oriented approach for nursing research.

Research Questions/Hypotheses:

Significance:

Methods: Examples from a longitudinal study of adolescents will illustrate the use of the developmental science perspective.

Findings: Although nursing is a holistic discipline, most nursing research focuses on group averages and/or relationships among variables. Yet, to examine complex individual processes, aspects of developmental science must be considered in study conceptualization and design from implementation through data analysis. A person-oriented approach to the study of development allows for the examination of developmental trajectories of individuals and addresses processes rather than just outcomes. In this approach, the person is both the conceptual and analytic unit. This perspective also examines the interactions of individuals with their environments. This approach allows for a more holistic understanding of development in individuals than do variable-oriented approaches that focus on only parts of the individual. The choice of statistical methods to be employed is as important as the research design. Choosing a person-centered analytic approach that focuses on patterns within individuals, such as cluster analysis, allows the researcher to take this holistic and dynamic view and examine the individual’s behavior in the context of environmental systems. While variables are important in the person-centered approach, they are important only insofar as they are a part of a pattern within individuals.

Discussion: Developmental science and person-oriented analytic approaches have the potential to help nursing science better guide nursing theory and practice.

Research Completed: Yes

Abstract History: Financial Disclosure:
Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure: Cleared: Yes

Non-Exclusive License: Accepted Terms: Yes

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Abstract ID: 426

Methodological Issues and Challenges in Conducting Research with Mothers, Fathers, Children, Adolescents and Families (Parent Child RIG symposium)

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Abstract Information

Presentation Preference: SNRS Symposium

Willing To Submit Podium? Yes
Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Parent-Child
Thematic Areas: Methods

Purpose/Aims:
The purposes of this paper are 1) to review current federal regulations and the role of local institutional review boards in the assent process for adolescents and 2) to explore practical solutions to commonly encountered obstacles in assenting teens.

Research Questions/Hypotheses:

Significance:
Adolescents bring diverse capacities for decision-making in the research milieu. Cognitive capacities may be similar to adults, although judgement may be immature. During the adolescent period individuals are more likely to engage in risky behaviors than during other developmental periods. Teens often experience life altering conditions, such as pregnancy, fatherhood, or drug use, and develop psychopathologies more frequently than during previous stages. However, teens are still minors, thus largely subject to parental control. This presents unique challenges in the research process. Adolescents can not consent to participate in research, but often are offered the opportunity to assent or dissent. Researchers who anticipate potential ethical conflicts and conduct the assent process with care may avoid common pitfalls.

Methods:
This paper will review HHS regulations at CFR 46.408(a) and 21 CFR 50.55 that require local IRBs to take specific actions concerning the assent of child subjects to participate in research. Issues specific to the adolescent assent process will be described, such as differential perceptions of risk between adolescents and adults, contextual influences on decision-making for teens, and potential ethical conflicts. Examples of relevant issues will be derived from the research and theoretical literature. Practical recommendations for conducting the assent process and writing assent documents will be discussed and illustrated with examples from local archives.

Findings:

Discussion:

Research Completed: Yes

Abstract History:

Financial Disclosure:
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FDA Disclosure:
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Methodological Issues and Challenges in Conducting Research with Mothers, Fathers, Children, Adolescents and Families (Parent Child RIG symposium)

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Presentation Preference: SNRS Symposium
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Willing To Submit Poster? No
Abstract Categories: Interest Group: Parent-Child
Thematic Areas: Methods

Purpose/Aims : Research in community settings seeking to reduce health disparities among maternal child health (MCH) populations is often challenging. Health disparities in MCH populations may present special challenges due to the complexity of interacting social forces. The purpose of this presentation will be to examine methodological issues in conducting MCH community based participatory research, by an examination of exemplary nursing studies of MCH community-based participatory research.

Research Questions/Hypotheses :

Significance : Engaging community members, particularly vulnerable MCH populations, in research can be difficult. Community members can become disillusioned and feel disempowered when they feel excluded from the decision making processes. Results of the
studies are often not useful for communities (e.g., we don’t need just another pamphlet, or what’s in it for us), and they tend to create more problems than are solved. Understanding methodological challenges and lessons learned may be helpful as nurses develop future studies to reduce health disparities in MCH populations.

Methods:

Community-based participatory research, as defined by AHRQ (2007) is a collaborative research approach that is designed to ensure and establish structures for participation by communities affected by the issue being studied, representatives of organizations, and researchers in all aspects of the research process to improve health and well-being through taking action, including social change. Methodological issues in conducting community based participatory research can create special challenges in research with MCH populations, such as scientific quality, intervention testing, inability to fully specify all aspects of the research up front, seeking a balance between research and action, and time demands. Lessons learned focusing on methodological challenges from exemplary examples from previous nursing research using a community-based participatory model in MCH populations will be examined.

Findings:

Discussion:

Research Completed: Yes

Abstract History:

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Methods in Research to Reduce Drinking in College Students who are High-Risk Drinkers

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The purpose of this study was to investigate the agreement between the Brief Readiness to Change (RTC) questionnaire and a one-question scale measure in college students who engage in high-risk drinking.

Can a single item readiness to change question be substituted for the Readiness to Change questionnaire when assessing college students' readiness to change drinking behavior?

Reducing alcohol consumption in college students has been identified as a major health priority for college campuses. Students' readiness to change behaviors may assist in identifying effectiveness of an intervention. A one-item tool, if relevant, could be beneficial in screening students.

Three hundred sixty-four high-risk drinking college students, identified during their initial student health clinic visit through an alcohol screening questionnaire incorporated into a health questionnaire, completed the brief Readiness to Change (RTC) questionnaire. Participants were also asked “How ready are you to change your drinking behavior?” with response options on a scale of 1-10, called the RTC Ruler.

One-way ANOVA, evaluating the relationship between stage of RTC and the RTC ruler, was significant, F(2, 340) = 91.858, p = .000, with the stage of RTC accounting for 35.3% of the variance of the RTC ruler. Post hoc tests revealed a statistically significant difference (p = .000), between each of the three stages of RTC as measured by the questionnaire.

The RTC ruler demonstrated statistically significant agreement with the brief RTC questionnaire. Use of the RTC ruler as a mechanism for individualizing alcohol interventions warrants study. Its ease of use, coupled with the speed at which it may be administered, suggests that it may be a valuable assessment instrument in resource-limited student health centers.
Abstract ID: 380

Methods in Research to Reduce Drinking in College Students who are High-Risk Drinkers

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Abstract Information

Presentation Preference: SNRS Symposium

Willing To Submit Podium? Yes
Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Health Promotion/ Self-care
Thematic Areas: Methods

Purpose/Aims: The purpose of this study was to evaluate the feasibility of using word association as a rapid assessment measure of drinking behavior in college students who engage in high risk drinking.

Research Questions/Hypotheses: Can knowledge of college students' first words associated with drinking behaviors be helpful in developing interventions?

Significance: Reducing alcohol consumption in college students is a major priority on college campuses. College students typically identify alcohol use as a positive experience. Knowledge of college students' expectancies as identified by their first word associations may be helpful in intervention research.

Methods: Three hundred sixty-four high-risk drinking college students, identified during their initial student health clinic visit through an alcohol screening questionnaire incorporated into a health questionnaire, completed a Healthy Lifestyle Questionnaire that included a first-word alcohol expectancy question and a 30-day alcohol recall diary.

Findings: Using a normative set of alcohol expectancies, 69% of the participants gave responses that were positive or positive/aroused. For females, frequency of responses peaked at three to four drinks per occasion while for males, they peaked at six to seven. Negative first-word associations were more common for students who reported fewer drinks per occasion.

Discussion: Data suggest that alcohol expectancies vary by gender based on average drinks per occasion. While the probability of a positive response was found to be higher with heavy drinkers, more research is needed to evaluate the predictive value of word associations with level of alcohol consumption in both genders and among all levels of college students. Use of normative sets of word association alcohol expectancies provides a standardized method for evaluation of alcohol expectancies.

Research Completed: Yes

Abstract History: 

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

Yes
Grants/Research Support: Y
National Institutes of Health
Consultant:
Stock/Shareholder:
Speaker's Bureau:
Other Financial or Material Support:

FDA Disclosure:

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Abstract Information

Presentation Preference: SNRS Symposium

Willing To Submit Podium? Yes
Willing To Submit Poster? Yes

Abstract Categories:
Interest Group: Health Promotion/ Self-care
Thematic Areas: Methods

Purpose/Aims:
The purpose of this study was to determine the fidelity of brief interventions (BI) intended to reduce alcohol harms among college students identified as high-risk drinkers. Brief interventions vary among studies in duration, frequency and content. Brief interventions based on MI are popular in the addictions field of health care.

Research Questions/Hypotheses:
Do healthcare providers implement brief intervention when analyzed with a standardized assessment tool?

Significance:
College students are at risk for harms related to alcohol use behaviors. BI are recommended by the National Highway Traffic Safety Administration (NHTSA) as a key component of prevention in the college student population. The University of Central Florida Health Services designed a study to test the effectiveness of BI on students' drinking behaviors. Preliminary findings demonstrated significant
reductions in alcohol use and associated harms in treatment group.

Methods:
A total of 364 students were enrolled in the study; 181 students were randomly assigned to the BI group. The BI sessions were audiotaped in a subset of subjects those in the treatment group. A content analysis methodology was used to analyze audio-taped transcripts of 63 BI sessions. The Motivational Interview Skill Code (MISC) framework and a word analysis for the components of the BASICS program were used to assess BI elements.

Findings:
Analysis of the audiotapes using the MISC guide found that 17% of the tapes demonstrated MI proficiency. The majority of the interventions, 63%, met the criteria more consistent with brief advice counseling that adhered to many of the components of the BASICS program.

Discussion:
Brief advice that incorporates BASICS components appears to be successful in changing alcohol behaviors among college students. Motivational interviewing is difficult to master. Further research to determine the elements that are efficacious in BI are needed.

Research Completed: Yes

Abstract History:

Financial Disclosure:
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Grants/Research Support: Y
AANP Foundation
FNA Foundation
Sigma Theta Tau, Theta Epsilon
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Other Financial or Material Support:

FDA Disclosure:
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Preparing the Future Nursing Workforce: A 2-Year Longitudinal Study Examining Stressors and Nursing Student Success

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Presentation Preference: SNRS Symposium

Willing To Submit Podium? Yes
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Abstract Categories:
- Interest Group: Education
- Thematic Areas: Methods

Purpose/Aims: The current nursing shortage challenges every nursing school to not only increase enrollment but to retain students and reduce attrition. The overall objective of this study is to identify the type, extent, and temporal sequencing of various stressors associated with nursing student academic success. Personal, interpersonal, and environmental stressors will be measured in baccalaureate nursing students over a 2-year period.

Research Questions/Hypotheses: The study, which began in the Fall of 2006, will investigate the relationship between personal, interpersonal, and environmental stressors and nursing student success as measured by grade point average, absenteeism, and attrition.

Significance: This will be the first longitudinal study, reported in the literature, that will provide crucial data on the relationships between personal and interpersonal stressors and success in nursing school and eventually success on the job.

Methods: A longitudinal, repeated measures, cohort study recruited junior I nursing students (N=132) from the Texas Woman's University, College of Nursing, Houston and Dallas campuses. Nursing faculty and graduate student investigators (n=54) on both campuses conducted face-to-face baseline interviews at the beginning of the program and then each semester for 2 years. Participants received a $20 cash incentive/interview. Instruments include: demographic data form, SF-12, Pittsburgh Sleep Quality Index, Brief Symptom Inventory, Posttraumatic Stress Disorder Checklist, Stress Resiliency Profile, Psychological Empowerment Instrument, Student Nurse Stress Index, Perceived Faculty Support Scale, Verbal Abuse Scale, and Student Satisfaction Survey.

Findings: The sample is full-time students (91.1%), age 26.5 years, mostly female (89.5%), married/committed relationship (67%), and U.S. born (70.2%), Caucasian (42.7%), Asian (20.2%), African-American (18.5%), and Hispanic (18.5%). The answer to, “What language did your mother speak to you when you were a child?” was English (59.7%) or non-English.

Discussion: Using data from this study, stress mediating interventions can be developed and tested. It is possible nursing school curricula could teach stress mediation and better prepare graduate nurses for their professional work.

Research Completed: No

Abstract History:
-This material has been presented or accepted for presentation in whole or in part at this or another scientific meeting.

-Details: STTI Research Conference in Vienna, Austria, July 2007; only a small part

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

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FDA Disclosure: Cleared: Yes
Preparing the Future Nursing Workforce: A 2-Year Longitudinal Study Examining Stressors and Nursing Student Success

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Presentation Preference: SNRS Symposium

Willing To Submit Podium? Yes
Willing To Submit Poster? Yes

Abstract Categories: Interest Group: Education
Thematic Areas: Methods

Purpose/Aims: The purpose of this study is to determine the relationship between certain demographic characteristics of undergraduate baccalaureate nursing students and quality of sleep. Demographic characteristics included nursing courses grades, age, number of children living in the home, hours of employment, commute time to school and/or work, and hours spent studying.

Research Questions/Hypotheses:
R1: Students who report poor sleep quality will have poorer academic outcomes compared to students who report good or very good quality sleep. R2: Students who report poor sleep quality will have higher levels of non-academic time demands (children at home, employment, long commute) compared to students who report good or very good quality sleep.

Significance: Nursing students report a lack of sleep. This lack of sleep can impair a student and impact the quality of their school performance and ultimately lead to patient safety issues. This abstract will report the relationships between certain demographic characteristics that may interfere with and impact quality of sleep.

Methods: Students (N=132) were interviewed using the Pittsburgh Sleep Quality Index (PSQI) and a demographic data form during the first 2 weeks of starting a nursing program and then re-measured at the end of each subsequent semester while enrolled in nursing school. The PSQI measures subjective sleep quality grouped into 7 component scores: sleep quality, sleep latency, sleep duration, habitual sleep efficiency, sleep disturbances, use of sleeping medication, and daytime dysfunction. A quantitative design using a Pearson product-moment correlation coefficient was used to determine relationships between sleep, academic outcomes, age, number of children, hours of employment, hours of commute to work and school, and hours spent studying.

Findings:
Abstract ID: 465

Preparing the Future Nursing Workforce: A 2-Year Longitudinal Study Examining Stressors and Nursing Student Success

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Research indicates that high levels of stress are reported by nursing students with sources including academic difficulty and failure, issues with faculty, financial difficulties, as well as personal problems.

Research Questions/Hypotheses:
Is there a relationship between baccalaureate nursing students’ stress and perceived faculty support?

Significance:
Previous studies have shown that students who complete their chosen program of study perceive higher levels of faculty support than students who withdraw from a program because of academic difficulties or personal reasons.

Methods:
Students (N=132) were interviewed using the Student Nurse Stress Index (SNSI), the Perceived Faculty Support Scale (PFSS) and a demographic data form during the first 2 weeks of starting a nursing program and then re-measured at the end of each subsequent semester while enrolled in nursing school. The SNSI measures stress related to 4 factors: academic load, clinical sources, interface worries, and personal problems. The PFSS measures two types of faculty support: psychological and functional.

Findings:
Preliminary findings indicate that student nurse stress as measured by the SNSI increased significantly from baseline. Student nurses also report a significant decrease in perceived faculty support as measured by the PFS from baseline. There was no significant difference in psychological support, but there was a significant decrease in perceived functional support by faculty.

Discussion:
The implications for nursing education practice include evidence of the impact between nursing student stress, faculty support, and success in school. For example, if certain faculty actions can decrease student stress, then interventions can be designed that promote success.
Abstract ID: 470

Preparing the Future Nursing Workforce: A 2-Year Longitudinal Study Examining Stressors and Nursing Student Success

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Student Level:
Purpose/Aims:
This study compares gender differences in perceived faculty support in an undergraduate baccalaureate nursing program.

Research Questions/Hypotheses:
Is there a difference in perceived faculty support for men compared with women enrolled in an undergraduate baccalaureate nursing program?

Significance:
Faculty support is one factor that determines success or failure for nursing students. Communication is a key component of the faculty support and is impacted by conscious and unconscious cues. The interpretation of such cues is uniquely individual; nevertheless, differences may be between men and women. It is reasonable to assume that these differences influence perceived faculty support which in turn influence educational outcomes. Therefore, understanding differences in perceived faculty support between men and women can inform faculty and suggest strategies to improve communication. In turn, creating a learning environment where students, irrespective of gender, feel supported by faculty, enjoy the learning experience, and ultimately graduate.

Methods:
Students (N=132) were interviewed using the Perceived Faculty Support Scale (PFSS) and a demographic data form during the first 2 weeks of starting a nursing program and then re-measured at the end of each subsequent semester while enrolled in nursing school. The PFSS measures two types of faculty support: psychological and functional. An independent samples t-test will be calculated to report the findings on two of the study variables, gender and perceived faculty support measured by the Perceived Faculty Support Scale.

Findings:
Of the 132 participants, 10.6% (n=14) are male nursing students. Analysis pending at time of abstract submission.

Discussion:
Findings from this study will shed light on gender differences in undergraduate nursing education.

Research Completed: Yes
Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

FDA Disclosure: Cleared: Yes
Non-Exclusive License: Accepted Terms: Yes
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Such interventions are recommended by the National Highway Traffic Safety Administration (NHTSA) as a key component of prevention in the college student population.

Abstract Information

Presentation Preference:
SNRS Symposium

Abstract Categories:
Interest Group: Health Promotion/ Self-care
Thematic Areas: Methods

Purpose/Aims:
The purpose of this symposium is to discuss methods and measurements that are part of a large randomized trial to reduce alcohol consumption and its associated harms in college students identified as high risk drinkers. Those assigned to the treatment group received Brief Intervention as recommended by the National Highway Traffic Safety Administration.

Research Questions/Hypotheses:
What are methodologic and measurement issues in conducting intervention research with college students identified as high risk drinkers?

Significance:
Reducing alcohol consumption and its associated harms is a major public health issue. College students have a high incidence of drinking behaviors. Interventions delivered through providers at the college health center may be effective in changing drinking behaviors in this high-risk group.

Methods:
Three papers will be presented. The first, by Rash, relates to testing the fidelity of the model of brief intervention. The second, by Sole, discusses...
findings related to readiness to change drinking behaviors. The last paper, by Harper, discusses word association expectancies.

Findings:

Issues related to methods and measurement will be summarized as part of the symposium.

Discussion:

Most of the brief intervention episodes were more consistent with brief advice rather than brief intervention. A one-word measure of readiness to change, along with a one-word alcohol expectancy measure, may assist the provider in assessing readiness to change and in delivering the interventions to change drinking behaviors.

Research Completed:

Yes

Abstract History:

Financial Disclosure:

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Yes

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National Institutes of Health
Consultant:
Stock/Shareholder:
Speaker's Bureau:
Other Financial or Material Support:

FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

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The Science of Preterm Infant Feeding

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Abstract Information
Presentation Preference: SNRS Symposium
Willing To Submit Podium? Yes
Willing To Submit Poster? Yes
Abstract Categories:
Interest Group: Parent-Child
Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims:
Symposium Overview<br />
Preterm infant feeding has been the object of scientific study for sometime. However, despite the efforts of researchers and clinicians, there remains much that is not clearly understood about the phenomenon. Since the acquisition of oral feeding is necessary for hospital discharge and since feeding care decisions fall primarily to nurses, further research in this area is critically important. In particular, when to initiate oral feedings and how to progress oral feedings continues to be primary issues in neonatal intensive care units. Starting and progressing oral feedings is made more complicated from a clinical perspective by the presence of complex health conditions, including those that affect breathing and neurologic integrity. In addition, there are a plethora of untested recommendations and interventions aimed at speeding up the acquisition of oral feeding skills in order to reduce length of hospitalization while the infant masters oral feeding. Concerns about the safety and efficacy of these interventions have not been empirically addressed. The three papers that comprise this symposium focus on the major areas of research and clinical concern in preterm infant feeding: determining feeding readiness, intervening
to promote feeding effectiveness in healthy preterm infants, and understanding the challenges of feeding preterm infants with compromising health conditions. Based on three individual but related programs of research, these papers will provide the most current research findings in this area. The overview will provide a synopsis of the state of the science in these areas. The objectives of the symposium are to: 1) understand the complexity of neurobehavioral factors to consider when examining a preterm infant’s readiness for oral feeding and oral feeding progression; 2) appreciate the effectiveness of a neurobehaviorally sound intervention to promote feeding effectiveness and safety; and 3) recognize challenges associated feeding care for infants with compromising pulmonary illness.<br />

Research Questions/Hypotheses:

Significance:

Methods:

Findings:

Discussion:

Research Completed: Yes

Abstract History:

Financial Disclosure: Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material? Yes

FDA Disclosure: Cleared: Yes

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The Science of Preterm Infant Feeding

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The Feeding Readiness and Progression in Preterms Scale (FRAPPS) is a 10 item pen-and-paper instrument designed to easily assess a variety of physiologic and behavioral parameters that appear to influence oral feeding readiness/progression. Content and face validity have been established. The purpose of this study was to examine the construct validity of the FRAPPS using physiologic and sucking measures of stability as correlates for feeding initiation, progression and success in preterm infants.

Research Questions/Hypotheses:
1. Is the FRAPPS a reliable and stable measure of feeding readiness/progression?  
2. Is criterion-related validity established for the FRAPPS using physiologic/sucking measures?  
3. Do FRAPPS scores correlate with the successful initiation, and progression of feeding?

Significance:
Once respiratory stability is established in the preterm infant, successful oral feeding is a major priority for discharge decision-making. Yet, no objective measures for oral feeding readiness or progression exists. Preterm infants are often encouraged to bottle feed before they are ready. Consequently, they are subjected to a trial-and-error approach that may increase stress and detract from success. Decision-making during this process seldom takes into account a full picture of the interwoven physiologic and behavioral variables.

Methods:
The study was approved by an institutional review board and parental consent obtained. Data collection began between 29 and 32 weeks post-conceptional age (PCA) for 25 infants. The FRAPPS was scored once daily while variables related to physiologic and feeding behaviors were also collected. Once oral feeding was initiated physiologic (heart rate, oxygen saturation) and sucking (pressure, counts) data were obtained at one feeding daily.

Findings:
Data were analyzed using correlations and logistic regression. Confounding variables such as the repeated measures nature of the data and infant characteristics were accounted for in the analysis.

Discussion:
Preliminary results suggest that the FRAPPS may be a sensitive measure of feeding readiness and progression during the transition to oral feeding.
The Science of Preterm Infant Feeding

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Presentation Preference: SNRS Symposium

Willing To Submit Podium? Yes
Willing To Submit Poster? Yes

Abstract Categories:
- Interest Group: Parent-Child
- Thematic Areas: Perinatal/Neonatal/Infancy

Purpose/Aims:
The purpose of this analysis was a) to describe adjustments in the caregiver’s intervention strategies throughout the feeding in response to their on-going assessment of the infant’s skills, and b) to describe the effectiveness of the intervention on infant breathing regulation, physiologic stability, and infant behavioral distress.

Research Questions/Hypotheses:
1. What adjustments do caregivers make to feeding interventions in response to preterm infant cues for feeding behaviors? 2. Are cue-based interventions effective in reducing breathing difficulties, physiologic instability, and distress during preterm infant feedings?

Significance:
The gentle, cue-based approach to feeding preterm infants is based on on-going assessment of infant skills across four domains: ability to maintain engagement in feeding, oral-motor functioning, integration of swallowing with breathing, and ability to maintain physiologic stability.

Methods:
Serving as his/her own control, 20 ELBW infants were fed by the nurse or parent using the standard care approach and by the intervention study team using the gentle, cue-based approach. On average, each infant was observed feeding 4 times for a total of 77 feeding observations. Infant physiology (HR, and SaO2) was collected at 1 sample/second, breathing regulation was scored from Respitrace waveforms, and continuous infant distress behaviors were coded from videotape using an observational coding system. The study had IRB approval; parents gave informed consent.

Findings:
Intervention feedings were more commonly initiated in response to infant readiness cues, had more rest periods and more pacing events (bottle tip backs) throughout
the feeding, and were more likely to end in response to the infant’s lack of readiness. Intervention feedings had more physiologic stability, shorter breathing pauses, and less behavioral distress.

Discussion:

A gentle, cue-based feeding approach has significant short-term feeding outcome benefits. Further research is needed to determine if this approach has long-term benefits, such as shorter time to full oral feeding, improved use of calories for growth, and less development of feeding problems.

Research Completed: Yes

Abstract History:

Financial Disclosure:

Have a financial arrangement or affiliation with commercial companies whose products may be mentioned in this material?

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FDA Disclosure:

Cleared: Yes

Non-Exclusive License:

Accepted Terms: Yes

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The purpose of this analysis was to examine the maturation of feeding skills in preterm infants who have developed bronchopulmonary dysplasia (BPD).

**Research Questions/Hypotheses:**
1) How do feeding skills change over time in preterm infants who have BPD?

**Significance:**
Preterm infants with chronic lung disease (BPD) have great difficulty attaining skills necessary for oral feeding. Understanding skill maturation provides a basis for interventions that facilitate the acquisition of these skills.

**Methods:**
Feeding proficiency, percentage of volume ingested of the total feeding volume, and efficiency, volume (mL/min) ingested over the feeding period, were calculated for day-one of feeding initiation, mid-point to achieving nipple feeding, and day of feeding achievement (taking all feedings orally). The sample included 33 infants with BPD who were born preterm. The study had IRB approval; parents gave informed consent.

**Findings:**
Mean day-one proficiency by post-conceptual age (PCA) in weeks was 66% (+31) for infants 34-35 weeks, 70% (+38) for infants 36-37 weeks, and 55% (+30) for infants 38-41 weeks. Mean mid-point proficiency 85% (+26) for infants 34-35 weeks, 74% (+35) for infants 36-37 weeks, and 98% (+3) for infants 38-41 weeks. Proficiency was 100% on achievement of full oral feeding for all PCA groups. Mean day-one efficiency was 1.4 (+.8) for infants 34-35 weeks, 1.3 (+.6) for infants 36-37 weeks, and 1.0 (+.5) for infants 38-41 weeks. Mean mid-point efficiency was 1.8 (+.7) for infants 34-35 weeks, 2.0 (+1.1) for infants 36-37 weeks, and 2.0 (+.3) for infants 38-41 weeks. Mean efficiency on achievement of full oral feeding was 2.6 (+1.1) for infants 34-35 weeks, 3.8 (+1.4) for infants 36-37 weeks, and 2.5 (+.2) for infants 38-41 weeks.

**Discussion:**
Proficiency and efficiency improved from initiation to achievement of full oral feedings as expected. However, infants with BPD are less efficient, with 2.5-3.8 mL/min efficiency compared to healthy preterm infants at 36 weeks PCA who ingest 10.4 mL/min.