

# **NEXUS** Portal



Volume 3, Issue 2

Spring 2009 Special Issue on Knowledge Exchange

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# "Thinking Outside the Box": NEXUS Spring Institute Unpacks Knowledge Exchange

n April 16 and 17, 2009, the 6<sup>th</sup> annual NEXUS Spring Institute took place, bringing together 60

participants - including NEXUS investigators and trainees, health researchers from universityaffiliated and community-based organizations, representatives from national funding bodies and provincial government, and graduate students from various disciplines - to critically examine knowledge exchange (KE) in health research. Given the central role of KE and the growing emphasis on KE integration required by many granting agencies, this year's institute, Knowledge Exchange: From Research to Social Action and Back, sought to spur discussion and debate about the complexities of KE, from its political and ethical dimensions to specific KE methods and creative practices. This goal was met with great success, as reflected in the words of one NEXUS investigator: "What I have come away with is a better understanding of knowledge exchange, and a better understanding of the limits of my understanding... [The institute] opened up possibilities for me."

Since its debut in 2004, the Spring Institute has been the centrepiece of NEXUS training. Each year it is dedicated to a different theme related to the NEXUS mandate of researching the social contexts of health behaviour. The overall aim of the institute is to foster mentorship, learning,

and collaboration by cultivating opportunities for students, junior investigators, and more established researchers to present their research, exchange ideas, and network in a supportive environment, as well to acquire practical knowledge and tools. The success of this year's

institute in meeting this objective was echoed by a NEXUS trainee: "I appreciated the practical focus

of the institute as I came away with some skills to enact KE. It was an excellent forum for research training." NEXUS presently supports 33 trainees, from the master's to postdoctoral levels.

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The two-day institute featured a highly interactive and participatory program where contributors were encouraged to expose situational dilemmas, pitfalls, pearls, and successes in undertaking or conceptualizing KE in their own work. The presentations and discussions were guided by several overarching questions including: What is knowledge and who produces it? What are some of the ethical challenges or rewards faced in undertaking KE? What are some of the barriers to KE and how might they be overcome? Who are the parties involved in KE and in which direction(s) does the knowledge flow?

A new interactive component of the 2009 Spring Institute was the Controversy Café. Participants circulated among several stations at timed intervals to engage in facilitated discussions prompted by contentious propositions related to KE. The

stations' facilitators

subsequently shared their observations with the entire group. Many participants found this discussion format valuable for stimulating their thinking on KE concepts, as one participant noted: "In addition to having time to discuss ideas not directly on my own research, but fundamental to

Participants discuss contentious propositions related to knowledge

exchange at the Controversy Café

it, I am now better able to address some of the knowledge translation issues that arise in funding, and in teaching."

Three keynote speakers each contributed a unique vantage point to the Spring Institute. Sylvie Stachenko, dean of the University of Alberta School of Public Health and former deputy chief public health officer of the Public Health Agency of Canada, launched this two-day exploration of knowledge exchange with her keynote address 'Knowledge translation - Public health perspectives'. Dr. Stachenko set the stage by offering a number of key definitions, concepts, and theories behind knowledge translation in the field of public health and presenting several challenges and complexities encountered in developing aspects of public policy. Dan Reist, assistant director of knowledge exchange at the Centre for Addictions Research of BC (CARBC), galvanized participants to grapple with some of

the core questions and assumptions about knowledge, such as: What is knowledge and how is it acquired and shared? His interactive workshop, 'Where is that epistemology prof when you actually need her?', was "a reminder to 'stop, look



Dan Reist leads partipants through an 'unguided tour of the epistemological forest'

and listen' before entering the 'intersection'", according to one institute participant. Day 2 of the Spring Institute opened with a keynote address by Victoria Schuckel, director of research in the Corporate Policy and Research Branch of the BC Ministry of Health Services. In her presentation, 'Making stone soup: Building organizational capacity for health research', Ms. Schuckel engaged the age-old parable of "stone soup" as a metaphor to challenge participants to conceptualize how - See "Spring Institute" on page 5 -

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# **NEXUS Trainee Spotlight**

NEXUS trainees share a bit about their academic lives and beyond.

## Making the Message Count!

# Exin Ttolemy is Changing the Social Context of Breast Cancer Risk

Erin Ptolemy is a master's student in the School of Social Work at UBC Okanagan, supervised by NEXUS codirector Joan Bottorff. Her research focuses on new evidence that young women regularly exposed to second-hand smoke have an increased risk of developing premenopausal breast cancer (68-120%), and that similar risks are associated with active smoking. Erin is gathering ideas from young women about how this new risk information should be shared to assist them in minimizing their exposure to tobacco to reduce the incidence of premenopausal breast cancer. Her study examines social contexts around tobacco that are amenable to change. She has finished her coursework and is turning to focus on her final clinical placement and completion of her thesis. Erin is originally from Dinsmore, Saskatchewan.

How did you go about identifying potential techniques for communicating tobacco-risk information to young women? We developed an online survey to examine young women's interest in information about tobacco exposure as a risk factor for breast cancer, their interest in information about how to reduce their tobacco use/exposure, and their assessment of strategies to increase awareness of this risk among peers. We provided participants with information about smoking and secondhand smoke as risk factors for development of premenopausal breast cancer. They were then asked to rate how important this information was at this point in their lives, why or why not, and whether this information would make them consider reducing their smoking and/

or second-hand smoke exposure.

So far in your research, what appear to be key ingredients in an effective message? Many young women reported that information about second-hand smoke and

smoking as risk factors for breast cancer is

"Young women... prefer direct approaches from 'real' people with the 'real' facts about breast cancer risk."

important to them because they try to be as healthy as they can. Young women appear to prefer direct approaches from "real" people with the "real" facts about breast cancer risk. How did you initially become interested in social

contexts of health behaviour? I first became interested in the social contexts of health behaviour while working in Saskatchewan at a correctional residence facility. The residents were former federal offenders (predominately Aboriginal males) being re-integrated into the community on parole. These men tended to have experienced a host of hardships including health difficulties, substance dependence, and exposure to violence, among others. Talking to the men and hearing their life stories I began to realize the extent to which systemic discrimination of Aboriginal peoples over the years has shaped the social contexts of these men and drastically affected them in the present. "NEXUS offers

How would you describe your involvement with NEXUS? I have been connected with NEXUS since multidisciplinary starting my master's program at **UBC** Okanagan in September 2008. I have attended NEXUS seminars via WebEx (a wonderful invention!).

What is your favourite thing about NEXUS? I like the feeling of community that NEXUS offers. Researchers and trainees each bring unique perspectives and methodologies to various aspects of the social contexts of health behaviour. NEXUS offers a wonderful

> multidisciplinary community from which to be inspired!

What are some of your recent accomplishments that you are proud of? Finishing my master's coursework, receiving a CIHR training fellowship, and beginning my final clinical placement in May 2009.

If you could pursue any research topic outside your field, what would it be?



Erin on a recent trip to Germany.

Something to do with the impact of farm stress on rural families. Growing up on a farm in rural Saskatchewan I have witnessed firsthand the adverse health effects (physical, mental,

> and emotional) that the current farming context has on families.

What profession other than your own would you like to attempt? In the past I had given serious consideration to becoming an EMT. I think that the hands-on, fast-paced challenge of every workday would be both fascinating and humbling.

What would someone be surprised to learn about you? I was a lifeguard and swim instructor for 10 years, and used to spend so much time in the pool that my skin

always smelled faintly of chlorine. When I "retired" two years ago I had taught over 2500 people of all ages and abilities, from mom and baby classes to lifequarding and resuscitation courses. I still swim in a master's

swim club for fitness.

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If you could live anywhere in the world, where would it be? Iceland. My family originates from there and, although I've never been, I think the landscape is breathtaking and the culture intriguing.

Your motto could be... Seize the day!



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## KE Snapshots: NEXUS Members in Action

#### Trainee Goes Global with KE

What does it take bring together 20 leading researchers, policy makers, health care practitioners, and consumers from Australia, UK, US, and Canada in a roundtable on chronic disease self-management (CDSM)? Just ask NEXUS postdoctoral trainee Dr. Sue Mills. She was convinced that a lack of exchange of CDSM knowledge posed a critical impasse to the capacity for improving CDSM strategies in Canada and elsewhere. Her solution? Create and lead an international three-day forum for dialogue on self-management bringing together stakeholders from research, policy, and practice domains from countries undertaking similar and related initiatives around the world.

From Dr. Mills' viewpoint, current directions in the CDSM field are driven by biomedical and health education perspectives. As such, the focus is on individual behaviour change without due consideration to the important role that social context and social determinants play in shaping self-management behaviour. The end result: most initiatives are only addressing the needs and social reality of certain segments of the population with chronic conditions and are failing to address the enormous health inequities that exist for marginalized groups. A chief outcome of the roundtable is the development of a consensus framework that will make recommendations for priority directions in self-management research, policy, and practice. Follow-up initiatives will help to translate the recommendations into local and context-specific actions in Canada.

'Minding the Gap': Building a Framework to Bridge Evidence, Policy, and Practice in Chronic Disease Self-Management takes place in Vancouver, June 10-12, 2009, with the support of a range of funders, including in-kind support from NEXUS.

From idea to action, Sue Mills' leadership of this international CDSM roundtable clearly demonstrates that when it comes to KE, one can never dream too big!

## KE is Key to Harm Reduction in BC

In her efforts to minimize risk and improve safety in BC, NEXUS lead investigator Dr. Jane Buxton – physician epidemiologist and harm reduction lead at the BC Centre for Disease Control – has



Jane Buxton at the NEXUS Poster Session in Nov. 2008

spearheaded several knowledge exchange initiatives paving the way for enhanced approaches to harm reduction (HR) in the province. Having identified significant inter-jurisdictional variation in BC's HR programs – from the types of supplies available to the local social context and attitudes regarding HR (Buxton et al. 2008) – Dr. Buxton sought to address these disparities. She developed the Harm Reduction Workshop (January 2009), sponsored by the BC Centre for Disease Control, to share knowledge and stimulate dialogue across these sites. This training

event brought together 88 participants from across BC. Post-meeting, 60% of evaluation respondents reported applying some of their new learning to work in their communities. An HR training manual drafted for the workshop is also currently being revised based on participant feedback. Last year, Dr. Buxton launched a bi-annual HR newsletter, Strategies, with wide circulation to HR supply distributors, public health authorities, community partners, and other stakeholders. There is now momentum to hold an annual harm reduction training event and to continue to foster channels for ongoing communication among practitioners throughout the province. Click here for an audio recording of Dr. Buxton's NEXUS seminar 'More than just needles'.

### More than a Mandate: KE is MO for CREST.BD

For the Collaborative RESearch Team to study psychosocial issues in Bipolar Disorder (CREST.BD), led by NEXUS co-investigator Dr. Erin Michalak, knowledge exchange (KE) goes beyond mandate: it is their modus operandi. This MSFHR-funded team, now three years strong, is a multidisciplinary network of both consumers with BD and international researchers from a range of disciplines. By integrating a variety of dynamic and iterative KE elements to create a highly collaborative research process, this group has made major strides towards understanding the psychosocial aspects of BD, a disease that affects half a million Canadians. Their primary goal is to enhance the quality of life (QoL) of individuals living with BD by expanding understanding of the impact of psychosocial factors on the condition.

From the outset, CREST.
BD has included
individuals with BD fully
in the research process
and the team operates
within a participatory
and consumer-focused
framework. Through
regular education events,



CREST.BD team meeting, March 2009, Cecil Green House, UBC

newsletters, publications, and other KE activities, the team maintains a strong relationship with the community it serves. An example illustrative of CREST.BD's unique KE MO is a series of three consecutive one-day events in BC in March 2008 that brought together BD consumers and the CREST.BD team to develop a research agenda. A key outcome was identifying the impact of stigma upon QoL in BD as a top priority for people with the condition and their family members. On this basis, a grant proposal, 'Quality of Life in Bipolar Disorder: Predictors, structure, and outcomes', was submitted for CIHR operating funds.

The CREST.BD MO pays dividends, both in terms of the quality and efficiency of the research conducted and the positive impact on those living with BD.

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## **NEXUS**news

# NEXUS Article Downloaded Over 1,215 Times in 1 Week!



The paper 'Relief oriented use of marijuana by teens', published on April 23, 2009 by NEXUS codirectors Joan Bottorff, Joy Johnson, and project director Barb Moffat in the open access journal Substance Abuse Treatment, Prevention, and

Policy, was downloaded more than 1,215 times in the one week following its release. This article, part of a larger ethnographic study on youth and marijuana, reported that one-third of teens engaged in marijuana use for therapeutic or medicinal purposes to treat a range of symptoms when they lacked support and assistance in dealing with these health problems. The findings subsequently received extensive media attention. Newspapers in both Canada and the US, including the Ottawa Citizen, Montreal Gazette, Calgary Herald, Los Angeles Mirror, and the LA Times, picked up the story as well as countless online blogs and news sources including FoxNews.com. In the Vancouver Sun, 'Teens smoke weed therapeutically: UBC study' (April 24, 2009) featured an interview with Dr. Bottorff. The study was also the topic of a BC CTV news feature 'Where we live', which aired on April 24, 2009 and included an interview with Dr. Johnson.

#### **NEXUS Research Featured in ONS Connect**

An article on smoking in the context of lung cancer by NEXUS codirector Joan Bottorff, co-investigator Carole Robinson, and colleagues, published in the May 2009 issue of the Oncology Nursing Forum, was selected to be featured as a Five-Minute In-Service column in the



NEXUS co-investigator Dr. Carole Robinson.

May ONS (Oncology Nursing Society) Connect. In-Service is a monthly feature that summarizes full-length articles into informative continuing education resources. The paper by Bottorff et al., 'Continued family smoking following a diagnosis of lung cancer: The patient perspective', reported on the family dynamics around quitting smoking after a family member had been diagnosed with lung cancer.

#### Co-I Rick Sawatzky Promoted to Associate Professor

NEXUS co-investigator Rick Sawatzky was recently promoted to the rank of associate professor in nursing at Trinity Western University. His research focuses on self-reported health outcomes measurement, and the conceptualization of spirituality in nursing.



Rick Sawatzky at the NEXUS Poster Session, Nov. 2008

#### **NEXUS Masculinities Research Makes Media Buzz**

At a NEXUS forum for <u>UBC Celebrate Research</u> <u>Week</u> in March 2009, NEXUS investigators discussed their research on father's smoking, men's depression, and Indo-Canadian men's heart health. At this panel session, Drs. Joan Bottorff, John Oliffe, and Paul Galdas drew on empirical examples from their own work to collectively address the broader question of how masculinities influence men's health and health behaviour. Their insights were captured in an interview with all



three investigators that appeared in the March 13, 2009 Vancouver Sun article "Are men too manly to seek help for their medical problems?". The story was subsequently picked up by newspapers across Canada, including the Calgary Herald, Edmonton Journal, the Saskatoon Star Phoenix, Province, and the Montreal Gazette. Dr. Galdas also appeared in a TV interview on the Punjabi edition of BC's Omni news on March 17, 2009.

#### **Double Honours for Trainee Sandra Lauck**



Sandra Lauck at the NEXUS Spring Institute, April 2009

NEXUS doctoral trainee Sandra Lauck, supervised by NEXUS co-director Pam Ratner, was selected to undertake a prestigious MITACS ACCELERATE internship to investigate the quality of life and other patient-reported outcomes of patients who have received an implantable cardioverter-defibrillator (ICD) in the first year following their implant. Sandra will work with ICD clinicians at St. Paul's

Hospital and Medtronic Canada to implement a data collection system that will be integrated in clinical practice. Sandra was also honoured with a Frederick Banting and Charles Best Canada Graduate Scholarships (CGS) Doctoral Award from CIHR. Recipients of this award are top candidates in the CIHR doctoral competition who are regarded to hold significant potential for research productivity.

#### **Yvonne Bombard Receives Brain Star Award**

NEXUS trainee alumna Yvonne Bombard was awarded an esteemed 2008 CIHR Brain Star Award for her paper, 'Managing genetic discrimination: Strategies used by individuals found to have the Huntington disease mutation', Clin Genet 2007: 71: 220–231. This paper is based on her doctoral work under the supervision of NEXUS co-director Joan Bottorff. The CIHR Institute of Neurosciences, Mental Health and Addiction Brain Star Awards recognize the research excellence of graduate students in Canada on the basis of lead authorship of a recently published, high-impact research article. Yvonne plans use her award to support dissemination activities such as participating in a workshop on revising the International Predictive Testing Guidelines for Huntington disease and presenting at several international meetings.

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## Spring Institute (continued from page 1)

to effectively work with the available resources and infrastructure to affect change in the BC health policy context.

Three separate panel presentation sessions enabled participants to engage with researchers looking at KE in a variety of research contexts, such as the mobilization of knowledge to shift the culture of tobacco use in psychiatric settings, ethical issues in knowledge exchange with youth, and the use of photography as a KE technique for smoking cessation interventions with new fathers.

In distilling the take-home messages of the NEXUS Spring Institute, many participants felt their future approaches to KE would indeed be informed by their institute experiences. One participant would now consider "what is needed instead of what I want to translate"; while another felt instilled with confidence to "be able to take a more systematic and organized approach to KE for projects I am involved with. I will also have a better idea of where to go or resources to look for to help". The institute succeeded in sparking critical reflection and exposure to a new range of KE possibilities, encouraging us – as at least one participant challenged – to be "thinking outside the box" even further.

### Images of the NEXUS Spring Institute...



Keynote speaker Dr. Sylvie Stachenko delivers her address.



Keynote speaker Ms. Victoria Schuckel explains how "stone soup" is a valuable metaphor to conceptualize KE in the policy realm



groups in Dan Reist's keynote workshop.





Challenging ideas about KE at the Controversy Café



Lead investigator Jane Buxton, doctoral trainee Azar Mehrabad and trainee alumna Lise Olsen at the Controversy Café



Knowledge broker for the NEXUS' FACET3 project, Gayl Sarbit and NEXUS co-director Joan Bottorff.

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Michael Smith Foundation for **Health Research** 

NEXUS is a community of academic and clinical researchers and graduate students pursuing health behaviour research from a variety of perspectives including Nursing, Public Health, Epidemiology, Health Promotion, Sociology, Pharmaceutical Sciences, and Geography. Its mission is to develop knowledge, interventions, and policy recommendations based on a critical analysis of the social contexts that 1) create barriers to health, 2) affect health seeking, and 3) influence system responses. NEXUS is building expanded research programs related to these three themes in health behaviour using the analytical lenses of gender, diversity, and place.