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After the initial global response to the COVID-19 pandemic in 2020, the ongoing pandemic challenges in 2021 has meant remaining nimble in order to quickly assess, adjust, and respond to a constantly evolving clinical and research landscape. The dual BC public health crises of COVID-19 and opioid-related deaths from toxic drug supply have taxed our healthcare system, adding further urgency to our education programs to address the worsening shortage of nurses and nurse educators. During this year, we also witnessed revelations of ongoing discrimination toward Indigenous people in the healthcare system, along with further evidence of historic atrocities that occurred in residential schools. The UBC School of Nursing is continuing to expand our efforts to meaningfully support Truth and Reconciliation activities as well as support research initiatives that are reciprocal and community-led. With faculty, students, and staff committed to conducting research to improve health and healthcare equity, UBC School of Nursing scholars continue to move work forward towards a more just and equitable society. At this pivotal moment in history, UBC School of Nursing researchers are being tapped to inform next steps for British Columbia, Canada, and beyond, and this report outlines some of those efforts.

This research report is a testament to the sustained dynamism and virtuosity of our many nursing faculty and students throughout the pandemic period. Nursing researchers have continued to advance the science of nursing with their respective research programs and student training. The UBC School of Nursing currently houses several externally funded scientists, including: three Canada Research Chairs, one Canadian Institutes of Health Research chair and several scholars funded by Michael Smith Health Research British Columbia, and the St. Paul’s Hospital Professorship/Heart and Stroke Foundation. During this past year, the faculty also spearheaded diverse work in response to COVID-19 and the opioid crisis related needs in the community and healthcare system. Throughout this, the UBC School of Nursing has made tremendous strides in formalizing our equity, diversity, and inclusion commitments. Already a leader in research dedicated to social justice, the School of Nursing formally established an anti-racism standing committee in 2021 as part of its governance structure. In close collaboration with the existing Indigenous Cultural Safety committee, these two bodies are informing and accelerating the School’s initiatives across both educational and scholarly spheres. We are humbled by the work that has been done to date and committed to ongoing progress towards reconciliation and amelioration of the systemic racism and discrimination that continues within our healthcare system, educational institutions, and wider society.
Research Metrics (2021/2022)

Annual Research Expenditures by Funding Source

In the 2021/22 fiscal year, the annual research funding revenues increased by 29%. The figures above reflect the actual annual research budget across multi-year grants by source. For the second year in a row, 2021 investments from the Public Health Agency of Canada (PHAC) roughly equalled that of the Canadian Institutes of Health Research (CIHR), which has historically been the predominant source of research funding in the School of Nursing. Throughout the pandemic, the intervention work spearheaded by faculty members continues to be supported by PHAC. In addition, funding secured from the Social Sciences and Humanities Research Council (SSHRC) increased by 53% from 2020/21, which continues an expected trend, given UBC Nursing faculty members’ expertise in upstream social determinants of health. Finally, the federal tri-agency New Frontiers in Research Fund (NFRF) is a growing source of new funding secured by UBC Nursing faculty members. This funding focuses on world-leading, interdisciplinary, and exploratory research.
Faculty Composition

Recent years have been marked by growth and renewal as the School of Nursing continues to strategically recruit and retain high-calibre research and teaching faculty as part of our succession planning. This proactive approach ensures a strong and vibrant cohort of educators and scholars to train and mentor the next generation of nurses and nursing researchers. In addition, as the School of Nursing anticipates program expansions in the coming years, a continuation of this growth trend is expected.

Faculty Publications

In 2021, the number of peer-reviewed publications produced by UBC School of Nursing faculty and trainees increased substantially, despite the ongoing COVID-19 pandemic. UBC Nursing faculty produced 205 publications in the 2021 calendar year, with 45% co-authored with trainees. Compared to the previous year, there was a 35% increase in students who co-published with a faculty member. In addition, there was an absolute increase of 12 peer-reviewed publications by Indigenous, Black and People of Colour (IBPOC) trainees in 2021 compared to 2020, representing about a 40% increase in IBPOC trainees publishing with the UBC Nursing faculty.
Research Staffing

Ratio of Faculty to Administrative Support staff

The UBC School of Nursing continues to enact an ongoing recruitment and retention strategy to ensure long-term sustainability for the School. Therefore, the current faculty numbers shows that the School has been successful in replenishing faculty members in balance with continuing retirements. Likewise, to mirror growth in research and educational programs and activities across the School, the regular, full-time administrative support staff complement was deliberately bolstered. As a result, the ratio of regular faculty to administrative staff has remained relatively constant for several years.

UBC Nursing Staffing Trends

The School of Nursing's total staffing includes operations-funded full-time administrative support staff and a large complement of grant-funded research staff and student trainees working to support research activities in the School directly. Despite the significant disruption experienced across many research programs as a result of the pandemic, numerous research teams adapted quickly to remote research processes enabling research programming and ultimately research training to continue and grow across the continuing COVID-19 pandemic period.
UBC Nursing in the Media

UBC School of Nursing faculty are committed to engaging with mainstream media. During the pandemic, that engagement intensified. UBC Nursing experts are highly responsive to frequent media requests related to diverse COVID-19 impacts. On topics ranging from mental health concerns to the healthcare system’s long-term sustainability, UBC Nursing faculty have been frequently quoted. They provide timely, evidence-based commentary on current health issues facing society.

UBC Nursing faculty received continuing COVID-19 coverage in 2021, with growth in several emerging topics such as substance use, climate change, and Indigenous health. The chart below shows the number of media stories by topic that quoted UBC Nursing faculty experts.
UBC Nursing Faculty Awards

At the international, national, and provincial levels, UBC Nursing faculty continue to garner recognition for their innovations in research and teaching. In 2021, three faculty were honoured with awards from their Alma Maters. UBC Nursing faculty have also secured a number of research chairs over the past five years. These prestigious chairs provide long-term support for the pursuit of innovative, high-impact programs of research.

**Fellow of American Academy of Nursing**
Dr. Jennifer Baumbusch

**CANO/ACIO: Pfizer Award of Excellence in Nursing Research**
Dr. Kristen Haase

**Canadian Nurse Educator Institute (CNEI) Fellow**
Dr. Suzanne Campbell

**MEDEA Awards (Education and Media Awards)**
Special Jury Prize 2021
Kathy O’Flynn Magee, Ranjit Dhari, Lynne Esson, Amy Fong-Yuk Poon & Dr. Paddy Rodney

**Nurses & Nurse Practitioners of BC (NNPBC): Award of Excellence in Nursing Education**
Dr. Elisabeth Bailey

**Nurses & Nurse Practitioners of BC (NNPBC): Award of Excellence in Advancing Knowledge and Research**
Dr. Farinaz Havaei

**Nurses & Nurse Practitioners of BC (NNPBC): Award of Excellence in Advancing Knowledge and Research**
Dr. Fuchsia Howard
RESEARCH CHAIRS

**CIHR CHAIR**
Dr. Jennifer Baumbuch  
Sex & Gender Science Chair (2020 - 2024)

**UBC SCHOLAR**
Dr. Annette Browne  
Distinguished University Scholar (2017 - 2022)

**TIER II Canadian Research Chair (SSHRC)**
Dr. Victoria Bungay  
Gender, Equity and Community Engagement (2015 - 2025)

**MSHRBC SCHOLAR**
Dr. Farinaz Havaei  
Psychological Health & Safety of Nursing Workforce in LTC (2021 - 2026)

**MSHRBC SCHOLAR**
Dr. Fuchsia Howard  
Critical Illness Survivorship (2020-2025)

**TIER II Canadian Research Chair (CIHR)**
Dr. Lillian Hung  
Senior Care (2021-2026)

**MSHRBC SCHOLAR**
Dr. Emily Jenkins  
Mental Health & Substance Use in Canadian Youth (2019 - 2024)

**ST.PAUL’S HOSPITAL PROFESSORSHIP/HEART AND STROKE FOUNDATION**
Dr. Sandra Lauck  
Cardiovascular Nursing (2017 - 2021)

**KATHERINE M. MACMILLIAN NURSING RESEARCH SCHOLAR**
Dr. Martha Mackay  
Research & leadership in cardiovascular nursing (2017-2022)

**TIER I Canadian Research Chair (CIHR)**
Dr. John Oliffe  
Men’s Health Promotion (2020 - 2027)

**UBC SCHOLAR**
Dr. Elizabeth Saewyc  
Distinguished University Scholar (2021 - 2026)
Working with Indigenous Communities

Indigenous Health Leadership
Dr. Margaret Moss, Tania Dick, Dr. Elder Roberta Price

In 2021, UBC Nursing Professor and Director of the First Nations House of Learning, Dr. Margaret Moss, served as Interim Associate Vice President of Equity and Inclusion for the University of British Columbia. Additionally, the US National Academy of Medicine appointed Dr. Moss to the Population Health and Public Health Practice Board. Dr. Moss is an enrolled member of the Mandan, Hidatsa, and Arikara Nation (Three Affiliated Tribes of North Dakota) and has an equal lineage as Canadian Sioux/Saskatchewan.

Tania Dick, a member of Dzawada’enuxw First Nations of Kingcome Inlet, a UBC Nursing Indigenous Advisory Circle Member, and UBC School of Nursing Alumna, was recruited by the School of Nursing in 2021 as the Indigenous Nursing Lead. Ms. Dick’s expertise, knowledge, and leadership adds another layer of support to help guide the School’s commitment to preparing the next generation of nurses to uphold Indigenous Peoples’ rights. She continues to work toward ending Indigenous-specific racism in healthcare.

Dr. Elder Roberta Price has shared her leadership, wisdom, and teachings for nearly four decades at UBC and beyond. A member of the Coast Salish Snuneymuxw and Cowichan Nations, she has been instrumental in helping to create shared spaces for both Indigenous and Western approaches to healing and health. Her ongoing involvement and leadership in research projects have been critical to the continued work of decolonizing healthcare, creating cultural safety and equity for Indigenous patients. Elder Roberta Price received an Honorary Doctor of Laws from UBC in 2021, recognizing her substantial contributions to society.

As leaders and role models, these women make Indigenous leadership visible within the School of Nursing and far beyond.
53rd Marion Woodward Lecture
Disrupting Nurses’ Thinking & Practice
Dr. Denise Wilson, Tania Dick, Chloe Crosschild

The impacts of colonization on Indigenous peoples globally have left a wake of historical and intergenerational trauma, ongoing cultural disconnection, and displacement in society. Nurses play a significant role in the healthcare of Indigenous people. The 53rd annual Marion Woodward Lecture featured keynote speaker Dr. Denise Wilson (Ngāti Tahinga, Tainui), a New Zealand registered nurse and Professor in Māori Health, Associate Dean of Māori Advancement in the Faculty of Health & Environmental Sciences, and Co-Director of Auckland University of Technology’s Taupua Waiora Māori Research Centre. Dr. Wilson’s lecture provided a historical and contemporary exploration of Indigenous realities when seeking healthcare and recommendations to transform nurses’ thinking and practice.

Following the lecture, UBC Nursing alumni and panellists Tania Dick and Chloe Crosschild joined Dr. Wilson to discuss the next steps in the Canadian context. Tania Dick is from the Dzawada’enuxw First Nations of Kingcome Inlet and has over 18 years of experience in rural/remote nursing, Indigenous health and emergency care. Ms. Dick is the inaugural Indigenous Nursing Lead at the UBC School of Nursing. Chloe Crosschild (litaapii’tsaanskiakiikii) is a Blackfoot woman from the Blood Tribe (Kainai Nation). Ms. Crosschild is a UBC Nursing doctoral trainee and assistant professor at the University of Lethbridge.

Indigenous Elder-led Research Collaboration in the Okanagan Promotes Culturally Safe Parenting
Dr. Wendy Hall

Dr. Wendy Hall secured two grants for developing an Indigenous elder-led app to support Indigenous parents’ two-eyed seeing to combine empirically based information with traditional culture, teaching, and knowledge about parenting. The culturally safe and respectful offline app for Syilx Okanagan parents supports early childhood development and promotes parents’ knowledge of the Nsyilxcan language.

Peer Mentorship Program Fostering Health and Social Equity for Indigenous Peoples in Criminal Justice Contexts
Dr. Helen Brown

Dr. Helen Brown leads a team of 30 academics and graduate students, Indigenous Elders, ten institutional and organizational partners, and 12 people with lived experience of incarceration to advance peer-led interventions to foster health and social equity, employment opportunities, and safe housing for people facing systemic barriers. The focus is on fostering the capacity for future scholars and advocates at the intersections of health, justice and social well-being. Drawing on arts-based methods (film-making, storytelling), the team enlists the strengths and priorities facing Indigenous peoples in criminal justice contexts.

Global Indigenous Youth Health
Dr. Elizabeth Saewyc

As one of eight non-indigenous co-authors invited to join a Lancet Commentary on global Indigenous youth health, Dr. Saewyc is working with over thirty Indigenous scholars, healthcare professionals, and early career researchers. Although Indigenous knowledge, language, and cultural practice contributions to global health exemplifies effective evidence-based strategies, they are often excluded from health policy and action. This commentary commits to building the research capacity of young Indigenous people to serve as a foundation for youth leadership in Indigenous health and wellbeing locally and globally.
Health Equity in Action

**Health Equity Action ToolKit**  
*Dr. Annette Browne, Dr. Vicky Bungay, Dr. Colleen Varcoe*

The goal of the EQUIP team, which includes Drs. Annette Browne, Vicky Bungay, Colleen Varcoe, and others, is to share best practices in equity-oriented care and support implementation by healthcare providers and organizations. Even small, low-cost changes can profoundly improve patients’ experiences. Therefore, the team designed a series of tools so providers and organizations can tailor equity-oriented care to local needs and contexts.

**BC Alliance for Monitoring Mental Health Equity**  
*Dr. Emily Jenkins*

Dr. Emily Jenkins has joined a coalition of researchers to launch the BC Alliance for Monitoring Mental Health Equity (BC AMMHE). Currently, they are tracking mental health research studies (including substance use) with particular attention to groups of people who have experienced social and/or structural barriers to health or healthcare (e.g. youth, LGBTQ2S+, Indigenous, People of Colour, people with mental health concerns, and others). The BC AMMHE group ensures emerging research findings are widely available to policymakers, healthcare practitioners, researchers, and the public, in a timely manner through up-to-date data monitoring tools.

**Equity and BC Cancer**  
*Dr. Leah Lambert, Dr. Sally Thorne, Dr. Annette Browne, Dr. Tara Horrill*

Despite significant clinical advances in cancer therapy, alarming disparities exist in outcomes among people with cancer who experience significant health and social inequities. Dr. Leah Lambert, Dr. Sally Thorne, Dr. Annette Browne, and post-doctoral fellow Dr. Tara Horrill are mapping pathways of current inequities in cancer care, working to improve outcomes by addressing health equity gaps, and expanding cancer care access.

**iHEAL Reclaiming our Spirits**  
*Dr. Colleen Varcoe*

Internationally, Indigenous women are subjected to high rates of multiple forms of violence, including intimate partner violence. However, there are insufficient services and few evidence-based interventions designed for Indigenous women’s needs. The iHEAL (intervention for Health Enhancement after Leaving) Reclaiming our Spirits (ROS) study, led by Dr. Varcoe and colleagues, evaluated a health promotion intervention to bridge service gaps to meet Indigenous women’s needs. The intervention was offered over 6 to 8 months with partnerships with nurses and Indigenous Elders. The ROS intervention significantly improved the quality of life and trauma symptoms experienced by Indigenous women.
Informing the Discipline

Methodological Guidance & Consultations
Dr. Sally Thorne

Widely recognized for the qualitative methodological text *Interpretive Description: Qualitative Research for Applied Practice*, now in its second edition, Dr. Sally Thorne has helped shaped nursing research. In addition to her heavily cited work nearing 25,000 citations, numerous universities worldwide have invited her to present methodology master classes. Dr. Thorne is also editor-in-chief for *Nursing Inquiry*, a journal dealing with critical nursing and healthcare scholarship.

Reducing Bullying in Nursing Education
Kathy O’Flynn-Magee, Ranjit Dhari, Lynne Esson, Amy Fung-Yuk Poon, Dr. Paddy Rodney

Bullying among healthcare workers is well-documented, and there is a high prevalence of bullying in nursing practice and education programs. The Cognitive Rehearsal to Address Bullying (CRAB) project, led by Associate Professor of Teaching Emeritus Kathy O’Flynn-Magee, with a team of students and faculty, has created numerous initiatives to address bullying in nursing education. In recognition of several CRAB video vignettes created with director Tom Scholte to extend this work, the team received a Special Jury Prize 2021 from the MEDEA Awards.

Health Impacts of Climate Change: Case Study on BC Wildfires
Raluca Radu

With funding from UBC Sustainability, UBC Nursing instructor Raluca Radu developed a case study on wildfires in British Columbia to enrich student learning and provide real-world cases to approach complex problems posed by climate change on human health in NURS 290. This approach helps students understand how the social determinants of health are interconnected to climate change, and ensures equity is central in decision-making. Additional topics also include Indigenous food sovereignty — particularly Indigenous People’s need for healthy, culturally appropriate foods, how policy decisions affect the amount and quality of the food gathered (hunting, fishing, and others), and the impact of climate change on access to healthy food and food insecurity.

Social Pediatrics in a Baccalaureate Nursing Curriculum
Ranjit Dhari

Assistant Professor of Teaching Ranjit Dhari redesigned the pediatric clinical course (NURS 366) in the UBC BSN program using a social pediatrics framework. She evaluated this clinical course during the pandemic and investigated the framework used to enhance student learning. This course allowed students to access a pediatric clinical practicum even during the COVID-19 pandemic when many inpatient hospital experiences were not available to students.
COVID-19 Research

Evaluating a Critical Care Nursing Surge Model during the Pandemic
Dr. Sandra Lauck

The COVID-19 pandemic severely tested critical care units’ capacity to meet patients’ needs and adaptability of health service delivery. As a result, Dr. Sandra Lauck collaborated with advanced practice nurses and nurse leaders to evaluate a newly developed critical care nursing surge model in response to the escalating needs of critical care units. The study concluded that the new model increased the support experienced by nurses working in these units.

Tahltan Nation COVID-19 Emergency Management
Dr. Sabrina Wong

Through a partnership with the Tahltan Nation, Dr. Sabrina Wong was invited to assist with implementing Lucira Health “mini-PCRs” to enable COVID-19 PCR testing for multiple remote First Nation communities in Northern BC and Yukon. The Tahltan Central Government’s emergency management committee was recognized with the David Barr Award from the provincial Association for Mineral Exploration (AME) for exemplary leadership during the COVID-19 pandemic.

Rapid Testing for COVID-19
Dr. Kristen Haase

With over 41,000 article views in The Conversation, Dr. Kristen Haase’s op-ed on rapid antigen testing has raised public awareness of the utility of these tests. For those who are most vulnerable such as those who are immunocompromised, the elderly, kids, and individuals who are not vaccinated, rapid antigen testing adds another measure of protection when used correctly. Dr. Haase and her colleague answer critical questions about using rapid testing at home, including when and how to use a testing kit and what it can and cannot show.

Nursing Led Rapid Antigen Testing Study for Asymptomatic Individuals
Dr. Sabrina Wong

In May 2021, UBC launched a 13-week COVID-19 rapid testing trial led by Dr. Sabrina Wong and her research team. As the province embarked on their restart plan that summer, the goal of the rapid tests study was to add another layer of protection and help ease the anxiety of UBC residents. The rapid testing clinic was open to asymptomatic individuals such as student housing residents, critical service employees, those attending select in-person classes, faculty or anyone who lives on the campus.

Pandemic Management in Long-Term Care Sectors
Dr. Farinaz Havaei

Dr. Farinaz (Naz) Havaei led a project to identify the best pandemic management policy practices for BC long-term care (LTC) in collaboration with LTC leadership, management, care providers, residents, and families. The team held five virtual discussion forums, open to all BC stakeholders, to dialogue about pandemic management policies and practices and to co-develop recommendations. Findings from the project have informed decision-making on LTC homes’ pandemic management policies/practices.

COVID-19 and Intellectual and Developmental Disabilities
Dr. Jennifer Baumbusch

Not only do people with intellectual and developmental disabilities (IDD) have a greater risk of severe complications and death from COVID-19, but they also face significant short- and long-term consequences of COVID-related public health measures on their mental health and well-being. Dr. Jennifer Baumbusch was recruited to a Royal Society of Canada COVID-19 Task Force Working Group which released a policy brief with recommendations on achieving a more inclusive and accessible Canadian society for people with IDD, both during and after the pandemic.
Data and Technology

**Promoting Awareness on Pain, Sex, and Endometriosis**
*Dr. Fuchsia Howard*

Endometriosis is a debilitating disease that can often go undiagnosed for years, due to stigma and patients normalizing symptoms. As part of a multidisciplinary team in the Endometriosis Pelvic Pain Laboratory, Dr. Fuchsia Howard and others launched a website that provides creative, visually appealing webpages describing lived experiences of people with endometriosis. The goal is to raise awareness of endometriosis and improve care through evidence-based information.

**Using a Social Robot PARO in Care Settings**
*Dr. Lillian Hung*

There is growing demand for using social robots to support dementia care; however, providing dementia care in hospitals is complex. Dr. Lillian Hung reviewed studies of the social robot PARO, which looks like a furry seal. While there are many documented benefits of PARO, it is crucial to pay attention to patient perspectives and develop strategies to mitigate barriers (such as cost, workload, infection control, ethical issues) that surround the use of PARO.

**Virtual Reality Guided Meditation & Electroencephalograph Activity**
*Dr. Bernie Garrett*

Electrical activity in the brain changes during mindfulness meditation, but this has not been studied in virtual reality (VR) guided meditation therapy. Dr. Bernie Garrett’s team explored the potential for recording and analyzing electroencephalograph waveforms, topographic mapping and coherence during VR experiences. These novel findings demonstrate that distinct brain signals were detectable during VR-guided meditation.

**Seniors’ Triumphs and Trials using Technology**
*Dr. Kirsten Haase*

During the pandemic, Dr. Kirsten Haase and her colleagues found that social pressure motivated many older adults to use technology, whereas before they may have avoided it. Of the technology-reluctant older adults, few reported perceiving a lack of usefulness of technology, but rather, a fear of technology underpinned their prior technology avoidance. The hunger for social and community connections during the pandemic stimulated many older adults to adopt technology in new ways.

**Big Data & Primary Care**
*CPCSSN* [*RCSSSP*]

Co-led by Dr. Sabrina Wong and a national research team, the Canadian Primary Care Sentinel Surveillance Network (CPCSSN) is Canada’s first multi-disease, electronic medical record surveillance system. CPCSSN provides a secure research environment for researchers to analyze data on approved projects. CPCSSN forms a foundation for a pan-Canadian primary care information system and helps advance knowledge through published research on diverse topics, such as improving appropriate antibiotic prescribing in primary care. Ultimately, the mission is to improve primary healthcare delivery outcomes, while facilitating innovation in primary healthcare research.
Fostering Inclusiveness

Unseen – Ranjit’s Story
Ranjit Dhari
Assistant Professor of Teaching Ranjit Dhari shared the story of the systemic racism she faced throughout her childhood, education, and nursing career. The video, Unseen – Ranjit’s Story, has been viewed more than 600+ times and used as supplemental media for students to view. Some of the themes she raises include mistrust, loneliness, barriers to relationships, and collaboration in the profession. She draws sobering attention to the pernicious effects of racism, both in the field of nursing and in society at large.

Black (in) visibility panel: Black nurses in Canada who paved the way
Ismália De Sousa, Dr. Lydia Wytenbroek
In recognition of Black History month, the Consortium of Nursing History Inquiry hosted an online panel discussion in February 2022 to highlight the significant contributions of Black nurses to healthcare in British Columbia and Canada. In addition, panelists presented their research into the complex, racialized experiences and systemic racism that many Black nurses have negotiated throughout their careers.

Teaching Nursing History through Photographs
Dr. Lydia Wytenbroek, Dr. Geertje Boschma
Lead investigators Dr. Lydia Wytenbroek and Dr. Geertje Boschma examined how historical images of nurses or nursing can be used as a resource and tool to teach nursing history. The online recorded session from the 2021 Congress of the International Council of Nurses includes case examples of how to analyze and contextualize selected historical images from various national, cultural, and social contexts in nursing and healthcare.

Anti-Racism Committee
Co-chairs (2021): Dr. Colleen Varcoe, Natalie Chambers
The School of Nursing voted to establish the anti-racism committee (ARC) in 2021. ARC worked collaboratively with the Indigenous Cultural Safety Committee (ICS) to foster equity-oriented, culturally safe and decolonizing environments for research, policy, service, and teaching. Ultimately, the goals of the ARC are to create a welcoming and diverse School of Nursing while, being a facilitator for structural change throughout healthcare.
**Advancing Indigenous Research**  
*Dr. Helen Brown*

The UBC Vancouver campus Indigenous Research Support Initiative (IRSI) Advisory Committee re-elected Dr. Helen Brown (June 2021) as one of only two non-Indigenous UBC faculty to a 12-member advisory committee. Dr. Brown’s research program employs community and strength-based approaches for academic-community partnerships with Indigenous co-leads. Her team forefronts issues such as restorative justice, Indigenous cultural continuity, and social inclusion in their work. With the release of the UBC Indigenous Strategic Plan, UNDRIP, and the TRC calls to action, Dr. Brown’s commitment to participatory and decolonizing methodologies, in partnership with Indigenous people, models collaborative approaches to building healthy community relationships.

**UBC 23 24 Indigenous Cultural Safety Facilitators**  
*Ranjit Dhari, Dr. Elizabeth Bailey, Debbie Mann, Dr. Lydia Wytenbroek, Elsie Tan and Dr. Helen Brown (Advisor)*

UBC 23 24 is an Indigenous Cultural Safety (ICS) Program responding to the Truth and Reconciliation Commission of Canada’s 94 Calls to Action. Several UBC Nursing faculty were recruited as Interprofessional Education (IPE) facilitators, who play an integral role in health professional students’ learning experience by supporting them through ICS modules while creating a safe learning environment.

*UBC 23 24*

**Dementia & Social Inclusion**

Amid restrictive public health mandates in 2021, research on older adults blossomed in unexpected ways. For example, Dr. Kristen Haase and colleagues tracked how Canadian seniors dramatically changed their technology use during the pandemic. As a result, many older adults were uniquely motivated and socially pressured to seek and adopt new technologies to reduce social isolation.

In the same year, a BC action group of people with dementia that was working with Dr. Alison Phinney’s team to reduce stigma and foster social inclusion, consolidated a move to an online platform to extend their reach into the northern and interior regions of BC. In this way, the pandemic inadvertently helped build capacity across the province for meaningful public involvement in research and community advocacy by people living with dementia.

New ideas and opportunities continue to emerge from the initial urgent needs created by the pandemic. Dr. Lillian Hung’s team of patient co-leads, front-line workers, healthcare leaders, industry partners and students was poised to expand their work exploring adopting technology for patient care, using implementation science methodologies. For example, projects using a telepresence robot, a remote-controlled, wheeled tablet with wireless internet, and a TOCHIE talking device (or intelligent speaker) enabled families to connect with long-term care residents during the COVID-19 restrictions.

The success of these pilot studies has made inroads in supporting a better quality of life for residents, even as visitation access has resumed. In addition, they continue to explore the best configurations of technology supports for different older adult users, such as those with advanced dementia.
Expert Consultations

Public inquiry into the Death of Ms. Joyce Echaquan
Dr. Annette Browne

In the wake of Ms. Joyce Echaquan’s death, Atikamekw leaders in Quebec drafted Joyce’s Principle to guarantee healthcare for Indigenous people free of discrimination. The Quebec Provincial Coroner called Dr. Annette Browne to serve as an expert witness in the Public Inquiry into the death of Ms. Echaquan. Dr. Browne provided insights into how systemic racism, stigma, inaccurate stereotypes, and other forms of discrimination intersect within the Canadian healthcare system to reduce the quality of care. Ultimately, Dr. Browne called for “a tidal change in the way health professionals and hospital staff treat Indigenous people.”

Ministry of Health Discontinuation of One High Risk Site Policy in LTC
Dr. Farinaz Havaei

Dr. Farinaz Havaei was co-principal investigator of a CIHR-funded research study that evaluated the “One High-Risk Site” policy implemented in long-term care (LTC) settings. The policy prohibited staff from being employed in more than one LTC home to help slow the spread of COVID-19. This research indicated that the nature of the policy was discriminatory as it did not apply to other healthcare sectors. Dr. Havaei and Dr. Sims-Gould presented their findings to the BC Ministry of Health and the BC Quality and Safety Council, which helped inform the decision to discontinue policy in the LTC.

Supporting the Needs of Sexual Minority and Gender Diverse Youth in Care
Dr. Elizabeth Saewyc

The BC Representative of the Children and Youth Office commissioned two reports by UBC’s Stigma and Resilience Among Vulnerable Youth Center (SARAVYC), led by Dr. Elizabeth Saewyc. The SARAVYC team is informing future guidance to support Two-Spirit, lesbian, gay, bisexual, trans and non-binary and queer (2SLGBTQ+) young people in government care in BC.

Nurse Practitioner Lead in BC Primary Care Initiatives
Dr. Jennifer Krist

To further integrate Nurse Practitioners (NP) into the province’s team-based primary healthcare system, the Regional Leadership program is a collaborative initiative between the BC Ministry of Health and Nurses and Nurse Practitioners of BC. UBC Nursing Lecturer Dr. Jennifer Krist is the Fraser Regional Lead for NP initiatives in Primary Care Networks (PCN) and represents PCN NPs at the Divisions of Family Practice and Ministry of Health Strategic Planning. As a regional leader, she provides professional coaching and mentoring to ensure the Fraser Health Authority region is well supported to advance NP leadership in their communities.

Medical Assistance in Dying from Bill C-14 to Bill C-7
Dr. Sally Thorne

The Canadian Nurses Association’s submission to the federal government concerning Amendments to the Criminal Code related to Medical Assistance in Death (MAiD) was largely informed by Dr. Sally Thorne and Dr. Barbara Pesut’s study findings. On March 17, 2021, Bill C-7 received Royal Assent, substantially changing MAiD legislation to allow for a second stream of MAiD eligibility for individuals whose natural death was not reasonably foreseeable. Dr. Sally Thorne and Dr. Barbara Pesut’s team published the first report in November 2021 examining the implications of the new MAiD legislation from the perspective of nurses and nurse practitioners.
**Professional Nursing Workforce Advocacy**  
*Dr. Sally Thorne*

In a commentary published in December 2021, *Regaining Our Professional Vision*, Dr. Thorne argues that despite the pandemic’s strains on the nursing workforce, the fundamental threat to healthy healthcare systems is the demoralizing conditions under which many nurses strive to practice their profession. Dr. Thorne further participated in the Task Force commissioned by the Royal Society of Canada to develop a Policy Brief on the Impact of COVID-19 on the Nursing Workforce in Canada. In it, she highlights the impact of structural and attitudinal healthcare system features on the experiences of patients and their caregivers and systems of support for nursing practice.

**Technology Adoption Guidelines**  
*Dr. Lillian Hung*

As the founder of IDEAlab, Dr. Lillian Hung and her team have co-developed policies with stakeholders at Vancouver Coastal Health (VCH) and patient partners to guide technology adoption (e.g. telepresence robots, smart audio devices) for providing real-time benefits to residents living with dementia. Furthermore, with the VCH infection control office, the team developed an infection control policy outlining procedures to follow during acute and long-term care (LTC) facility outbreaks. With expertise in dementia and technology use in healthcare, Dr. Hung also serves as an advisory member with VCH leaders on the regional committee for planning technology improvement in LTC.

**Mental Health Promotion Position Statement**  
*Dr. Emily Jenkins*

Dr. Emily Jenkins led a position statement, *Critical Actions for Mental Health Promotion*, released by the International Union for Health Promotion and Education (IUHPE). Advocacy efforts have been directed towards Canadian governments (e.g., B.C. Ministries and the Public Health Agency of Canada) and international agencies (e.g., WHO, UNICEF). The position statement focuses on leveraging the pandemic context to support a population approach to mental health and identifies eight priority areas for mental health promotion with a long-lasting potential for health, social, and economic measures.

**WHO Global Action on Measurement in Adolescent Health**  
*Dr. Elizabeth Saewyc*

WHO Global Action on Measurement in Adolescent Health (GAMA) is an advisory group with 16 global experts and four young experts focused on improving adolescent health. Adolescents between the ages of 10-19 represent 16% of the world’s population. Serving on the GAMA Technical Advisory Group, Dr. Saewyc mapped out a set of key global youth health indicators to better track the progress of improving adolescent health, harmonize global coordination, and reduce duplicate reporting.

**American Academy of Sleep Guidelines**  
*Dr. Wendy Hall*

As the only Canadian nurse invited to serve on the American Academy of Medicine’s international panel, professor emerita Dr. Wendy Hall helped shape evidence-based sleep guidelines for 0-18 year olds. Recognized internationally, she is a “go-to” expert on this topic, and over the past five years, she has given over 60 media interviews promoting children’s healthy sleep durations. Dr. Hall’s commitment to media engagement provides a valuable nursing perspective to the current public conversation.
UBC Nursing Trainee Awards

NATANIA ABEBE, MSN/MPH STUDENT
Supervisor: Dr. Maura McPhee and Dr. Chris Lovato
Professor Jessie Gordon MacCarty Memorial Scholarship 2021 Recipient

DR. JONATHAN AVERY, POST-DOCTORAL FELLOW
Supervisor: Dr. Fuchsia Howard
Canadian AYA Oncology Grant
Developing an approach to supportive care for adolescent and young adults with advanced/ incurable cancer

RAYMOND CHHUN, MSN STUDENT
Supervisor: Dr. Helen Brown & Dr. Elisabeth Bailey
UBC President’s Pandemic Recovery Initiative
The power of resilience in nursing education

CHLOË CROSSCHILD, PHD STUDENT
Supervisor: Dr. Colleen Varcoe
Canada Graduate Scholarship Doctoral Award (CIHR)
litsim’kaatsita: Enhancing relations between Indigenous women and registered nurses. Journeying toward transformative reconciliation to foster maternal health equity

ZACHARY DALY, PHD STUDENT
Supervisor: Dr. Emily Jenkins
Canada Graduate Scholarship Doctoral Award (CIHR)
A mixed methods exploration of young peoples’ experiences of climate anxiety and its impacts in British Columbia, Canada

TREVOR GOODYEAR, PHD STUDENT
Supervisor: Dr. Emily Jenkins & Dr. Rodney Knight
Canada Graduate Scholarship Doctoral Award (CIHR)
Out on the street: A critical ethnography with homeless 2SLGBTQ+ youth who use drugs

DR. TARA HORRILL, POST-DOCTORAL FELLOW
Supervisor: Dr. Annette Browne, Dr. Kelli Stajduhar
MSHRBC Trainee Award
Advancing health equity in the cancer care sector: identifying organizational and contextual factors impacting the integration of equity-oriented healthcare for marginalized populations

CATHERINE LIAO, PHD STUDENT
Supervisor: Dr. Colleen Varcoe
President’s Academic Excellence Initiative PhD Award and UBC Public Scholars Award
Burn injury in under-served communities in BC: A mixed-methods study

DR. COREY MCALIFFE, POST-DOCTORAL FELLOW
Supervisor: Dr. Emily Jenkins
Health System Impact Fellow (CIHR)
Building capacity for campus suicide prevention: A policy practice partnership

MANPREET THANDI, PHD STUDENT
Supervisor: Dr. Sabrina Wong
Canada Graduate Scholarship Doctoral Award (CIHR)
Implementing a frailty severity scale using primary care electronic medical record data in Canada

SARAH CROWE, CRITICAL CARE NURSE PRACTITIONER
Supervisor: Dr. Fuchsia Howard
MSHRBC Trainee Award
Understanding critical care nurses’ prioritization of patient care
Theses & Dissertations

Catherine Margaret Haney, PhD
Supervisor: Dr. Geertje Boschma
Abortion nursing in Canada: 1960s to 1990s

Shams Moh’D Fares Al-Anzi, MSN
Supervisors: Dr. Emily Jenkins, Dr. Farinaz Havaei
Ten-year trends in bullying, discrimination and suicidality among adolescents experiencing overweight and obesity in British Columbia

Christine Hui-kuan Ou, PhD
Supervisor: Dr. Wendy Hall
Using mixed methods to explain maternal anger: examining the relationships between sleep and anger and exploring mothers’ development of anger

Vanessa Brcic, MSc (SPPH)
Supervisor: Dr. Sabrina Wong
Building capacity for trauma and violence-informed care and deconstructing oppression in women’s healthcare

Janet Currie, PhD (ISGP)
Supervisor: Dr. Suzanne Campbell
What patient, clinician, policy and socio-cultural factors are associated with the rise in off-label prescribing of domperidone in British Columbia when used to treat low milk supply?

Shivinder Dhari, MSN
Supervisors: Dr. Emily Jenkins, Dr. John Oliffe
A strengths-based exploration of the lived experiences of sexual and/or gender minority women with past suicide attempts

Neda Hamzavi, MSN
Supervisor: Dr. Helen Brown, Dr. Joan Anderson
Exploring the experiences of Black, Indigenous, and People of Colour graduate nursing students in white academic spaces

Chantelle Recsky, PhD
Supervisor: Dr. Leanne M. Currie
Characterization and management of technology-mediated adverse events in primary and community care

Anna Theresa Ryan, MSN
Supervisor: Dr. Farinaz Havaei, Dr. Maura MacPhee
Nursing scope of practice defined and operationalized in Canada: a systematic review

Marianne Liette Sakamoto, PhD
Supervisor: Dr. Alison Phinney
Waiting for home: dementia and the alternate level of care experience development of anger

Krista Sferrazza, MSN
Supervisor: Dr. Suzanne Campbell
Undergraduate nursing students’ experiences in the clinical learning environment since COVID-19 in British Columbia

Building capacity for trauma and violence-informed care and deconstructing oppression in women’s healthcare

Realist evaluation of violence prevention education in British Columbia healthcare: how does it make a difference
UBC Research Excellence Clusters

Transformation Health & Justice
Cluster Lead: Dr. Helen Brown
This cross-sectoral cluster uses innovation and strength-based approaches to support equity-oriented, decolonizing and culturally safe research and policy development for and with people impacted by the criminal justice system, to address justice and health inequities.

Reducing Male Suicide
Cluster Lead: Dr. John Oliffe
This international cluster based at UBC is working to address men’s mental health inequities, optimize help-seeking experiences, and equip community and mental-health professional care services to expertly evaluate and treat mental illnesses and suicidality.

Women’s Health Research
Cluster Co-lead: Dr. Suzanne Campbell
A network of researchers, clinicians, community partners, and trainees, the Women’s Health Research cluster aims to mobilize and catalyze research that supports women to live equitable healthy lives from birth to old age.

Advancing Mental Health Equity in Post-COVID-19 Asia-Pacific
Cluster member: Dr. Sabrina Wong
As a member of an interdisciplinary cluster, Dr. Wong collaborates on innovative ways for knowledge exchange and advance best practices for equitable mental health in the Asia-Pacific region.

Designing for People (DFP)
Cluster member: Dr. Kristen Haase, Dr. Lillian Hung, Dr. Manon Ranger
UBC’s Designing for People is an interdisciplinary center of excellence in human-centered design. Their goal is to accelerate social and technical problem-solving, and create sharable resources.

Patient-Oriented Research

A Qualitative Investigation of How to Integrate Primary Caregiver-Reported Outcomes Across the Colorectal Cancer Journey
Dr. Fuchsia Howard, Dr. Sally Thorne
Primary caregivers who help patients through their cancer journey can experience high levels of caregiver burden. In addition, there can be emotional or work/income challenges and their own health problems. Dr. Fuchsia Howard’s research group aims to answer questions regarding what outcomes matter the most to caregivers, how to effectively and efficiently collect caregiver-reported outcomes, and what kind of assistance would be most helpful.

Integrating Patient Perspectives Through Shared Decision-Making for Valvular Heart Disease Therapy
Dr. Sandra Lauck
Dr. Sandra Lauck led a review of shared decision-making to support older patients’ inclusion in the treatment decision for managing heart valve disease and educate healthcare professionals on using decision aids. This review aligns with the recent publication of the Canadian Cardiovascular Society and other international societies’ guidelines that have endorsed shared decision-making and helps equip clinicians with tools and knowledge to promote this shift in the culture of healthcare and the empowerment of patients to achieve a good treatment decision.
UBC Nursing PUBLICATIONS

* UBC Nursing Faculty denoted in blue
* UBC Nursing trainees underlined


Books and Chapters


Citation:

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