INSIGHT INNOVATION IMPACT

Annual Research Report 2017-2018



Acting Associate Dean's Message

#1 in Canada

In February 201

Quacquarelli Symonds World University Ranking by Subject announced that it had graded Bloomberg Nursing as the #2 nursing school in the world and the #1 nursing school in Canada. This honour, in part, is cause of its quantifiable ment of our research outputs.

principally of our publications and citations.

But our numerous publications and citations only tell part of our story. The more important aspect is the impact we have beyond academia, in how our work influences society, health and policy. While publications and citations are noteworthy, having an impact on a population or a problem is what is the most important.

Our research moves from empirical study through to practice through our myriad knowledge translation initiatives. It is through sharing our research findings that Bloomberg Nursing inspires advancements in Canada and around the world.

> Linda Johnston Phd, Feans, Faan

Our research impact

While the research interests of Bloomberg Nursing faculty members are diverse, we are all striving to answer research questions that will generate evidence that our target audiences can use. As researchers, we each ask, "How can I make my research useful and ensure at it has an impact on my population?"

Our faculty members are leading research programs that are having an impact. The research is informing decisions about public policies, clinical care, social programs and professional practice.

The students in all of Bloomberg Nursing's academic programs are exposed to and/or are leading research studies. They're being encouraged to contemplate the potential impact that their research will have.

Bloomberg Nursing research continues to have an impact, locally, nationally and internationally. In this year's *Research Report*, we highlight the significant impact of the research that our faculty members are leading.

> Kelly Metcalfe PhD, FAAN, FCAHS Acting Associate Dean, Research & External Relations

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RESEARCH INFORMS CHANGES TO CARE, POLICY, PUBLC HEALTH

Meet the Research Faculty

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and parents

PARRY

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PROF. SIOBAN **NELSON** History of the nursing profession

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STEVENS management of pain in in infants and children



PROF. BONNIE



4 | Lawrence S. Bloomberg Faculty of Nursing









Bringing impact to light

Frances Bloomberg International Distinguished Visiting Professor says research must make a difference

"Right now, there's a payback approach to research," says Dr. **Karen Luker**, this year's Distinguished Visiting Professor. "You need to prove that your research has the potential to lead to an improvement in service delivery in terms of added value for money, or that it can positively influence the health of the public or lead to improvements in treatment or quality of life."

Over the course of the professorship, the community nursing professor and nurse leader from the University of Manchester in England engaged faculty, students and researchers at Toronto's academic health care facilities in discussions on research impact. "Impacts are varied and most importantly include improvements in patient outcomes and quality of life related to their treatment and care," she said. "Research that influences public debate and changes policy leading to improvements in the health of the public are considered impactful. In addition, research that improves the efficiency of health care and reduces costs, or leads to innovative service re-design is valued. Impacts can also include contributing to the development of professional standards and professional education and capacity building." In May, Luker spoke to faculty and Toronto Academic Health Science Network researchers about the increasing need to articulate the impact of their investigations. During the presentation, Luker listed the myriad ways that research can have an impact. Some of those ways include improving patient outcomes, stimulating public debate, lowering the cost of health care and improving social welfare.

The visiting professor recognized that investigators may be reluctant to share their findings outside of the research community for fear of being pressured to make unsubstantiated conclusions. However, she encouraged researchers to share even early data with their stakeholders so they can increase the impact of their research.

In monitoring the impact of her own research, Luker discovered that her survey on how cancer affects employment was cited in the analysis leading up to changing England's Disability Act to include cancer as a disability. "Now, those with cancer can receive disability payments if they are unable to work," said Luker. "This is an excellent example of how research is having an impact. The study helped change government policy."

Think global, act local

Research program for migrant transgender women promoted health through social inclusion

Associate Professor **Denise Gastaldo** investigates how social, political and economic processes affect health, both in Canada and internationally. One of her particular interests is how migration affects health. "International migration deeply disrupts social networks and support systems, potentially leading to social isolation and poor working conditions," she says. These, in turn, can produce acute health problems and chronic illness.

Dr. Gastaldo was the Evaluation Academic Lead on the "Trans Latinas Overcoming Radical Socio-Economic Exclusion" study. The objective of this community-based social intervention was to improve the health and well-being of the Spanish-speaking immigrant transgender women who attended the intervention's program in Toronto and to build capacity by sharing the intervention with others who work with radically excluded groups.

This research was a collaborative effort of practitioners at the Centre for Spanish Speaking People (CSSP), members of the Trans Latinas Ontario (TLO) group, and U of T students and researchers. "The need for this social intervention was identified by CSSP professionals," says Gastaldo. "Overall, what the TLO

Our community-university partnership created sustainable social innovation and new knowledge that has had local and international impact.

- Associate Professor Denise Gastaldo

members needed was to feel they have a rightful place in the larger society. This makes perfect sense as social integration is at the core of health promotion."

The participants were migrants from Spanish-speaking countries including Colombia, Venezuela, Argentina, Honduras and Mexico. "Most moved to Canada expecting to feel safe because they believed transphobia doesn't exist here," says Gastaldo. "But unfortunately, they face discrimination and exclusion here. While Canada is much safer for transgender women than many other countries, we still have a long way to go to eliminate transphobia."

During the intervention, the participants met every two weeks for six months for a workshop structured around three themes – self-care, belonging and professional skills.

At the end of the program, the workshop graduates were invited to lead a monthly self-care and advocacy evening. Through new partnerships, this sustainable outreach initiative aims to improve the well-being and socio-economic inclusion of transgender women in Toronto. Gastaldo and the other team members act as an advisory board for the graduates.

The intervention was evaluated through pre- and post-intervention questionnaires and hand mapping. The results indicate that most participants improved their self-care practices and expanded their social networks, and some achieved new job opportunities. The researchers recognize that improving social inclusion for transgender women requires consideration of and attentiveness to the multiple factors leading to socio-economic exclusion and the ways in which these factors interact with immigration and gendered social norms.

The impact of the study has extended not only locally, but globally. CSSP's community principal investigator created an educational workshop about transgender migrant women that she presented to health care providers and frontline service workers in Toronto. The interdisciplinary team developed a "lessons learned" best practices model that is benefiting those who work with transgender communities. The team is now preparing scholarly articles and an e-publication to share with community groups and other stakeholders. "We also shared the results in Latin America with the support of our international partners in Colombia and Costa Rica," says Gastaldo. "Our learnings are being widely circulated."



MONICA PARRY (LEFT) WITH VINCENZA SPITERI DEBONIS, A PATIENT ADVISER

Heartfelt research

Professor's practice informs her research

Associate Professor **Monica Parry's** research program focuses on reducing the burden of cardiovascular disease (CVD). It has three streams: 1) identifying individuals at risk of CVD, 2) improving care for those at risk of, or with the disease, and 3) managing the complications associated with CVD.

Dr. Parry also practises as a nurse practitioner in cardiac surgery at a hospital in Kingston, Ont. "The research I do must be relevant to practice," she says. As a PhDprepared nurse, Parry insists that patients inform her research. "The patients bring the experience and the relevance, and have helped design some of my studies," she says.

One of Parry's recent investigations is "Cardiac Pain in Women with Arthritis." It focuses on women with inflammatory arthritis (IA), which includes rheumatoid arthritis, ankylosing spondylitis and psoriatric arthritis. "Women with IA have a disproportionate burden of coronary artery disease," says Parry. "They develop heart disease 10 years earlier than men with IA and have up to a 70 per cent increased risk of having a heart attack."

During a heart attack, men tend to have crushing chest pain, but women may experience more diffuse symptoms such as pain in the jaw, neck, shoulders and/or back, as well as extreme fatigue. "For women with IA, it can be difficult to distinguish arthritic pain from cardiac pain."

The objective of this study was to explore the current body of knowledge on the self-management of cardiac pain in women with IA. Parry and her team conducted a systematic review of MEDLINE, EMBASE and six other medical databases, as well as 156 grey literature repositories. "To our knowledge, this is the first systematic review of the literature related to self-management of cardiac pain in women with IA," says Parry.

I consider patients as partners in research.

- Associate Professor Monica Parry

The team performed a full-text assessment on 519 studies, but no study described the self-management of cardiac pain or associated cardiac pain equivalents – such as fatigue, dyspnea and exhaustion – in women with IA. "Our results suggest there is a lack of knowledge related to how women with IA recognize and self-manage cardiac pain," says Parry.

The knowledge gained from this study contributes to that obtained in a recent systematic review and meta-analysis, which found that self-management interventions reduce cardiac pain and cardiac pain equivalents in women. These interventions are more effective if they target women only, and include goal setting and support from health care providers. Parry and her team will translate this knowledge to women using a user-developed smartphone and web-based intervention called HEARTPAQN. The intervention is expected to motivate healthy behaviours, reduce symptoms, be a crucial source of information and improve quality of life for women with cardiac pain and cardiac pain equivalents.

PHOTO: STEPHEN UHRANEY

Empowering cancer patients

Esteemed research chair allows professor to focus on improving patients' quality of life

Professor (status-only) **Doris Howell's** research focuses on minimizing the debilitating effects of cancer and its treatment, and on improving quality of life for patients living with cancer as a chronic illness. She examines how psychological factors – such as perceptions, beliefs and self-efficacy – affect the physical and emotional aspects of cancer. She develops, tests and disseminates behavioural self-management interventions and system innovations that target the side effects of cancer treatments.

"Cancer patients are required to adhere to complicated and often lifelong treatment regimes, managing multiple symptoms while adjusting to emotional distress and a changed sense of self." says Dr. Howell.

In 2004, Howell was appointed the inaugural RBC Financial Group Chair in Oncology Nursing and Research. This joint research chair between Bloomberg Nursing, U of T and the University Health Network (Princess Margaret Cancer Centre) allows Howell to dedicate up to 80 per cent of her time to research.

One of her current research projects is the "Usability and Feasibility Study of the Advanced Symptom Management System (ASyMS) for Chemotherapy Toxicities in Canadian Cancer Patients." The objective of the study is to reduce symptom burden by enhancing patients' confidence in their ability to self-manage the side effects of cancer treatments, such as nausea, mucositis, pain and fatigue. "It's the patient who shoulders the responsibility for symptom management 24-7," says Howell, "and most cancer patients struggle to manage their symptoms on their own, often using trial and error to find what works best."

The ASyMS mobile phone system provides for remote patient monitoring and early identification of treatment side effects between clinic visits. "It has been shown to have utility in Australia and the U.K.," says Howell.

In Phase 1 of the study, Howell and her research team evaluated the usability and feasibility of implementing

the ASyMS during chemotherapy treatment in the Ontario cancer system and adapted it to Canadian guidelines. This phase is now complete. The research team is disseminating their findings.

The team is also conducting Phase 2, a randomized controlled trial measuring the rate of recruitment, retention and adherence to the ASyMS intervention. It will allow the researchers to estimate the effectiveness of ASyMS in changing symptom severity, self-management behaviours, health care utilization and quality of life.

This phase will recruit 88 breast, colorectal and lymphoma cancer patients receiving adjuvant chemotherapy. Forty-four of them will be given a cellphone installed with the ASyMS app.

For the first two weeks of each chemo cycle, the patients with the ASyMS app enter their symptoms on the cellphone twice a day. The app then advises them on how to manage those symptoms by tailoring self-care information to the reported symptoms. It also generates additional questions to determine the acuteness of the symptoms. If a symptom is severe, the clinical trials nurse receives an alert on his or her phone and calls the patient. The nurse then triages the patient using the ASyMS decision support system to provide evidence-based advice and if necessary, arranges for the patient to see a health care professional.

Howell's research study has the potential to improve the quality of life of cancer patients by reducing the severity of the side effects of cancer treatments and providing patients with self-management strategies and support. "ASyMS empowers cancer patients by shifting the response to symptoms from reactive to proactive care," says Howell. The intervention will also improve patient outcomes by promptly identifying symptoms that require medical attention. This, in turn, will reduce the burden on the health care system.

Cancer has lagged behind other diseases in terms of self-management because of its complexity. Cancer is not one disease. It's considered 200 diseases.

- Professor Doris Howell



I-CAN MANAGE Feedback Guide: Welcome Chapter & Chapter 1

Before you start to review the chapters provided, please read through this guide to let you know what kind of feedback we are looking to receive from you at this time. This will also provide information to help you understand the current status of the chapters and other supporting elements of the program.

Some of the illustrations and image sourcing for certain areas of the chapters are still in progress. You will see empty boxes and small notes for future illustrations— these are placeholders for now, so please disregard them as you explore the chapters. Some things for you to keep in mind

• chapters.

Bloomberg Nursing

By the numbers



Building Future Researchers

Bloomberg Nursing integrates research opportunities at every level

Encouraging undergraduates

"The summer research program opened my eyes to what nurses can bring to the table," says **Morgan Hempinstall** from the BScN Class of 2018. "It was an amazing opportunity to see a different side of nursing."

In the summer of 2017, seventeen first-year students participated in our Undergraduate Student Summer Research Program, which pairs students with faculty members to give them the opportunity to be integrated into a faculty member's program of research.

Hempinstall was paired with Professor **Katherine McGilton** to contribute to her examination of the nurse supervisory role in long-term care homes. "I helped do the coding of the data from 25 previously conducted interviews," says Hempinstall. The interviews were with RNs, RPNs, PSWs and administrators in five long-term care homes. "I'd never done coding and data analysis before. I'd only done a literature review."

Bloomberg Nursing's undergraduate program requires applicants to have at least 10 university credits. But this year, all 176 students entering the two-year program had at least one university degree. In fact, 21 of them had a master's degree. Before starting our nursing program, Hempinstall earned a bachelor of health sciences degree.

"Working on this study showed me the importance of leadership in the work environment," he says. "It gave me a holistic view of how nurses work in a system."

Hempinstall's work over the summer was such a help to McGilton that she asked him to continue to be involved in her research during the school year by contributing to another study she was leading. For this study, Hempinstall analyzed chart data from long-term care homes to assess whether the clients had had hearing and vision testing. "Hearing issues can be misinterpreted as cognitive impairment," says Hempinstall. "The solution may be as simple as putting a sign over the patient's bed: 'Please make sure my hearing aids are in before you speak.'

"Working on this research study showed me the importance of research and how it can inform clinical practice, which ultimately will help the elderly lead fulfilling lives. I hope to work with people of all ages, and benefit the health of everyone."

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Building Future Researchers

Bloomberg Nursing integrates research opportunities at every level

Taking heart

Tieghan Killackey, now in her third year of Bloomberg Nursing's doctoral program, is researching why there is low engagement in advance care planning (ACP) among patients with heart failure. Under the supervision of Professor **Elizabeth Peter**, Killackey is developing a relational autonomy model by exploring the experiences of heart failure patients as well as their family members and health care providers. Her research will expand our understanding of the complex challenges that heart failure patients face when making end-of-life decisions.

For this patient population, ACP is associated with fewer acute care admissions, increased satisfaction with care, and lower rates of anxiety and depression in family members. "If the family members know what is important to their loved one, they may experience less anxiety when asked to make decisions about care.

"It's important to have ACP conversations early and often," continues Killackey. "They allow patients to discuss their values and ensure that their future care reflects those values." Some conversations may be one-on-one with the patient and a health care provider, and nurses can assume this role. Other conversations may include family members.

"One reason why the majority of heart failure patients do not participate in ACP is because health care providers may feel they don't have enough training on how to best approach these conversations," she says. To address this concern, Killackey has given workshops as well as lunchand-learn sessions and seminars at University Health Network where she practises as a staff nurse in the Peter Munk Cardiac Centre.

Another reason for low ACP rates is that heart failure has an unpredictable trajectory, she says. "It's hard to know what to expect, especially with the life-sustaining therapies that are available now for our patients, such as ventricular assist devices and implantable cardioverter-defibrillators." Recently, Killackey was selected to receive the prestigious Adel S. Sedra Distinguished Graduate Award through the University of Toronto Awards of Excellence program. "I was extremely surprised because I knew it was very competitive," she says. The award will allow Killackey to present her research at international conferences and collaborate with leaders in nursing ethics as well as cardiovascular and palliative care. "Just as meaningful to me is the encouragement that the award provides and the recognition that this an important area of study," she says.

Easing caregiver burden

"Caring for a family member who needs a ventilator is enormously demanding," says post-doctoral fellow **Marina Wasilewski**. "The amount and intensity of care that's required puts this role at the extreme end of the caregiving spectrum."

Under the supervision of Associate Professor **Louise Rose**, Dr. Wasilewski is conducting a pilot randomized controlled trial to explore the feasibility of an online peer support program for family caregivers of ventilator-assisted individuals (VAIs) and how it influences the caregivers' health and well-being.



Family caregiving is a serious public health issue.

- Postdoctoral student Marina Wasilewski

"Family caregivers can become so fixated on caring for their loved one that they neglect their own health," says Wasilewski, who researched adult children caring for aging parents for her doctoral thesis. "There are significant declines in mental and physical health when people take on the caregiving role."

As part of her postdoctoral studies, Wasilewski has developed the first peer-support program tailored to VAI caregivers. "In some cases, as with amyotrophic lateral sclerosis patients, a loved one's life is in the hands of the family caregiver," she says. "The caregivers need to be vigilant with their responsibilities, which include managing tube complications and responding to ventilator alarms. They can't easily get away to utilize in-person support groups."

To address the unique needs of VIA caregivers, Wasilewski created an online, 12-week peer support program that includes private chat options (where caregivers can communicate one-on-one using audio, video or text), as well as a weekly one-hour "live chat" in which the caregivers can engage with each other. For the study, Wasilewski will ask the caregivers to participate in the program at least twice a week and in most of the weekly chats.

"Peers are a key source of social support," she says. "Peers reduce isolation, buffer stress, enhance self-efficacy and create a sense of empowerment."

Wasilewski hopes that with positive findings from her postdoctoral work, the online peer support program can be launched as a hub where caregivers of VAIs in Canada can connect with each other. "The website will be a way for this very vulnerable group to battle isolation," she says.

Our faculty have research partnerships in 36 countries

From China to Cuba, Singapore to Stockholm, Bloomberg Nursing's faculty members engage with other researchers to solve health problems locally and internationally.

152

152 collaborations in North America:

Canada United States

6

16 collaborations in South America:

Brazil Chile

Research Collaborations

58 collaborations in the European Union:

Austria Belgium Cyprus Denmark England Finland France Germany Ireland

58

Italy The Netherlands Northern Ireland Poland Scotland Spain Sweden Wales

6 collaborations in Africa:

Ghana South Africa

As well, we have collaborations in:

Lebanon United Arab Emirates

6 collaborations in

the Middle East:

Iran

China

Cuba

India

Israel

Norway South Korea Singapore Switzerland

12 collaborations in Australasia:

Australia New Zealand

Awards and Distinctions



Canadian Association of Schools of Nursing

Pat Griffin Award

Professor Linda McGillis Hall received the 2017 Pat Griffin Nursing Education Research Scholar Award from the Canadian Association of Schools of Nursing. The award acknowledges her research on Canada's transition from a Canadian entryto-practice exam to one from the U.S.

In January 2015, the Canadian Registered Nurse Exam was replaced by the National Council Licensure Exam-RN from the States. Dr. McGillis Hall investigated the effects of the exam on students and the implications for Canadian educational institutions.



Inducted into the Canadian Academy of Health Sciences

Professor **Kelly Metcalfe** has received three honours.

The Canadian Academy of Health Sciences

presented Dr. Metcalfe with one of its highest awards by inducting her as a Fellow. The honour acknowledges her internationally recognized leadership, academic performance, scientific creativity and willingness to serve.

U of T's Faculty of Medicine recognized Metcalfe's exemplary career and research achievements with its 2017 Rising Star Award. This Dean's Alumni Award commends Metcalfe's numerous international studies that have informed the way in which hereditary breast cancer is prevented and treated.

In addition, Metcalfe was elected to the Royal Society of Canada's College of New Scholars, Artists and Scientists,

which recognizes emerging Canadian intellectual leaders.



Inducted into the American Academy of Nursing

Professor Edith Hillan and Professor (status-only) Jennifer Stinson have received the significant honour of being inducted into the American Academy of Nursing as Fellows.

Dr. Hillan is currently researching how to use new technologies to improve access to high-quality health care for mothers and newborns in rural and remote settings. Dr. Stinson's research focuses on smartphone and Internet technologies to help children and youth manage chronic pain.

Bloomberg Nursing now counts 13 faculty members as Fellows of the American Academy of Nursing.



Canadian Critical Care Trials Group

Deborah J. Cook Mentorship Award

Associate Professor **Louise Rose** is the 2018 recipient of the prestigious Deborah J. Cook Mentorship Award. It recognizes a member of the Critical Care Trials Group who has made exceptional contributions to promoting critical care research to those caring for this group of vulnerable people and, in particular, to those beginning their research career. Dr. Louise Rose conducts research on the care and management of patients who need mechanical ventilation.



Sigma Theta Tau International, Lambda Pi-At-Large Chapter

Dorothy M. Pringle Award

Assistant Professor **Craig Dale** received the 2017 Dorothy M. Pringle Award for Excellence in Research. The award recognizes Dr. Dale's research focus on the fundamental nursing care needs of acute and critically ill adults. His research concentrates on the pain management and communication of patients receiving oral care in the ICU.



Council of Ontario University Programs in Nursing

Scholarship into Practice Award

Professor **Cindy-Lee Dennis** is the 2018 recipient of COUPN's Scholarship into Practice Award, which recognizes the demonstrated impact of scholarship on nursing practice. Dr. Dennis holds the Canada Research Chair in Perinatal Community Health at U of T, and the Women's Health Research Chair at St Michael's Hospital and U of T.



Canadian Association of Nurses in Oncology

Professor (status-only) **Doris Howell** has received two awards.

The Canadian Association of Nurses

in Oncology recognized Dr. Howell's significant, innovative and sustained contributions to the profession with its 2017 Award of Distinction. Howell's research focuses on improving cancer patients' health, particularly their quality of life, by empowering them to self-manage their symptoms during and after treatment.

From the **Registered Nurses' Association** of Ontario, Howell received the 2018 Leadership Award in Nursing Research.

An impressive investment

In November 2017, the Canadian Institutes of Health Research announced a \$17-million investment in a study led by Professor **Cindy-Lee Dennis**. It may be the largest grant ever awarded to a nurse researcher in Canada.

The funding is through the Healthy Life Trajectories Initiative (HeLTI), which focuses on reducing child obesity and the risk for non-communicable diseases, such as cardiovascular disease, type 2 diabetes and mental illness, later in life. HeLTI takes a Developmental Origins of Health and Disease approach, which stresses that environmental factors interact with genes during conception, fetal life, infancy and early childhood, affecting the individual's health later in life.

The HeLTI initiative is international and includes intervention cohorts in Canada, China, India and South Africa. They are aligned to enable harmonized data capture, comparative analysis of successful interventions, identification of mechanistic pathways, exchange of scientific ideas, and cross-study mentorship and training.

> Dennis is leading the Canadian cohort called the "TRajectories Of healthy life using Public Health and primary care Interventions in Canada: The TROPHIC Trial." This 10-year randomized controlled trial will evaluate the effect of a four-phase intervention from pre-conception to early childhood on child obesity and development, and school readiness. It involves a multidisciplinary team of 48 investigators from 21 institutions across six provinces.

> > The trial will recruit 10,000 couples planning a pregnancy and provide a preconception intervention that targets the goals of achieving an ideal pre-pregnancy weight, encouraging health behaviours (such as physical activity), promoting mental health, boosting the parental relationship and optimizing the home environment. The intervention will then continue into pregnancy, infancy and early childhood among the 70 per cent of couples expected to conceive.

To achieve the intervention goals, in each phase the families will receive telephone-based collaborative care by nurses; personalized e-health interventions, based on identified risk factors that target health behaviours; and a health promotion app that will supply time-sensitive information on a supportive, nurturing environment for a child and his or her family.

Research Funding Awarded: 2017-2018

Investigators	Sponsor	Program	Title of Research Project	Awardec
K. Cleverley (PI), J.N. Stinson, et al.	Canadian Institutes of Health Research (CIHR)	Project Grant	Longitudinal Youth in Transition Study (LYiTS)	\$1,002,150
D. Korczak (PI), K. Cleverley , et al.	Centre for Brain & Mental Health	Capitalize for Kids Health Outcomes Award	A focused suicide prevention strategy versus enhanced usual care for youth presenting to the emergency department with suicide related behaviour: A randomized controlled trial	\$100,000
L.A. Cranley (PI), L. McGillis Hall, K.S. McGilton, et al.	CIHR	Project Grant	Implementing an intervention to foster meaningful engagement and shared decision-making among residents, families, and healthcare teams in long-term care: A mixed methods approach	\$153,000
B.H. Cuthbertson (PI), C. Dale, L. Rose, et al.	CIHR	Project Grant – Bridge Funding	The SuDDICU study – A study of the impact of preventative antibiotics (SDD) on patient outcome and antibiotic resistance in the critically ill in intensive care	\$100,000
CL. Dennis , C.S. Birken, P. Jüni (Co-PIs), M.T. Puts, R.L. Stremler , et al.	CIHR	Team Grant: Healthy Life Trajectories Initiative	TRajectories Of healthy life using Public Health and primary care Interventions in Canada: The TROPHIC trial	\$17,018,637
H. Brown (PI), CL. Dennis , et al.	CIHR	Project Grant	Chronic medical conditions and perinatal mental illness	\$200,000
S.N. Vigod (PI), CL. Dennis, et al.	CIHR	Project Grant	Schizophrenia Understood in the Perinatal period: Psychiatric Outcomes and Reproductive Trajectories (SUPPORT) – Part 3: Child health	\$336,600
N.M. Ivers, A. Greenberg, P. Agarwal, CL. Dennis , S.N. Vigod (Co-PIs), et al.	CIHR	Catalyst Grant: Personalized Health Catalyst Grants	Automated screening, triage, and follow-up to facilitate proactive, personalized postpartum mental health treatment for new parents	\$189,943
S.G. Matthews, K. Kumaran, S.J. Lye, P. Shah, K.G. Suryanarayana, C. Yajnik (Co-PIs), CL. Dennis , et al.	CIHR	Team Grant – Healthy Life Trajectories Initiative India	Early INterventions to Support Trajectories for healthy lifE in INdia (EINSTEIN)	\$5,005,500
S.N. Vigod (PI) , CL. Dennis , et al.	CIHR	Catalyst Grant: Personalized Health	Postpartum depression Action toward Causes and Treatment (PACT) – Canada: Predictive analytic models for postpartum depression risk	\$200,000
S.N. Vigod (PI), CL. Dennis, K.A. Metcalfe, et al.	CIHR	Project Grant	Randomized controlled trial of an electronic patient decision aid (PDA) for antidepressant medication use in pregnancy	\$719,100
D. Singla (PI), CL. Dennis, et al.	Patient-Centered Outcomes Research Institute		Improving the scalability of psychological treatments for perinatal depression and anxiety via teledelivery: A proposal for a pragmatic, randomized on-inferiority effectiveness trial	\$4,425,740
D. Forster (PI), CL. Dennis , et al.	National Health and Medical Research Council (Australia)		Preventing postnatal depression in new mothers using telephone peer support: A randomised controlled trial	\$800,000
K. Chaput (PI), CL. Dennis , et al.	University of Calgary	Clinical Research Fund Grant	Antenatal telephone psychotherapy intervention for the treatment and prevention of postpartum depression	\$10,000
W. Tharao, S. Godoy, N. Massaquoi, C. Joseph, D. Gastaldo , U. Bajwa, P. Ruiz	Women's XChange Grant	15K Challenge	Juntas/Together: Creating a wellbeing intervention for Latin American women at Women's Health in Women's Hands Community Health Centre	\$15,000

Investigators	Sponsor	Program	Title of Research Project	Awarded
D.M. Howell	CIHR & Canadian Cancer Society Research Institute	Innovation Grant	Adaptation, feasibility and acceptability study of the advanced symptom monitoring and management system (ASyMS) mobile health intervention to reduce chemotherapy toxicities in Canadian cancer patients	\$196,000
M.K. Krzyzanowska, L. Moody, D.M. Howell (Co-PIs), et al.	CIHR	Operating Grant: Partnerships for Health System Improvement for Cancer Control	Decreasing cancer burden: Testing a proactive model of care to improve the quality of toxicity management through patient activation for cancer self-management during the active treatment phase	\$961,492
R.L. Urquhart (PI), D. Howell, et al.	CIHR	Foundation Grant	Follow-up care of cancer survivors: Optimizing survivor and health system outcomes	\$957,545
S. Lambert, A. Katz, G. Ménard, J. McCusker, M. Morrison, M.M. Vickers (Co- Pls), D.M. Howell , et al.	CIHR	Catalyst Grant: SPOR Innovative Clinical Trials	An adaptive dyadic self-directed coping and self-management skills training intervention for caregivers of individuals with cancer: A pilot Sequential Multiple Assignment Randomized Trial (SMART) design	\$99,969
C. Zimmerman (PI), D.M. Howell, et al.	CIHR	Project Grant	Symptom screening and early palliative care in patients with advanced cancer: A randomized trial	\$1,002,150
D.M. Howell	CIHR	Institute Community Support Travel Award	Summer program in aging – Technology and innovation supporting the health of older adults. (S. Budhwani, doctoral student)	\$730
L. Jeffs (PI), L. McGillis Hall, et al.	Ontario Ministry of Health and Long-Term Care	Targeted Research	The NURSING SCOPE of Practice Evaluation project: The NURSING-SCOPE project	\$386,881
P.A. Rochon, S.E. Bronskill (Co-Pls), L.P. Jeffs , et al.	CIHR	Project Grant	A multi-method approach to exploring prescribing cascades	\$488,069
C. Bailey (PI), L.P. Jeffs , et al.	CIHR and Mitacs	Health System Impact Fellowship	Enhancing nurses' role in opioid stewardship – Implications for health policy, practice (advocacy) and patient safety. (C. Bailey, postdoctoral fellow)	\$108,500
S. Mayo	Oncology Nursing Society (U.S.)	Career Development Award	Advancing biomarker investigation of cancer-related cognitive impairment	\$20,000
S. Mayo (PI), D. Howell, K. Metcalfe, et al.	Oncology Nursing Society (U.S.)	Research Grant	Long-term neurocognitive function after allogeneic stem cell transplantation: A follow-up study	\$24,995
L. McGillis Hall (PI), M. Lalonde	Ontario Ministry of Advanced Education and Skills Development	Ontario Human Capital Research and Innovation Fund	Understanding the human capital impact of the change to the NCLEX-RN for Canadian nurse licensing: Phase 2	\$50,000
L. McGillis Hall (PI), L. Cranley, et al.	Ontario Nurses' Association		RN4Cast Study	\$237,300
J. McElhaney, G. Daybutch, J. Walker (Co-PIs), K. McGilton, et al.	CIHR	Project Grant	Integrated knowledge translation to address multi-morbidity and promote healthy aging in Indigenous people	\$1,476,450
S.A. Narod (PI), K.A. Metcalfe, et al.	CIHR	Foundation Grant	Clinical evaluative studies in hereditary breast and ovarian cancer	\$1,952,885
P. Frenz, C. Muntaner , O. Solar	World Health Organization		Global review report on the social determinants of health	\$50,000
M.J. Parry , T. Ceroni (Co- Pls), et al.	CIHR	Patient-Oriented Research Collaboration Grants	Building capacity for patient engagement and patient-oriented research in clinical trials	\$89,426

nvestigators	Sponsor	Program	Title of Research Project	Awarded
M.J. Parry, H.A. Clarke (Co-Pls), J.N. Stinson, J.H. Watt-Watson, et al.	CIHR	Project Grant	Development and usability testing of HEARTP9IN: An integrated smartphone and web-based intervention for women with cardiac pain	\$566,099
J. Gegus (PI), M. Parry , et al.	University of Toronto	Instructional Technology Innovation Fund	Using interprofessional student-directed simulation to enhance critical thinking and collaboration in emergency situations in community health settings	\$1,980
L. Pilote (PI), M. Parry , et al.	CIHR	Planning and Dissemination Grant – Institute Community Support	Impact of gender on health outcomes international meeting	\$15,000
E. Peter	Ted Rogers Centre for Heart Research Education Fund	Doctoral Fellowship	Improving advance care planning in heart failure management: Developing a relational model of the patient and family experience. (T. Killackey, doctoral student)	\$18,000
D.N. Wijeysundera, S.M. Alibhai, P. Jüni, D.I. McIsaac (Co-PIs), M.T. Puts , et al.	CIHR	Project Grant	The Functional Improvement Trajectories After Surgery (FIT After Surgery) study: A multicentre prospective cohort study to evaluate the incidence, trajectories, risk factors, impact and healthcare costs related to significant new disability after major elective surgery	\$1,388,474
M. Puts	CIHR	Travel Award	The impact of falls on cancer treatment in older adults with cancer. (S. Sattar, doctoral student)	\$1,000
L . Rose , F.J. Page (Co-PIs), et al.	CIHR	Project Grant	Core outcome set development for effectiveness trials of interventions to prevent or treat delirium (Del-COrS)	\$271,576
L. Rose (PI), C. Dale, et al.	Ontario Respiratory Care Society	Research Award	Patient and family centred performance measures focused on actionable processes of care for persistent critical illness	\$25,000
L. Rose (PI), C. Dale, et al.	Canadian Lung Association		Patient and family centred performance measures focused on actionable processes of care for persistent critical illness	\$20,000
L. Rose, L. Burry (Co-PIs), C. Dale, et al.	Sunnybrook Practice- based Research Fund		Feasibility of melatonin for prevention of delirium in critically ill patients: Protocol for a multi-centre, randomized, placebo- controlled study	\$9,953
B.H. Cuthbertson, G.E. Garber, C. Misak, L. Rose , S. Murthy (Co-PIs), C. Dale , et al.	CIHR	Project Grant	The SuDDICU study – A study of the impact of preventative antibiotics (SDD) on patient outcome and antibiotic resistance in the critically ill in intensive care	\$2,999,929
L.J. Morrison (PI), L. Rose , et al.	CIHR	Planning and Dissemination Grant	Resuscitation in Motion (RiM) 2018 – From research to real world resuscitation – Dissemination and knowledge exchange for best practice	\$15,000
A. Gershon (PI), L. Rose , et al.	CIHR	Foundation Grant	Canadian Best Respiratory Research Evaluation and Analyst Team of Health Experts (CanBREATHE)	\$926,746
M. Campbell-Yeo (PI), B. Stevens , et al.	Nova Scotia Health Research Foundation	Establishment Grant	Effect of skin-to-skin contact on acute pain response in the preterm brain	\$149,980
M.A. Latimer, J.R. Sylliboy (Co-PIs), B.J. Stevens, J.N. Stinson , et al.	CIHR	Planning and Dissemination Grant	PICH2Go Indigenous	\$23,613
J.N. Stinson , L. Jibb (Co- PIs), et al.	Canadian Cancer Society Research Institute	Quality of Life Grant	The PainSquad+ smartphone app to support real-time pain management for adolescents with cancer: A randomized controlled trial	\$299,983

nvestigators	Sponsor	Program	Title of Research Project	Awarded
J.N. Stinson , L. Jibb (Co- PIs), et al.	CIHR	Project Grant	The PainSquad+ smartphone app to support real-time pain management for adolescents with cancer: A randomized controlled trial	\$573,752
J.N. Stinson (PI), et al.	CIHR	Patient-Oriented Research Collaboration Grants	Building sustainable partnerships with patients and families to guide pediatric chronic pain research and practice in Canada	\$46,955
J.N. Stinson (PI), et al.	CIHR	Planning and Dissemination Grant	Developing a pediatric neuropathic pain instrument: A consensus conference	\$29,807
J.N. Stinson	CIHR	Brain Star Award	Dyadic analysis of child and parent trait and state pain catastrophizing in the process of children's communication. (K. Birnie, postdoctoral fellow)	\$1,500
J.N. Stinson, F. Campbell (Co-PIs), et al.	CIHR	Project Grant	iCanCope with post-operative pain (iCanCope PostOp): Development and evaluation of a smartphone-based pain self- management program for adolescents following surgery	\$382,500
J.N. Stinson	CIHR	Travel Award	My Post-Operative Pain (MyPOP): A smartphone-based app to address gaps in post-operative pain self-management for youth. (K. Birnie, postdoctoral fellow)	\$1,500
S. Kashikar-Zuck (PI), J. Stinson , et al.	National Institutes of Health	Canadian Subsite	Multi-site randomized clinical trial of FIT teens for juvenile fibromyalgia	\$139,278
S.J. Anthony (PI), J.N. Stinson , et al.	CIHR	Early Career Grants in Maternal, Reproductive, Child and Youth Health	Measuring what matters: Integrating patient-reported measures into clinical practice	\$49,948
S.J. Anthony (PI), J.N. Stinson , et al.	CIHR	Patient-Oriented Research Collaboration Grants	Measuring what matters: Integrating patient-reported outcomes into clinical practice – A consensus conference	\$49,961
L.R. Gauthier, C. Lalloo (Co- Pls), J.N. Stinson , et al.	CIHR	Personalized Health Catalyst Grant	PainQuILT: A patient-centred solution to empower older adults and improve pain assessment and management	\$162,027
B.M. Feldman (PI), J.N. Stinson, et al.	CIHR	Project Grant	Sleep and pain in childhood arthritis: A crossover randomized controlled trial comparing adequate and restricted sleep duration, and its impact on pain in adolescents with arthritis	\$256,275
R.L. Stremler	CIHR	Healthy Behaviour Data Challenge – Letter of Intent	The PHASStrack (Physical Activity, Sleep, Sedentary behaviour tracking) app	\$10,000
R.L. Stremler (PI), et al.	CIHR	Healthy Behaviour Data Challenge	The PHASStrak system	\$25,000
K. Widger (PI), et al.	Hospital for Sick Children	Norman Saunders Complex Care Grant	Development of a conceptual framework for quality of life in children with medical complexity	\$14,128
K. Weingarten, K. Widger , D. Wilson	Hospital for Sick Children	Innovation Grant, Clinical Advisory Council	Early consultation for children undergoing hematopoietic stem cell transplantation (quality improvement project)	\$10,000
H. Siden (PI), K. Widger , et al.	University of British Columbia	2017 Grants for Catalyzing Research Clusters	The frail young: Care for children with complex illnesses, their families and communities	\$98,000
S. Gupta (PI), K.A. Widger , et al.	CIHR	Project Grant	Long-term morbidity and mortality among mothers and siblings of children with cancer: A population-based study using health services data	\$233,325

Publications

April 1, 2017, to March 31, 2018

among Canada's top-15 research universities for citations in nursing publications

Abbass-Dick J, & Dennis CL. (2018). Maternal and paternal experiences and satisfaction with a co-parenting breastfeeding support intervention in Canada. *Midwifery*, *56*, 135-41.

Abbass-Dick J, Xie F, Koroluk J, Alcock Brillinger S, Huizinga J, ... Dennis CL. (2017). The development and piloting of an eHealth breastfeeding resource targeting fathers and partners as co-parents. *Midwifery*, 50, 139-47.

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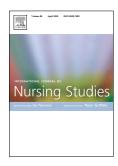
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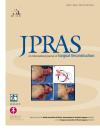
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Giving nurses the words



"The #1 issue for nurses today is moral distress," says Professor **Elizabeth Peter.** "They experience moral distress by not being able to achieve the ideals of nursing because of staffing constraints. They experience moral distress by participating in futile interventions at end of life. Ethics helps nurses open up an issue and look at it through a different lens, a process that can foster new ideas and approaches to care."

Dr. Peter has developed approaches in nursing ethics that have advanced the concepts of moral distress, moral identity, moral agency and moral competency. She shares her insights not only through journal articles and by teaching ethics at Bloomberg Nursing, she is also a sought-after speaker. After a presentation, people have approached Peter to express their gratitude for the vocabulary she has given them. "They say, 'Oh, I didn't know there were words for that!' Ethics gives people a language to express what concerns them," says Peter. "Ethics helps nurses go from sensing an issue, to being able to articulate it and raise critical questions, to being a leader by choosing to act on the issue.

"Ideas are as powerful as facts," Peter says. "Ideas and values are what can initiate social change."

Putting pain in its place



Professor (status-only) **Jennifer Stinson** has developed the PainSquad+ app to help cancer patients aged 12 to 18 manage their pain. "After using PainSquad+ for 28 days, the adolescents experienced significantly less pain, and pain interfered less with their daily activities," she says. The app is being translated into Persian for youth in Iran and into Cantonese and Mandarin for adolescents in China.

Much of the app's success stems from Stinson's decision to make it fun. She cast the patient in the role of a law-enforcement officer hunting down pain. Twice a day, police headquarters sends an alert to the teens' smartphones to tell them it's time for their pain-recording mission, which they fulfil by completing a questionnaire on their pain intensity, duration, location and impact, and how pain-management strategies affected their pain. Then, based on the reports, the app gives each participant tailored pain-management advice.

More recently, Stinson developed iPeer2Peer to match adolescents with a chronic pain condition with a mentor, aged 18 to 25, with the same condition. "Every week, the mentor and mentee meet on Skype," explains Stinson.

"The mentors help the teens to validate their experience and advocate for themselves. Perhaps most importantly, iP2P gives the teens someone they can reach out to who understands what they're going through."

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