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In this printed issue we offer the convenience of QR codes. Turn on your phone’s camera and hover over any code to reveal the clickable link. No smartphone? Extras and active hyperlinks are online at nursing.ubc.ca/touchpointsx. If you are reading a digital version, simply click the QR code.

The School of Nursing Research and Teaching Scholarship Report for 2022 is now available to read online.
DIRECTOR’S MESSAGE

Once again, we are experiencing difficult and uncertain times globally. The Russian invasion of Ukraine is entering its second year and the war in Sudan has been raging since April. The terrorist attack on Israel in October and its horrific response in Gaza have incited a rise in violent anti-Semitism and anti-Islam actions, even in Canada.

At home and elsewhere, we are seeing increases in racism and protests against inclusion: the rights of trans people are being challenged, and voices are even being raised against school programs that support and acknowledge 2SLGBTQ+ children and youth. Climate change has increased the incidence of wildfires and extreme weather, and now, six people die every day in British Columbia from the ongoing toxic drug crisis. As a consequence, life expectancy in Canada has declined.

And even while violence, death and disaster are increasing throughout much of the world, underscoring the importance of health care, health care systems are struggling too. ERs are closing and there’s a shortage of nurses and other health professionals, causing a shortage of access to hospital and long-term care beds.

It’s at moments like these that nurses and nursing research become even more crucial. Our faculty and students are providing research to advance knowledge and tackle misinformation; delivering expert testimony for human rights tribunals, inquests and court cases; writing commentaries as well as research briefs; and reaching out to help nurses navigate moral distress in their clinical settings. The School has initiatives in place to take up and attend to much that is happening in the world and at home, and to contribute nursing knowledge to help people cope in the face of so much grief and loss.

Some of these achievements of our students, faculty and alumni help give hope for the future. We have outlined some great work in these pages, and I am confident this issue will demonstrate that nurses can and do make positive changes locally and globally.

We continue to advocate for human rights, truth and reconciliation, health equity, and a healthy planet, and renew our hope for peace.

Elizabeth Saewyc, PhD, RN, FSAHM, FCAHS, FAAN, FCAN
Professor & Distinguished University Scholar
Director, School of Nursing

Byte-sized Brilliance: our faculty online

The Reducing Male Suicide Research Excellence Cluster asks: “What is your ‘Go-To’ tune when you’re feeling down?” Watch this video to get some suggestions from Dr. John Oliffe and the Men’s Health Research team.

The Flipping Stigma group facilitated by Dr. Alison Phinney has created a guide to help you develop an action group to create your own initiative for change. BONUS: Buy a T-shirt or hoodie and help support dementia research.

Dr. Sandra Lauck gives a brief video introduction to the St Paul’s Hospital’s CREST program in the hospital’s Promise Magazine.

Dr. Emmanuela Ojukwu shares her research perspectives in two videos filmed at the 2023 Canadian Conference on HIV/AIDS Research (CAHR) in Quebec City. (Filmed by Canada’s Source for HIV and Hepatitis C Information (CATIE)). The first video is on HIV stigma and the negative impacts it can have, and the second video on Women and Canada’s HIV response.

What’s your “Go-To” Song?
Flipping Stigma Store
Flipping Stigma Guide
CREST Program
HIV Stigma & negative impacts
Women and HIV response
History of Nursing Symposium 2023
Using photo analysis to examine the history of nursing in political spheres: Canadian and European perspectives

What does the Portuguese Women’s Brigade of WWI have in common with the Riverview Psychiatric Hospital? Most recently, they comprised two of the “political spheres” discussed using photo analysis at the 2023 Nursing History Symposium.

Hosted by the UBC Consortium for Nursing History Inquiry at the School of Nursing on November 21, 2023, an online webinar presented several talks to over 50 participants from Canada and Europe. The panel of presenters was comprised of representatives from the Canadian and European Associations for the History of Nursing (CAHN and EAHN) and took place across several time zones.

Panel presenters examined a series of photographs representing key events in the history of nursing from various perspectives, time periods and national and international contexts. The panel showed how photographs can provide insight into nursing’s past that may not necessarily be captured by document analysis alone and may invite reflection on the ways in which nursing has interacted with different political influences. Below are some of the ideas presented in the recorded event, available for viewing through the UBC Library.

Geertje Boschma, PhD, RN (University of British Columbia, Canada, CAHN past-president). In “Psychiatric Nursing History: Mental Hospital transformations from a nursing viewpoint” Geertje discusses three photographs from the collection of the Riverview Hospital Historical Society in Coquitlam. A photo of a fun, friendly sports event on a bright, sunny afternoon documents a shift in policy from closed communities and long-term confinement to “slowly considering patient rights from new perspectives.”

Peter Twohig, PhD (Saint Mary’s University, Canada, current CAHN president). Presenting Invisible No More: Indigenous nurses in Canadian Health Care, Peter begins his presentation by noting that in 1931, 94% of nurses in Canada claimed either British or French heritage, which “can be read as a proxy for whiteness in nursing.” His chosen imagery unveils the “invisible” Indigenous women in health care. Each is meticulously identified and can be seen posing for photos that celebrate their graduation or other achievements. “There is a strong visual record,” Peter says, “that records the labour of Indigenous women in Canadian health care even if that labour was rendered invisible by a state intent on portraying Indigenous people as recipients of services rather than as providers of those services.”

Helen Vandenberg, PhD RN (University of Saskatchewan, Canada, CAHN past president and current treasurer). Helen, who is also a UBC alum, presented on Nursing Roles in Early Hospital Development and Reform. She points out that although religious organizations and governments are well-known for developing health care institutions, nurses have a rich history of establishing

The November event was a reprise of the presentation previously given at the 2023 American Association of the History of Nursing conference earlier this year in Pittsburg, USA. The recording is available through the Open Collection of the UBC library.
hospitals throughout Canada in the late 19th and early 20th century. She focusses on the achievements of the Victorian Order of Nurses (VON), established in 1897 as a result of ideas expressed at the National Council of Women’s meeting the previous year. Helen noted in her analysis of the photograph above, that the VON and its influence was made possible by these mainly white, upperclass women testing their power and authority in this political sphere.

Maria Eugenia Galiana Sanchez PhD RN (University of Alicante, Spain, current EAHN president) introduces the EAHN’s three videos, the first from the Historical Nurse Research section of the German society of nursing science, presented by Anja Katharina Peters of the Protestant University Dresden, Germany. What appears to be a benign 1954 postcard of nurses celebrating a jubilee in period uniforms contains oblique references to an important nurse figure, who was also a Nazi sympathizer. This information is to be obtained only by close analysis and research. Next, The Portuguese Society for the History of Nursing offers photographs showing how WWI was “one of the most significant periods in the history of Portuguese nursing,” as nurses were trained and marshalled to care for injured Portuguese soldiers at the European front. Finally, Zvonimir Kralj and Sanda Franković of the University of Zagreb present a 1956 photograph of the first class of college-educated nurses in front of the school of nursing in Zagreb which had been founded in 1921). This group was called “The Skiers” because they celebrated their landmark graduation with a ski trip. The last class in this program graduated in 1962. The presenters could only surmise why the college was so short-lived, when the previous system of a high-school level program was restored, but referred to this historical blip as “an opportunity lost in time.”

Hugo Schalkwijk, PhD candidate (University of Applied Sciences Utrecht, Netherlands, current EAHN vice president), wrapped up the European presentations with further analysis. The video was followed by a question-and-answer period that brought the symposium to a close.

“Photographs can deepen historical understanding in a much more immediate fashion than text alone may achieve. Still, like written documents, photos do require analysis in order to convey a message and must be placed in context. Similar to text, photographs also reflect an interpretation from the photographer at the time and the nurse historian when presenting them.”

- Geertje Boschma
Students attending the UBC School of Nursing can be confident that they will receive a stellar education. This fall, 97.98% of UBC Nursing students passed the NCLEX exam.

Average passing rates among nursing programs:
- In BC: 94.4%
- In Canada overall: 90.5%
- In the US: 93.5%

Well done students!
Rising Star and Newest Faculty Member

Dr. Scott Ramsay

Dr. Scott Ramsay is a Registered Nurse at BC Children’s Hospital Research Institute. He graduated with a PhD from the School of Nursing on November 23, 2023 and will be joining the faculty in January, 2024. Scott was featured as a UBC Applied Science Rising Star in November - that story is reproduced below. His story and his research gained a great deal of traction through December. For more about Scott and links to those stories, please visit the nursing website’s News page.

From Athlete and Patient to Researcher and Clinician: Using Lived Experience to Guide Concussion Care

I am BC Métis, born and raised in the Lower Mainland. I recently defended my PhD in the School of Nursing at UBC and am a Registered Nurse by profession, having worked at BC Children’s Hospital for the past eight years.

Prior to that, I played high-level hockey, making it all the way to NHL camp with the Anaheim Ducks. As a former professional athlete, whose teenage dreams of playing in the NHL were dashed by a traumatic brain injury, I was inspired to pursue a career in Nursing so that I could have an impact on the lives of youth struggling with the same symptoms I experienced myself.

Throughout my degree I have continued to expand advocacy efforts for youth concussion prevention and management.

Why did you choose to go into your field of study at UBC?

I decided to pursue Nursing, following my own experience as a patient. While in my Master’s program, I had a serendipitous conversation with Dr. Susan Dahinten. She encouraged me to pursue my doctoral studies and was one of the main reasons I entered the program. She has been a fantastic mentor, and I am so glad we had that initial conversation five years ago!

What has made your time at UBC memorable?

Being named an APSC Rising Star is definitely a highlight - the culmination of my work and dedication over the last five years, I think is best encapsulated through this recognition. All the course work, teaching, mentoring, research, etc. compiled into one, and really allows me to reflect back on all the different contributions I made throughout my program.

What advice would you give a student entering your program?

My advice would be patience. Doing a doctoral degree is about being patient and absorbing as much information as possible along your journey. Too often, we want to learn everything at once or make an instant change. To that end, I would also say it is important to be realistic with yourself and the expectations you set.

Where do you find your inspiration for using your degree to make an impact?

As someone who suffered concussions and post-concussion syndrome I reached out to Dr. Michael Gaetz, a researcher I personally knew when going through my experience. He influenced my life direction and demonstrated, now that I can recognize it, how powerful research and evidence can be to inform peoples decisions and the choices they can make for their health when properly informed.

What are some contributions you would like to make when it comes to the future of work in your field?

Moving forward, and building off my doctorate, I hope to make very clear the importance of nurses being able to do both research and clinical practice: a nurse-clinician-scientist.

Bridging the gap that exists between academics and clinical practice is imperative for training the next generation of nurses, and I hope that my work can serve as an example on how to balance both areas.

Further, I am hoping that researchers in areas where nursing is not a strong voice, such as concussion research, see the importance of having a multidisciplinary approach and recognize the value of what the nursing perspective can bring to the table to move the field forward.

As an Indigenous nurse researcher, I also want to acknowledge and thank Dr. Leanne Currie for her mentorship, support, and guidance throughout my degree - she has been a rock.
Alina Benischek
The Kievell Scholarship in Nursing

Alina Benischek is the 2023 recipient of The Kievell Scholarship in Nursing. This scholarship has been made available annually through a fund established at the Vancouver Foundation by Myrtle Lorena Kievell (1903-1989) in memory of her parents, James Wesley Kievell (1860-1938) and Margaret Gardiner Kievell (1871-1965), and brother, William Elder Kievell (1897-1965), for an outstanding third or fourth-year female student in the Bachelor of Science in Nursing program. It is hoped that recipients of the scholarship will spend time in an area where medical help is needed – in Canada or elsewhere. The scholarship is made on the recommendation of the School of Nursing.

Alina will graduate with her BSN in 2024. She took time from her busy schedule to offer her thoughts her path toward a career in nursing.

My journey through nursing education has been incredibly enriching, exposing me to inspiring and unforeseen learning opportunities. I chose to pursue a career in nursing due to my desire for involvement in a profession deeply rooted in humanistic values, offering boundless prospects for professional advancement across various domains, including medicine, technology, education, research, health promotion, and leadership.

Within the UBC program, I have been fortunate to engage in both professional and personal development activities. Engaging in the UBC Indigenous Studies book club as a peer participant and serving as an elected member of the Nursing Undergraduate Society in the role of an Interprofessional liaison have been integral parts of my developmental journey. Furthermore, as my nursing training and skill set expand, I’ve broadened my involvement in community-based roles and volunteering. This expansion has bolstered my confidence in integrating my passions for healthcare, public health, and wellness coaching into my community outreach and public health engagements which has helped prepare me for entering the complex and dynamic field of healthcare.

As an aspiring nurse, health professional, and advocate for patients, I emphasize the paramount importance of self-care and personal development. I firmly believe that prioritizing self-care allows us to best serve our patients and communities. Nursing is inherently selfless and demands resilience, both emotionally and physically. However, with the backing of our colleagues and families, nursing transforms into a profoundly meaningful and gratifying profession.

Our responsibility as nurses encompasses caring for and advocating for individuals and families navigating through challenging life circumstances, a privilege that I deeply cherish.

I am exceedingly grateful for Kievell Scholarship in Nursing. This recognition not only validates my dedication and hard work in nursing, but also facilitates my continued focus on academic pursuits, as well as personal and professional development endeavors for my future career as a nurse.

Unlocking Potential: Inspiring a Future Generation of Nurses

These two stories exemplify more than two dozen awards and scholarships that were awarded this fall. They illustrate the impact that financial support can have on aspiring nurses, paving the way for excellence in patient care and healthcare leadership.

Our donors are catalysts for change, influencing the trajectory of future healthcare professionals. We are grateful to them for amplifying, through scholarships and awards, the impact a nursing degree can have. Their generosity has the potential to unlock dreams, alleviate financial burdens, and empower deserving individuals to pursue their passion for nursing.
Danica “Nica” Calvert is the 2023 recipient of the Janet Gormick Memorial Scholarship in Nursing. This scholarship has been endowed through a bequest by Janet Gormick, RN, BSc, MSN and professor emerita, to be awarded to a graduate student in Nursing. The award is made on the recommendation of the School of Nursing in consultation with the Faculty of Graduate and Postdoctoral Studies. To learn more about the donor of this award, please visit Janet’s Amazing Alumni page.

Nica graduates with her BSN in 2024. Here are some of her thoughts on this award, her student experience, and her chosen profession.

This award came as a complete surprise. I have never really strived for academic recognition and never expected that I was performing at a level that would be recognized in this way. Though unexpected, I cannot express the gratitude I’ve felt and how humbling the experience has been. I have such a deep love for this discipline and learning to be a nurse has never really felt like “work;” being recognized this way has made me feel that I am right where I am meant to be.

I had a very transformational moment prior to pursuing nursing that really forced me to confront what my purpose was to be in this life. I felt very called to do something more meaningful with the gifts I had. To me, nursing is a profession where not only can you make a profound impact on someone’s life, but you also never run out of new things to learn and opportunities to grow in the role.

I have so many interests ranging from primary and urgent care to emergency medicine, so as of now I’m still undecided about my trajectory in nursing! What I do know is that the patients who have left the biggest impact on me, and with whom I’ve had the most meaningful experiences, are those who are unhoused, street entrenched, or otherwise part of a vulnerable population. I also know that I feel very passionate about harm reduction and have loved every experience I’ve had on the DTES. So, wherever my career does take me, I know I want to work with these populations in some capacity!

I have had some really wonderful clinical instructors, who encouraged and believed in me very early on. Their support and affirmation helped me build my confidence and recognize my strengths, which then inspired me to take on challenges that helped me develop and excel in my practice.

I also had one professor show me a great deal of compassion and kindness when I was struggling personally, and though I don’t want to name her in case that’s something she’s uncomfortable with, I hope she knows she forever has my gratitude.

I attribute a lot of the ease I had in nursing school to my love for critical thinking and curiosity. I am a very autonomous and self-directed learner and found a lot of strength came from immersing myself in critical inquiry. I always tried to go a couple steps deeper than what we were taught to fortify my understanding. Often times this meant delving into pathophysiology, pharmacology, and the evidence/physiology behind interventions, looking for those “aha!” moments.

I also attribute my success to the fact that I really embraced what worked for me. I found that I felt excited to learn when I took total ownership over my education and allowed myself to learn in the way that I needed to, rather than comparing myself to others.

My advice to anyone really would be to constantly ask the question “why?” Beyond that, seek out the answer on your own first - you’d be surprised how much you can learn just by trying to find an answer. I would also encourage any student to do what you need to do and learn how you best learn, even if it may look different from your peers.

I definitely had moments where I struggled, and frankly, I think every single person has something they’re going through. For me, it was managing an invisible disability. Though I’ve managed this since childhood, this period of massive change in my life was very dysregulating. What I learned from it though is that it’s so important to remember that you can’t take care of others without taking care of yourself first. Personally, I was able to move through my challenges by grounding myself in new coping mechanisms, recognizing and respecting my limits, and utilizing my support system.

I try to view periods of challenge with gratitude for the resilience I’m able to build from them and hope that others have found their strengths in their struggle as well!

I often feel very privileged to be in a position to show compassion to others in their vulnerable moments. I have one memory that sticks with me always and is the memory I go back to when I need to remember why I chose this profession. I had the opportunity to lead my peers through a dressing change I had experience with, for an individual who was unhoused and had been brought in after being found unconscious in the rain. I held this man’s hand and tried to distract him during the change, hoping that I was providing him some comfort. Through our interaction and words exchanged, I knew that my attention, love, and presence in that moment made him feel safe and cared for. I’ve really learned that sometimes the smallest things go the furthest way.
This fall, Term 1 BSN students completed an assignment new to NURS 300, “Theoretical and Professional Foundations for Nursing Practice,” introduced by Dr. Lydia Wytenbroek, called an UnEssay Project. Students worked in groups to explore a topic related to one of the course themes and presented their project in a creative format of their choosing. Students then showcased their projects in an UnEssay Exhibition, held on November 16. There will be a rotating display of the projects on the third floor of Koerner Pavilion (UBCH) and visitors are invited to view these until March.

“Costumes can hide who we are, we can also don and doff them as we choose. We like to think of this project as a reminder of the complex histories and societal forces that create the gender paradigms in nursing as we experience them today. Simultaneously, however, we see the medium as a hopeful reminder that, just as gender roles are constructed and performed, they can also be peeled away, thus freeing nurses to bring their full identities to their practice.”

Jill Reimer (NURS 300 Student)
The Vancouver Summer Program (VSP) rebooted in 2023 after a pandemic hiatus. The newest iteration of the VSP program for international students now includes a third package. Along with Senior’s Health and Home Care, and Interdisciplinary Global Health Leadership, package C focuses on Mental Health and Awareness.

From July 14 through to August 14th, 49 students from Australia, China, Hong Kong, Singapore, Taiwan and the UK attended the Vancouver campus to learn and explore the lower mainland. From beaches to classrooms, below are snapshots of their stay.

The VSP is a four-week academic program for international undergraduate students. Applications are now being accepted for VSP 2024. Please visit our website for more information about this program.
Marion Woodward Lecture with Dr. Rae Walker
Life, Death, and Data: Imagining Possible Futures for Care Work in an A.I. Era

It is striking that a keynote speaker on artificial intelligence would include a personal anecdote of a decidedly un-tech experience of volunteering with a search and rescue crew. Completely off-grid, combing the wilderness for survivors of a plane crash, Dr. Rae Walker described their role in sitting with a dying man in that remote setting as one of accompaniment. In his final moments, the most meaningful act was one of human connection.

Moving from psilocybin clinical trials to data feminism, 55th annual Marion Woodward Lecturer Dr. Rae Walker (they/them) spoke of the hope that we need to maintain in not only ensuring good deaths, but also in the design and use of technologies that sustain us. They challenged us to reject the false binary of technology as good versus evil. Quoting South African civil rights activist Miriam Makeba who said that hope is a discipline, Dr. Walker called on nurses to practice hope.

“I’d like to imagine how we might practice hope for the future of our world, our communities, our relationships, on a networked planet increasingly connected, surveilled, metricized, archived, and automated by technologies of AI and big data,” invited Dr. Walker.

Artificial Intelligence (AI) itself is imagined in a myriad of ways. Nimble in conception to conform to the aims of the powers that deploy it. For example, Moxi the helper robot is meant to assist nurses in chronically understaffed settings to perform automated tasks while claiming to create more time for nurses to according to the tagline “do what they do best”.

Dr. Walker clarified how machine learning rests on vast training data to allow for pattern recognition and data models that can be “supervised” to repetitively refine the model to improve its problem-solving or “learning”. Or put more simply, explained Dr. Walker, AI replicates patterns from the past to answer questions in the present. Historically, AI development has been organized around military aims from computer vision for detecting enemy incursions to speech recognition for surveillance. These war metaphors have followed AI into healthcare applications like cancer detection.

Digital data is especially susceptible to sidelining invisible symptoms or indeed any health experiences that don’t conform to the structure of electronic health records – originally repurposed from accounting software. Even the most accurate records are still replete with coded bias which is structured around billable services.

As the Associate Director of a translational research centre developing AI-powered wearable sensors, Dr. Walker was increasingly concerned that despite their good intentions, developers attempting to build useful health technologies were
failing to account for the ethical safeguards needed to manage the power structures inherent in surveillance technologies. Seeking better tools, Dr. Walker turned to organizations like Our Data Bodies Project, the Algorithmic Justice League, and Data for Black Lives as well as scholars including Dr. Ruha Benjamin, Dr. Ashley Shew, and Meredith Broussard.

Dr. Walker argues for a more radical approach of community accountability and transformative justice rather than reproducing mechanisms of further surveillance to punish bad actors in the AI field. Likewise, they argue for greater recognition and remuneration of the “repair work” the nurses do in monitoring for false negatives and correcting false positives introduced through automation algorithms.

Ultimately, algorithms are not value neutral. In automating triage-like decision-making, Dr. Walker posits that society is also removing relational components and meaning-making. These issues become especially fraught in death – where the dead have the least control over their data.

“What are the conditions that need to be established and sustained for any technology we create to support health and healing for everyone? Answering that has been my own discipline of hope in recent years,” adds Dr. Walker.

Watch the full recording as Dr. Walker shares approaches from Algorithmic Bias Playbooks to Consentful Tech training, from nursing AI think tanks to Equity Design Thinking, and the Digital Defense Playbook.

MWL Panel 2023

The complexity and possibilities of digital technologies in healthcare

While technology isn’t inherently good or bad, in the absence of context, it has the potential to harm rather than help. The UBC School of Nursing symposium panelists shared opportunities and challenges for nurses in navigating our current technological realities as well as charting future directions.

Lori Block started with a near-future imagining of a homecare nurse assessing wounds in the community equipped with a smart watch and an electric car. As a UBC Nursing doctoral candidate and member of the Vancouver Coastal Health Clinical Informatics-Community team, where she leads the implementation, development and support of an electronic wound documentation system, she knows how very close we are to this reality. However, she cautions that nursing needs to guard against cutting care to streamline work flow. Diverting nurses as data collection agents may sound appealing as a project business case, but it doesn’t make for quality patient care.

Dr. Rae Walker echoed that concern arguing that much of nursing labour is not captured in what is written, particularly in digital systems. As the co-founder of Health Tech for the People, a multidisciplinary research group focused on tech ethics and accountable design, Dr. Walker’s scholarship focuses on community-directed health innovation and digital defense against technologies and data regimes that cause harm.

Dr. Fatawu Abdulai and Dr. Kristen Haase, both assistant professors in the UBC School of Nursing, added additional nuances to the conversation. In Dr. Abdulai’s work in health informatics, he is exploring how trauma-informed care can be leveraged across digital health platforms to address inequities in healthcare – and commit to designs that uphold the ethical mandate to do no harm.

Dr. Haase is co-designing digital tools with older adults with cancer whose needs have historically been under-considered in the digital space. Not only does she want to shift the ageism that permeates much of our society, but she wants to center attention on patient needs and priorities in digital health versus the administrative demands of complex health systems. This is a phenomenon that Dr. Walker called administrative violence when patients are harmed navigating care systems.

In terms of next steps, Dr. Abdulai advocates for moving beyond the easily documented to find ways to expand technology developers’ capacity to capture the emotional and relational aspects that people experience. “How to encode empathy or emotions in digital health, which are so important to patients, but so difficult for software engineers to develop?” he asked.
A Dynamic Duo
How Postdocs and Research Institutions Thrive Together

Postdoctoral fellows, often referred to as “postdocs,” are freshly-minted doctorally-prepared researchers who are engaged in further research and scholarly activities in their respective fields. In partnership with their institutions, their activities not only enhance their career and learning trajectory, but their efforts enrich our school and the university as a whole. While many will move on to non-academic posts, postdocs working in academia bring many benefits to their institutions. Here are a few:

Enhancing Nursing Research: Postdocs primarily conduct research in their chosen field, working under the guidance of a principal investigator (PI) or faculty member on projects related to their previous doctoral research. Through experimentation, data analysis, literature reviews, and other scholarly activities, postdocs enhance research by pursuing new lines of inquiry or by bringing original ideas, fresh angles and novel perspectives to established investigations.

Collaboration: Postdocs often collaborate with other researchers, both within their host institution and with external partners. These collaborations can lead to new research opportunities, networking, and the exchange of ideas, expanding the reach of the university and enhancing knowledge transfer.

Academic Growth: Postdocs continue to learn and expand their knowledge in their area of expertise, gaining valuable experience in designing experiments, collecting and analyzing data, and publishing research papers. This period helps them develop into independent researchers with well-established projects and further collaborations and mentorship opportunities.

Teaching and Mentoring: Some postdocs may have teaching responsibilities, such as leading seminars, supervising undergraduate or graduate students, or assisting in course instruction. This experience can be valuable for those planning academic careers.

Grant Writing: Postdocs may work on writing research proposals and grant applications to secure funding for their projects, an essential skill for our researchers, who regularly secure their own research funding. Meanwhile, postdocs are indispensable contributors to the grant writing process for ongoing research.

Publications: Our postdocs regularly publish their research findings in peer-reviewed journals. These publications are crucial for building a strong research portfolio and advancing in an academic or research-oriented career, but they also bring prestige and renown to the school, strengthening visibility and impact.

Skill Development: Postdocs have the opportunity to acquire new skills and techniques that are relevant to their research. This may include mastering specialized laboratory equipment, informatics, programming languages, or statistical analysis tools. Then, they pass their skills on to their mentees.

Career Development: Many postdocs use this period to gain the experience and credentials needed to pursue permanent positions in academia, industry, government, or other research-related careers. It’s a time for them to establish a track record of research and make valuable professional connections. Wherever they go, they are sure to maintain ties with the school. Our former postdocs now practice all over the world, and are valued members of ongoing collaborations with the school.

Networking: Postdocs attend conferences, seminars, and workshops to present their work and connect with other researchers in their field. Building a professional network is important for future career opportunities, but it is also another means of advancing the school’s reputation.

Bridging Gaps: Postdoc positions can serve as a bridge between completing a PhD and securing a permanent research or academic position. They provide a structured environment for continued research and scholarship while individuals explore their long-term career goals.

The school’s postdoc scholars are part of a campus-wide group that fills a vital role in the panoply of career opportunities across UBC.

On the opposite page is a list of our current postdocs, some with funded studies and some supported through their supervisor’s grants. We celebrate and acknowledge the important work of our post-doctorate scholars upon whom the success of the school depends.
Our Postdoctoral Scholars

**Chantelle Recsky (S. Lauck & L. Lambert)**
Canadian Institutes of Health Research (CIHR) Health Systems Impact (HSI) Fellowship
Optimizing nursing workforce transformation using digital tools: Advancing the quintuple aim in cancer care

**Shahin Kassam (V. Bungay)**
Michael Smith Health Research BC (MSHRBC) Trainee
Women and Forced Migration: Inclusively Examining Access to Care at the Axes of Chronic Health and Gender-Based Violence

**Vanessa Fong (J. Baumbusch)**
MSHRBC Trainee
Improving the Healthcare Experiences of Racialized Newcomer Families of Children with Medical Complexity: A Qualitative Longitudinal Study

**Sandra Marquis (J. Baumbusch)**
MSHRBC Trainee
Using population-level administrative data to study the health of youth with developmental disabilities transitioning to adult services

**Corey McAuliffe (E. Jenkins)**
CIHR HSI Fellowship
Building Capacity for Campus Suicide Prevention: A Policy Practice Partnership

**Sheila Novak (A. Phinney)**
CIHR Postdoctoral fellowship
An ethnographic exploration of user engagement in long-term care

**Paul Sharp (J. Oliffe)**
CIHR Postdoctoral Fellowship & MSHRBC Trainee
The BuddyUp mental health e-intervention: Engaging men through social connection and mutual help

**Sarah Wu (J. Baumbusch)**
MSHRBC Trainee
Making room at the table: Understanding the mealtime experiences of racialized residents and their families in long-term care

**Natasha Orr (F. Howard)**
CIHR Postdoctoral Fellowship
Development of a serious game educational resource on chronic pelvic pain in gynecology for Canadian healthcare providers-in-training

**Adi Ferrara (D. Clark & E. Saewyc)**
Public Health Agency of Canada (PHAC)
Improving Health Equity for LGBTQ Youth in Canada and Globally

**Mauricio Coronel Villalobos (E. Saewyc)**
Stigma and Resilience Among Vulnerable Youth Centre (SARAVYC)
Fostering Healthy Relationships Among LGBTQ+ Youth in BC
Longitudinal effects of school interventions in the health and well-being of LGBTQ2S+ youth

**Monica Rana (E. Saewyc)**
SARAVYC
Longitudinal effects of school interventions in the health and well-being of LGBTQ2S+ youth
Improving Family Support for South Asian Sexual Minority Youth in Canada
Dr. Fairleth McCuaig | **Dean’s Faculty Award for Service**, awarded to those who work to help “teach students, conduct meaningful research, create a great diverse and inclusive culture, and promote amazing work.”

Dr. Sandra Lauck | **2023 Fellow of the American Association of Nurses (FAAN)** and recipient of the **2023 Nurses and Nurse Practitioners of BC (NNPBC) Award for Nursing Excellence in Advancing Nursing Knowledge and Research**. Sandra is an embedded nurse scientist and enthusiastic mentor for advanced practice and front line nurses.

Dr. Jennifer Krist | recipient of the **2023 NNPBC Excellence in Nursing Leadership** for demonstrating innovative leadership and facilitating and supporting numerous initiatives and programs with the Fraser Health Authority, as well as her mentorship of PCNs and NPs.

Dr. Geertje Boschma | **Award of Recognition, BC History of Nursing Society** for her dedication to nursing history, including her research program on the history of nursing and health care, her mentorship of emerging scholars of nursing history, and her continuing leadership contributions.

Ms. Ranjit Dhari | **Dean’s Faculty Award for Service - Equity, Diversity, Inclusion & Indigeneity** for promoting and creating a diverse and inclusive culture.

Dr. Alison Phinney | **2023 Fellow of the Canadian Academy of Nursing** for her research and mentorship on aging, especially for deepening understanding of the lived experience of people living with dementia, and highlighting ways in which they continue to remain active and engaged in their communities.

Ms. Julie Tipping & Mr. Jonathan Neufeld | In September 2023 Julie and Jonathan earned their **Canadian Certified Simulation Nurse Educator** designation. They are two of just over 100 CCSNE designates across Canada.

These represent a sample of the many awards and other accolades received by faculty, emeriti and colleagues since January. For more, please visit our “News” and “Our People” webpages at nursing.ubc.ca.
The Gateway Health Building
Fall/Winter Update

The exterior structure and scale of the building are now becoming apparent with the steel work and wall panels being erected. In these photos, the two wings of the front form of the building can now be seen on the ground floor and western wall.

Structural steel assembly has continued with the west side of the building complete and major zones of the east side completed.

The initial Creative Resources and Energy Efficiency (CREE - prefabricated timber-hybrid slab) panels have started to arrive on site ready for sequenced installation.

Musqueam artists are continuing to develop the final artistic designs for the building, and these should be completed by the end of 2023. Scheduled occupation is now proposed for January 2025, but it is hoped that time can be made up in the construction schedule at the point in the timeline when the flooring and tiling are installed.

Submitted by Bernie Garrett,
Associate Professor and Associate Director of Infrastructure and Technology

Nursing Rounds Online
Nursing research made accessible

Please join us for Nursing Rounds - an opportunity to engage with scholars and researchers as they outline their areas of study. The sessions are online. Please visit our events page for further details as they become available. Our next two sessions are described below.

Jan 30, 2024
Ismáíla De Sousa, Dr. Suzanne Campbell, Dr. Elisabeth Bailey, Dr. Lydia Wytenbroek.
Nursing students’ perceptions of teaching practices that develop awareness and engagement with social justice.

Feb 28, 2024
Dr. Jennifer Baumbusch & Dr. Sandra Marquis
Transitioning from Pediatric to Adult Healthcare Services: Understanding the Personal and Population-level Experiences of Youth with Intellectual Disabilities

Events
Dr. Colleen Varcoe, Professor Emeritus and co-lead of the iHEAL team, has been developing and testing an app for women experiencing Intimate Partner Violence (IPV) for more than ten years. Her co-leads on the Public Health Agency of Canada (PHAC)-funded project are Marilyn Ford-Gilboe of Western University and Kelly Scott Storey, of the University of New Brunswick.

A QUESTION ANSWERED

Colleen has been collecting data for over 20 years with the goal of answering the question, “How do nurses best support women who have experienced IPV?”

At one point, Colleen collaborated with US-based researchers who had developed a “decision aid” in part to help women determine if they should leave or not leave their current relationship. The technology was good, but the app was very limited in attention to health and Colleen’s team felt that Canadian women would benefit from more options for planning their next steps, as well as accessing local resources. The team was able, however, to build on that existing technology to develop an app that is fully Canadian, focusing on a broad range of issues facing women experiencing violence that affect their health and wellbeing.

The earliest version of their app was the CIHR-funded “ICAN Plan for Safety,” a program designed to assist women to promote their health and wellbeing when thinking about or leaving an abusive partner.

After the initial launch of the program, the team conducted a randomized clinical trial involving 462 Canadian women using the ICAN Plan for Safety program. The positive outcomes from that trial, coupled with technological advances over the past ten years, encouraged them to expand and further tailor the program.

The newly-released iHEAL app https://ihealapp.ca/ is the third iteration, drawing on the team’s wider program of intervention research with women experiencing IPV and their earlier work on online support, and leveraging advances in technology, iHEAL, or Intervention for Health Enhancement and Living, supports women in a whole spectrum of scenarios, from determining the legal ramifications of moving in with someone, to finding resources for living with HIV.

In its current form, it is an app for mobile phones or computers that is easily accessible. The app is organized into 6 “pillars” which are areas in which the team has found women experiencing IPV require support. It offer tailored and curated support, resources, exercises, planning and assessment tools that can help women work through a systematic program at their own pace and with their own goals in mind. The information offered is based on the user’s response to certain prompts they encounter on opening the app, beginning with the very simple, “Are you here for yourself or someone else?”

A DUAL AUDIENCE

IHEAL is designed for a dual audience. It was created as a support for women and others who are in abusive relationships or experiencing gender based violence (GBV), but it is also a helpful tool for their concerned friends and family or service providers.

Healthcare workers or even police officers responding to domestic violence calls can use iHEAL as a means of prompting discussion and building confidence. As they use iHEAL together, a service provider can help those experiencing IPV or GBV to take steps toward setting and achieving their personal goals, whether they’re curious about personal finances or they have relationship questions.
STRENGTHS AND LIMITATIONS

iHEAL is quite comprehensive, but it isn’t meant to replace human connection or other available resources. In fact, it consolidates over 400 currently-existing third-party services, programs and resources from each province and territory in Canada. Because it contains a variety of prompts, exercises and reflections, it can be an excellent planning tool to work through while a woman is waiting for face-to-face programs or services.

iHEAL addresses all the barriers to support that women may encounter (see below) and is the only app available that links to resources across Canada and tailors its responses to meet a woman where she is in her journey.

THE USER EXPERIENCE

Developed in collaboration with women with lived experience of IPV, there’s no judgment or agenda. The user is able to progress through steps methodically or to jump to whatever topic most interests them, such as how to obtain housing, or guides for child health and wellness.

When the app is opened, an interactive activity appears at the beginning of each session. Prompts encourage users to reflect on their health and current situation with questions such as, “How often does your health interfere with your work?” The researchers hope this kind of reflective activity will foster a deeper connection to each user’s personal experience.

THE IHEAL APP

1. Based on the responses received, iHEAL offers suggestions and support that is tailored to each user’s needs and focus.
2. Users can progress methodically or jump to specific sections of interest.
3. The program is evidence-based, woman-led, free of assumptions and judgments, and makes women’s choice and control a priority.
4. It is specifically designed for Canadians and is available in both French and English, as a desk/laptop or mobile app.
5. It sources and updates information specific to each province and territory.
6. iHEAL helps determine the suitability of each resource for the user, letting them know exactly what is offered.
7. It emphasizes health and well-being for the woman and her family.
8. Safety measures, including the ability to disguise the app instantly, are on every page, and using a safety code disguises the app if user is being forced to open it.
9. It has a variety of important tools, such as one that helps the user assess their relationship and short exercises that encourage self-examination or goal-setting.
10. The app can be used by individuals experiencing IPV or third parties such as friends, family members, or service providers.

BARRIERS TO SUPPORT FOR WOMEN EXPERIENCING IPV

- Stigma and shame
- Fear of reprisal
- Fear of not being believed
- Mistrust
- Costs
- Geographic barriers
- Desire for privacy
- Not knowing where to start or what to expect

ihealapp.ca
iHEAL Youtube
Alumni Award nominations are now open!

You know a UBC Nursing graduate who is an amazing nurse leader. You hear yourself saying things like:

This unit wouldn’t even exist if she hadn’t championed it.

I don’t know how our department could run without him.

That procedure works better because of the changes they implemented.

What an amazing career—it should be celebrated!

Now here is a way to say, “I see you, and I appreciate you.”

NOMINATE A UBC ALUM NOW!