



The University of the West Indies
Faculty of Medical Sciences
The UWI School of Nursing, Mona

PRESENTS

**The 29th Nursing and Midwifery Research Conference
&
30th Mary J. Seivwright Day**

*“Advancing Evidence Based Practice through
Innovative Technology in Nursing & Midwifery
Education.”*

May 30-31, 2019
The UWI School of Nursing, Mona

Keynote Speaker

DR. MELANIE DREHER
PhD, RN, FAAN
Dean Emeritus,
Rush University College of Nursing

The Distinguished Dr. Mary J. Seivwright Lecture

DR. NOLA HOLNESS
PhD, CNM, APRN (Adult)-BC, RN
Clinical Assistant Professor,
Nicole Wertheim College of Nursing and Health Sciences
Florida International University

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Overview of the Conference

Both international and national nursing organizations emphasize “Advancing Evidence Based Practice through Innovative Technology in Nursing & Midwifery Education.” According to the International Council of Nurses (ICN), closing the gap between evidence and action requires stronger emphasis to be placed on implementing strategies to translate knowledge to action through innovative technology.

The objectives of the conference are to:

- Strengthen nurses and midwives capacity to translate knowledge to action
- Enhance nurses and midwives knowledge and skills in evidence based nursing/ midwifery practice and education
- Provide a forum for dialogue, engagement and networking among nursing and midwifery scholars to facilitate collaborative nursing and midwifery research

Event Sponsors

We would like to acknowledge the following companies for their valued support:

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Message From The Head of School



Steve Weaver PhD, MPH, RN

Head of School

The UWI School of Nursing, Mona

Director: PAHO/WHO Collaborating Centre for Nursing and
Midwifery Development in the Caribbean

It is indeed with great pleasure that I welcome you on behalf of the faculty and staff of the UWI School to the 29th Annual Nursing and Midwifery Research Conference and the 30th Mary J. Seivwright Day. This yearly occasion unites such a significant number of our nurses, midwives and other healthcare professionals from different divisions, associations and nations from the Caribbean and for sure from around the globe.

Our conference theme: *Advancing Evidence Based Practice through Innovative Technology in Nursing & Midwifery Education* is very suitable as we endeavor to address the supportable improvement objectives recently outlined out by the United Nations. We continue to strive to meet the target goals of the sustainable development goal that speaks directly to health that demands that we “ensure healthy lives and promote wellbeing for all ages.” This can only be done by an evidence based approach to understand what contribution is needed to ensure healthy lifestyles for all.

Nurses and Midwives represent approximately seventy percent of the professional workforce in health services in the Caribbean. They have a key role to play in meeting the quality and productivity challenges within the health care system, which is to deliver high-quality care in the most effective and efficient manner within the current economic climate. It is important therefore to maximize the quality output of these professional care givers through appropriate education and training which ensures that student nurses and midwives develop the core competencies needed to practice effectively.

I extend a warm welcome to all our colleagues nationally, regionally and internationally as we again come together to show our research. Let me wish you a successful conference period and do enjoy our Jamaican hospitality.

Message from the Conference Chair



Prof. Eulalia Kahwa PhD, BScN (Hons), RN, RM
The UWI School of Nursing, Mona
Deputy Director: PAHO/WHO Collaborating Centre for Nursing and
Midwifery Development in the Caribbean

It is with great pleasure that I welcome everyone to the 29th Annual Nursing and Midwifery Research Conference and 30th Mary J. Seivwright Day. Consistent with the UWI School of Nursing, Mona's mission "to lead the Caribbean region in delivering undergraduate and postgraduate nursing education which reflects international standards", this year's conference theme is "**Advancing Evidence Based Practice through Innovative Technology in Nursing & Midwifery Education**".

This theme is reflective of the schools thrust on preparing nurses for the 21st century by providing quality nursing and midwifery education and applying modern and innovative technologies in teaching. I commend all of you for devoting your time to participate in this important event as we seek to transform nursing and midwifery education in the Caribbean. Sincere thanks and commendations to the conference planning team as well as sponsors and presenters who made this conference possible.

Keynote Speaker



Dr Melanie Dreher
PhD, RN, FAAN
Dean Emeritus,
Rush University College of Nursing

Biography

Dr. Dreher is a nurse and an anthropologist. She received her undergraduate nursing degree from Long Island University and her PhD in Anthropology, with distinction, from Columbia University. She has four decades of academic leadership serving as Dean of Nursing at the University of Miami, the University of Massachusetts at Amherst, the University of Iowa and most recently, Rush University in Chicago. The International Nursing Honor Society celebrated her decanal achievements by the establishment of the Melanie Dreher Dean's Award, presented at each biennium. She was a charter member of the National Institute for Nursing Research and the NIH Council of Public Representatives and inducted into the American Academy of Nurses

Her early research in rural Jamaica generated three decades of funded research on the social and economic aspects of marijuana use and the impact of cannabis on the health and development of men, women and children. Her work has been cited widely in the media, including the New York Times, the Wall Street Journal and the Chronicle of Higher Education. Throughout her career, she has been an unwavering advocate not only for the persons who have suffered unfairly under current laws but also for an objective and scientific appraisal of cannabis. She also has served as an expert witness in cannabis-related cases in several states and worked to provide clinicians with an informed and reasoned use of cannabis as medicine. While conducting her research, she received the U.S. Ambassador's citation for her humanitarian work in Jamaica.

Most recently, her activity has shifted to healthcare governance. Dr. Dreher currently serves as a member of the Chicago Board of Health, a Director of Wellmark Blue Cross/Blue Shield, and as Chair of the Board for Trinity Health – a nation-wide not-for-profit health system. She was named among the 40 smartest people in health care in Becker's Hospital Report. But Dr. Dreher considers the greatest legacy of her academic healthcare career to be the students whom she has taught and mentored over the years to advocate for patients and for communities seeking health in a complex and often irrational healthcare system.

Situating Evidence: the Knotty Relationship of Knowledge, Science and Technology in Nursing Practice

The application of evidence in practices is not new. From the time of Florence Nightingale, nurses have relied on evidence, ordinarily derived from clinical observations, comparisons and experience, to assure the quality and safety of patient care. The concept of *evidence based practice*, however, was promulgated by the U.S. medical profession, largely in response to the revelation of costly but preventable medical errors and resulting public concern. The Evidence Based Medicine (EBM) paradigm, integrating the best available research evidence with clinical expertise and the particular circumstances of the patient, quickly spread to the other health professions, including nursing, as the gold standard of practice (EPB). An essential component of EBP is information technology, required to facilitate the translation of knowledge from researchers to clinicians and create executable knowledge for standardized practice guidelines.

Nursing researchers, administrators and clinicians have been challenged to re-examine the capacity of the nursing profession to contribute to the improvement of safety, quality and cost-effectiveness in patient care. Yet the deployment of evidence for nurses in clinical decision-making carries many considerations, ordinarily not experienced by the medical profession. Using contemporary examples that range from implementing technological innovation, to using patient data to solve clinical problems, to the appropriation of folk knowledge to enhance patient treatment, the shifting nature and value of evidence is described and analyzed. Nursing's complex and intelligent use of evidence is distinguishable from that of other professions and embraces practice based evidence as well as evidence based practice. In conclusion, questions will be raised about the relationship between Evidence Based Nursing, clinical scholarship and the future direction of nursing research, education, practice and policy in fulfilling its covenant with society.

Dr. the Hon. Mary J. Seivwright Distinguished Lecture



Dr. Nola Holness
PhD, CNM, APRN (Adult)-BC, RN
Clinical Assistant Professor,
Nicole Wertheim College of Nursing and
Health Sciences

Biography

Nola Holness, PhD, CNM, APRN (Adult)-BC, RN is a Florida International University Alumnus having obtained her BSN, MSN, and PhD degrees in the Nicole Wertheim College of Nursing and Health Sciences, Miami, Florida. She is a full-time Clinical Assistant Professor in the Undergraduate Nursing Department. She currently works at Jackson Memorial Hospital, Miami, Florida as a Certified Nurse Midwife providing care mainly to underserved women. Her research interest is enhancing the reproductive health of adolescents. Dr. Holness has published on adolescent pregnancy and presented at regional, national, and international conferences. She was awarded the Undine Sam's Research Grant toward her research on preventing a repeat adolescent pregnancy.

Taking up the Challenge

In keeping with the theme of the 30th Mary J Seivwright Day: Advancing Evidence Based Practice through Innovative Technology in Nursing and Midwifery Education, it is fitting to reflect on Dr. Mary Jane Seivwright's integral contribution to the development of nursing research in Jamaica. As a bold innovative nursing leader, Dr Seivwright is the first Jamaica nurse, under her own propulsion, to tirelessly advocate and secure university education for nurses (Burgher, n.d). Today, the UWI School of Nursing stands as an icon of the vision of Dr Mary Jane offering high quality nursing programs, distinguished faculty, sustained research projects and conferences, and a peer reviewed journal.

At the ICN Congress 30 years ago to South Korea I had a firsthand relationship with Dr Seivwright. As a Jamaican nurse graduate it is with honor that I return home to share in her memory. Having developed a program of research to address reproductive health in childbearing women, I will share the innovative and novel current research project to determine women who are likely to go into preterm labor by noninvasive photographic evaluation of the degree of disruption in the collagen fibers of women with threatened preterm labor. Further research will look longitudinally at the cervix of the pregnant client in each trimester to observe serial changes in her cervix toward predicting preterm birth.

The 5th Annual Syringa Marshall-Burnett Memorial Lecture



Dr. Winsome Stephenson
PhD, MSN, RN, CNE
Curriculum and Instruction Developer
Chamberlain University

Dr. Stephenson currently works as a fulltime Educator with an international nursing faculty development and academic consulting company. She also works as a Visiting Professor, teaching in the master's program of a large university.

Dr. Stephenson graduated as a registered nurse from Pace University in New York. Her clinical experience spans 24 years, working in the areas of orthopedics, neurology, rehabilitation and long-term care nursing. In her clinical roles, she had the opportunity to hold positions as Staff Nurse, Clinical Nurse Educator, Clinical Nurse Specialist and Director of Nursing Services. In addition to her expansive clinical experience, Dr. Stephenson has had an outstanding academic background. She acquired both a Master of Science and a Doctor of Philosophy from Georgia State University in Atlanta, Georgia and transitioned to the academic setting in 2007. In her academic appointments, she has held roles as Associate Professor, Department Chair, Dean of Academic Affairs, Faculty Development Specialist, and Curriculum and Instruction Developer. She has also worked with attorneys on a contractual basis, as a Legal Nurse Consultant.

Dr. Stephenson is passionate about nursing education and ensuring students are prepared to be exceptional clinicians who can use critical thinking and clinical judgment to positively impact healthcare outcomes. However, to realize that goal, her firm belief is that nurse educators must be fully equipped to be transformative teachers who facilitate deep, and not superficial learning in their students.

Conference Programme

Day One: Thursday May 30, 2019

- 7:30 a.m. Registration**
- 8:30 a.m. Welcome & Opening Remarks**
Dr. Steve Weaver, Head of School, The UWI School of Nursing, Mona
- 8:40 a.m. Prayer- Andrea McPherson**
- 8:45 a.m. Greetings**
- Dr. Tomlin Paul, Dean, Faculty of Medical Sciences
 - Patricia Ingram-Martin, Chief Nursing Officer, Ministry of Health, Jamaica
 - Dr. Audrey Morris, representative for PAHO/WHO Jamaica
 - Professor Dale Webber, Pro Vice Chancellor & Principal, UWI Mona
 - Dr. The Honourable Christopher Tufton, Minister of Health, Jamaica
- 9:10 a.m. Introduction of the Keynote Speaker- Kaydian Hewitt-Thompson**
- 9:15 a.m. Keynote Address**
Dr. Melanie Dreher
- 10:00 a.m. Vote of Thanks- Donnette Wright-Myrie**
- 10:10 a.m. - 10:30 a.m. DISPLAY BOOTH**
- 10:30 a.m. - 11:00a.m. COFFEE BREAK**
- Scientific Session 1**
Enhancing Teaching and Learning Through The Use Of Technology in Nursing & Midwifery Education
Chairpersons: Sandra Chisolm-Ford/Jennifer Roberts
11:00 a.m. – 11:45 a.m.
- 11:00 a.m. Academic Technology Committee: Supporting Faculty in the utilization of Technology to Enhance Education, Research, and Service.**
K. Snowden, D. Salani and K. Azaiza
- 11:15 a.m. Best Practices to fuse game-based learning and simulation into end of life care in the undergraduate nursing education**
L. Lewis-Pierre
- 11:30 a.m. Using Weebly to Enhance Student Learning and Engagement**
A. Falcon
- 11:45 a.m. Virtual worlds: A paradigm shift in nursing education**
C. Foronda

Scientific Session 2
Enhancing Teaching and Learning Through The Use Of Technology in Nursing & Midwifery Education

Chairpersons: Cynthia Pitter/Jacqueline Garvey-Henry
12:15 p.m. – 1:00 p.m.

- 12:15 p.m.** Mitigating Grade Inflation through Increased Evaluation Objectivity in an Online Nursing Course
K. White and E. Heitzler
- 12:30 p.m.** Low fidelity simulation-enhanced teaching and learning in Child Health: an interprofessional collaboration of Nursing and Medicine at Faculty of Medical Sciences, UWI Mona
A. Garbutt, **H Silvera**, V Deslandes, J Garvey-Henry, S Chisholm-Ford², L Hyde-Allison, RB Pierre
- 12:45 p.m.** Clinical Decision-Making Accuracy: Impact of Simulation Role
K. White, K. Zulkosky, J. Pretz and A. Price
- 1:00 p.m. – 1:20 p.m.** **DISCUSSION**
- 1:20 p.m. - 1:30 p.m.** **JAMAICA NATIONAL**
- 1:30 p.m. - 2:30 p.m.** **LUNCH BREAK**
- 2:30 p.m. -2:50 p.m.** **POSTER PRESENTATION VIEWING**
- 2:50 p.m. – 3:00 p.m.** **NATIONAL COMMERCIAL BANK**

Best Practices for Best Outcomes

- 3:00 p.m. – 3:30 p.m.** Learner Self- Assessment of Knowledge of Best Practice Guidelines and Satisfaction of Best Practice Guideline Workshop
K. Ewers

Scientific Session 3:
Maternal and Child Health Issues
Chairperson: Donnette Wright-Myrie/Diana Adderley
3:30 p.m. – 4:30 p.m.

- 3:30 p.m.** Exploring the Psychological Consequences of Childhood Sexual Abuse on the Adult Social Functioning – A Case Study
K. Fraser Williams
- 3:45 p.m.** Knowledge, Attitudes and Factors influencing Health Seeking Behaviours of Baccalaureate Nursing Students towards Sexually Transmitted Infections at an Urban University in Jamaica
F E Lawal, C Agu, T Rae

- 4:00 p.m.** The Lived Experience of Perinatally Acquired Human Immunodeficiency Virus among Young Adults (18-25 years) in South Florida.
A. Wright
- 4:15p.m. – 4: p.m.** **DISCUSSION**
- 4:45 p.m.** **Summary and Closing Remarks Day 1**

Day Two: Friday May 31, 2019

Dr. the Honorable Mary J Seivwright Day

- 7:30 a.m. Registration**
- 8:30 a.m. Chairperson's Opening Remarks**
Prof. Eulalia Kahwa, Senior Lecturer, The UWI School of Nursing, Mona
- 8:40 a.m. Prayer- Veronica Waugh-Brown**
- 8:45 a.m. Greetings**
- Carmen Johnson, President, Nurses Association of Jamaica.
 - Aseta Edwards Hamilton President, Jamaica Midwives Association
 - Dr. Beth Baldwin Tigges, President of Sigma Theta Tau International Honor Society of Nursing
- 9:05 a.m. Introduction of the Guest Speaker- Sherryon Gordon-Singh**
- 9:10 a.m. The Distinguished Dr. the Hon. Mary J. Seivwright Lecture**
Dr. Nola Holness
- 10:00 a.m. Vote of thanks- Sandra Tomlinson**
- Scientific Session 4:
Preventing and Managing Chronic Health Conditions
Chair: Verona Henry-Ferguson/Joyette Aiken
10:10 a.m. – 11:00 a.m.**
- 10:10 a.m.** The occurrence of chronic sorrow and coping strategies employed by adult oncology patients in western Jamaica
GA Wright and **VH Waugh-Brown**
- 10:25 a.m.** The lived experience of heart failure in a lower middle-income country: Patient and caregiver perspectives
JL Aiken
- 10:40 a.m.** Factors contributing to registered nurses turnover at an urban Jamaican hospital
Carlene A. SIMPSON, Antoinette BARTON-GOODEN, Mauvette WAITE, Marsha DEER
- 10:55 a.m. DISCUSSION**
- 11:05 a.m. - 11:30 a.m. DISPLAY BOOTH**
- 11:30 a.m. - 12:00 p.m. COFFEE BREAK**

Scientific Session 5
STUDENTS' SESSION-1
Chair: Pauline Anderson-Johnson/
12:00 p.m. – 1:15 p.m.

- 12:00 p.m.** Effectiveness of Child Birth education in preparing expectant fathers for labor and delivery in a Caribbean state: Views of Obstetricians and Midwives.
K.A. Alphonso- Lootawan and O. N. Ocho
- 12:15 p.m.** Preparedness of final year nursing students for professional practice among students attending the UWI School of Nursing, Mona
J L Stewart and P Anderson- Johnson
- 12:30 p.m.** Mental health literacy and attitudes of senior students at the UWI School of Nursing, Mona towards caring for patients with mental illness
J. Valentine and T. Witter
- 12:45 p.m.** Factors that influence health risks behaviors among teenagers in an Education District, Trinidad and Tobago
S. Kewley-Lashley, A. Jones, C. Lewis and ON. Ocho
- 1:00 p.m.** A quantitative study investigating factors contributing to falls in the elderly among nursing students at a community college
N Dekid, S. Campbell & S. Soares
- 1:25 p.m. -1:35 p.m.** **JAMAICA NATIONAL**
- 1:35 p.m. – 2:35 p.m.** **LUNCH**
- 2:35 p.m. - 2:45 p.m.** **SAGICOR**

Scientific Session 6
STUDENTS' SESSION-2
Chair: Mauvette Waite/ Sheryl Garriques-Lloyd
2:45 p.m. – 3:30 p.m.

- 2:45p.m.** The relationship between frequency of antenatal contact, neonatal birth weight and socio- demographic characteristics among Jamaican women 15-49 years
K Frew, R Forbes-Bryan, J Aiken and P Anderson-Johnson
- 3:00 p.m.** UWISON 4th year students' perception of factors affecting medication compliance among their relatives diagnosed with hypertension
S. Simpson and A. Smart
- 3:15 p.m.** Factors affecting medication compliance among hypertensive adults (18-59) and older adults (60 and over) in a rural community in Western, Jamaica.
R Green, J Odusanya, S Gordon Singh, D Bowen

- 3:30 p.m.** A quantitative study to determine the prevalence and related factors of depression among third- and fourth-year nursing students at a local community college in Jamaica.
C. Williams, S. Smith & K. Harris
- 3:50 p.m.** **Discussion**
- 4:00 pm** **Closing Remarks** - Dr. S Weaver, Head of School and Prof. Eulalia Kahwa, The UWI School of Nursing, Mona



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Abstract Presentations

Academic Technology Committee: Supporting Faculty in the utilization of Technology to Enhance Education, Research, and Service

K. Snowden DNP, APRN, ACNP-BC, ANP-BC, FNP-C, D. Salani and K. Azaiza
University of Miami School of Nursing and Health Sciences, USA

Aim: To describe the process of developing with the School of Nursing and Health Studies Academic Technology Committee within the School of Nursing and Health Studies

Methods: The membership of the Academic Technology Committee consisted of a minimum of 3 full-time faculty members, at least 1 of whom have a Regular Faculty appointment and up to one of whom may be a Lecturer. There is also be 1 student member. The Graduate and Undergraduate Associate Deans, Instructional Designer, Director of Simulation (or designee), Information Technology Manager and Director for Administration served as ex-officio members. The Academic Technology Committee met monthly. The functions of the Academic Technology Committee are:

1. Receive and review requests from faculty on academic technology issues and make recommendations to School Council as indicated for approval.
2. Advise and support faculty, including technology management services, technology training support, instructional design assistance, media production support and scholarly endeavors.
3. Develop and monitor policy and procedure to provide students with appropriate instructional access and support instructional needs.
4. Promote quality by conducting needs assessments, developing guidelines, monitoring and evaluating established best academic technology practices for traditional, blended/hybrid, and online programs at the School of Nursing and Health Studies.
5. Recommend to the Dean a list of academic technologies including hardware and software that support the School of Nursing and Health Studies mission and vision for acquisition consideration.
6. Annually review and revise, as necessary, the School of Nursing and Health Studies Academic Technology Plan.

Results: Since its inception in 2010 the Academic Technology Committee has supported faculty, staff, and students increase their comfort and familiarity with technology to enhance their education, research, and service endeavors.

Conclusion: Academic technology committee has proven to be an effective way to support the continued integration of technologies at the University of Miami School of Nursing and Health Studies.

Best Practices to fuse game-based learning and simulation into end of life care in the undergraduate nursing education

L. Lewis-Pierre Ed.D-CI, MSN, RN

University of Miami School of Nursing and Health Sciences, USA

- Aim:** To discuss the best practices of infusing simulation and game-based learning into an end of life care in the undergraduate nursing program
- Methods:** Undergraduate nursing students in the second semester of the junior year viewed an interactive game-based program online in the Blackboard learning management system. The game-based learning module allowed the students an opportunity to view an interactive museum to learn the end of life content. This best practice technique provided the nursing students with the opportunity to transition through different rooms to listen and view various evidenced-based content. The simulation experience is a beneficial learning practice to create an augmented real-life experience to support experiential learning. The asynchronous e-learning environment allowed the students the ability to enter and leave on their own time. Additionally, students were able to download information to retain as a reference tool for the content.
- Results:** The combined use of game-based learning and simulation modalities were effective towards integrating the sensitive nature of end of life care. Data collection from the Qualtrics survey and qualitative responses indicated the students viewed the methods provided insightful information to prepare for the transition from education to practice. Infusing both the simulation and game-based learning modalities into the curriculum provided a novel opportunity to learn end of life care.
- Conclusion:** The gaming software supported the inclusion of auditory and visual cues to promote student engagement and the adaptation to various learning styles. Integrating technology into end of life nursing education facilitated the second-semester students' ability to learn the end of life information through an engaging educational experience

Using Weebly to Enhance Student Learning and Engagement

A Falcon PhD MPH

University of Miami School of Nursing and Health Sciences, USA

- Aim:** To determine the effectiveness of nursing students' ability to investigate and disseminate information regarding a salient public health topic using a free web hosting service in an undergraduate public health nursing course
- Methods:** Using the core functions of public health as a framework, students (n=95) in their final year of an accelerated nursing program worked in groups of six to develop a webpage dedicated to providing educational information on a public health issue affecting a vulnerable population. Students explored the magnitude of the health problem, determinants of health, health impacts, theory-informed interventions, and available community resources; and then used Weebly, a web hosting service, to display their research in an organized and engaging manner. This user-friendly tool allows for creative delivery of information, including the embedding of images, videos, and hyperlinks to additional resources. Groups presented their final webpage in class, and students provided structured and written feedback about the project within an online, end-of-semester course evaluation.
- Results:** The project was an applied experience that allowed students to take ownership of their learning, select and synthesize credible sources of information, and creatively deliver educational information using a media-rich environment. Student feedback (n=32) showed that the project, while labor and time intensive for students, was directly related to course content (88%), helped with real-world application of the subject matter (84%), and contributed to their academic and personal growth (81%).
- Conclusion:** Web-development is an effective pedagogical tool for student engagement and enhanced learning that may benefit nursing students.

Virtual worlds: A paradigm shift in nursing education

C. Forona PhD, RN, CNE, CHSE, ANEF

University of Miami School of Nursing and Health Sciences, USA

- Aim:** To assess Nurses' knowledge, attitudes, and practices (KAP) of pharmacovigilance.
- Methods:** A cross-sectional study utilized questionnaires to evaluate nurses' KAP of pharmacovigilance. A sample size of 234 nurses was determined using the raosoft online sample size calculator. Stratified random sampling method was used to ensure homogeneity in selecting nurses from different departments. Approval for conducting the study was obtained from the University Hospital of the West Indies/ University of the West Indies/ Faculty of Medical Sciences Ethics Committee. Data were analysed using SPSS version 20. Chi-square test was used to test the association between two attributes at a $P < 0.05$ significance level.
- Results:** Two hundred and sixty (260) questionnaires were distributed, 209 registered nurses responded resulting in a response rate of 80%. Thirteen percent (13.5%) of nurses had heard of the term pharmacovigilance prior to the study, while 58.4% correctly stated the functions of pharmacovigilance. Over ninety three percent (93.7%) of nurses felt it was a professional obligation to report adverse drug reactions (ADR) while 98.1% of nurses felt that ADR reporting was necessary. Sixty eight percent (68.8%) of nurses indicated that they had noted an ADR while in practice, while 55.3% had reported an ADR. There was a significant association between noting ADRs in clinical practice and reporting ADRs. $\chi^2 (1) = 86.642, p < 0.05$.
- Conclusions:** Registered nurses at UHWI had positive attitudes towards pharmacovigilance, although their knowledge and application to practice was limited. Instituting pharmacovigilance training programs may improve nurses' knowledge and impact their practice.

Mitigating Grade Inflation through Increased Evaluation Objectivity in an Online Nursing Course

K White PhD, RN, CCRN-K, CNE & E Heitzler PhD, WHNP, FNP, RNC-OB

School of Nursing & Health Studies

Georgetown University, USA

- Aim:** To examine the effect of adding increased evaluation objectivity (quality valid multiple-choice [MC] testing and precise grading rubrics) on grade inflation in an online graduate research course.
- Method:** The study used a retrospective comparative design. Data collection occurred between 2012 and 2016. Final letter-grade distributions in the original version of the course (i.e., no MC testing and un-precise rubrics) were compared with the revised course (i.e., rigorously developed objective weekly MC testing and increased precision in grading rubrics). Grades from 97 students pre- and 258 students post-course revision were analyzed (N = 355). All data were de-identified. Consent was waived. Descriptive statistics and Mann-Whitney U analysis was used.
- Results:** A statistically significant reduction in grade distributions was observed after course evaluation methods revisions were implemented (U = 4575.0, p < 0.001). Prior to course revision, most students received a final course grade of A (79.4%). Following the course revision, the most frequent final course grade was A- (32.2%), followed by B+ (19.8%). Letter grades of C more than doubled after the implementation of precise grading rubrics and weekly MC testing.
- Conclusion:** Findings suggest the creation of precise grading rubrics and the use of MC testing may help mitigate inflated grades. Rigorous grading evaluation rubrics not only enhance faculty objectivity when grading but also improve students' comprehension of expectations for assignments. Well-created, reliable, and valid MC items can effectively assess students' knowledge acquisition rather than assess whether a student is test-wise. Although our study was conducted with online graduate students, we suggest findings may be extrapolated to undergraduate students and may be applicable to the face-to-face classroom setting.

Interprofessional Collaboration between Nursing and Medicine in the Faculty of Medical Sciences at UWI using Low fidelity Simulation-enhanced Teaching and Learning in Child Health

VA Garbutt¹ MBBS, BM-Paediatrics, Development & Behavioral Paediatrics, Clinical Paediatrics, Lecturer, Clinical Coordinator Aspects of Family Medicine (Child Health), H Silvera² MScN-FNP, Post Graduate Dip. in Education, RM, RN, V Deslandes² MScN-MHNP, BScBA, RM, RN, J Garvey-Henry MScN-FNP, RM, RN, S Chisholm-Ford² MScN-Education, Cert. Nursing Admin, RM, RN, L Hyde-Allison² MPH-Health Promotion/Health Education, FNP, RM, RN, RB Pierre Professor of Paediatrics.

¹Department of Child & Adolescent Health, FMS, Mona

²Nurse Practitioner Program, UWISON

³Health Professions Education Unit, FMS, Mona

- Aim:** To promote inter-professional collaboration and team building among healthcare professionals in the Faculty of Medical Science at the University of the West Indies, Mona Campus.
- Methods:** During the period September to November 2018, rotating groups of 3rd year medical students participated in a one-day training in pediatric skills using Low fidelity Simulation. The training sessions were standardized by the Nurse Practitioners team in collaboration with physicians. Instructions sessions were facilitated the Nurse practitioners team in the simulation Laboratory at the UWI School of Nursing, Mona. Skills training included anthropometry, use and interpretation of growth charts, basic vital signs, use of spacers/metered dose inhalers, peak flow meters and nebulization. Evaluation of facilitators and the process of training was done by students at the end of the training.
- Results:** Sixty-four (64) medical students participated in the low fidelity simulation skills training during the 8-week period, 60 (93.7%) students completed the evaluations. Seventy-five percent (75%) of students strongly agreed that the facilitators demonstrated thorough knowledge of the subject, (80%) of students strongly agreed that facilitators showed the relevance of content covered, 83% of students strongly agreed that facilitators used appropriate language (83%) and (87%) strongly agreed that facilitators encouraged participation and interaction. Students strongly agreed that the training met their expectations (80%), was well structured (78%), the information was delivered in an organized manner (82%), the time allotted for the training was adequate (67%) and the physical environment was comfortable (78%). Majority (82%) strongly agreed they would be able to apply the knowledge gained from the training in the clinical setting.
- Conclusions:** The training facilitated early exposure of medical students to working with other members of the health team. The initiative has potential to promote team building among health professionals.

Clinical Decision-Making Accuracy: Impact of Simulation Role

K. White *PhD, RN, CCRN-K, CNE*, K. Zulkosky, J. Pretz and A. Price
School of Nursing & Health Studies
Georgetown University, USA

- Aim:** This study assessed the accuracy of clinical decision making (CDM) among roles in an acute care simulation scenario in pre-licensure nursing students.
- Methods:** The study utilized a mixed factorial design. Stopping points (shortness of breath [SOB] and Atrial Fibrillation [AFib]) and decision phase (cue acquisition, diagnosis, and action) as within subjects' factors and simulation role (observer, family, primary nurse, and auxiliary nurses) as between subjects' factors. Convenience sampling was used to obtain final-semester students who participated in a post-open-heart surgery scenario (N = 120). After randomizing to roles, students completed a CDM form about cue acquisition, diagnosis, and action at two stopping points in the scenario. Shortness of breath was a familiar situation with many possible actions. New onset of a AFib was novel content with one primary action. Data were collected in spring 2015. Descriptive statistics, Kruskal-Wallis, and intraclass coefficient analyses were used.
- Results:** Between subject's results were as follows: during the AFib situation, mean levels of cue acquisition accuracy differed significantly across role: observers (67%), medication and education nurses (50%), primary nurse (46%), and family members (41%). Significant role effect indicated the differences lie between observers and family members ($p = 0.03$). During the SOB situation, despite their role, students performed comparably regarding CDM accuracy. Within subjects' comparisons, across both stopping points, found students were most accurate with cue acquisition in CDM (65%). When the situation was familiar (SOB) the diagnosis phase of CDM was the least accurate (29%) since many diagnoses for SOB exist. When the situation was new (AFib), students were least accurate with their action plan (27%) since one primary action exists.
- Conclusion:** This study found the observer role is beneficial related to CDM accuracy, likely because students are under less scrutiny, experience less stress, and can collaborate with peers. In contrast, the family member role may be less beneficial because students are often instructed to remain "in-role". Nurse educators must be mindful of the simulation goal when assigning roles. If the intended goal is practicing the process of CDM and accuracy, educators might assign family member roles cautiously.

Learner Self- Assessment of Knowledge of Best Practice Guidelines and Satisfaction of Best Practice Guideline Workshop

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- Aims:** To examine the impact of the introduction of Best Practice Guidelines (BPGs) into case studies within a fourth year undergraduate medical-surgical course on students' knowledge and application of BPGs
- To understand the students' experience of the Best Practice Champions Workshops
- Methods:** This cross-sectional study used the research software Qualtrics TM to distribute the study surveys electronically and to perform descriptive statistics. Twenty nine, third and fourth year undergraduate nursing students who attended the Student Best Practice Champions Workshop were invited to complete the Best Practice Champions Workshop Evaluation (Registered Nurses Association, 2018) survey. Sixty one, fourth year undergraduate nursing students enrolled in a medical-surgical theory course were invited to complete the Learner Needs Assessment (Registered Nurses Association of Ontario, 2005) survey and The Knowledge Assessment of Best Practice Guidelines in an Academic Context survey) at the conclusion of their course.
- Results:** Best Practice Champions Workshop Evaluation Survey: The response rate for this survey was 20%. Study participants reported their overall satisfaction of the workshop meeting their learning needs as either satisfied or very satisfied. Mean scores for survey items were between 4.00- 4.67 (5 was maximum score possible). The Knowledge Assessment of Best Practice Guidelines in an Academic Context Survey: The response rate was 14%. Mean scores for these survey items ranged from 5.11-6.47 (10 was the maximum possible score), and suggests that students found BPG learning strategies somewhat to moderately helpful. Learner Needs Assessment Survey: All participants indicated that they had read the practice recommendations of at least one BPG and they all believed that BPGs could improve practice. Students' awareness of BPGs varied and ranged from one- 10 or more.
- Conclusion:** Although survey findings cannot be considered representative or generalizable due to low response rates and small sample sizes, understanding students' perceptions of learning strategies utilized to promote BPG knowledge and implementation holds important implications for faculty teaching practices and nursing curriculum development. Replication studies should be done to better understand teaching and curriculum development practices that support student BPG knowledge and implementation of BPG practice recommendations.

Exploring the Psychological Consequences of Childhood Sexual Abuse on the Adult Social Functioning

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- Aim:** To explore the lived experiences of sexual trauma of adults and to examine the impact on adult social functioning.
- Methods:** This is an action research using the qualitative approach. Six adult women were selected from two practice settings where the researcher was familiar with. The Psychodynamic Theory, Cognitive Behavioral Theory (CBT), Erik Erikson's Psychosocial Theory, Herman's Trauma Recovery Theory were the theoretical approaches used and which guided the data collection and analysis processes. Data were collected during counselling sessions using an interview guide and other techniques such as journaling, systematic desensitization and self-talk.
- Results:** The results showed that the adult survivors who formed part of this action study were faced with emotional and behavioral disorders/characteristics such as depression, somatization effects, shame and guilt, low self-esteem, post-traumatic stress disorder, intrusive memories, schizophrenia and dissociative identity disorder (showed signs). Findings also revealed that the duration of the sexual abuse as well as the time of intervention, early or late, contributed significantly to the impact on the social functioning of the adults. Except for one participant who terminated the therapeutic intervention after the first session, steady and marked improvements were recorded for the other participants. Two participants displayed less depressive symptoms and one aborted her marijuana use.
- Conclusion:** The findings revealed that individuals who experienced childhood sexual molestation were significantly impacted socially and medically in their adult life. Early interventions are critical in assisting their recovery. It is important that health care professionals be educated and trained appropriately to assist persons who have experienced childhood sexual abuse in their recovery and ensuring adjustments and better quality of life and social functioning.

Knowledge, Attitudes and Factors influencing Health Seeking Behaviors of Baccalaureate Nursing Students towards Sexually Transmitted Infections at an Urban University in Jamaica

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- Aim:** To determine the knowledge, attitudes and factors influencing the health seeking behaviors of undergraduate students regarding Sexually Transmitted Infections at an urban University in Jamaica.
- Method:** This was a quantitative cross-sectional study among year one undergraduate nursing students (n=141). A sixteen (16) item Health Seeking Behavior self-administered questionnaire with multiple responses was used to collect data during the period of May-June 2018. Statistical analysis was done using statistical Package for the Social Science (SPSS) version 20. Descriptive and inferential statistics were used to summarize data.
- Results:** Majority (75.9%) of the respondents were between the ages 18-24years. All participants (100%) had heard about Sexually Transmitted Infections. The most commonly known STI was Gonorrhoea (96.5%) while the least known was Trichomoniasis (29.8%). Their major source of information was television (93.6%) and internet (90), while the least source of information was their parents. The most preferred treatment source was private hospitals (82.3%). Majority of the respondents would seek treatment for STIs if their symptoms were severe, cost of treatment was low and based on proximity to clinics, while the knowledge of where to get treatment was the least motivating factors to seek treatment for STIs.
- Conclusion:** Respondents had general knowledge about STIs however, they lacked in-depth knowledge of specific Sexually Transmitted Infections. Early healthcare seeking behaviors for STIs could be facilitated through improving students' basic knowledge regarding STIs, changing their orientation to sexual behavior through appropriate health education and creating a supportive environment for seeking health care promptly.

The Lived Experience of Perinatally Acquired Human Immunodeficiency Virus among Young Adults (18-25 years) in South Florida.

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- Aim:** To explore the lived experience of perinatal acquired human immunodeficiency Virus (HIV) among young adults (18-25 years) living in South Florida.
- Method:** The Heuristic Research Method was used to guide the data collection and analysis. The purposive sample consisted of 15 young adults (18-25 years) with PAHIV from South Florida. Data were collected between January and June 2018 via demographic questionnaire and audio-recorded interviews. Data analysis included demographic data; individual depictions; composite depiction explicating the themes and sub-themes; exemplary portraits (3); and aesthetic renditions.
- Results:** The young adults' essences of the experience of PAHIV include their structured meaning of their Panoramic Views of Living with HIV; Consciousness of their HIV status, Kinship with their parents and siblings, Concealment of their HIV status, and medication (ART) Paradox. They also co-created rhythmicity with the universe in their Realities of Living with HIV; and were co-transcending in their Affirming Milestones towards a successful future.
- Conclusions:** Understanding these challenges will facilitate their integration into mainstream society; provide directions to the discipline of nursing on strengthening the nursing workforce to meet the demands of a prepared healthcare workforce; and inform their evidence-based care and service needs through nursing education, nursing practice, nursing research health and public policy.

The occurrence of chronic sorrow and coping strategies employed by adult oncology patients in western Jamaica

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- Aim:** To explore the occurrence of chronic sorrow and describe the coping strategies used by patients diagnosed with cancer.
- Method:** A qualitative phenomenological study was conducted among eight adult patients medically diagnosed with cancer and attending an oncology clinic in western Jamaica. Purposive sampling was used to select participants for a Focus Group Discussion. Participants had to be 18 years or older, *compos mentis*, able to verbalize, diagnosed with cancer for a minimum period of six months and attending the oncology clinic for follow-up care on the day of visit. Care-givers and next of kin of patients diagnosed with cancer were excluded. Medical and nursing staff of the oncology clinic assisted with the recruitment. Informed consent was obtained from all participants. A Focus Group Discussion Guide with eight semi-structured questions and probes guided the discussion. Discussion was audio-taped, transcribed verbatim and reviewed for accuracy. The transcript was manually coded, and read iteratively to identify common themes and sub-themes. Themes were connected, inter-relationships identified and narrative constructed.
- Results:** Five female and three male patients diagnosed with cancer for a period of one to five years and receiving treatment at the Oncology Clinic participated in the Focus Group Discussion. Their initial reactions on being diagnosed were denial, feelings of sadness or depression followed by feelings of resignation or acceptance. The chronicity of the illness, negative shift in the equilibrium of life and financial challenges caused major stress which contributed to chronic sorrow. Strong spiritual belief was the major common element expressed that helped persons to cope. Keeping physically active and volunteerism were other coping mechanisms that emerged. Participants with greater family and financial supports expressed greater ability to cope with the illness than those with poor family or financial support. Psychological / emotional therapy from professional source was lacking.
- Conclusions:** Persons diagnosed with cancer experience chronic sorrow resulting from emotional strain and stress. Spiritual and psychological support from the bed-rock for their mental well-being and coping ability. The occurrence of chronic sorrow experienced by cancer patients can be reduced by the integration of these critical components in the management plan for the patient.

The lived experience of heart failure in a lower middle-income country: Patient and caregiver perspectives

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- Aims:**
1. to describe and interpret the issues that are important to patients with heart failure, and their caregivers.
 2. To provide the evidence base for a targeted educational intervention by health care providers, the nurse, specifically, in the context of the nurse-led clinic
- Method:** This hermeneutic/interpretive phenomenological study conducted gave insight as to how 11 Jamaican patients – caregiver dyads experienced and coped with heart failure. Data were collected between December 2015 - August 2016. Patients were purposively selected, and their caregivers were also invited to participate. Following informed consent, in-depth, unstructured interviews were held at the patients’ home. All interviews were conducted by the researcher and tape recorded. Interview transcripts were analyzed from verbatim narrative which was mainly in Jamaican patois. A multi-stage data analysis, using Moustakas’ method, was done manually.
- Results:** Patients were mainly females (55%) with a mean age of 62 years. Seven themes were derived from patient interviews: Finding out; Now that I have heart failure; helping myself; Wanting to know; Dealing with the system; Finding strength through (religious) faith; and Role changes. Caregivers were mainly females (73%) with a mean age of 49.6 years. Three themes were derived from caregiver interviews: Becoming a caregiver; Tell me, please; and the stress of caring. Both patients and their caregivers wanted to know how to manage the disease process, their individual roles, and the relationship issues that emerged. Caregivers had no role preparation and relied on intuition because they lacked the information necessary for decision making.
- Conclusion:** The themes reveal a significant gap in patient /caregiver knowledge that could negatively impact patient outcomes. These study findings provide a baseline for tailored interventions to improve knowledge levels and eventual outcomes for patients with heart failure, and their caregivers.

Factors Contributing To Registered Nurses Turnover At An Urban Jamaican Hospital.

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- Aim:** To determine the individual and organizational factors, contributing to the turnover of Registered Nurses, at an urban hospital in Jamaica.
- Method:** A descriptive cross-sectional design was utilized to conduct the study. Consecutive Sampling technique was employed to select 171 Registered Nurses out of a population of 680 certified RNs of all levels employed to the hospital. Data were collected using the National Study of Turnover in Nursing and Midwifery: Phase 3 Questionnaire; a (38) item self-administered questionnaire. The data were analyzed using the Statistical Package for the Social Sciences (SPSS) version 16. Descriptive statistics included; measures of central tendencies. Bivariate analyse; the following statistical test were done to evaluate relationships between variables.
- Results:** A response rate of 63.2% (n=108), was analyzed from the sample size. Ninety six percent (96.3%) of the participating Registered Nurses, were females, ranging from ages 26-35 years (52.8%). The majority, 84.3% had a primary nursing degree (BSc/BNS), with 43.6% being employed to the institution over five (5) years. Age was found to be the only 'individual factor' associated with intention to leave employment at the institution, with a $p=0.003$. Several 'organizational factors' were found to be positively related with intention to leave, with: pay; lack of resources to do the job and the attitude of managers; subsequently ranking as the first, second and third main contributors.
- Conclusion:** The study found that organizational factors, rather than individual factors, are the nurses' intention to leave. Nurse Managers/Administrators should consider these factors, which can prove crucial in helping to establish key retention strategies. Recommendations were also made to assist in controlling and preventing the turnover of RNs.

Preparing expectant fathers for labor and delivery in the Caribbean: Views of Obstetricians and RN/Midwives.

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- Aim:** To examine the perspectives of Obstetricians and Registered Nurses/Midwives about Lamaze classes for expectant fathers.
- Method:** This was a qualitative research. Data were collected using five focus group discussions among 34 RN/Midwives ranging from 38-60 years and five key informant interviews among Consultants/Registrars with 12-25 years' experience as Obstetricians. Data were coded openly then combined to form themes and utilized as the framework for data analysis using the Van Mennen's thematic analysis.
- Results:** Lamaze classes can support prospective fathers during the labour and delivery process. Four themes emerged including variability in quality of content of various classes, structure of classes, attendance requirements by males and culture. There is no standardized content which leads to variability in information provided to fathers that could affect its effectiveness in their preparation. Classes could be sometimes ad-hoc or based on personal preferences of facilitators which affect standardization. Each institution has different criteria for attendance as a pre-requisite for involvement in the birthing and delivery experience. The focus of the classes was more about satisfying the institutions requirements than meeting the needs of the fathers.
- Conclusion:** Findings suggest that the childbirth education classes at the various public health institutions were inadequate and needed to be revised to cater to the needs of not only the pregnant women but that of the prospective father. However, in the absence of standardized information shared during these classes, it may be difficult to measure its effectiveness, especially if they are not delivered in a context that is needs oriented.

Preparedness of final year nursing students for professional practice among students attending the School of Nursing in Kingston.

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- Aim:** The study seeks to explore the factors that are related to student's level of preparedness to practice as professional nurses and will identify areas where the final year nursing students at the UWI School of Nursing are lacking confidence. The study will be guided by Benner's novice to expert theoretical framework.
- Method:** The study will utilize the mixed methods research approach using the explanatory sequential design. The quantitative phase will be conducted first among 125 randomly selected students (Step 1) and followed by the qualitative phase. The sample for the qualitative phase will be 6-20 students purposely selected from those receiving low and high scores for readiness to practice. The Casey-Fink readiness to practice survey will be utilized after modification to collect the quantitative data. The data will be analyzed using version 19 of the Statistical Package for Social Sciences (SPSS) software. Descriptive statistics will be used such as mean and standard deviations for readiness scores and age, and frequencies for all categorical variables. The t-test will be used to determine relationships between practicum courses and readiness scores. The ANOVA will be used to determine relationships between other key independent variables with three or more categories and the dependent variable, preparedness score, for example, age (recoded into 3 or more age groups), GPA (recoded into 3 or more groups), clinical area for rotation and skills most uncomfortable with.
- Results:** The results from the quantitative analysis will guide the development of the instrument for the collection of qualitative data using two focus groups. Thematic content analysis will be used to analyze the data from the qualitative study. The tape-recorded interviews will be transcribed verbatim and read multiple times to identify basic patterns. The QDA-Minor software will be used to manage the qualitative data. The data will then be reviewed to identify broad ideas, concepts such as, positive or negative responses and codes assigned. Themes will then be identified such as common responses to questions or patterns about reactions to certain questions. The results from both qualitative and quantitative phases will be integrated in the discussion.

Mental health literacy and attitudes of senior nursing students at The UWI School of Nursing, Mona towards caring for patients with mental illness.

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Aim: To determine the level of mental health literacy and attitudes of senior students at The UWI School of Nursing, Mona (UWISON) towards patients with mental illness.

Method: A correlational study was conducted among student nurses from The UWI School of Nursing, Mona. A sample of 101 4th year nursing students was randomly selected from the class of 141 using the register as the sampling frame. Respondents were asked to complete an online questionnaire with a vignette adopted from The National Survey of Mental Health Literacy and Stigma. A researcher-developed general anxiety disorder (GAD) vignette was also used. The PSPP statistical software was used for data analysis. Descriptive statistics (frequency and percentage) was used to examine sociodemographic data and the variables: mental health literacy and attitudes. Inferential statistics was used to determine the relationship between mental health literacy and attitudes by way of One-Way ANOVA, a p-value of ≤ 0.05 was considered statistically significant. Identification rates of the mental illness described, beliefs about various interventions, personal and professional attitudes were measured.

Results: A total of 61 students responded to the online survey, generating a 60.4% response rate. All students were females and the majority (97%) were within the 21-30 year age group. Most of the students correctly identified Schizophrenia (88.5%), GAD (86.9%), depression (73.8%) and alcohol abuse (67.2%). They held positive attitudes towards patients with mental illness. And lastly, majority of the results showed that mental health literacy does not affect student attitudes towards patients with mental illness. Only authoritarianism showed relationship to identification of mental illness ($p=0.034$).

Conclusion: The study concluded that majority of students had good mental health literacy and showed a positive attitude towards patients with mental illness. Also, mental health literacy does not affect the attitudes towards patients with mental illness and suggest that mental health training among undergraduates are adequate. It is important for hospitals/institutions to have mandatory competency training and workshops for professional development supported by trained mental health professionals.

Factors that influence health risk behaviors among teenagers in an Education District, Trinidad and Tobago.

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- Aim:** To identify the factors that influence health risk behaviors among teenagers.
- Method:** A quantitative research study among teenagers in Forms 1-4 and attending four public secondary schools in the St. George East Educational District. The population comprised 2,180 students and a sample of 288 students was calculated. Based on logistical challenges only 148 students participated in the study using stratified, random sampling. Permission was granted by the Ministry of Education after receiving ethical approval. The data collection instrument was a 20 questionnaire that was pre-tested for validity and reliability. Data were analyzed using SPSS Version 22.
- Results:** Ages ranged from 12-16 years with the mode 14 years (55, 37 %). The three major factors that contributed to health risks included peer pressure, community of residence and music. Bullying was dominant among all three domains and associated with music 60 (40.5%), community of residence 50 (33.8%) and peer pressure 46 (31%). Illicit sexual activities were associated with music 50 (33.8%) and peer pressure 22 (14.9%) while alcohol and drug use was associated with community of residence 52 (35.1%), peer pressure 30 (20.3%) and music 28 (18.9%).
- Conclusion:** Teenagers do adopt health risk behaviors that are influenced by peer pressure, the media, and the social environment/community. The findings can be utilized as a framework for a national study as well as the development of culturally sensitive school health programmes to reduce health risk behaviors among teenagers.
- Keywords:** teenagers, peer-pressure, media, social environment/community, risk behavior, drug use, alcohol, bullying

A quantitative study investigating factors contributing to falls in the elderly among nursing students at a community college.

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- Aim:** To examine nursing students' views on the factors that are associated with falls in patients sixty-five years and older and prevention strategies.
- Method:** A quantitative descriptive, research methodology was used to address the research topic. The data was collected over two days in November 2018. The sample consisted of forty nursing students purposively chosen from a total population of 124 year three and four nursing students. A questionnaire containing twenty closed ended questions were distributed to the participants using face to face interactions. The questionnaire explored the views of third and fourth year student nurses on factors which may contribute, hinder or rectify patient falls. Participants were visited in class with their lecturer's permission. Descriptive statistics were used in this study and further organized for presentation using appropriate tables. The data was analyzed using the Statistical Package for Social Sciences (SPSS) version twenty which provided the results.
- Results:** The results were based on the year three and four nursing students' views. Findings from the research revealed three leading causes of falling which include getting out of bed (75%), loss of balance (67%) and reaching for items from the bedside table (42.5%) respectively. The main fall prevention strategies were bed rails in place (85%), followed by wet floor caution signs (72.5%) and bedside tables nearby (65%).
- Conclusion:** Physiological and environmental factors may attribute to a fall among the elderly population. The study also revealed a relationship between falls and increased lighting. One recommendation is the enforcement of remedial classes for healthcare providers in global and local, acute and long-term institutions to reduce the incidence of falls in the elderly. Therefore, to prevent falls among the elderly standard precautionary and preventive measures and policy guidelines are necessary for promoting patient safety. However, future research will be necessary, to determine which fall prevention strategies are effective in reducing falls in care facilities. The implementation of the results of these futuristic researches should prove to be successful in reducing the amount of fall related injuries among inpatients.

The relationship between frequency of antenatal contact, neonatal birth weight and socio-demographic characteristics among Jamaican women 15-49 years.

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- Aim:** To determine the relationship between sociodemographic characteristics and frequency of antenatal contact (ANC) and age and birth weight among Jamaican women 15-49 years.
- Method:** This is a secondary analysis of the cross sectional study “Maternal and Newborn health section of the Multiple Indicator Cluster Survey” (MICS) conducted among 5032 women aged 15-19 years. Data for women who had a live birth within the last 2 years (n=630) were selected for analysis. Face to face, structured questionnaires were administered to eligible women in both rural and urban areas of Jamaica. A stratified random sampling method was used to select the sample for the study. Data were analysed with SPSS version 22 using frequencies and cross tabs (Pearson Chi square). Data such as age and frequency of antenatal contact were recoded.
- Results:** Most (23.3%) of the respondents were age 20-29 years and the mean age was 28 \pm 7.09). Majority of the women had secondary education (78.4%), resided in urban area (60.6%), had a normal (\geq 2500gr) birth weight child (83.7%) and were not in a union (54.6%). Most of the women were within the poorest quintile (24.8%). Chi- square tests showed statistically significant relationships – more antenatal contact was related to more educated women (p=0.001); women in high wealth quintile (p.001); women in urban areas (p.04); and those who were married (p.01). However, maternal age or birth weight did not show a statistical significance with antenatal contact (p>05).
- Conclusion:** Statistical relationships were found between level of education, wealth quintile, marital status and area of residence, p<.05. However, no statistical relationship was found between maternal age and frequency of antenatal contact and birth weight. Public education and further research are recommended to expand the knowledge on socio-demographic characteristics of women presenting for antenatal care to improve access and utilization.

UWISON's final year students' perception of factors affecting medication compliance among their relatives diagnosed with hypertension.

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- Aim:** To investigate students' perception of factors affecting medication compliance among their relatives who are diagnosed with hypertension
- Method:** A quantitative cross-sectional study was carried out among 144 4th year nursing students who had relatives diagnosed with hypertension. Convenience non-probability sampling was used to select participants - An email was sent to the entire population of 144 4th year students inviting them to respond if they had a relative diagnosed with hypertension. A total of 107 responded. A self-administered questionnaire consisting of 4 sections and 27 items was used to collect the data. It contained demographic and other 4-point Likert scale items. The SPSS version 20 was used to analyze data. Chi-square test was utilized to find the relationship between the independent and dependent (medication compliance) variables.
- Results:** Only 97 questionnaires were returned, giving a response rate of 90.6%. The mean age of student's relatives was 62.4 ± 13.4 years, the majority (81%) were females and within the 46-64 year age group (55%). Only 5% of relatives were fully compliant while 70% were highly compliant. Sociodemographic variables such as older persons ($p < 0.0001$), females vs males ($p < 0.0001$), financial assistance ($p = 0.008$) along with higher knowledge of medication ($p < 0.0001$) were related to compliance to hypertension medication. Notwithstanding these sociodemographic restraints, students still viewed their relatives to be 55% more compliant than they actually were.
- Conclusion:** Findings showed that compliance increased with age and there is a significant relationship between level of compliance and age, gender, financial assistance and level of knowledge. Based on these factors relatives and or patients diagnosed with hypertension must be probed to identify what may be influencing their level of compliance. This will allow for proper teaching and advocacy to improve their drug taking behavior to a higher level of compliance. Nurses should allow these individuals to participate in their care and educate them about important of being compliant and the consequences of not being compliant and advocate where necessary thus compliance level will improve.

Factors affecting medication compliance among hypertensive adults (18-59) and older adults (60 and over) in a rural community in Western, Jamaica.

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- Aim:** To determine the factors that affect medication compliance in hypertensive adults and older adults in a rural community in western Jamaica.
- Method:** A mixed approach was undertaken. A quantitative cross-sectional design was used consisting of a 12-item questionnaire in conjunction with one open-ended question (qualitative). The study consisted of 60 participants and convenience sampling method was used. Qualitative data was analyzed by categorizing the direct quotes into themes and placing them in a table. Quantitative findings were analyzed using PSPP version 3.0. Bivariate correlation and regression was used to determine the relationships between the independent variables (health insurance, weekly income, number of high blood pressure medications prescribed, educational level, and employment status) and compliance. Medication compliance was defined as taking antihypertensive medications in the frequency and dosage in which they were prescribed.
- Results:** A total of 60 (100%) responses were analyzed. The respondents consisted of 66.67 % females and 33.33% males. The results revealed that majority of the participants (61.67%) were not compliant with their anti-hypertensive medications. No statistical relationship was found between the factors (income, health insurance, educational level, polytherapy) and medication compliance ($p>0.05$). Qualitative data revealed that forgetfulness was the leading reason for non-compliance. Additional alternative therapy, availability of medication, feeling well, poor attitude to taking medication, ignorance about the chronicity of the disease and frustration about taking medication were reasons for non-compliance.
- Conclusion:** Compliance with antihypertensive medication is imperative to achieving blood pressure control and preventing complications. Knowledge of the factors that affect medication compliance can be used to modify the factors where possible to increase medication compliance.

A quantitative study to determine the prevalence and related factors of depression among third- and fourth-year nursing students at a local community college in Jamaica.

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- Aim:** To determine the prevalence and related factors of depressive symptoms among third- and fourth-year nursing students at a local community college in Jamaica.
- Method:** Researchers performed a quantitative descriptive study among 37 third- and fourth-year nursing students at a local Community college in Jamaica using a non-probability purposive sampling technique. Questionnaires were administered via face-to-face to participants. Descriptive analysis was done using the Statistical Package for the social sciences (SPSS) and Pearson's Chi-square test.
- Results:** Thirty-seven (37) randomly selected third and fourth year nursing students completed the study. The incidence of depression showed borderline clinical depression (10.8%), moderate (16.2%) and severe depression (5.4%). Factors of depression were fear of failure, school assignments, finances, lack of sleep, personal, clinical practicum placement and worries about the future was 64.4%, 62.2%, 56.8%, 40.5%, 37.8%, 32.4% and 21.6% respectively. There is no relationship between age and factors of depression among third- and fourth-year nursing students as the Pearson Chi-square test is $p\text{-value} = 9.49924 < 26.30$ at the 5% level of significance.
- Conclusion:** The major factors associated with feelings of depression are fear of failure, school assignments and finances with abuse having minimal influence. The female gender was also indicated as a factor; however, the study lacked male participants. Support, mainly financial, is needed by nursing students.

Poster Presentations

Breastfeeding Education Program for Nurses to Increase the Rates of Exclusive Breastfeeding among Ethnic Minorities

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- Aim:** To provide breastfeeding support for minority mothers via education of nurses.
- Methods:** A correlational study with four nurses completing 40-hour self-study to become Certified Breastfeeding Counsellors (CBC) along with 20 randomly selected nurses completing one-hour instructor led breastfeeding education session provided nurse support to mothers. March of Dimes® Instrument-Breastfeeding knowledge- pre- and post-test evaluation. Researcher collected pre/posttest tests following one-hour session, tests were kept secure.
- Results:** Age of the 24 nurses participating (30%) 20-30 years, (35%) 30-40 years, (15%) 40-50 years, (15%) 50-60 years, and (5%) 60-70 years. Ethnicity; African American- 40%, Hispanic- 30%, Caucasian-25%, and Asian- 5%. Analysis of the data did not show any correlation between age and ethnicity of nurses and results of pre-and post-tests. The samples were nurses (working within postpartum department 75%, Labor and Delivery 10%, Lactation Consultant 15%) and 22 ethnic minority mothers. This study was implemented on an obstetric unit from September to October 2017, admissions- 164 patients from all ethnicities; 47% indicated intent to exclusively breastfeed. Of the 47%, 14% were minority mothers provided with support by newly trained nurses with increasing rates of exclusive breastfeeding, “Baby Friendly Hospital”.
- Conclusion:** Noticeable trends became discernible. There was a correlation between nurses with evidence-based information and the rate of exclusive breastfeeding amongst ethnic minorities ($M = .75$, $SD = .47$). The rate of .75 was achieved following the education and certification of nurses in breastfeeding education. This program becomes the hallmark in generating knowledge retention and support in the postpartum period. Findings imply the need for breastfeeding education and support for postpartum mothers to increase the rates of exclusive breastfeeding.

The Quest for a Sustainable Wound Management Solution for Rural Areas of Tropical Developing Countries: What We Have Learned So Far

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- Aim:** Climate, poor sanitation, lack of knowledge, and poverty contribute to a disabling wound prevalence that often exceeds 20% in rural areas of tropical developing countries. Wounds in this environment are usually poorly managed at very high cost. Traditional health practitioners and village health workers, rather than health professionals, provide health care in most villages. Evidence for wound management methods in this environment is scant. This study was designed to define usual wound management practices in rural areas of tropical developing countries so that studies comparing usual practice with alternatives could be designed.
- Methods:** The story completion data collection method overcame cultural obstacles which have prevented researchers from obtaining meaningful quantitative data in this challenging setting. Participants from villages in Ghana, Zambia, and Cambodia were interviewed to obtain detailed descriptions of their current usual topical wound management methods using this new approach. This required extensive travel to areas which are medically underserved due to either remoteness or conflict. Village health workers, untrained villagers who perform self-care, and traditional health practitioners ranging from herbalists with Red Cross training to self-proclaimed “witch doctors” were all eager participants in the study.
- Results:** Wound management practices of nonprofessional health care providers were identified and described in detail for the first time. Four research questions were addressed with descriptive statistics and ANOVA. Although they often cannot meet their goals, most of the participants’ descriptions revealed a preference for moist treatments, such as bandages or occlusive herbal poultices, regardless of wound type. Safe wound cleansing and debridement were described less consistently.
- Conclusion:** These detailed results provided usual practice data needed to design a comparison study to help ensure the ecological validity (both safety and effectiveness) of sustainable wound recommendations for indigenous wound care providers in rural areas of tropical developing countries. An RCT to test an improvised dressing for use in this challenging setting is scheduled for late 2019. If the improvised dressings prove to be safe and effective in the tropical environment, they will be compared with usual practice in rural areas of tropical developing countries.

Early childhood stimulation and cognitive development in 3-4-year olds in Jamaica

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- Aim:** To determine the relationship between early childhood stimulation and cognitive development in children.
- Methods:** This was a secondary analysis of the Jamaica Multiple Indicator Cluster Survey (MICS) which was a cross sectional study designed to provide estimates of indicators of children and women in the three regions of Jamaica- KMA, Other towns and rural areas. The MICS selected a total of 7200 households. Mothers or caretakers of 1651 children under 5 years were interviewed. The data were filtered and this analysis focused on 671 children aged 3-4 years. Data were collected using the children under 5 questionnaire which consisted of 4 sections (feeding practices, care of illness, immunization and early childhood development). Only the early childhood section was used for analysis and focused on cognitive development and early childhood development. The SPSS software version 21 was used for data analysis. Descriptive Statistics were used to determine frequencies and chi square were calculated to determine relationships among the variables.
- Results:** The sample had slightly more boys (53%) than girls. Stimulation activities parents engaged with their children included, reading books/looking at pictures, telling stories, playing and counting things with child, and more mothers (60%-70%) engaged their children. The vast majority (92%) of children attended early childhood education, 71% could identify at least ten letters, 51% could read at least four simple words and 70% recognized symbols 1-10. Significantly more children whose mothers (74%) read for them compare to fathers or others (65%) could identify at least 10 letters ($p=0.03$). Similarly, significantly more children whose mothers stimulated them could read at least 4 simple words ($p=0.001$), and could recognize symbols ($p=0.001$)
- Conclusion:** The findings of the study showed that maternal stimulation and attendance to an early childhood programme greatly impacted cognitive skills in children. Both mothers and fathers should be guided and made to understand their role in early childhood stimulation. This could possibly be done from as early as antenatal care visits and child health clinics.

Title of Study: Experiences with Self-Care Management of Type 1 Diabetes among University students

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Aim: To explore the experiences of self-care, medication regime and how diabetes affected the daily lives of young people diagnosed with Type 1 Diabetes and studying at the UWI.

Methods: This is a qualitative study with the phenomenological approach. Five students aged 18 to 24 years with Type 1 Diabetes were purposively selected to participate in the study. They were recruited using flyers sent via Whatsapp and other social media platforms. An interview guide with 8 open-ended questions was used to collect data in October-November 2018. The one-hour session was held in a private room on the campus and was audio-recorded. Data were analyzed manually using the deductive approach. This involved using the research questions to group the data and then looking for similarities and differences.

Findings: The participants were four females and one male, and were between 22-23 years old. They were from 3 faculties and were living with diabetes 5-14 years. Three main themes emerged; Managing the condition, challenges and changes, and benefits of education. For some, the challenges faced were greater than others, but there were commonalities amongst all participants. They realized that there were changes that needed to be made to overcome these challenges. Participants stated that diabetes education came mostly from the time spent in the hospitals as children, not getting other information and, as such used the internet for most of their diabetes education.

Conclusion: University students have challenges with self-management of diabetes. They have to implement changes in their daily lives to ensure optimal health while attending to the requirements of school. It is important that programmes that assist with self-care management of type 1 diabetes be available to students. They should be implemented across the campus. Awareness about the benefits a healthy lifestyle and assistance with medication costs be made available to students with chronic conditions.

The Perceptions of 4th Year Undergraduate Nursing Students of Mental Health Nursing in Jamaica

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- Aims:** (1) To describe the perceptions of 4th year undergraduate nursing students toward mental health nursing and (2) to determine the contributing factors to students' perception of mental health nursing in an urban school of nursing in Jamaica.
- Method:** A quantitative cross-sectional study with a census sampling of the 4th year cohort of undergraduate nursing students ($N=70$) was done. Data were collected using the *Nurses Perception of Psychiatric Nursing Questionnaire*. Data were analyzed using SPSS version 18.
- Results:** The majority (97.1%) of the participants had a positive perception toward psychiatric nursing but only 22.9% were interested in pursuing psychiatric nursing. Amongst the participants, psychiatric nursing was perceived the least valued of nine nursing subspecialties. Contributing factors to nursing students' perception included prior care for an individual who suffered with a psychiatric illness and consideration to choose psychiatric nursing as a specialty.
- Conclusion:** Though the perception of mental health nursing was high, the interest in pursuing this specialty was low. There was leaning towards the choosing of specialties that were perceived as highly skilled or highly valued. The interest and action of choosing psychiatric nursing would assist in the recruitment and retention of nurses into this workforce. Therefore innovative and creative strategies such as the increased use of simulation are perhaps needed to make mental health nursing more attractive to nursing students.

New born weight, sociodemographic characteristics and antenatal care among women of reproductive age in Jamaica

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- Aim:** To determine the relationship between, newborn weight, sociodemographic background and antenatal care visits among women of reproductive age (15-49 years) in Jamaica
- Methods:** This was a secondary analysis of a larger cross-sectional study, the Multiple Indicator Cluster Survey (MICS) carried out in 2011 in Jamaica. The purpose was to provide estimates of indicators of children and women from all three regions (KMA, Towns and rural areas) in Jamaica. A total of 7200 households were selected for the study and 5143 women participated. Only women aged 15-49 years with a live birth in the last 2 years (n=630) were used in this analysis. The MICS questionnaire focusing on women was used to collect the data. SPSS was used for analysis. Frequency statistics was used to describe sociodemographic characteristics, ANC visits and newborn weight. Association between women's socio-demographic background and number of antenatal visits and other associations were done using Chi Square tests using a p value of 0.05 for statistical significance.
- Results:** Half (50.3%) of the women were between 20-29 years old, 61% lived in the urban area, and most had secondary level education (78%). The majority of women had 5 or more anti natal visits (89.3%). The mean birthweight was 3.27±?? and 61% had a normal birth weight (2.5-3.7kg) and 7.6% with birthweight <2.5kg. A higher proportion of younger women attended ANC <5 times, but this was not significant (p=0.55). Significantly more women from the rural areas (p=0.002), who were single (p=0.004), who had primary education (p=0.001) who were in the lowest wealth index (p=0.001) attended ANC < 8 times. Number of ANC visits was not related to newborn weight (p=0.7).
- Conclusion:** This study established that a woman's level of education, area of residence, marital status, and wealth index influenced number of antenatal visits. Nursing students should play a role in educating women on the importance of attending ANC for the MOH stipulated frequency.

The Story Completion Method for Obtaining Accurate Survey Data

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- Aims:** Detailed descriptions of usual wound management practices in villages were needed to design effective, culturally appropriate wound management protocols. No such descriptions were found in the literature. A new study design was needed to overcome barriers which prevent researchers from obtaining accurate survey data in this setting, which include:
1. Cultural differences that prevent classical surveys from being understood
 2. A universal reluctance to expose ones' work to strangers for evaluation
 3. A sense of hospitality which dictates that one provide pleasing answers, in preference to accurate answers
 4. The challenge of presenting questions that are relevant
- Methods:** Thirty actual wound cases (photos/histories) were presented to five Ghanaians experienced in wound care and familiar with village life. Based upon their qualitative responses, seven cases were chosen as representative interview prompts. Semi-structured interviews were guided by these case studies because story-telling is integral to village cultures and is relatively unthreatening. Open-ended questions avoided inferring that any particular aspect of wound management, such as cleansing, is expected. The story telling research method was tested with 75 participants in 25 villages in Ghana in a formal quantitative research study. The data was coded for quantitative analysis. Subsequently, the method was employed in Zambia and Cambodia.
- Results:** Most of the study participants offered detailed descriptive responses, verifying that the wound exemplars were familiar and the story completion method put them at ease. The eclectic and detailed nature of the responses indicates that the participants did not simply provide answers they believed would be pleasing. The data was coded and quantitatively evaluated as if obtained from a conventional survey.
- Conclusions** Using representative actual examples as story prompts to elicit objective data via the story completion method overcame the significant barriers that have prevented researchers from discovering usual wound management practices in villages in the past. This study design can now be implemented in other settings with other research topics to determine how broadly it can be used to overcome common barriers to obtaining accurate survey data.

Factors Affecting Immunization Status in Children 0-59 months in Jamaica

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Purpose: To identify the factors that affect immunization status in children 0-59 months in Jamaica.

Methods: A cross-sectional study design was used in the Multiple Indicator Cluster Survey (MICS) carried out in 2011 in Jamaica. The sample was selecting using a multistage stratified cluster sampling design from the population. A total of 7200 households were selected and 1651 parents were interviewed about their children and 1639 persons completed the study. The under 5 MICS questionnaires were used which comprised of 18 close ended questions based on the Ministry of Health of Jamaica Expanded Programme of Immunization. Secondary analysis was done using the SPSS version 20. Descriptive statistics were used to present the data and chi square tests used to determine the relationship between the factors identified and immunization status of children. A p value of > 0.05 was used to determine significance.

Results: Most of the children were males (52%) and lived in the urban areas (56.6%). Most mothers (75%) had secondary education and 45% were in the second and lowest wealth quintile. Up to 98.9% of children were immunized but only 77.1% of immunization cards were seen. Mothers with tertiary education were less likely to have their children vaccinated ($p < 0.01$) and children from the poorest wealth index quintile had a higher proportion of vaccine coverage than persons from the richest quintile ($p < 0.001$). Generally, there was no statistically significant relationship between a child's area of residence and immunization status.

Conclusions: There was a significant relationship between mother's education, wealth index and immunization status of children. Strategies should be developed to target parents who are more likely to be in demanding, decision making jobs to ensure their children are fully immunized.

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