**Session Identifier: B.5** 

**Session Theme: Making Research Matter** 

Thursday, June 16, 2016 1:30 p.m. – 3:00 p.m.

<u>It Takes a Village: Enhancing Community Support to Rural Informal Providers of Care at the End of Life</u>

Dr. Gail Wideman, Memorial University of Newfoundland; Dr. Victor Maddalena, Memorial University of Newfoundland; Dr. Susan MacDonald, Eastern Health; Dr. Daryl Pullman, Memorial University of Newfoundland

Community engaged research is premised on the principle of constituent engagement which necessitates nurturing complex alliances with academics, governments, community organizations and service users. The trajectory from community engagement to successful and collaborative research outcomes requires creativity, perseverance and a substantial investment of time. Conflicting pressures and priorities must be identified and carefully navigated from proposal development to dissemination and uptake. This presentation will outline the mechanisms of a strengths based research process for engaging communities in exploring and enhancing their capacity to support those providing and receiving end-of-life (EOL) care. Historically, death was a familiar community affair; individuals at EOL were surrounded by family, friends, and neighbours. With the post WWII expansion of hospital services, EOL care was medicalized and segregated in hospitals. Lately the fiscal challenges of providing health and social care for an aging population have led to deinstitutionalization of many services, and a transition back to home and family based support, albeit to community contexts that are markedly different from earlier times. While, the burden of care is exacerbated in rural places by a lack of access to specialized Palliative/EOL resources, rural communities are still generally characterized by social solidarity, close relationships, and community commitments. We outline some capacity building goals of community engaged research including understanding policies and their consequences, environmental and geographic factors, and the importance of networking and collaboration.

<u>Evaluating Age-Friendly Communities: Comments on a Multi- and Interdisciplinary Approach</u>
Dr. Elizabeth Russell, Memorial University of Newfoundland

Although the number of communities in Canada implementing age-friendly programming is growing, few programs have been evaluated. Social capital theory was used to study and evaluate a provincial age-friendly communities program in Newfoundland and Labrador (NL). This interdisciplinary, multi-sectorial research included academic researchers, seniors, health policy makers, municipal officials, and community volunteers in study development, data collection, and dissemination. Overall, the presentation will comment on the benefits and challenges of multi- and interdisciplinary evaluation research in the aging field, and how to facilitate community-level knowledge translation, with the aim to share effective practices with other researchers. Specifically, this will include a discussion of a) benefits for seniors involved in age-friendly programming in NL, b) the methodological approach taken in this research, c) creating effective and feasible policy recommendations, and d) multi- and interdisciplinary practices used during this research. Study methods included a) surveys of age-friendly

committees, b) an analysis of census data, and c) qualitative focus groups or interviews. In total, 108 people and 24 communities participated. Participants from towns experiencing outmigration and those with a higher income per capita had a lower sense of community, creating program implementation challenges. Social, health and educational benefits for seniors were associated with participation in programming. Outmigration increased the need for programming, but yet created a challenge for program development given volunteer burnout, typically addressed by community capacity building.

## Research Evidence Informs Change in Nursing Homes: An integrated Knowledge Translation Approach

Dr. Janice Keefe, Mount Saint Vincent University; Debra Boudreau, Tideview Terrace; Marian Casey, Shannex; Ann McInnis, Nova Scotia Community College

Engaging knowledge users throughout the research process is key to producing research findings that are more likely to be relevant to and used by knowledge users. The Care and Construction project (2011-2015) can be described as a best practice in integrated knowledge translation as the research results informed actions that knowledge users have put into practice. Senior leaders of nursing homes in Nova Scotia provided evidence of the changes to organizational practice they implemented as a consequence of their participation in, and evidence generated by, the research. Such changes included: modifying staff appraisal process to include "supporting relationship" criteria, changing scheduling to support consistent staff whenever feasible, and revisiting policies about accepting gifts. These actions are largely due to successfully engaging the knowledge users throughout the research process thereby contributing to research findings that were more likely to be directly relevant to and used by the knowledge users. This collaboration originated with the development of the research questions and selection of methodologies. During the project, specific engagement activities included working groups within which both researchers and knowledge users discussed instrument development, collection strategies, interpretation of the findings and dissemination activities. As well, workshops with sector representatives provided further opportunity for interpretation of findings and identifying relevant and meaningful actions for policy, practice and education. This presentation will provide an overview of the iKT approach taken and highlight the factors that supported research to practice.