



5<sup>th</sup> Hong Kong International Nursing Forum

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The 5<sup>th</sup> Hong Kong International Nursing Forum aims to share research and clinical practice among nursing academics and clinicians, and to highlight our commitment to providing quality education for practice and disseminating scientific discovery.

The forum includes The **Grace Tien Lecture** and we have invited worldwide distinguished health care leaders and professionals to be our keynote and plenary speakers. The theme of the forum this time is “**Innovation to Advance Nursing Practice**”, which aims to foster the exchange of ideas on the latest innovations and developments on the health care system, nursing practice and research. Local and international nurse academics and clinical nurse specialists will also present their outstanding research and latest work of clinical practice.

### Organizing Committee

**Honorary Adviser:** Professor Sophia S.C. CHAN

**Director:** Dr Sharron S.K. LEUNG

#### Scientific Sub-committee

**Coordinators:** Dr Marie TARRANT

**Members:** Professor Sophia S.C. CHAN  
Professor Marion GOOD

Dr Sharron S.K. LEUNG  
Dr Agnes F.Y. TIWARI

#### Promotion and Publicity Sub-committee

**Coordinator:** Dr Vivian F.W. NGAI

**Members:** Dr Denise M.K. CHOW  
Ms Jessica Y.Y. CHEUK

Dr Athena W.L. HONG  
Ms Caroline W.L. YANG

#### Finance and Sponsorship Sub-committee

**Coordinator:** Ms L.K. YU

**Members:** Ms Cecilia H.M. KONG  
Mr William W.K. LAM

Ms Maggie W.M. PUN  
Ms Flora S.Y. YUEN

#### Reception and Registration Sub-committee

**Coordinator:** Dr William H.C. LI

**Members:** Ms Claudia K.Y. CHAN  
Ms Maggie M.K. CHAN  
Ms Joyce O.K. CHUNG  
Ms Winnie S.Y. CHUNG

### Co-organizers

	School of Nursing Fudan University, China		College of Nursing Jilin University, China
	School of Nursing Peking University, China		School of Nursing Peking Union Medical College, China
	School of Nursing Third Military Medical University, China		School of Nursing Sun Yat-sen University, China
	College of Nursing Centro Escolar University, Philippines		Alice Lee Centre for Nursing Studies Yong Loo Lin School of Medicine National University of Singapore, Singapore
	School of Health Sciences Ngee Ann Polytechnic, Singapore		Department of Nursing College of Medicine National Cheng Kung University, Taiwan
	Faculty of Nursing Chiang Mai University, Thailand		Faculty of Nursing Mahidol University, Thailand
	Praboromarajchanok Institute Ministry of Public Health, Thailand		School of Nursing and Midwifery Queens University Belfast, UK
	Division of Nursing & Health Care University of Glasgow, UK		School of Nursing University of California, San Francisco, USA
	School of Nursing University of Connecticut, USA		School of Nursing University of Pennsylvania, USA
	School of Nursing The University of Virginia, USA		School of Nursing Yale University, USA

# Welcome Messages



## **Professor Sophia CHAN**

Professor and Head  
School of Nursing  
The University of Hong Kong



It is my great pleasure, on behalf of the School of Nursing of The University of Hong Kong, to welcome you to the 5<sup>th</sup> Hong Kong International Nursing Forum.

During the past years, the Hong Kong International Nursing Forum has become an annual meeting point, where nurse scholars, clinicians, managers and researchers can exchange the latest scientific knowledge, with distinguished local and international nurse. We are particularly privileged to host this year's Forum with the support of 20 co-organizers, which are the renowned universities / institutes from Mainland China, the Philippines, Singapore, Taiwan, the U.K. and the U.S.A.

Our Forum theme this year entitled "Innovation to Advance Nursing Practice" aims to foster the exchange of insights on the latest innovations and developments on the health care system, nursing practice and research. Nowadays, innovative developments are underway under health care reform to convert and enhance the function of nursing professionals. Dr Leung Pak-Yin, Chief Executive of Hospital Authority, HKSAR will share with us his views on nurses' role and importance in utilizing innovations to promote health to the community under the complex and rapid changing health care system. Other local and overseas nurse academics and clinical nurse specialists will also address their use of innovations in improving quality of care. The Forum has been an important platform in the region, for knowledge exchange, bring participants closer to cutting edge research on advance clinical practice, new diagnostic and treatment methods, as well as disease prevention and health promotion, which will achieve our School's mission in advancing nursing and providing better health care for the community.

I would like to take this opportunity to express my gratitude to the Tien's family, for supporting the Grace Tien Lecture in the Forum. We are also grateful to the distinguished speakers for sharing their knowledge and research findings with us. My heartfelt thanks also go to the co-organizers and the organizing committee, for their concerted effort and commitment in making this Forum a great success.

I hope you will find your participation in this Forum rewarding and have a joyful stay in Hong Kong!

**Professor Sophia CHAN**

Professor and Head  
School of Nursing  
The University of Hong Kong

# Welcome Messages



## **Professor Lap-Chee TSUI**

Vice-Chancellor and President  
The University of Hong Kong



On behalf of the University of Hong Kong, I would like to offer a very warm welcome to all those participating in the 5<sup>th</sup> Hong Kong International Nursing Forum, which brings together international and local leaders in nursing research, education and clinical practice to exchange ideas on innovations to advance nursing practice.

I hope participants in the forum will take advantage of this opportunity to share information with their international peers, advance their knowledge in their respective areas of expertise and ultimately improve the quality of care for those who depend on them.

For the past 100 years, HKU has known the importance of knowledge and education in transforming individual lives, building communities and serving society. In this, the University's centenary year, the Forum is thus a strong and timely reminder of the values of Knowledge, Heritage and Service that HKU continues to stand for.

May I offer my congratulations to the HKU School of Nursing and the 20 other co-organizers from renowned universities and institutes worldwide on what promises to be a productive and successful event.

**Professor Lap-Chee TSUI**

Vice-Chancellor and President  
The University of Hong Kong

# Welcome Messages



**Professor Sum Ping LEE**

Dean

Li Ka Shing Faculty of Medicine  
The University of Hong Kong



It gives me great pleasure to welcome all of you to the Li Ka Shing Faculty of Medicine to participate in the 5<sup>th</sup> Hong Kong International Nursing Forum. Once again, we are very glad and excited to have many leaders of the nursing profession from around the world gathering here to share the latest innovations and developments in the healthcare system, nursing practice and research.

Nursing practitioners play a pivotal role in today's healthcare system. As defined by the World Health Organization, their role encompasses autonomous and collaborative care of individuals of all ages, families, groups and communities, sick or well and in all settings. It also includes the promotion of health, the prevention of illness, and the care of ill, disabled and dying people.

While the demand for nurses continues to surge in terms of quantity, the rapidly-changing health needs and ongoing healthcare reform have also led to compelling and legitimate expectation for better healthcare knowledge, quicker response to the unique characteristics of patients' needs, and a call for greater innovation in the teaching, research and practice of nursing.

The theme of this year's forum, "Innovation to Advance Nursing Practice", is indeed a timely response to the challenges and opportunities that the profession and society are facing today. It is only by being innovative and creative that we could generate novel research initiatives, and high quality and evidence-based practice, which in turn enhance the standard of healthcare and improve the health outcomes of individuals, families and communities.

Since the first Hong Kong International Nursing Forum held in 2007, this annual event has successfully drawn over 1,500 local and overseas delegates, including nursing educators, managers and government officials, for the exchange of knowledge in the forefront and development of research collaborations.

May I take this opportunity to wish the 5<sup>th</sup> Hong Kong International Nursing Forum every success.

**Professor Sum-ping LEE**

Dean

Li Ka Shing Faculty of Medicine  
The University of Hong Kong

# Welcome Messages



**Dr Sharron LEUNG**

Director

5<sup>th</sup> Hong Kong International Nursing Forum  
School of Nursing  
The University of Hong Kong



On behalf of the Organizing Committee, I welcome you to the 5<sup>th</sup> Hong Kong International Nursing Forum in Hong Kong. This one-and-a-half day Forum is organized by the School of Nursing, the University of Hong Kong with 20 co-organizers from renowned universities and institutes. We are grateful for the great support of the Co-organizers to enable success of the Forum.

This year, the Forum addresses an important theme, "Innovation to advance nursing practice". The Forum brings in world leading scholars from Australia, U.K., and U.S.A. The speakers will share different innovative research and practices that improve healthcare and patient outcomes as well as the challenges of translating the innovations to practice. The Chief Executive and a Nurse Consultant from Hospital Authority Hong Kong will share the most exciting recent advancement and innovations in Hong Kong. Delegates from different countries, including China, Iran, Philippines, Thailand, Taiwan, U.K. and U.S.A., will also present their research and practices in 6 concurrent sessions.

This Forum provides an excellent platform for active exchanges and collegial networking which enable the generation of knowledge and insights. Such exchanges will surely impact on all who attend to improve practices and research which ultimately will bring about better health of people in our countries. I am sure this Forum will be inspiring and fruitful for us all.

I hope many of you will take time to enjoy this vibrant city in Hong Kong and wish your stay to be rewarding and pleasurable.

**Dr Sharron LEUNG**

Director

5<sup>th</sup> Hong Kong International Nursing Forum  
School of Nursing  
The University of Hong Kong

# Congratulatory Messages from Co-organizers



## **Jilin University, CHINA**

Jilin University School of Nursing is very honor to be one of co-organizers. During the past four years, the Hong Kong International Nursing Forum has made great progresses. The forum is recognized for its high standards by setting a platform for nurses and nursing educators to exchange and share advanced nursing philosophy, knowledge and experience. I would like to extend my warm congratulations to the HKU School of Nursing on their achievement in hosting this big event.

I wish the 5<sup>th</sup> Hong Kong International Nursing Forum greater success.

**Libin AN**  
Director and Professor  
School of Nursing



## **Peking University, CHINA**

Congratulations for the success in organizing The Hong Kong International Nursing Forum. I believe this forum will contribute to the development of nursing profession and people's health.

**Guifang GUO**  
Dean and Professor  
School of Nursing



## **Peking Union Medical College, CHINA**

On behalf of School of Nursing, Peking Union Medical College, I extend my heartiest congratulations to HKU School of Nursing on the great success in organizing this excellent Forum in Hong Kong.

Throughout the world nurses are known as caring individuals that people look for to advocate for the sick and provide empathy towards the needy. Nurses are playing a more and more important role in health and medical system nowadays.

I applaud the hard work and effort of you in bringing most of the experts and the person who concerned about nursing together to share their knowledge and expertise in nursing. It is definitely a valuable contribution to nursing all over the world.

I wish the Forum a great success. And all best wishes for the future! Again my sincerest congratulations to the entire team!

**Huaping LIU**  
Dean and Professor  
School of Nursing



## **Sun Yat-sen University, CHINA**

On behalf of the School of Nursing, Sun Yat-sen University, I take great pleasure to express my best wishes and congratulations to the Forum.

The success of the past four forums has shown that the Hong Kong International Nursing Forum is a useful platform for exchange views of nursing research, practice and education to advance patient care. I believe that the Forum will be a fruitful and interesting event for nursing professionals to share the innovative healthcare ideas.

Wish the 5<sup>th</sup> Hong Kong International Nursing Forum successful and fruitful!

**Liming YOU**  
Dean and Professor  
School of Nursing

# Congratulatory Messages from Co-organizers



## **Third Military Medical University, CHINA**

Warm congratulations on the 5<sup>th</sup> Hong Kong International Nursing Forum! I believe that this conference will provide an extremely good academic exchange platform for nursing scholars from all around the world, and promote nursing innovation and advancement in nursing practices.

Wish the conference a full success!

**Jingci ZHU**  
Professor  
School of Nursing



## **Queen's University Belfast, U.K.**

On behalf of the faculty of the School of Nursing and Midwifery, Queen's University Belfast, I warmly congratulate the School of Nursing, The University of Hong Kong, on the many successes of the School over the past year. The 5<sup>th</sup> Hong Kong International Nursing Forum will provide the ideal opportunity for delegates to gain an insight into innovations in practice via the presentations by world leaders in education, research and practice. It is an honour for Queen's University Belfast to be a co-organizer of this annual scientific meeting and we look forward to a continuing successful collaboration with both staff and students of the two Schools.

**Linda JOHNSTON**  
Head and Professor  
School of Nursing and Midwifery



## **University of California, San Francisco, U.S.A.**

Congratulations, Professor Chan and Dr. Leung, to The University of Hong Kong School of Nursing, and to all the organizers of this 5<sup>th</sup> Hong Kong International Nursing Forum! This year's theme carries much relevance on the heels of the U.S. Institute of Medicine's 2010 Report on the Future of Nursing. The Report recommended the removal of scope of practice barriers so that advance practice nurses can function to the full extent of their education and training. Let us all continue to work together to improve collaborative and interprofessional environments throughout the health care world.

**David Vlahov, RN, PhD**  
Dean and Professor of Nursing Education



**Sally H. Rankin, RN, PhD, FAAN**  
Associate Dean for International Programs and Global Health



## **University of Pennsylvania, U.S.A.**

Congratulations to the University of Hong Kong School of Nursing for holding your Fifth Hong Kong International Nursing Forum! We are delighted to partner with you in this enriching endeavor. And we are most pleased to have had the benefits of an active close partnership in education with you since the year 2004. This partnership has enhanced and expanded nursing education at both the University of Pennsylvania and The University of Hong Kong in ways that transform students personally and professionally, deepening their insights into global issues, raising their respect for diverse values and practices, and advancing their creativity and communication skills.

**Afaf MELEIS**  
Margaret, Bond Simon Dean of Nursing  
Professor of Nursing and Sociology  
School of Nursing

## Congratulatory Messages from Co-organizers



### University of Virginia, U.S.A.

The University of Virginia School of Nursing sends warm congratulations to our nursing colleagues at the School of Nursing at The University of Hong Kong. We value our partnership and are delighted to be co-organizers for the 5<sup>th</sup> Hong Kong International Nursing Forum. The conference theme celebrating the worldwide innovations that advance nursing practice will serve to move the profession forward. The benefit to patients, families and global communities will be profound. We look forward to future efforts together to improve the health of people across the globe.

#### Dorrie K. FONTAINE

Sadie Heath Cabaniss Professor of Nursing and Dean  
School of Nursing



### Yale University, U.S.A.

Congratulations on the opening of the 5<sup>th</sup> Hong Kong International Nursing Forum. The Yale University School of Nursing is proud to co-sponsor this event, where research and scholarship from around the world will be presented. Under the leadership of the University of Hong Kong School of Nursing faculty and staff, I expect the program to enrich the work of nurses throughout the world. The mission of the Yale School of Nursing is, 'better health care for all'. The forum will most certainly lead to better health care through Nursing.

#### Professor Margaret GREY

Dean and Annie Goodrich Professor  
School of Nursing



### National Cheng Kung University, TAIWAN

On behalf of the co-organizer, Department of Nursing, National Cheng Kung University, I deeply express my sincere congratulations to the School of Nursing, The University of Hong Kong for the occasion of the 5<sup>th</sup> Hong Kong International Nursing Forum.

The issue "Innovation to Advance Nursing Practice" will contribute to meaningful sharing of the latest scientific discovery and enrich the platform for intellectual challenge of quality research and clinical practice among participants from different countries. This annual event may continuously foster international connection for future collaboration among the nursing scholars and clinicians. Best wishes for a successful conference.

#### Ying-Ru CHANG

Director and Associate Professor  
Department of Nursing, College of Medicine



### Chiang Mai University, Thailand

On the occasion of the 5<sup>th</sup> Hong Kong International Nursing Forum, I wish to extend, on behalf of the Faculty of Nursing, Chiang Mai University our warm congratulations and warm welcome to you all.

It is our privilege to collaborate with the School of Nursing, The University of Hong Kong in co-organizing this significant nursing forum. I do hope that this is a very timely event that nursing profession could share and learn about our advanced clinical practices and significant innovations to improve the quality of nursing education and service.

I would like to wish this grand Forum a success. I am sure that all of you will gain something memorable. I thank The University of Hong Kong for organizing this important event.

#### Suwanprapisa THANARUK

Dean  
Faculty of Nursing

## Congratulatory Messages from Co-organizers



On behalf of Faculty of Nursing, Mahidol University, I am very grateful and feel prestigious to be a co-organizer for the 5<sup>th</sup> Hong Kong International Nursing Forum, organized by the School of Nursing, The University of Hong Kong. Faculty of Nursing, Mahidol University has been a co-organizer of the forum since 2009 and has witnessed the great success of the past two forums. I would like to congratulate for the theme of this year's Forum "Innovation to Advance Nursing Practice" which is an update issue in nursing profession throughout the world. I hope that this year will be another great success of the forum to bring professional nurses, educators, researchers and health care professionals from around the world to join the Forum. I wish all the success of the forum and wish the forum will draw some guidelines for advance practice nurses to make contributions for the better health of people around the world.

#### Tilokskulchai FONGCUM

Dean and Associate Professor  
Faculty of Nursing, Mahidol University, Bangkok, Thailand



As director of Praboromarajchanok Institute, it is my pleasure and privilege to be a co-organizer and a participant once again of the 5<sup>th</sup> Hong Kong International Nursing Forum which will be held on 3 - 4 June 2011.

For a past four years, this event has always met a great success; receiving good cooperation from various organizations, exchanging the valuable and beneficial ideas among the participants and conducting knowledge to the society. I strongly believe that every year the forum will increase quality and diversity and can be a great impact on global health promotion.

This year, the forum's theme is up to date and very interesting - Innovation to Advance Nursing Practice. Latest innovations and developments on health care system, nursing practice and research will be discussed and presented, so I would like to invite all of you to share your experience and join this meeting.

Thank you once again for always giving our institute an opportunity to be a part of this memorable and beneficial forum. See all of you again next year!

#### Hanpatchaiyakul SOMKUAN, M.D.

Director  
Praboromarajchanok Institute for Health Workforce Development, Thailand



On behalf of the Alice Lee Centre for Nursing Studies, National University of Singapore, it is a distinct honour and pleasure for me to welcome you to the 5<sup>th</sup> Hong Kong International Nursing Forum. I hope this meeting will provide a dynamic forum for exchange of ideas and strategies to promote advanced nursing practice in the region. Thanks to the organising committee for their leadership in planning the outstanding programme. I express my deepest appreciation for the vision of our hosts and the efforts they have made to make this event a success. Best wishes for a most enjoyable and stimulating Forum.

#### Sally CHAN

Professor and Head  
Alice Lee Centre for Nursing Studies, National University of Singapore, Singapore



Congratulations to The University of Hong Kong, School of Nursing for providing an excellent platform annually for healthcare professionals to meet and update on the trends and challenges in the healthcare sector.

This year's theme of is particularly timely as we need to tap on innovation to bring patient care to the next level of excellence. The interactions and discussions at the forum will lead to much collaborative learning and continuous improvement in our own settings.

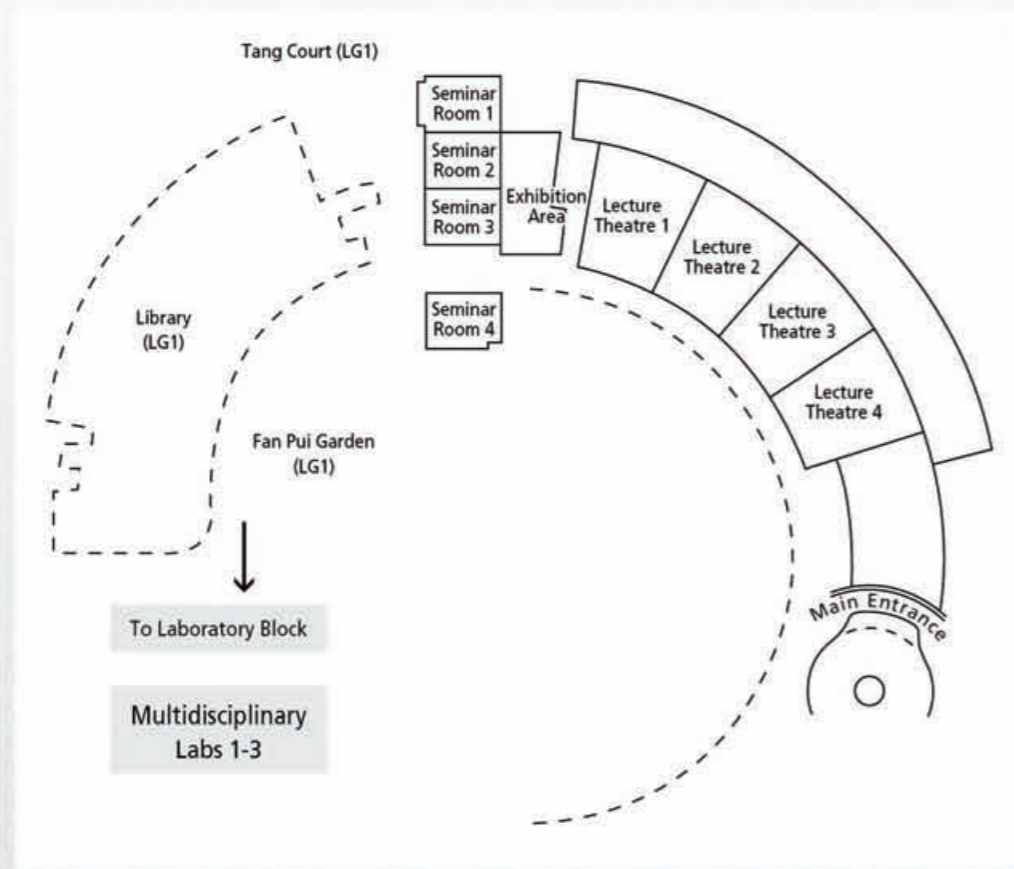
Best wishes to all!

#### Chiew Hun PHANG

Director  
School of Health Sciences, Ngee Ann Polytechnic, Singapore

# Forum Venue

William M.W. Mong Block, 21 Sassoon Road, Pokfulam, Hong Kong



## REGISTRATION & ENQUIRY COUNTERS

Lobby, G/F William M.W. Mong Block, 21 Sassoon Road, Pokfulam

## KEYNOTE LECTURES

Lecture Theatre 3 - 4, G/F, William M.W. Mong Block, 21 Sassoon Road, Pokfulam

## CONCURRENT SESSIONS

Lecture Theatre 1 - 4, G/F, William M.W. Mong Block, 21 Sassoon Road, Pokfulam

## POSTER PRESENTATIONS

Exhibition Area and Seminar Room 1 - 3, G/F, William M.W. Mong Block, 21 Sassoon Road, Pokfulam

## PREVIEW ROOM

Seminar Room 4, G/F, William M.W. Mong Block, 21 Sassoon Road, Pokfulam

## TEA BREAK

Exhibition Area, G/F, William M.W. Mong Block, 21 Sassoon Road, Pokfulam  
Foyer outside Lecture Theatres, G/F, William M.W. Mong Block, 21 Sassoon Road, Pokfulam

## FORUM LUNCH

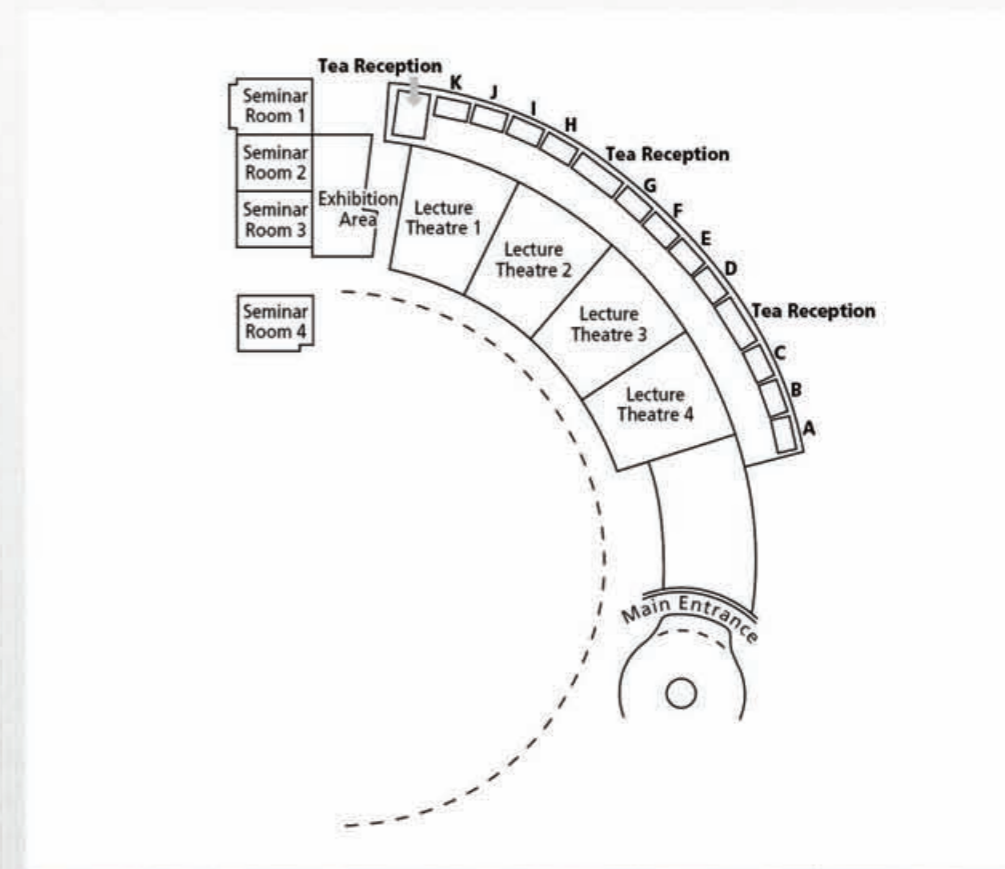
Multidisciplinary Lab 1 - 3, G/F, Laboratory Block, 21 Sassoon Road, Pokfulam

## FORUM DINNER

Jumbo Kingdom Restaurant (Shum Wan Pier Drive, Wong Chuk Hang, Aberdeen)

\*Transportation is available to take delegates to the venue at 6:00pm at the main entrance of William M.W. Mong Block

## Floor Plan of 5<sup>th</sup> Hong Kong International Nursing Forum



	3 June	4 June
Booth A	School Programme Booth	
Booth B	Draeger Medical Hong Kong Ltd.	---
Booth C	Lippincott Williams & Wilkins Asia Limited	
Booth D	Associated Medical Supplies Co. Ltd.	---
Booth E	Johnson & Johnson (HK) Ltd.	---
Booth F	Cengage Learning Hong Kong Ltd.	---
Booth G	Ultra Care Company Ltd.	---
Booth H	Ferring Pharmaceuticals Ltd.	---
Booth I	Goodwin Health Care Ltd.	---
Booth J	Quality Healthcare Nursing Agency	---
Booth K	American International Assurance Company (Bermuda) Limited	---

# Programme at a Glance

## 3 JUNE 2011, FRIDAY

08:30 - 09:00 Registration

09:00 - 09:30 Opening Ceremony

### 09:30 - 10:30 **OPENING KEYNOTE ADDRESS**

*Innovation in Advanced Nursing Practice*

#### **Dr Leung Pak-Yin**

Chief Executive  
Hospital Authority, HKSAR

10:30 - 11:00 Tea Reception & Poster Presentations

### 11:00 - 12:00 **GRACE TIEN LECTURE**

*The Challenges of Translating Nursing Innovations into Everyday Practice*

#### **Professor Karen Luker**

Professor and Dean  
School of Nursing, Midwifery and Social Work  
University of Manchester, U.K.

12:00 - 14:00 Lunch & Poster Presentations

### 14:00 - 15:00 **KEYNOTE ADDRESS**

*Innovation and Research in Wound Management: Lessons from 10 Years of Research and 15,000 Patients*

#### **Professor Nick Santamaria**

Acting Head of Nursing  
Department of Nursing  
Melbourne School of Health Sciences  
University of Melbourne, Australia

*Innovations in Pain Management*

#### **Professor Marion Good**

Visiting Professor  
School of Nursing, The University of Hong Kong  
Professor Emerita  
Frances Payne Bolton School of Nursing, Case Western Reserve University, USA

15:00 - 15:30 Tea Reception & Poster Presentations

15:30 - 17:30 Concurrent Session I: Acute-care Nursing

Concurrent Session II: Maternal and Child Health

Concurrent Session III: Chronic Disease Prevention and Care (I)

## 4 JUNE 2011, SATURDAY

08:30 - 09:00 Registration

### 09:00 - 10:00 **KEYNOTE ADDRESS**

*Developing a Positive Work Environment: A Journey Toward Quality*

#### **Dr Carol Porter**

Chief Nursing Officer and Senior Vice President for Nursing  
The Mount Sinai Medical School, U.S.A.  
Associate Dean Nursing Research and Education  
Mount Sinai School of Medicine, U.S.A.

*Clinical Practice Innovation*

#### **Ms Jolene Mui**

Nurse Consultant  
Community Psychiatric Service  
Castle Peak Hospital, HKSAR

10:00 - 10:30 Tea Reception & Poster Presentations

10:30 - 12:30 Concurrent Session IV: Chronic Disease Prevention and Care (II)

Concurrent Session V: Family and Community Health

Concurrent Session VI: Doctoral Students' Presentation



# Opening Keynote Speakers

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**Dr LEUNG Pak-Yin**  
*Chief Executive*  
*Hospital Authority, HKSAR*

**Dr Leung** began his career in public health and administrative medicine in 1985. He was appointed Deputy Director of Food and Environmental Hygiene in 2000 and Deputy Director of Health in 2002 in the Department of Health of the Hong Kong SAR Government. He set up and became the first Controller of Centre for Health Protection in 2004. As Controller, he was responsible for disease prevention and control as well as public health emergency (including major infectious disease outbreaks and pandemics) planning and response in Hong Kong.

Dr Leung joined the Hong Kong Hospital Authority as Director of Quality and Safety in 2007 to lead, plan and launch initiatives to enhance quality, patient safety and risk management. He is appointed Chief Executive of the Hospital Authority in 2010 and is responsible for the overall management of 41 public hospitals and other healthcare institutions, 58,000 staff and an annual recurrent budget of over US \$ 4.5 billion.

# Abstract

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**3 JUNE 2011 (09:30 - 10:30)**

Lecture Theatre 4

## **OPENING KEYNOTE LECTURE**

*Innovation in Advanced Nursing Practice*

**Dr LEUNG Pak-Yin**

*Chief Executive*  
*Hospital Authority, HKSAR*

Nurses play a vital role in a healthcare system and their role will evolve as the needs of society change. Nowadays nurses have the opportunity to make a difference by participating in service planning and development. They can become proactive in creating innovative practice to address patient needs and improve care delivery. Yet, work place innovation is heavily influenced by organisational environment. As a major healthcare provider in Hong Kong, how does the Hospital Authority create an environment where innovation can flourish? The development of nurses will put them on the path to success. Innovation within a health care system which improves patient care quality can only be achieved by multidisciplinary efforts and collaborative practices.

# Grace Tien Lecture



## **Professor Karen Luker**

*Professor and Dean*

*School of Nursing, Midwifery and Social Work*

*University of Manchester, U.K.*

**Professor Karen Luker** obtained a BNurs degree from Manchester. She completed a PhD in Social Science and Nursing at the University of Edinburgh. She is currently the Queen's Nursing Institute Professor of Community Nursing and Head of the School of Nursing, Midwifery and Social Work. She holds research grants from medical research charities and National Institute of Health Research. She leads a research group in the School: Adults with long term conditions & self care. She is Co Lead for the Health Services Research Theme of the Collaboration for Leadership in Applied Health Research & Care (CLAHRC) <http://clahrc-gm.nihr.ac.uk/>.

Karen is a Fellow of the Academy of Medical Sciences and was awarded a fellowship of the Queen's Nursing Institute in 2003, and in 2010 was awarded an Honorary Doctorate in Medicine from the University of Lund Sweden in recognition of her contribution to Health Care research. She has reviewed on a wide range of national and International research committees including MRC Health Services and Public Health Research Board and two RAE Panels. Karen is a Non-Executive Director of Greater Manchester West Mental Health NHS Foundation Trust. In addition she edits the Journal Health and Social Care in the Community published by Wiley/Blackwell Publishing.

# Abstract

**3 JUNE 2011 (11:00 - 12:00)**

Lecture Theatre 4

## **GRACE TIEN LECTURE**

*The Challenges of Translating Nursing Innovations into Everyday Practice*

**Professor Karen Luker**

*Professor and Dean*

*School of Nursing, Midwifery and Social Work*

*University of Manchester, U.K.*

Innovations which have the potential to improve patient care and advance nursing practice come in many different guises. This paper starts from the position that nursing is a global activity and an innovation in one location can be common practice in another.

Innovations can be characterised in a number of different ways, in medicine an innovation is usually thought to be research based advancement in treatment (e.g. a drug) and the challenge is in the translation of the research finding from the laboratory to the bedside, referred to as translational research. In nursing, innovations can be derived from research but mostly are not. It can be argued that the need in nursing is not for more research but for the application of research findings in practice. Nurses may refer to the application of research and its evaluation in situ as translational.

Many innovations in nursing relate to policy and education as well as practice, increasingly innovations are championed if they have the potential to enable more efficient and effective practice. This paper highlights four types of nursing innovation

- Extension of the nurses role: nurse prescribing or nurse led clinics
- A change in organisational policy: implementation of a pain assessment tool
- The introduction of new technology: remote monitoring of patients
- The promotion of patient self management

Irrespective of the innovation the challenge is in motivating individuals to change and implementing and sustaining the change in practice. This paper will draw upon relevant models of diffusion to explore the ideal requirements for successful implementation.

# Keynote Speaker



## **Professor Nick Santamaria**

*Acting Head of Nursing  
Department of Nursing  
Melbourne School of Health Sciences  
University of Melbourne, Australia*

**Professor Nick Santamaria** is the Professor of Nursing Research, Translational Research and Acting Head of Department at the University of Melbourne and the Royal Melbourne Hospital. He holds an Adjunct Professorial appointment at Curtin University WA and is Senior Research Fellow with the Bendigo Health Care Group in Victoria.

He designed and developed the Advanced Medical Wound Imaging System (AMWIS) that was subsequently awarded the Baxter/AHA National Healthcare Innovation Award in 2002. He has conducted national clinical trials in wound management that have led to the development of WoundsWest which is unique wound management system comprising clinical IT, online education, remote consultation and prevalence monitoring. WoundsWest has been recognised both nationally and internationally for its innovation and clinical effectiveness.

Nick chairs the IT Working Group for WoundsWest and is an active researcher in wound management. He has secured more than \$11 Million in research funding and was a member of the consortium that recently secured funding Commonwealth funding for a Collaborative Research Centre for Wound Management Innovation.

# Abstract

**3 JUNE 2011 (14:00 - 15:00)**

Lecture Theatre 4

## **KEYNOTE LECTURE**

***Innovation and Research in Wound Management: Lessons from 10 Years of Research and 15,000 Patients***

### **Professor Nick Santamaria**

*Acting Head of Nursing  
Department of Nursing  
Melbourne School of Health Sciences  
University of Melbourne, Australia*

This presentation will review more than 10 years of research and innovation in wound management conducted in Australia. Included will be the development of an early digital wound imaging system that led to the first reported randomised controlled trial of the effectiveness of remote nurse-led expert consultation for chronic wounds in the remote Kimberley region of Western Australia.

Pressure ulcer prevention studies will also be presented that highlights the effectiveness of integration of risk assessment and pressure ulcer prevention guidelines in a cohort of 3,500 patients. These and other studies will be used to explain the development of the WoundsWest System which has brought together on-line wound management education, digital imaging, electronic wound records and prevalence monitoring for Western Australia.

Data on wound prevalence will be presented on 10,000 patients from 87 Australian hospitals that demonstrate the clinical effectiveness of nurse-led interventions in wound care and current wound management research will also be reviewed. Finally emerging directions in wound research will be discussed and the potential for international collaborations explored.

# Keynote Speaker



## **Professor Marion Good**

*Visiting Professor*

*School of Nursing*

*The University of Hong Kong, HKSAR*

*Professor Emerita*

*Frances Payne Bolton School of Nursing, Case Western Reserve University, U.S.A.*

**Professor Marion Good**, PhD, RN, FAAN is a Visiting Professor at Hong Kong University School of Nursing and Professor Emerita at the Frances Payne Bolton School of Nursing, Case Western Reserve University in Cleveland, Ohio. Professor Good has created a body of theoretical and evidence-based knowledge regarding the efficacy of complementary therapies for pain management. Her theory of a balance between analgesia and side effects is one of the first middle-range prescriptive theories in nursing and has been supported by her research and that of others. Her innovative program of integrated pain management research has attracted considerable professional and public attention, and it strengthens the empirical support for development of pain policies. Good received the Elizabeth Narcessian Award for Outstanding Educational Achievements in the Field of Pain from the American Pain Society in 2007.

# Abstract

**3 JUNE 2011 (14:00 - 15:00)**

Lecture Theatre 4

## **KEYNOTE LECTURE**

*Innovations in Pain Management*

**Professor Marion Good**

*Visiting Professor*

*School of Nursing, The University of Hong Kong, HKSAR*

*Professor Emerita*

*Frances Payne Bolton School of Nursing, Case Western Reserve University, U.S.A.*

Pain after major surgery is excessive, but opioids do not relieve all of the pain and suffering. Evidence-based nonpharmacological methods can be added to improve relief. In this keynote presentation, I will discuss my studies of relaxation and music for pain management and will recommend ways they can be used in nursing practice. This work is based on a mid-range pain management theory that proposes that nurses can provide better relief than analgesics alone by adding nonpharmacological methods. A series of well-powered randomized controlled trials showed that relaxation, music, and the combination of relaxation and music reduced several types of pain, 10%-55%, thus supporting the theory. These interventions acted by relaxing and distracting patients from focusing on their pain; they had overall small to medium effect sizes but also had effects on depressive symptoms, anxiety, sleep, and the autonomic nervous system. These innovations have advanced nursing practice by contributing a new theoretical perspective and providing evidence-based, humanistic, and helpful additions to the use of opioids for managing pain. Limitations are that they reduced pain primarily while the person was listening, and did not reduce opioid intake or opioid side effects. Advantages are that they helped patients focus on something pleasant and calming that sometimes resulted in new meanings and perspectives on their illness. They did not add side effects and have been effective for pain in several cultures in the US and around the world. Relaxation and soft music are inexpensive, safe, and can be used to supplement analgesic medication requirements.

*This research was supported by the National Institute of Nursing Research, NIH, Grant Number R01 NR3933 (1994-2005), to M. Good, PhD, RN, FAAN, Principal Investigator, and by the General Clinical Research Center, Case Western Reserve University (Currently the Dahms Clinical Research Unit located in the University Hospitals Case Medical Center in Cleveland).*

# Keynote Speaker



## **Dr Carol Porter**

*Chief Nursing Officer and Senior Vice President for Nursing  
The Mount Sinai Medical School, U.S.A.  
Associate Dean Nursing Research and Education  
Mount Sinai School of Medicine, U.S.A.*

**Dr Carol Porter**, DNP, RN is the Chief Nursing Officer, Senior Vice President at The Mount Medical Center in New York City and the Associate Dean of Nursing Research and Education in the Mount Sinai School of Medicine. Mount Sinai Hospital Nursing includes 2300 nurses of which over 240 are Nurse Practitioners and 1400 support staff.

Dr Porter received her DNP from Case Western Reserve University, a Masters Degree in Public Administration-Health Administration from Rutgers University and a Bachelor of Science Degree in Nursing from William Paterson University. Dr Porter is a Wharton Nurse Executive Fellow, a member of the Nursing Spectrum Board as well as the New York Times Health Care Advisory Board for Nursing.

Dr Porter's research is focused on the effect of partnerships between clinical nurses and management on nurse satisfaction and nurse turnover which was published in the May and June 2010 issues of The Journal of Nursing Administration (JONA). Dr Porter is actively involved in promoting a positive work environment and has developed a Nursing Labor Management Partnership Model based on her work in this area.

The Mount Sinai Hospital Nursing Department is the recipient of the American Nurses Association (ANA) Magnet Award for Nursing Excellence since 2004 and have been re-designated from 2009 to 2013. Carol has been an Appraiser for the Magnet Recognition Program since 2008.

MSH Nursing leadership actively collaborates with global nursing leadership on nursing research, nursing leadership and advanced nursing practice. Carol was selected by the International Council of Nurses (ICN) to participate in the 2010 ICN Global Nursing Leadership Institute at their world headquarters in Geneva, Switzerland.

In 2009, Dr Porter and the MSH Leadership team established The Center for Nursing Research and Education in The Mount Sinai School of Medicine.

# Abstract

4 JUNE 2011 (09:00 - 10:00)

Lecture Theatre 4

## **KEYNOTE LECTURE**

*Developing a Positive Work Environment: A Journey Toward Quality*

### **Dr Carol Porter**

*Chief Nursing Officer and Senior Vice President for Nursing  
The Mount Sinai Medical School, U.S.A.  
Associate Dean Nursing Research and Education  
Mount Sinai School of Medicine, U.S.A.*

The key to developing a positive work environment in healthcare which supports nursing practice and quality patient care outcomes is founded in a bidirectional linkage from the bedside up to the Board Room and back. Clinical nurses caring for patients are the one continuous professional that is at the bedside providing care, following treatment standards and leading quality one patient at a time.

Leadership takes many forms and levels. Nursing leaders are formally seen in management positions but clinical nurses also assume leadership roles in nursing practice through quality work, evidence based projects, functioning as preceptors and role models, and by being identified by others for their excellence in practice. Nurses lead quality activities and are instrumental in forming the foundation of the journey to quality.

When Nursing leaders both formal and informal, work together towards shared goals, operational decision making, and building interdisciplinary teams to provide a collaborative approach to patient care they may find that quality outcomes are achievable that were not achievable by working in isolation. Patient care is a team activity and requires multiple healthcare professionals all working collaboratively to improve patient care and quality outcomes.

Collaboration flourishes in a positive work environment. A positive work environment fosters mutual respect, shared decision making, and staff having their voices heard and their opinions matter. Staff are engaged in the work of patient care and are empowered to improve nursing practice and patient outcomes.

A study will be presented of a large urban academic medical center's transformation based on a partnership between staff and management dedicated to achieving excellence in care of patients, their families and the community. Together they created and nurtured a positive work environment of collaboration, work and clinical practice. The partnership recognized that they may not always agree but will respect their differences, seek common ground and strive for success together. As leaders at all levels they agreed to inspire and engage the healthcare team in the journey of excellence in quality: patient care, operational performance, and professional practice. Outcomes in all of these categories will be presented.

# Keynote Speaker



## Ms Jolene Mui

*Nurse Consultant*

*Community Psychiatric Service*

*Castle Peak Hospital, HKSAR*

**Miss Jolene Mui** is the Nurse Consultant in the Community Psychiatric Service of Castle Peak Hospital, New Territories West of Hong Kong. She is also the first nurse consultant in the psychiatric service of Hong Kong. She has organized and conducted many training courses to multidisciplinary staff in the field of community psychiatric service. She is the honorary consultant for the Samaritan Befriender Hong Kong. Miss Mui is a founding member of the College of Mental Health Nursing, Hong Kong and the Ackerman Alumni Institute for the Family (Hong Kong). She is the trainer for community psychiatric nursing, multidisciplinary case management and family therapy. She is also the founder of the patient self-help group for the mentally ill.

# Abstract

4 JUNE 2011 (09:00 - 10:00)

Lecture Theatre 4

## KEYNOTE LECTURE

*Clinical Practice Innovation*

**Ms Jolene Mui**

*Nurse Consultant*

*Community Psychiatric Service, Castle Peak Hospital, HKSAR*

People with severe mental illness have different needs and risk at different stages of their illness and recovery. This group of people is particularly difficult to integrate back to the community. The obstacles could be related to the disabilities resulting from the illness, social stigma, inadequate funding, insufficient well-trained workforce, and inadequate collaboration with community partners. Despite these obstacles, for constructive change to occur, a model of care needs to be explored and developed.

In response to this challenge, a 3-tiered multidisciplinary case management model was specifically designed to address the wide range of needs of people with severe mental illness in our local settings.

The model provides a framework of organizing the community psychiatric service in a systematic and coordinated way. Under this model, service users will be allocated to different levels of care according to the needs and risk assessment. The construction of the 3 tiers is based on the multi-dimensional criterion of clinical state and psychosocial functioning of the service users. The levels of care (low, medium and high) aims at giving indication to the intensity of care and case load weighting. It also serves as guidance to the case manager on clinical decision making and choice of care packages.

To maintain a consistent therapeutic relationship between service users and providers, every service user will have a case manager responsible to take care of their bio-psycho-social needs in a long term approach. An individualized service plan is designed to align the aspirations and goals of service users, carers and case managers.

Another characteristic of this model is the close collaboration with our larger system, people in the community; we value them as an oasis of resources. By identifying and fully utilizing strength in these multidimensional ways, a better continuity of care for people with severe mental illness could be sustained. The ultimate aim of service provision is not only maintaining the mental stability of the service users but also enabling them to live independently in the community and enhancing their social inclusion.

The model is only at its infantile stage, it gives us a framework to develop pattern of effective clinical practices. It is hoped that best practices with evidenced based will emerge.

# Concurrent Sessions

## CONCURRENT SESSION I: Acute-care Nursing

3 JUNE 2011 (15:30 - 17:30)		LECTURE THEATRE 1
Moderators: <b>Ms Melanie Fleur SANDOVAL, Ms Lei King YU</b>		
15:30 - 15:45	CS01	Advancing Practice in Critical Care: A Model of Knowledge Integration <b>Dr Martin CHRISTENSEN</b>
15:45 - 16:00	CS02	Clinical Practice Guideline on Inpatient Fall Prevention in Mainland China: Development and Application in an Acute-care Unit <b>Ms Lei CHEUNG</b>
16:00 - 16:15	CS03	The Effectiveness of Crede's Method on Urine Retention among Post-Haemorrhoidectomy Recipients <b>Professor Yu-Hua LIN</b>
16:15 - 16:30	CS04	The Effects of Standardized Wound Care Project to the Burn Patients in Decreasing the Incidence of Dressing Dislodge <b>Ms Chiung-Hua CHAN</b>
16:30 - 16:45	CS05	The Effects of a Standardized Continuous Veno-Venous Hemo Filtration Care Procedure in MICU <b>Ms Hasiao-Wen LEE</b>
16:45 - 17:00	CS06	The Risk Factors of Pressure Ulcer in Orthopedic Patients <b>Ms Fariba BOLOURCHIFARD</b>
17:00 - 17:15	CS07	A Metamorphic Life of a Comatose Survivor <b>Mr Michael LEOCADIO</b>
17:15 - 17:30		Q & A Session

## CONCURRENT SESSION II: Maternal and Child Health

3 JUNE 2011 (15:30 - 17:15)		LECTURE THEATRE 2
Moderators: <b>Dr XIA Haiou, Dr Elizabeth HUI</b>		
15:30 - 15:45	CS08	Psychosocial Factors and Maternal Wellbeing <b>Dr Vivian NGAI</b>
15:45 - 16:00	CS09	The Effect of Guided Imagery on the Third Stage of Labor: A Pilot Study <b>Dr Mavis SCHORN</b>
16:00 - 16:15	CS10	Oplan Phonepal: An Intervention in Increasing the Level of Knowledge and Self-Confidence in Postpartum and Newborn Care <b>Ms Gloria Isabel L. BALTAZAR</b>
16:15 - 16:30	CS11	Effects of Maternal Skin-to-skin Contact (Kangaroo Care) on Reducing Bio-Behavioral Pain Responses in Preterm Infants <b>Dr Xiaomei CONG</b>
16:30 - 16:45	CS12	The Effects of Support Group and Structured Information on Stress and Role Adaptation in Mothers of Premature Infants in NICU of Sawanpracharak Hospital, Nakhonsawan Province <b>Ms Sirikan RAENGKASIKORN</b>
16:45 - 17:00	CS13	Impact of Baby-Friendly Hospital Practices on Breastfeeding in Hong Kong <b>Dr Marie TARRANT</b>
17:00 - 17:15		Q & A Session

## CONCURRENT SESSION III: Chronic Disease Prevention and Care (I)

3 JUNE 2011 (15:30 - 17:15)		LECTURE THEATRE 4
Moderators: <b>Dr QING Chunrong, Dr Daniel FONG</b>		
15:30 - 15:45	CS14	Enabling and Empowering Patients Living with Cancer as a Chronic Illness <b>Dr James Mark LAZENBY</b>
15:45 - 16:00	CS15	Adaptation of a Nursing Intervention to Improve ART Adherence in China <b>Professor Ann Bartley WILLIAMS</b>
16:00 - 16:15	CS16	Culturally Conceptualizing HIV Stigma among Injection Drug Users in China: A Grounded Theory Study <b>Dr Xianhong LI</b>
16:15 - 16:30	CS17	Effects of Standardized Contact Precaution against Infection Project in Respiratory Care Center <b>Ms Yi-Tzu CHOU</b>
16:30 - 16:45	CS18	Healthy Sound: A Health Communication Innovation for Behavioral Changes among Patients with Diabetes Mellitus and Hypertension <b>Dr Pornruedee NITIRAT</b>
16:45 - 17:00	CS19	Frequently Access to Health Information among Diabetic Patients: Do they really get it? <b>Dr Angela LEUNG</b>
17:00 - 17:15		Q & A Session

## CONCURRENT SESSION IV: Chronic Disease Prevention and Care (II)

4 JUNE 2011 (10:30 - 12:15)		LECTURE THEATRE 1
Moderators: <b>Dr LI Kun, Dr Felix YUEN</b>		
10:30 - 10:45	CS20	Disclosing a Prostate Cancer Diagnosis: Underserved Latino Men with Prostate Cancer <b>Dr Sally MALISKI</b>
10:45 - 11:00	CS21	The Impact of a Child's Unexpected Hospitalization upon Taiwanese Parents' Situational Anxiety <b>Dr Yun Shan TSENG</b>
11:00 - 11:15	CS22	Effect of Patient Diary and Nursing Follow-up on Compliance with Discharge Recommendation for Stroke Patients <b>Ms Chun-rong QIAN</b>
11:15 - 11:30	CS23	Self-efficacy, Medication Adherence and Quality of Life among People Living with HIV/AIDS in Hunan Province, China <b>Dr Honghong WANG</b>
11:30 - 11:45	CS24	Self-reported Waist Circumference for Assessing Cardiovascular Risk Factors and Overweight/Obesity in Hong Kong Chinese Children <b>Ms Noel CHAN</b>
11:45 - 12:00	CS25	Promoting Smoking Cessation in the Community: Results of a Quit to Win Contest <b>Professor Sophia CHAN</b>
12:00 - 12:15		Q & A Session

# Concurrent Sessions

3 JUNE 2011 (15:30 - 15:45)

Lecture Theatre 1

## CONCURRENT SESSION I: Acute-care Nursing

### CS01 *Advancing Practice in Critical Care: A Model of Knowledge Integration*

**M. CHRISTENSEN**

*Alice Lee Centre for Nursing Studies, National University of Singapore, Singapore*

It could be argued that advancing practice in critical care has been superseded by the advanced practice agenda. Some would suggest that advancing practice is focused on the core attributes of an individual's practice progressing onto advanced practice status. However, advancing practice is more of a process than identifiable skills and as such is often negated when viewing the development of practitioners to the advanced practice level. For example practice development initiatives can be seen as advancing practice for the masses which ensures that practitioners are following the same level of practice. The question here is; are they developing individually.

To discuss the potential development of a conceptual model of knowledge integration pertinent to critical care nursing practice. In an attempt to explore the development of leading edge critical care thinking and practice, a new model for advancing practice in critical care is proposed. This paper suggests that reflection may not be the best model for advancing practice unless the individual practitioner has a sound knowledge base both theoretically and experientially.

Drawing on the contemporary literature and recent doctoral research, the knowledge integration model presented here uses action research that is focused in practise to develop practice, for example the use of work-based learning and clinical supervision. Ongoing knowledge acquisition and its relationship with previously held theory and experience will enable individual practitioners to advance their own practice as well as being a resource for others.

CONCURRENT SESSION V: Family and Community Health		
4 JUNE 2011 (10:30 - 12:15)		LECTURE THEATRE 2
Moderators: <b>Professor Mark LAZENBY, Dr Vivian NGAI</b>		
10:30 - 10:45	CS26	An Empowerment Intervention for Abused Women <b>Professor Barbara PARKER</b>
10:45 - 11:00	CS27	Redefining the Core of Nursing: Concept Analysis for Health Promotion <b>Professor Rhea Faye Delmo FELICILDA</b>
11:00 - 11:15	CS28	A Proposed Project to Revisit the Items on the Safety Behavior Checklist: Intimate Partner Violence and the Relevance of Culture <b>Ms Melanie Fleur SANDOVAL</b>
11:15 - 11:30	CS29	Cross-cultural Understanding of Depression among Women Experiencing Intimate Partner Violence <b>Ms Janet WONG</b>
11:30 - 11:45	CS30	A Follow-up Study of the Short-term Daily-function Recovery and Rehabilitation Behaviors of Patients Undergone Lumbar Spine Surgery <b>Ms Xiaowei GENG</b>
11:45 - 12:00	CS31	The Differential Effects of Intimate Terrorism and Situational Couple Violence on the Mental Health of Abused Chinese Women <b>Dr Agnes TIWARI</b>
12:00 - 12:15		Q & A Session

CONCURRENT SESSION VI: Doctoral Students' Presentations		
4 JUNE 2011 (10:30 - 12:15)		LECTURE THEATRE 4
Moderators: <b>Ms Idy FU, Ms Veronica LAM</b>		
10:30 - 11:00	CS32	Advanced Practice Nursing in Hong Kong <b>Ms S.L. NG, Ms Erica M.K. TO</b>
11:00 - 11:15	CS33	Professional Breastfeeding Support Intervention to Increase the Exclusivity and Duration of Breastfeeding in First-time mothers <b>Ms Idy FU</b>
11:15 - 11:30	CS34	Effectiveness of Nurse Led Telephone-based Intervention for Chinese Caregivers of Colorectal Cancer Patients: A Pilot Study <b>Ms Nga Fun SHUM</b>
11:30 - 11:45	CS35	Efficacy of an Extended Education Programme for Improving Adherence to Continuous Positive Airway Pressure in Patients with Obstructive Sleep Apnea <b>Ms Agnes LAI</b>
11:45 - 12:15		Q & A Session



3 JUNE 2011 (15:45 - 16:00)

Lecture Theatre 1

**CONCURRENT SESSION I: Acute-care Nursing****CS02 Clinical Practice Guideline on Inpatient Fall Prevention in Mainland China: Development and Application in an Acute-care Unit**L. CHENG<sup>1</sup>, Y. HU<sup>1</sup>, Y.F. ZHOU<sup>1</sup>, J.Q. WU<sup>2</sup>, Y. CHEN<sup>2</sup>, L.R. ZHAO<sup>2</sup><sup>1</sup> School of Nursing, Fudan University, Shanghai, China<sup>2</sup> Hua Dong Hospital Affiliated to Fudan University, China

**Significance:** Falls in acute hospitals is one of the commonest patient safety issues as well as a long-standing research topic worldwide in nursing. Although a number of guidelines on fall prevention have been presented by different organizations, it is noted that most of the evidence comes from developed nations. For developing countries and countries with economies in transition, the design and applicability of the evidence on hospital fall management should be carefully reconsidered in light of their own situation.

**Objectives:** To develop a Clinical Practice Guideline on inpatient fall prevention in mainland China based on the JBI model of evidence-based healthcare and implement it in one acute-care unit of a 3-A hospital in Shanghai, so as to explore the practical way of evidence-based practice in mainland China.

**Methods:** A Clinical Practice Guideline on inpatient fall prevention was developed by a systematic review of relevant literature, a survey of 231 frontline nurses, in-depth interview of 8 nursing managers and 3 nurses from acute hospitals in Shanghai, and referring to current existing fall prevention guidelines from developed countries. Then a pilot trial was conducted so as to put this guideline into the fall management system in a neurological unit of a 3-A hospital in Shanghai. All the changes in this unit was collected and noted.

**Results:** The procedure and content of current fall prevention practice was slowly under change after a series group meeting of evidence introduction and implementation. The key points in evidence-based practice on inpatient fall prevention were to combine scientific evidence with nursing expertise and ward situation and push forward evidence-based practice on a system level by establishing effective decision-making mechanism and overcoming traditional views and convention.

**Conclusions:** JBI model of evidence-based healthcare provides a conceptual framework for the evidence-based practice of inpatient fall prevention. Special attention should be put on influential factors at individual and system level in the implementation of evidence-based practice.

**Acknowledge:** This study has been funded by Nursing Research Grants (No. FNF201014) from Fudan University.

3 JUNE 2011 (16:00 - 16:15)

Lecture Theatre 1

**CONCURRENT SESSION I: Acute-care Nursing****CS03 The Effectiveness of Crede's Method on Urine Retention among Post-Haemorrhoidectomy Recipients**

Y.H. LIN

Associate Professor, Department of Nursing, I-Shou University, Taiwan

**Significance of the problem:** Urinary retention is a common complication among patients after haemorrhoidectomy. Although Crede's method is recommended for urinary retention in nursing practice textbooks, its effects still need to be examined.

**Objectives:** The purpose of this study was to explore the rate of early recovery of urination within eight hours after haemorrhoidectomy and to examine the effects of Crede's method on early recovery of urination among haemorrhoidectomy recipients.

**Design:** A randomised controlled trial was conducted.

**Methods:** This study followed a randomised controlled trial design. All participants were over 20 years of age, and each one had undergone a haemorrhoidectomy. Outcome measurements included patients' self-reported urine voiding status, personal demographics, and disease-related data. Before the surgical procedure, participants were distributed into either a Crede's group or a non-Crede's group, and written educational materials were given. Patients in the Crede's group were taught the method of Crede's when they were unable to void urine after haemorrhoidectomy. The non-Crede's group patients were taught the traditional methods, but not Crede's method. We examined urination status at eight hours after haemorrhoidectomy.

**Results:** The urination rate was 60.9% in all participants, 91.3% (21/23) in the Crede's group, and 30.4% (7/23) in the non-Crede's group. After controlling for the two groups' personal characteristics and disease-related variables, age and amount of fluid administered during the perioperative period were treated as covariates and included in the multinomial logistic regression model. The odds of urination were 17.61 fold higher in the Crede's group than in the non-Crede's group ( $p < 0.01$ , 95% confidence interval (CI) = 2.78 ~ 111.46).

**Conclusions:** This study demonstrated that the evidence of Crede's method is an effective strategy for early recovery of urination among patients after haemorrhoidectomy. Clear and concise information about urinary retention and related strategies should be given to patients before the procedure.

3 JUNE 2011 (16:15 - 16:30)

Lecture Theatre I

**CONCURRENT SESSION I: Acute-care Nursing****CS04** *The Effects of Standardized Wound Care Project to the Burn Patients in Decreasing the Incidence of Dressing Dislodge***C.H. CHAN, S.F. LIN**

Department of Nursing, China Medical University Hospital, Taiwan

**Background:** Dislodge of dressing in burn patients may lead to wound infection.**Objective:** This study is to explore the effects of a standardized wound care project to the burn patients in decreasing the incidence of dressing dislodge.**Methods:** This is a quasi-experimental study of one group pretest and posttest design. From August 1<sup>st</sup>, 2009 to March 13<sup>th</sup>, we collected 30 burn patients in a burn unit of a medical center with dislodge of dressings. A "Wound Care Enhancement Project" was designed by the clinical experts in wound care of the burn. The project includes a wound self-care manual for the burn patients, and the standard procedure of wound dressing tailoring and coverage. Data collection was done through direct observation and assessment. We use SPSS 12.0 for data analysis.**Results:** After implementation of standardized "Wound Care Enhancement Project", the results were: (1) the patient's score of knowledge about wound self-care precautions improved from 51.4 to 97.1 ( $t=12.74$ ,  $p<0.005$ ), (2) the nurse's implementation of wound dressing tailoring and coverage accurateness improved from 59.0 to 94.0 ( $t=15.70$ ,  $p<0.005$ ). (3) the incidence of dressing dislodge fell from 29.9% to 4.8% ( $t=5.60$ ,  $p<0.005$ ).**Conclusion:** Through implementation the "Wound Care Enhancement Project" that can improve the quality of dressing care, increase the patient's knowledge of wound care, and decrease the incidence of dressing dislodges. The results of this study provide the clinical reference for nursing to improve the quality of wound care for the burn patients.

3 JUNE 2011 (16:30 - 16:45)

Lecture Theatre I

**CONCURRENT SESSION I: Acute-care Nursing****CS05** *The Effects of the Standardized Continuous Venovenous Hemo Filtration Care Procedure in MICU***H.W. LEE, Y.N. LI, L.Y. SHU, C.S. STU**

Department of Nursing, China Medical University Hospital, Taiwan

**Background:** Continuous Venovenous Hemo filtration (CVVH) is a very important therapy and nursing activity in ICU, if the implement of care was misconduct will influence the patient safety.**Objective:** The purpose of this study is to explore the effects of the standardized CVVH care procedure in MICU.**Methods:** This is a quasi-experimental study of one group pretest and posttest design. Through the implementation of standardized CVVH care procedure, including instrument operation skill, nursing care techniques, precautions against infection, wound care, how to do the catheter fixation, and so on. From November 2009 to April 2010, we collected 38 nurses' knowledge about CVVH care by structured questionnaire and on-site observation about the correctness of whole care procedure. We used the SPSS 12.0 for data analysis.**Results:** After implementation of standardized CVVH care procedure, the results were: (1) the nurses knowledge about CVVH care improved from 56.0% to 100%, the difference in the average volume of 45.5 and a standard deviation of 14.1, the results are significantly different. (2) the CVVH care correctness improved from 69.9% to 100%, the average difference in the amount of 29.4 points and a standard deviation of 16.3 points, the results are significantly different.**Conclusion:** The result of this study was showed the standardized CVVH care procedure could offer a guideline to clinical nurse for how to care such critical patients, the proposed measures included in the standard of care ward and in-service training courses will help increase the learning effectiveness of the intensive care unit nurses and Planning follow-up training course as a reference.

3 JUNE 2011 (16:45 - 17:00)

Lecture Theatre I

**CONCURRENT SESSION I: Acute-care Nursing****CS06 The Risk Factors of Pressure Ulcer in Orthopedic Patients****F. BOLOURCHIFARD<sup>1</sup>, M.ABDOLRAHIMI<sup>1</sup>, F.YAGHMAEI<sup>2</sup>, A.AKBARZADEH BAGHBAN<sup>3</sup>**<sup>1</sup> Medical-Surgical Nursing Department, Nursing and Midwifery School, Shaheed Beheshti Medical University, Iran<sup>2</sup> Department of Community Health Nursing, Faculty of Nursing and Midwifery, Shaheed Beheshti Medical University, Iran<sup>3</sup> Department of Biostatistics, Faculty of Paramedical, Shaheed Beheshti Medical University, Iran

**Introduction:** Pressure ulcer is a problem in nursing care. This problem not only imposes high cost to the care system but also has complications such as pain, decreasing quality of life and increasing mortality rate.

**Purpose:** This descriptive study was conducted to determine pressure ulcer incidence and its related risk factors in patients hospitalized in orthopedic wards in 4 hospitals affiliated to Shaheed Beheshti Medical University in 2009, Iran - Tehran.

**Methods:** 330 convenience samples who at least 18, free of pressure ulcers were at admission ion, immobile or used aid devices were included in the study. Study tools including demographic information questionnaire, National Pressure Ulcer Advisory Panel Grading System and Braden Pressure Ulcer Assessment Scale (Sensory Perception, Moisture, Activity, Mobility, Nutrition, Friction and Shear) were completed by researcher with observation and interview.

**Results:** Pressure ulcers were developed 46 patients (13.9 percent). The pressure ulcers observed most commonly were stage one (76.1 percent) followed by stage two (21.1 percent) and stage three (2.2 percent). The most common locations were sacrum (37 percent), ischium (34.8 percent), and heels (17.4 percent), sacral and heels (10.9 percent). Medical diagnosis, low body mass index, length of hospitalization, high age, kind of treatment, decreased activity and mobility were pressure ulcer risk factors by Chi square, Fisher test and Logistic regression.

**Discussion:** The risk factors of pressure ulcer in orthopedic patients were: Medical diagnosis, low body mass index, length of hospitalization, high age, and kind of treatment, decreased activity and mobility. With regard to 3-30 percent range of pressure ulcer incidence in international hospital setting, the pressure ulcer incidence in this study is in this range. The incidence of pressure ulcer in this study in comparison to previous studies was decreased which can be explained by improvement of hospital structure, increasing use of technology and patients' knowledge of pressure ulcer.

3 JUNE 2011 (17:00 - 17:15)

Lecture Theatre I

**CONCURRENT SESSION I: Acute-care Nursing****CS07 A Metamorphic Life of a Comatose Survivor****L. PAYBA, M. LEOCADIO, C.B.B. AMPARO, B.G. ARDIENTE, R.A.P. AZNAR, M.B.A. BOBON, J.A. CANUEL, C.J.C. CASTEN, M.J.S. CO**

Manila Doctors College, Philippines

Using qualitative-phenomenology, the researchers were able to describe the meaning of experiences of comatose survivors. From twelve (12) comatose survivors, using purposive sampling technique, three (3) satisfied a set of qualifications. The informants of the study are Filipinos living in Metro Manila who are in their productive age (18-60 years old) and have been on comatose state during their young adulthood (18-40 years of age) for more than 24 hours and hospitalized. The data were collected through note taking, audio recording, video recording, through interview sessions and from face to face interaction. The data gathered undergone 3 stages: (a) The epoche, (b) eidetic and (c) transcendental.

This study unveiled the life of three comatose survivors, their life on their conscious state to their life when they got unconscious for a long period of time. Their lives are like different species of butterflies which are (a) Paralasa Nepalaica Species. Informants held distinct and high positions in their fields before getting comatose just like this highest form of butterfly; (b) Southern Dogface Butterfly, members of the Pieridae family, are hard to catch like the informants who described themselves as people living in a fast lane of living before they got comatose; (c) Monarch butterflies, the migrators and fly in groups, can be described like the informants because after regaining back their consciousness, they learned to give importance to the value of what a family is; (d) Morpho Menelaus Butterfly, butterflies who love their ecological bed just like how the informants described their coma experience as being in a deep sleep. (e) Butterfly care. There are ways of taking good care of butterflies from the egg, larva, and caterpillar to the emerging of its wings. Certain measures are done to keep it healthy and make sure its final butterfly would be strong. Based on the themes, future directions including the recommendations of the study was being formulated.

3 JUNE 2011 (15:30 - 15:45)

Lecture Theatre 2

## CONCURRENT SESSION II: Maternal and Child Health

### CS08 *Psychosocial Factors and Maternal Wellbeing*

**F.W. NGAI**

*School of Nursing, The University of Hong Kong, HKSAR*

**Significance:** Developing a sense of well-being and achieving competence and satisfaction in the maternal role have a tremendous impact on the quality of parenting behaviour and the child's psychosocial development. Little is known about the mechanisms through which learned resourcefulness, social support and stress affect postnatal depression and women's sense of competence and satisfaction in the maternal role.

**Objectives:** To test a conceptual model that examines the relationships between learned resourcefulness, social support, stress, maternal role competence and satisfaction, and postnatal depression in first-time Chinese mothers.

**Methods:** A predictive correlational study using secondary analysis of data from an intervention study was conducted in two regional public hospitals in Hong Kong. A total of 181 first-time Chinese mothers were followed at six weeks postpartum. Participants completed five instruments at six weeks postpartum: the Self-Control Schedule, Medical Outcomes Study Social Support Survey, Social Readjustment Rating Scale, Parenting Sense of Competence Scale and Edinburgh Postnatal Depression Scale. Path analysis was employed.

**Results:** The findings indicate that learned resourcefulness and social support have a direct impact on maternal role competence and satisfaction and on postnatal depression. Stress affected postnatal depression directly and maternal role competence and satisfaction indirectly, via learned resourcefulness and social support. Both learned resourcefulness and social support mediated the effects of stress on maternal role competence and satisfaction and postnatal depression.

**Conclusion:** This study establishes potential mechanisms through which learned resourcefulness, social support and stress contribute to maternal role competence and satisfaction and postnatal depression during early motherhood. Culturally competent healthcare should be developed to provide support and equip women with learned resourcefulness skills to combat the stress of early motherhood, thereby enhancing maternal role competence and satisfaction and minimizing the risk of postnatal depression.

3 JUNE 2011 (15:45 - 16:00)

Lecture Theatre 2

## CONCURRENT SESSION II: Maternal and Child Health

### CS09 *The Effect of Guided Imagery on the Third Stage of Labor: A Pilot Study*

**M. SCHORN**

*School of Nursing, Vanderbilt University, U.S.A.*

**Significance:** Blood loss from hemorrhage during childbirth, most commonly due to uterine atony, is one of the leading causes of maternal mortality in the United States and the leading cause of maternal death worldwide.

**Objectives:** The purpose of this pilot study was to evaluate the effect of guided imagery on the third stage of labor. The hypothesis was that the use of physiologic guided imagery would reduce the amount of bleeding during the third stage of labor.

**Methods:** A 3-group randomized trial was conducted with women recruited between 36 to 38 weeks gestation. The experimental group received a relaxation focused guided imagery intervention to use through the remainder of pregnancy plus a physiologic guided imagery intervention during the third stage of labor. The placebo group received the same relaxation focused guided imagery intervention but no guided imagery during the third stage of labor. A third group did not receive any guided imagery. Complete data were collected on 41 participants. Intrauterine activity was measured through the use of intrauterine pressure catheters (IUPCs). Comparisons of the length of third stage of labor and measured blood loss among the three groups were conducted using analysis of variance (ANOVA).

**Results:** No significant differences were found among the groups on demographic or potentially confounding variables. No significant decrease in the length of third stage of labor or measured blood loss was found in this small sample. Measured blood loss was nominally less in the group that used guided imagery in the third stage compared with the other groups. The use of IUPCs demonstrated the continuance of intermittent contractions through the third stage of labor.

**Conclusion:** Additional study of this intervention during the third stage is warranted. The use of guided imagery may decrease the need for invasive procedures and provide an additional tool in the armamentarium to minimize maternal morbidity during the third stage of labor while allowing the birthing woman to be a participative partner in care and self-healing. The use of IUPCs may be a useful tool for measuring differences of interventions during the third stage of labor.

**Acknowledgements:** Financial support was received from the American College of Nurse-Midwives Foundation W. Newton Long Research Award, Sigma Theta Tau International Iota Chapter and Sigma Theta Tau International Delta Psi Chapters. Covidien Kendall Monitoring and OR Products provided Accu-Trace Intrauterine Pressure Catheters for use in this research.

3 JUNE 2011 (16:00 - 16:15)

Lecture Theatre 2

**CONCURRENT SESSION II: Maternal and Child Health**

**CS10 OPLAN PHONEPAL: An Intervention in Increasing the Level of Knowledge and Self-Confidence in Postpartum and Newborn Care**

K.J.T.ALCANTARA, G.I.L. BALTAZAR, K.L.A. BALUYOT, M.R. BANIQUED, J.P.L.A. BANZON, J.Z.S. BARIAS, R. ESCOLAR-CHUA

College of Nursing, University of Santo Tomas, Philippines

**Background:** In the Philippines, 160 out of 100,000 postpartal women die or suffer from complications following childbirth (UNICEF, 2009). Therefore, knowledge should be provided and emphasized through discharge teachings to assist the mother in ensuring her physical and her newborn's health. However, a shortened stay in the hospital may be a barrier to effective health education because there is a significant cognitive deficit in the first 24 hours after delivery. Due to the trend of shortened hospital stay at present, there comes a need for further instruction and guidance which could be provided beyond the borders of the hospital. Through an emerging technology called telenursing, postpartal care can be more accessible to the public.

**Objective:** This study aims to assess the effectiveness of OPLAN PHONEPAL in increasing the level of knowledge and level of self-confidence of primiparous postpartum mothers in rendering postpartum and newborn care.

**Design:** Classical experimental design

**Setting:** Subjects were recruited from Dr. Jose Fabella Memorial Hospital, which is a maternal and newborn public tertiary hospital found in Santa Cruz, Manila, Philippines.

**Participants:** The participants for this study were 26 postpartum primiparas who delivered via normal spontaneous delivery in Dr. Jose Fabella Memorial Hospital selected through purposive sampling.

**Methods:** Through the OPLAN PHONEPAL program, the researchers provided health teachings on postpartum and newborn care by conducting mobile phone calls daily for 10 days. Before and after the intervention, the subjects answered a 22-item postpartum Knowledge Assessment exam and Self-Confidence Checklist. After the 10-day intervention, they were asked to come back to the hospital to answer the same set of questionnaires.

**Results:** The findings of the study showed that (1) there is no significant difference on the level of knowledge on postpartum and newborn care of the experimental and the control group prior to the use of OPLAN PHONEPAL [t-value = 0.96, t-critical = 2.064]; (2) there is no significant difference on the level of self-confidence of the experimental and the control group prior to the use of OPLAN PHONEPAL [t-value = -1.08, t-critical = 2.064]; (3) there is a significant difference on the level of knowledge on postpartum and newborn care of the experimental and control group after the use of OPLAN PHONEPAL [t-value = 8.94, t-critical = 2.064]; (4) there is no significant difference on the level of self-confidence of the experimental and the control group after the use of OPLAN PHONEPAL [t-value = 1.73, t-critical = 2.064]; (5) there is a significant difference in the level of knowledge of the experimental group before and after the use of OPLAN PHONEPAL program [t-value = 6.71, t-critical = 1.78]; (6) there is a significant difference in the level of self-confidence of the experimental group before and after the use of OPLAN PHONEPAL program [t-value = 4.89, t-critical = 1.78].

**Conclusion:** OPLAN PHONEPAL users had a significant increase in their level of knowledge on physiologic changes and newborn care as seen in their pre-test and post-test scores compared to non-OPLAN PHONEPAL users. Therefore, OPLAN PHONEPAL was proven to be effective in increasing the level of knowledge and level of self-confidence in postpartum and newborn care.

3 JUNE 2011 (16:15 - 16:30)

Lecture Theatre 2

**CONCURRENT SESSION II: Maternal and Child Health**

**CS11 Effects of Maternal Skin-to-skin Contact (Kangaroo Care) on Reducing Bio-Behavioral Pain Responses in Preterm Infants**

X. CONG, R.M. CUSSON, D. ZHANG

School of Nursing, University of Connecticut, U.S.A.

**Significance:** Premature infants can feel pain and are hypersensitive to pain. They are suffering from numerous painful procedures during hospital stays; however, 80% of infants do not have pain relief. Resultant pain causes adverse effects in major organ systems. Current interventions to alleviate infant pain are inadequate and inconsistently used.

**Objectives:** To examine the effect of two different durations of skin-to-skin contact (Kangaroo Care, KC) on reducing pain responses during heel stick in preterm infants of 28 - 32 weeks gestational age.

**Methods:** In this randomized cross-over study, 26 stable mother-infant dyads were recruited. Each dyad was tested for two KC holding conditions  $\pm 30$ -minutes KC (KC30) and 15-minutes KC (KC15) pre and throughout heel stick compared to the incubator heel stick (IC). Infant behavioral states, crying time, and heart rate variability (HRV) indices - low frequency power (LF), high frequency power (HF), and LF/HF ratio were measured throughout Baseline, Heel Warming, Heel Stick, and Recovery in all three conditions.

**Results:** During Baseline, infants spent more time (89-78%) in quiet sleep in both KC30 and KC15 conditions compared to more active sleep or active awake (65% of time) in the IC condition. During Heel Stick, infants cried more in IC (325  $\pm$  122 seconds) than KC30 (75  $\pm$  56 seconds) and KC 15 (81  $\pm$  66 seconds) condition,  $p < 0.05$ . During Recovery, infants cried more in the IC condition (85  $\pm$  74 seconds) than KC30 (35  $\pm$  24 seconds) and KC15 (28  $\pm$  21 seconds) condition,  $p < 0.05$ . The HRV results from 26 subjects showed that the LF and HF are more stable and lower in KC30 compared with KC15 and IC. LF was significantly different among 3 conditions at Heel Warming, and at 30s, 60s, 90s, and 180s of Heel Stick,  $p < .05$  and post hoc tests showed that LF in KC30 was lower than IC,  $p < 0.05$  at these time points.

**Conclusions:** Both KC holding conditions are effective in reducing heel stick pain and infants in longer duration of KC had a better balanced autonomic response than shorter duration of KC and incubator. KC may be helpful in mediating bio-physiologic pain responses in preterm infants.

**Acknowledgement:** Supported by UConn Foundation

3 JUNE 2011 (16:30 - 16:45)

Lecture Theatre 2

**CONCURRENT SESSION II: Maternal and Child Health**

**CS12** *The Effects of Support Group and Structured Information on Stress and Role Adaptation in Mothers of Premature Infants in NICU of Sawanpracharak Hospital, Nakhonsawan Province*

**S. RAENGKASIKORN, W. KHONGKHADEE**

*Boromarajonani College of Nursing, Sawanpracharak Nakhonsawan, Thailand*

Having a premature infant admitted in NICU after birth is a crisis that causes stress and reduces role adaptation in mother. A quasi-experimental study was conducted to examine the effects of support group and structured information on stress and role adaptation in mothers of premature infants in NICU at Sawanpracharak Hospital, Nakhonsawan province. Twenty-five eligible mothers were included in each of control and experimental groups. While the control group received conventional nursing, each individual mother in the experimental group received the support group and the structured information for three days with the use of a picture book and a mother's manual about NICU environment and premature infant care. The mothers in both groups were interviewed at the first and the seventh day after delivery through the questionnaires assessing maternal stress and role adaptation. ANCOVA using birth weight and pretest scores as covariates was performed for data analysis.

The results reveal that maternal stress in the experimental group was statistically significant less than that in the control group. And the experimental group adapted to maternal role better than the control group, too. The possible reasons explaining the interesting results were discussed. A provision of the support group and the structured information for mothers with premature infants in NICU is effective in helping reduce maternal stress and enhance maternal role adaptation. Thus, this intervention should be encouraged to be utilized regularly. However, upon actual implementation in study, the information given on the second and the third times took approximately 50-60 minutes. The researchers would suggest that the time be adjusted to be within 30-45 minutes since the longer the time, the more tired would the mothers be. Moreover, whenever there is the use of this study intervention into actual nursing practice of staff nurses in NICU, an additional intervention to enhance maternal adaptation should be developed and provided in a direct manner that might impact mothers in their role adaptation in a better way.

*The researchers would like to thanks Boromarajonani College of Nursing, Sawanpracharak Nakhonsawan for funding, Dr. Niranart Vithayachockitikhun and Mrs. Rapeepun Viboonwatthanakitt for suggestion about research process, research instruments and editing.*

3 JUNE 2011 (16:45 - 17:00)

Lecture Theatre 2

**CONCURRENT SESSION II: Maternal and Child Health**

**CS13** *Impact of Baby-Friendly Hospital Practices on Breastfeeding in Hong Kong*

**M. TARRANT<sup>1</sup>, K.M. WU<sup>2</sup>, D.Y.T. FONG<sup>1</sup>, I.L.Y. LEE<sup>3</sup>, E.M.Y. WONG<sup>4</sup>, A. SHAM<sup>5</sup>, C. LAM<sup>6</sup>, J.E. DODGSON<sup>7</sup>**

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<sup>7</sup> College of Nursing & Health Innovation, Arizona State University, Phoenix, Arizona, U.S.A.

**Background:** The World Health Organization (WHO) developed the Baby-Friendly Hospital Initiative to improve hospital maternity care practices that support breastfeeding. In Hong Kong, although no hospitals have yet received the Baby-Friendly status, efforts have been made to improve breastfeeding support. The aim of this study was to examine the impact of Baby-Friendly hospital practices on breastfeeding duration.

**Methods:** A sample of 1,242 breastfeeding mother-infant pairs was recruited from four public hospitals in Hong Kong and followed-up prospectively for up to 12 months. The primary outcome variable was defined as breastfeeding for 8 weeks or less. Predictor variables included six Baby-Friendly practices: breastfeeding initiation within 1 hour of birth, exclusive breastfeeding while in hospital, rooming-in, breastfeeding on demand, no pacifiers or artificial nipples, and information on breastfeeding support groups provided on discharge.

**Results:** Only 46.6 percent of women breastfed for more than 8 weeks, and only 4.8 percent of mothers experienced all six Baby-Friendly practices. After controlling for all other Baby-Friendly practices and possible confounding variables, exclusive breastfeeding while in hospital was protective against early breastfeeding cessation (OR=0.61; 95% CI 0.42 to 0.88). Compared with mothers who experienced all six Baby-Friendly practices, those who experienced one or fewer Baby-Friendly practices were almost three times more likely to discontinue breastfeeding (OR=3.13; 95% CI 1.41 to 6.95).

**Conclusions:** Greater exposure to Baby-Friendly practices would substantially increase new mothers' chances of breastfeeding beyond 8 weeks postpartum. To further improve maternity care practices in hospitals, institutional and administrative support are required to ensure all mothers receive adequate breastfeeding support in accordance with WHO guidelines.

3 JUNE 2011 (15:30 - 15:45)

Lecture Theatre 4

**CONCURRENT SESSION III: Chronic Disease Prevention and Care (I)**

**CS14 Enabling and Empowering Patients Living with Cancer as a Chronic Illness**

**J.M. LAZENBY, R. McCORKLE, E. ERCOLANO, D. SCHULMAN-GREEN**

School of Nursing, Yale University, U.S.A.

**Significance:** With recent improvements in the early detection, diagnosis, and treatment of cancer; people with cancer are living longer; and their cancer may be managed as a chronic illness. Cancer as a chronic illness places new demands on patients and families to manage their own care, and it challenges old paradigms that oncology's work is done after treatment. As a chronic illness, however, cancer care occurs on a continuum that stretches from prevention to the end of life, with early detection, diagnosis, treatment, and survivorship in between. In this presentation, we review self-management (SM) interventions that enable patients and families to participate in managing their care along this continuum.

**Methods:** Randomized controlled trials of SM interventions with cancer patients and families in the treatment, survivorship, and end-of-life phases of the cancer care continuum are reviewed. Three major databases were searched (Medline, CINAHL, and PubMed) from 1992-2007. The terms "self-management interventions", "illness self-management interventions", "self-care interventions", "psychoeducation interventions", "cognitive-behavioral interventions", "neoplasm", "oncology," and "cancer" were entered as keywords. Results were limited to English language, intervention studies, and abstract review was conducted to further limit the sample to articles that included interventions with adult cancer patients. Thirty-two intervention studies were identified. Of the 32 intervention studies, ten either mixed or did not report phase of treatment, did not include description of the intervention, or were not randomized; they were excluded. Of the remaining 22, six studies were co-authored by the investigators included in this review; only one example of their work was included. Sixteen remained.

**Results:** We found the Chronic Care Model (CCM) to be a model of care that advanced practice nurses in oncology practices can use to enable and empower patients and families to engage in SM.

**Conclusion:** A common language with which to speak about SM and a common set of SM actions for cancer care is needed. However, with the CCM oncology advanced practice nurses can now build strong relationships with their patients and, with interdisciplinary teams, formulate mutually agreed upon care plans that enable and empower patients to care for themselves in the way they prefer.

3 JUNE 2011 (15:45 - 16:00)

Lecture Theatre 4

**CONCURRENT SESSION III: Chronic Disease Prevention and Care (I)**

**CS15 Adaptation of a Nursing Intervention to Improve ART Adherence in China**

**A.B. WILLIAMS<sup>1</sup>, H.H. WANG<sup>2</sup>, K. DANVERS<sup>3</sup>, X.H. LI<sup>2</sup>, J.D. BURGESS<sup>4</sup>**

<sup>1</sup> School of Nursing, University of California Los Angeles, U.S.A.

<sup>2</sup> Central South University, Changsha, China

<sup>3</sup> Yale University

<sup>4</sup> US Veterans Health Service

**Significance:** As the HIV/AIDS epidemic expands across China, the Ministry of Health has responded with a program of free treatment for those affected. However, patient adherence to demanding medication regimens presents a significant challenge. Inadequate adherence limits the potential for long-term virological control at both the individual and population level.

**Objective:** To adapt a theoretically driven anti retroviral (ART) adherence intervention, which demonstrated efficacy in a randomized clinical trial conducted in the United States, to the Chinese cultural and social context.

**Methods:** ADAPT-TT is a prescriptive method for adapting evidence-based interventions. Data are collected in eight sequential steps using both qualitative and quantitative methods. The Assessment phase included cross sectional and longitudinal studies describing adherence rates and correlates in the target population. In the Decision phase, an intervention previously tested in the United States was selected for adaptation. The Administration phase comprised a demonstration of the intervention for Chinese colleagues followed by discussion of its relevance in China. In the Production phase a plan for adaptation was produced, including identification of essential core elements and key characteristics. Topical Experts (patients, family members, clinicians) reviewed the adapted intervention; and their comments were Integrated in the intervention.

**Results:** Self-reported adherence was <90% for 20% of subjects and was significantly associated with current heroin use (OR=3.5; 95% CI 1.5, 8.1; p=0.002). Qualitative themes identified included stigma, family, and guilt which are key elements that should be addressed in an adherence intervention. The intervention selected for adaptation was nurse home-visits guided by the social action philosophy of Paolo Freire. The final, adapted model, based on collaborative, cross-national discussions and review, modified the content of the home visits to include an emphasis on family participation and education, less frequent home visits, and family and patient group activities.

**Conclusion:** In spite of significant social and cultural differences, it is possible to adapt evidence-based interventions from one country to another, using a structured systematic approach. The next step is to test the adapted intervention in a randomized controlled trial.

**Acknowledgment:** This work was supported by a grant from the U.S. National Institute of Mental Health

3 JUNE 2011 (16:00 - 16:15)

Lecture Theatre 4

**CONCURRENT SESSION III: Chronic Disease Prevention and Care (I)****CS16 Culturally Conceptualizing HIV Stigma among Injection Drug Users in China: A Grounded Theory Study****X. LI<sup>1</sup>, H. WANG<sup>1</sup>, G. HE<sup>1</sup>, K. FENNIE<sup>2</sup>, A. B. WILLIAMS<sup>3</sup>**<sup>1</sup> School of Nursing, Central South University, China<sup>2</sup> School of Nursing, Yale University, U.S.A.<sup>3</sup> School of Nursing, University of California Los Angeles, U.S.A.

Although stigma is a significant barrier to HIV/AIDS prevention and treatment globally, the culture-specific mechanisms of HIV stigma have not been described. This study used grounded theory to explore the social and psychological process of HIV stigma experienced by Chinese injection drug users (IDU) and proposes a culture-specific concept of stigma. One focus group with 6 participants and 16 individual interviews were conducted using semi-structured interviews. All except two individual interviews were tape recorded and transcribed verbatim. Field notes documented the two non recorded interviews. Constant content analysis was the main analytical method, with the assistance of software NVivo 8.0. The core category of this study was "Struggling Back to Normal". Stigma related to both HIV infection and drug use (Dual Stigma) and Family Support emerged as the important concepts, while maintaining secrecy and active drug abuse were influencing factors. Open communication and ending illegal drug use strengthened family support, helping individuals return to normal life (Struggling Back to Normal). Family stigma resulted primarily from drug using behaviors rather than HIV infection. Family responsibility played an important role in bringing family members together to cope with HIV/AIDS within the traditional culture. The HIV diagnosis increased the psychological stress and internalized stigma which was already experienced by the respondents as a result of their illegal drug use. Implications for Chinese health care providers include: (1) Discussing illegal drug use with the whole family rather than the patient alone, and emphasizing the patient's obligation to the family could be an effective strategy for stigma-reduction in Chinese AIDS treatment clinic; (2) Psychological counseling is urgently needed in treatment clinics, to alleviate the internalized stigma experienced by HIV infected IDUs.

3 JUNE 2011 (16:15 - 16:30)

Lecture Theatre 4

**CONCURRENT SESSION III: Chronic Disease Prevention and Care (I)****CS17 Effects of Standardized Contact Precaution Against Infection Project in Respiratory Care Center****Y. T. CHOU, M. C. WANG, Y. P. YING, C. T. CHANG**

Department of Nursing, China Medical University Hospital, Taiwan

**Background:** Indeed the implementation of contact precaution against infection was the most important way.

**Objective:** The purpose of this study is to understand the effects of implementation of standardized contact precaution against infection project.

**Methods:** This is a quasi-experimental study of one group pretest and posttest design. Through the implementation of standardized contact precaution against infection project, including the education lecture, the timing of hand washing, contact precaution against infection procedure, facilities management, and routine surveillance. From December 2009 to February 2010, we collected 28 nurses' knowledge about contact precaution against infection by structured questionnaire, and the on-site observation about hand washing, contact precaution, environment control and so on. We use SPSS 12.0 for data analysis.

**Results:** After implementation of standardized contact precaution against infection project, the results were: (1) the nurses score of the knowledge about contact precaution against infection improved from 77.3% to 99.6% ( $t=3.727$ ,  $C_p<0.05$ ). (2) the contact precaution accurateness improved from 64.2% to 93.7% ( $t=6.552$ ,  $C_p<0.05$ ). (3) the infection rate of contact reduced from  $20.4\pm$  to  $11.0\pm$  ( $t=1.813$ ,  $C_p<0.05$ ).

**Conclusions:** According our result, that standardized contact precaution against infection project was reinforced and compliance was monitored, can help clinical staffs practicable executing the policy, effectively block and prevent the contamination of environment, and the further spread through the hands of staffs contributed to the cross transmission.



3 JUNE 2011 (16:30 - 16:45)

Lecture Theatre 4

**CONCURRENT SESSION III: Chronic Disease Prevention and Care (I)****CS18 "Healthy Sound": A Health Communication Innovation for Behavioral Changes among Patients with Diabetes Mellitus and Hypertension****P. NITIRAT, J. SRITHAHI, S. KHANWISER, S. JARUJIT**

Phrapokklao Nursing College, Thailand

Chronic diseases such as diabetes, hypertension and cancer are significant global health problems and associated with unhealthy behaviors (i.e., high fat intake, less exercise, smoking, etc). So far, promotion of healthy behaviors alone has not gone far enough in reducing chronic disease morbidity and mortality. It is important for health providers to create new approaches to impact on this growing health issue.

This study aimed to examine the effectiveness of a "Healthy Sound" innovation on behavioral changes among patients with Diabetes Mellitus (DM) and hypertension. We conducted a quasi evaluation study with a one group pretest, post-test design. Twenty patients with DM and hypertension were recruited. We used the health communication intervention, "Healthy Sound", to improve healthy eating behavior and exercise. The intervention, based on the Health Belief Model, included: 1) individualized health counseling; and 2) a "Healthy Sound" voice box used as a reminder. After health counseling was provided, the "Healthy Sound" box was hung on the participant's refrigerator for one month. When the refrigerator was opened, healthy messages were spoken to remind participants about healthy eating and exercise. Data was collected using an interview questionnaire before and after the intervention from September to December 2009. Data analysis consisted of descriptive statistics and the Wilcoxon Signed Ranks Test.

The results found that 60% of participants were female with an average age of 68.85. Participants with DM, hypertension, and both diseases were 45%, 30%, and 25% respectively. After the intervention, participants' perceptions toward the severity of DM and hypertension, benefits of healthy behaviors, and self-efficacy to practice advised behaviors were significantly higher than before the intervention ( $z = -3.70, -3.69, -3.77, p < .01$  respectively). Moreover, after the intervention, participants' perceptions toward barriers to perform recommended behaviors were significantly lower ( $z = -2.68, p < .01$ ). Finally, 70% of participants were satisfied with the intervention and indicated that a "Healthy Sound" box accounted for their changes in eating habits.

In sum, the "Healthy Sound" innovation showed its effectiveness on behavioral changes among patients with DM and hypertension. Nevertheless, a study on behavior maintenance should be further conducted to strengthen the value of this innovation.

3 JUNE 2011 (16:45 - 17:00)

Lecture Theatre 4

**CONCURRENT SESSION III: Chronic Disease Prevention and Care (I)****CS19 Frequently Access to Health Information among Diabetic Patients: Do they Really Get it?****A.Y.M. LEUNG<sup>1</sup>, S.S.C. CHAN<sup>1</sup>, V.W.Q. LOU<sup>2</sup>**<sup>1</sup> School of Nursing, The University of Hong Kong, HKSAR<sup>2</sup> Department of Social Work and Social Administration, The University of Hong Kong, HKSAR

**Background:** Diabetic patients have regular medical follow up and receive various kinds of health information day by day. However, to what extent they understand and interpret this information is unclear. Health literacy refers to patients' ability to obtain, interpret the health information and eventually make decision in health behaviour.

**Objectives:** This study aims to assess diabetic patients' understanding and interpretation of health information from the commonly health information sheets.

**Methods:** A cross-sectional survey was conducted with 137 Chinese diabetic patients, aged 60 or above, with regular follow-up in outpatient clinics. Ten information sheets were presented to the subjects and based on these sheets, twenty questions were asked to test their understanding and interpretation. Eight questions on drug labels, 3 questions related to insulin injection, 2 questions on appointment sheet, 5 questions on clinical measurement and 2 questions on social security.

**Results:** Only one third of the subjects correctly answered all the questions on drug labels (29%) and insulin injection label (26%). More than half of the subjects (60%) could not identify the venue and date for medical consultation from the appointment sheets. Majority of them misinterpreted the instruction about social security. However, most subjects demonstrated good ability to interpret blood glucose level (mean=0.90) and other clinical measures (mean=3.36).

**Conclusion:** This study showed that health information from the commonly used information sheets was not understood by diabetic older adults. Measures should be developed to assist patients to get the right information and interpret it correctly.

**Acknowledgement:** The study was funded by Small Project Fund 2008 of The University of Hong Kong (ref. no.: 200807176147).

4 JUNE 2011 (10:30 - 10:45)

Lecture Theatre I

**CONCURRENT SESSION IV: Chronic Disease Prevention and Care (II)**

**CS20 *Disclosing a Prostate Cancer Diagnosis: Underserved Latino Men with Prostate Cancer***

**S.L. MALISKI**

*School of Nursing, University of California Los Angeles, U.S.A.*

Little is known about how Latino-American men who have been treated for prostate cancer approached disclosing their diagnosis to others. Without understanding practices, experiences, and attitudes toward prostate cancer treatment, disclosure, and screening, it will be impossible to develop an evidence base from which to facilitate culturally relevant support as treatment, disclosure, and screening situations are faced by men in this vulnerable and growing Latino population. Therefore, the purpose of this study was to understand prostate cancer treatment and disclosure decision situations from the perspectives of Latino men who have made prostate cancer treatment and disclosure decisions. These understandings form the evidence base to develop culturally relevant interventions to support Latino men faced with prostate cancer treatment and disclosure decisions.

**Theoretical Framework:** Symbolic Interactionism (SI) is the framework grounding this study. Disclosure is an interactive process in which meanings are attributed to prostate cancer and its meaning within cultural contexts. This study illuminates the meanings and interactions that influence the process of disclosure.

**Methods:** A descriptive design using "fundamental" qualitative description was employed. We interviewed Latino men who have been treated for prostate cancer. In-person interviews were conducted with 30 men. Interviews were audiotaped and transcribed verbatim and Spanish transcripts were translated using our method developed in previous studies. Analysis used grounded theory techniques.

**Results:** Relative to treatment decision-making, analysis revealed that men relied on their physician as the "expert" for the treatment decision. Men saw the treatment decision as their decision to do what the expert advised. Disclosure of the diagnosis had several levels: Need to Know, No need to Know, Need to Tell. If brothers or sons lived at a distance, they were considered to not have a need to know. Wives and close family needed to know and employers needed to be told.

**Implications:** Of particular concern are first degree male relatives in the "No need to Know" category because of their increased risk for prostate cancer. Interventions focused on facilitating the sharing of the diagnosis and risk information by Latino men will be developed based on these results.

4 JUNE 2011 (10:45 - 11:00)

Lecture Theatre I

**CONCURRENT SESSION IV: Chronic Disease Prevention and Care (II)**

**CS21 *The Impact of a Child's Unexpected Hospitalization upon Taiwanese Parents' Situational Anxiety***

**Y.S. TSENG**

*Nursing, I Shou University, Taiwan*

**Significance:** 288,461 Taiwanese children were admitted to the hospital in 2009. The parents of a sick child likely experience situational anxiety due to their child being unexpectedly hospitalized. The emotional upheaval may be great enough that their anxiety inhibits them in providing positive support to their hospitalized child. In Taiwan, very little is known about the experience of parents when facing their children's unexpected hospitalization. Because anxiety affects psychological distress as well as behavioral distress, identifying parental distress helps parents improving their coping mechanisms.

**Objectives:** The study compared situational anxiety levels between Taiwanese fathers and mothers and focused on differences between parental anxiety levels at the beginning of the child's unplanned hospitalization and at time of discharge. The study also identified factors related to the parents' distress and use of coping mechanisms.

**Methods:** A comparative research design was used to determine the difference between the anxiety levels of 62 Taiwanese father-mother dyads during the situational crisis of their child's unexpected hospitalization. The Mandarin versions of Visual Analog Scale, State-Trait Anxiety Inventory, and the Index of Parent Participation/Hospitalized Child were used to differentiate parental anxiety levels and identify factors related to their distress. Questionnaires were completed by parents within 24-36 hours of the child's hospital admission and within 24 hours prior to discharge. A paired t-test, two sample t-test, and linear mixed regression model were used to test and support the study hypothesis.

**Results:** The mothers' anxiety levels did not significantly differ from the fathers' anxiety level when their child had an unexpected hospitalization. Particularly, parental state anxiety levels did not decrease during the child's hospital stay and subsequent discharge. The anxiety levels did not differ between parents regardless of whether the child's disease was acute or chronic. The most effective factor related to parental situational anxiety was parental perception of the severity of the child's illness.

**Conclusions:** Parental anxiety was found to be significantly related to changes in their perception of the severity of their child's illness. The study was not able to illustrate how parental involvement in the child's hospital care was related to parental perception of the severity of their child's illness. Future studies using a qualitative approach may provide richer information from which to modify key variables as well as the instruments used to improve the quality of the data obtained.

4 JUNE 2011 (11:00 - 11:15)

Lecture Theatre I

**CONCURRENT SESSION IV: Chronic Disease Prevention and Care (II)****CS22 Effect of Patient Diary and Nursing Follow-up on Compliance with Discharge Recommendation for Stroke Patients**C. QIAN<sup>1</sup>, J. ZHU<sup>1</sup>, Y. CHENG<sup>2</sup><sup>1</sup> Department of Fundamental Nursing, Nursing School, Third Military Medical University, Chongqing, China<sup>2</sup> Department of Neurology, Southwest Hospital, Third Military Medical University, Chongqing, China

**Objective:** Compliance in discharged stroke patients is poor; and few studies have probed into strategies for improving compliance in mainland China. This study evaluated the effect of the combined intervention of patient diary and nursing follow-up in promoting compliance with discharge recommendation for discharged stroke patients.

**Methods:** Patients were recruited from the acute stroke department in Southwest Hospital in Chongqing from May to December 2010. Forty-two stroke survivors on confirmation of ischemic stroke were effectively enrolled and randomized to the control group (n = 19) and the interventional group (n = 23). The control patients were received a regular discharge care, whereas the interventional patients were received a regular care plus the interventional care. The intervention program contained 4 nursing events which are health education 1 week pre-discharge, compliance assessment 3 days pre-discharge, telephone follow-up 1 week post-discharge and family visit 4 weeks post-discharge. Compliance data were collected at the end of the 4th week and 12<sup>th</sup> week after discharge by the self-designed questionnaire.

**Results:** (1) The compliance score of the intervention group was significantly higher than those of the control at both time points (the 4<sup>th</sup> week after discharge:  $t=3.031$ ,  $P < 0.01$ ; the 12<sup>th</sup> week after discharge:  $t = 5.394$ ,  $P < 0.01$ ). (2) The compliance at the 12<sup>th</sup> week post-discharge significantly decreased compare with that at the end of 4 weeks after discharge in both groups (the intervention:  $t=2.545$ ,  $P < 0.05$ ; the control:  $t=3.432$ ,  $P < 0.01$ ).

**Conclusion:** With the extension of discharge time, the compliance with discharge recommendation had a downward trend in stroke patients. The combined intervention was effective in promoting patient compliance than the single regular care, but non-effective in changing a downward trend with the extension of discharge time.

Supported by the medical research foundation of Chongqing (surface project, 2010-2-430).

4 JUNE 2011 (11:15 - 11:30)

Lecture Theatre I

**CONCURRENT SESSION IV: Chronic Disease Prevention and Care (II)****CS23 Self-efficacy, Medication Adherence and Quality of Life among People Living with HIV/AIDS in Hunan Province, China**L. HUANG<sup>1</sup>, X. LI<sup>2</sup>, L. LI<sup>2</sup>, Y. ZHANG<sup>2</sup>, H. LI<sup>2</sup>, H. WANG<sup>2</sup><sup>1</sup> Health School of Changsha, Changsha, Hunan, China<sup>2</sup> School of Nursing, Central South University, Changsha, Hunan, China

**Aims and Objectives:** To describe the levels of self-efficacy, medication adherence and quality of life; to examine the relationships among self-efficacy, medication adherence and quality of life among the PLWHA in Hunan of China.

**Background:** Self-efficacy is recognized as an important factor associated with health behavior and medication adherence in people living with HIV/AIDS (PLWHA). But the concept of self-efficacy has not been widely adopted into HIV/AIDS care in China. Little is known about the relationship between self-efficacy and quality of life in PLWHA.

**Design:** Cross-sectional survey.

**Methods:** One hundred and ninety-nine patients were interviewed using the translated HIV Self-efficacy Questionnaire (HIV-SE) and the questionnaire of Quality of Life for Chinese HIV-infected. Medication adherence was measured through direct questioning of pill taking behavior.

**Results:** The level of self-efficacy for disease management among Chinese PLWHA was moderate, with a mean score of 6.61 ranging from 2.48 to 10.00. The HIV-SE total score and mean scores of four subscales were significantly lower than those reported in a similar study from the US. Among 199 patients, 157 (78.9%) reported the level of medication adherence was higher than 90% of the prescribed doses, while 42 (21.1%) reported level of medication adherence was equal or lower than 90% of that. The scores of dimensions of quality of life ranged from 33.1 to 81.4, with 6 dimensions lower than 60. Stepwise regression analysis showed that self-efficacy, medication adherence, drug use were significant predictors to quality of life.

**Conclusion:** The level of self-efficacy is moderate and quality of life is low in Chinese PLWHA. Self-efficacy was significantly associated with medication adherence. Self-efficacy, medication adherence, and injecting drug use were significant predictors of quality of life.

Relevance to clinical practice. Findings suggest that quality of life of PLWHA can be improved by interventions enhancing self-efficacy and medication adherence.

4 JUNE 2011 (11:30 - 11:45)

Lecture Theatre I

**CONCURRENT SESSION IV: Chronic Disease Prevention and Care (II)**

**CS24 Self-reported Waist Circumference for Assessing Cardiovascular Risk Factors and Overweight/Obesity in Hong Kong Chinese Children**

**N.P.T. CHAN<sup>1</sup>, K.C. CHOI<sup>2</sup>, E.A.S. NELSON<sup>3</sup>, R.Y.T. SUNG<sup>4</sup>, A.P.S. KONG<sup>5</sup>**

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**Significance of the problems:** In recent decades the prevalence of overweight/obesity among children and adolescents has become a public health concern worldwide. Overweight/obesity in children has been recognized as important cardiometabolic risk factors (CMRFs), along with its association with high blood pressure, dyslipidemia and hyperinsulinemia, insulin resistance, and impaired blood glucose tolerance. Waist circumference is often used as a surrogate marker of abdominal fat mass for identifying children with central obesity and cardiometabolic risk. Self-reported waist circumference (SRWC) is a simple, low cost and non-invasive assessment tool. It may be a useful screening tool to identify and monitor the prevalence of overweight/obesity in community settings or epidemiological research.

**Objectives of the study:** The objectives of this study were two-fold, (1) to validate the reliability of self-reported waist circumference against assessor measured waist circumference (MWC) and (2) to evaluate the diagnostic ability of SRWC for identifying (i) a clustering of CMRFs and (ii) overweight/obese status in Hong Kong Chinese children aged 6-18 years.

**Methods:** A cross-sectional study with cluster random sampling was conducted. A self-administrated questionnaire which included demographic data, anthropometric measures such as body weight, body height and waist circumference was given to children to bring home for completion. Children were asked to return the questionnaire and fast themselves for at least 8 hours on the day of the survey. Anthropometric measures, blood pressure were taken by trained research staff. Fasting blood samples were collected for measurement of plasma glucose, total cholesterol, triglyceride, high-density lipoprotein cholesterol, low-density lipoprotein cholesterol.

**Results:** A total of 515 boys and 711 girls entered data analysis. The reliability of SRWC was assessed by ICC ranged from 0.77 to 0.87. The gender-specific SRWC values exhibited moderately high to high sensitivity and specificity and the area under the receiver operating characteristics (AUC-ROCs) ranged from acceptable to excellent (from 0.76 to 0.84) in identifying children with a clustering of CMRFs and overweight/obesity.

**Conclusions:** SRWC reliably detects MWC and could be an effective screening tool for identifying children with a clustering of CMRFs and overweight/obesity status in Hong Kong Chinese children.

4 JUNE 2011 (11:45 - 12:00)

Lecture Theatre I

**CONCURRENT SESSION IV: Chronic Disease Prevention and Care (II)**

**CS25 Promoting Smoking Cessation in the Community: Results of a Quit to Win Contest**

**S.S.C. CHAN<sup>1</sup>, D.Y.P. LEUNG<sup>1</sup>, D.C.N. WONG<sup>1</sup>, V. LAI<sup>2</sup>, C.O.B. LAM<sup>1</sup>, T.H. LAM<sup>3</sup>**

<sup>1</sup> School of Nursing, The University of Hong Kong, HKSAR

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<sup>3</sup> School of Public Health, The University of Hong Kong, HKSAR

**Significance:** The Quit to Win Contest has successfully promoted smoking cessation among smokers with low socio-economic status, who have otherwise not pursued help in the Hong Kong community.

**Objectives:** To examine the impact of the Quit to Win Contest in promoting smoking cessation in the community, and identify factors to predict successful quitting at 12-month follow-up.

**Methods:** From 30 May to 15 July 2009, Hong Kong Council on Smoking and Health launched a Quit to Win Contest to encourage smokers to quit smoking in the community. Three prizes of \$10,000 gift voucher were awarded to contestants who quit smoking successfully at 6-month follow up, and another three prizes (gift package) were awarded to contestants who quit smoking successfully at 12-month follow up. A total of 1,119 daily smokers were recruited in the shopping malls of 16 districts in Hong Kong. All contestants received a self-help smoking cessation booklet and were randomized to receive either brief telephone counseling from a nurse counselor or 8 SMS quitting messages. Contestants were followed-up at 2, 6 and 12-month via telephone to assess their smoking status.

**Results:** Among the 1,119 contestants, 82% were male, 38% aged 16-50 and 78% had a monthly family income < \$20,000, and 32.7% were heavy smokers (with HSI score >= 4). Most started smoking < 20 years old (72%), while two-thirds had low nicotine dependency (67%). At 12-month follow up, the self-reported quit rate (7-day point prevalence) reached 19%. By generalized estimating equation model, contestants were likely to quit successfully if they had a lower nicotine dependency level, committed to quit smoking at the point of joining the contest, stated successful quitting is important to them, had a higher level of confidence to quit, and reported a lower level of difficulty in quitting smoking.

**Conclusion:** The Quit to Win Contest has successfully reached many smokers and promoted smoking cessation in the community in Hong Kong. Although the contest has achieved a satisfactory quit rate among the smokers, comparable to other smoking cessation counseling services, interventions to reduce nicotine dependence, boost confidence, and to reduce difficulty in quitting smoking can enhance the quit rate.

4 JUNE 2011 (10:30 - 10:45)

Lecture Theatre 2

**CONCURRENT SESSION V: Family and Community Health**

**CS26 An Empowerment Intervention for Abused Women**

**B. PARKER**

School of Nursing, University of Virginia, U.S.A.

Abuse of women is a significant problem influencing the health of women and families. The empowerment intervention has been developed and tested in numerous studies in the US and Hong Kong. The intervention uses a brochure to ensure standardized delivery by different nurses, while allowing for the intervention to be tailored to the needs of each woman. The brochures includes basic information about IPV (the cycle of violence), warning signs of increased danger based on a tested danger assessment instrument (Campbell et al., 2003a), women's options (leaving, staying and developing a safety plan, using the criminal justice system to obtain protective orders and/or press criminal charges), basic elements of safety planning, and local resources (shelter hotlines, criminal justice resources, health care contacts.). This format allows the nurse to quickly assess a woman's level of knowledge and to provide the particular information she most needs. Women are asked if they can safely take the brochure home (this can often be done by providing the brochure with a packet of other women's health information; see Human Subjects for more information). If not, they are encouraged to spend as much time reading it as necessary and told they can call to discuss the information further. It has been tested in a quasi-experimental design and women in the intervention reported significantly less violence and more safety behaviors one year after receiving the intervention

This presentation will describe the intervention and results of studies using the intervention in pre-natal clinics and in a pre-natal nursing home intervention study.

4 JUNE 2011 (10:45 - 11:00)

Lecture Theatre 2

**CONCURRENT SESSION V: Family and Community Health**

**CS27 Redefining the Core of Nursing: Concept Analysis for Health Promotion**

**C.K.Y. LAI, D.S.K. CHEUNG, R.Y.C. KWAN**

Graduate School of Health Science, Management and Pedagogy, Southwestern University, Philippines

**Significance and Objectives:** Nursing sciences provide a framework for nurses to build innovative nursing care not only in acute care, but also in the family and community nursing setting. Hall's Concept of the Core of Nursing must be redefined to extract its significance in the field of health promotion.

**Methods:** Hall's concept of Core was analyzed thoroughly to understand its definition, use in nursing, antecedents and consequences. Specifically, this concept analysis focused on Hall's description of the Core as "nurses becoming mirrors and sound boards of the clients." The result of the concept analysis was utilized to create a Core Health Promotion Program for both ill and well clients.

**Results:** The Core of nursing according to Hall focuses on nurturing the client through an interpersonal relationship between nurse and patients through the therapeutic use of self as a method. Its use in nursing includes allowing patients to reflect on their self-concept as related to their quality of life, their health values, beliefs and practices, health literacy and their active role in times of illness. The antecedents to the Core include therapeutic use of self of the nurses to ensure that they will be unbiased and nonjudgmental towards the reflective activities of the clients; must be willing listeners; trained in therapeutic communication techniques; and role models of health and wellness. The consequences of the Core of nursing include a nurturing nurse-patient relationship, better concept of self, health, wellness, and illness, and increased health literacy.

**Conclusion:** The concept analysis of the Core concept provided a solid foundation for innovative health promotion nursing practices and care due to its focus on the therapeutic use of self of the clients. The Core statement of "nurses as mirrors" provided a starting point for the creation of health promotion reflective therapies through analogy of the science of mirrors to assist the client to reflect on his health values, beliefs and practices, his perception of illness & disease and how he can overcome.

4 JUNE 2011 (11:00 - 11:15)

Lecture Theatre 2

**CONCURRENT SESSION V: Family and Community Health**

**CS28 A Proposed Project to Revisit the Items on the Safety Behavior Checklist: Intimate Partner Violence and the Relevance of Culture**

**M.F. SANDOVAL**

Graduate School of Arts and Sciences, University of Virginia, U.S.A.

**Significance:** Intimate partner violence (IPV) is a significant public health problem and is associated with a number of adverse health conditions including PTSD, sexually transmitted infections, drug and alcohol abuse, gastrointestinal illness, and HIV. Although the adverse conditions associated with IPV have been documented in the literature and an expert-developed checklist has been demonstrated to increase safety behaviors of women who have experienced IPV, few studies have explored the perceived safety-promoting behaviors of women who have experienced IPV from a survivor and provider perspective within specific cultures. Additionally, the current Safety Behavior Checklist (SBC) does not include items to address behaviors that women use to decrease injury from non-consensual sexual activities.

**Objectives:** The purpose of the proposed qualitative study is to explore the safety-promoting behaviors of Mexican-American women who have experienced abuse by an intimate partner as perceived by these women and the providers of service to these women. The Agency for Healthcare Research and Quality (AHRQ) Taskforce has proposed that to meet the specific healthcare needs of communities, researchers must gather information from persons dwelling in that community.

**Methods:** Separate focus groups comprised of Mexican-American women who have experienced IPV and IPV service providers of these women will be conducted to obtain data to inform the checklist regarding additional items that may be needed. As a second phase, an item analysis will be performed to assess the reliability of items on the checklist.

**Results:** The proposed study will provide the framework for the ongoing development of a checklist with added culturally relevant items that are indicators of safety. The qualitative data will set the foundation for a revised version of the Safety Behavior Checklist specific to Mexican-American women.

**Conclusion:** This paper outlines the background, significance, methods, and details of the research proposal aimed to develop a culturally-tailored Safety Behavior Checklist for women who have experienced intimate partner violence.

4 JUNE 2011 (11:15 - 11:30)

Lecture Theatre 2

**CONCURRENT SESSION V: Family and Community Health**

**CS29 Cross-cultural Understanding of Depression among Women Experiencing Intimate Partner Violence**

**J.Y.H WONG<sup>1</sup>, A.TIWARI<sup>1</sup>, D.Y.T.FONG<sup>1</sup>, C.H. CHANG<sup>2</sup>, L. BILLOCK<sup>3</sup>**

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<sup>3</sup> School of Nursing, University of Virginia, U.S.A

**Significance:** Intimate partner violence (IPV) is a global issue and depression is consistently found to be a common mental health problem of abused women. However, limited studies have addressed depression of abused women across different cultures.

**Objectives:** This review article examines the existing literature of studying depression and IPV by comparing and contrasting the family dynamics, coping of IPV, conception and expression of depression and help seeking behaviors of depression among women in China, Japan, India, Italy and the United States.

**Results:** This review found that cultural factors such as the responsibility of maintaining family harmony, protecting the name of family, sustaining the wife's role within the family, interaction with parents and parents-in-law, religious affiliation, social perception of extra-marital affairs and avoidance of deviating from social norms may increase the vulnerability of abused women or hinder their personal resources. Also, these cultural factors may shape the way that abused women cope with IPV. Nevertheless, our findings reveal that culture does not necessary cause maladaptive coping in abused women. Moreover, depression, being a maladaptive coping, is found to be expressed differently across cultures. For example, somatization exists in different cultures, but it is especially dominant in Asian countries. Also, cultural variance was found in somatic symptoms. The specific diverse somatic symptoms are pressure on the chest in Chinese, sexual and menstrual symptoms in American, fatigue and nausea in Japan and numbness and tingling in India. Given the possible association of depression and somatization, omitting to assess for somatization when assessing depression in abused women may affect the validity and generalizability of the results. Also, help seeking behaviors of depressed women are found to be lower in Asian countries because depression is the social stigma attached to psychiatric illness.

**Conclusion:** This review arouses the awareness and sensitivity to cultural issues, which are fundamental elements for successful assessments and interventions for abused women with depression. It also recommends research scholars and mental health practitioners to develop cultural specific strategies for treating depression in abused women.

**Acknowledgment:** RGC-Fulbright Hong Kong Dissertation Research Program (affiliation with University of Virginia, School of Nursing)

4 JUNE 2011 (11:30 - 11:45)

Lecture Theatre 2

**CONCURRENT SESSION V: Family and Community Health**

**CS30 A Follow-up study of the Short-term Daily-function Recovery and Rehabilitation Behaviors of Patients Undergone Lumbar Spine Surgery**

X. GENG<sup>1</sup>, W. ZHU<sup>2</sup>, R. XU<sup>2</sup>, C. SUN<sup>2</sup>

<sup>1</sup> Peking University School of Nursing

<sup>2</sup> Orthopedics Department of Peking University Third Hospital

**Significance** Lumbar spine surgery is an effective method to treat severe degenerative diseases of the lumbar spine. Based on literature review, rehabilitation program has been demonstrated effective in pain control. However, few researches of patients' rehabilitation behaviors have been reported.

**Objectives:** To investigate the short-term rehabilitation behaviors and the recovery of daily-functions of patients undergone lumbar spine surgery.

**Methods:** It is a prospective cohort study. All the patients who meet the inclusion criteria are recruited from the same spinal surgery ward. The baseline data are collected before surgery, the follow-up data are collected one month after the surgery which include "symptom analysis", "daily-function analysis" and "rehabilitation behaviors analysis".

**Results:** 191 patients are recruited in the study. (1) At one month after the operation, patients have a remarkable progress in daily-function recovery generally ( $p < 0.05$ ) compared to pre-operation. However, it is weaker in "taking shower", "bending back" and "raising and taking things" ( $p < 0.05$ ); (2) At one month post-operation, 82.3% patients have been doing "ankle-pump" exercise every day, 61.4% of whom are doing it in an accurate way; 90.1% patients have been doing "straight leg raising" daily, with a 61.0% accuracy rate; 74.3% patients have been practicing exercise of back muscle daily, with the "five-point support" 97.9%, the "flying swallow type" 23.9%, and the accuracy rates are 62.6%, 38.2% separately.

**Conclusion** Patients' daily-function recovery is satisfactory overall, and more help and advice of certain functions should be given to patients. The compliance rates of rehabilitation behaviors are good generally. However, the exercise to enhance the strength of back muscle is relatively weak and the accuracy rates are not well satisfied. It implicates that more post-operation education should focus on "Why to do it" to increase the compliance rate and "How to do it right" to enhance the accuracy rate.

4 JUNE 2011 (11:45 - 12:00)

Lecture Theatre 2

**CONCURRENT SESSION V: Family and Community Health**

**CS31 The Differential Effects of Intimate Terrorism and Situational Couple Violence on the Mental Health of Abused Chinese Women**

A. TIWARI<sup>1</sup>, E.K.L. CHAN<sup>2</sup>, D.Y.T. FONG<sup>1</sup>, D.TANG<sup>1</sup>, E.C.W. YAN<sup>2</sup>, G. LAM<sup>1</sup>

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<sup>3</sup> Po Leung Kuk, HKSAR

**Significance:** Intimate partner violence (IPV) is a serious prevalent public health problem with many negative consequences that incur human and financial costs. Previous research has generally treated IPV as a single phenomenon and failed to recognize the differential effects of the types of IPV on victim's health. Differentiating IPV by types and health effects is necessary to enhance early detection and timely intervention.

**Objective:** To categorize types of IPV and effects on mental health in Chinese women survivors of IPV based on Johnson's typology of domestic violence.

**Methods:** A prospective, mixed method design was used to triangulate qualitative and quantitative data in order to identify types of IPV and their mental health effects among community-dwelling and shelter Chinese women, aged 18 or above, who were screened positive for IPV in the past 12 months. IPV was assessed using the Chinese Abuse Assessment Screen (AAS) and Revised Conflict Tactics Scales (CTS2). Controlling behaviors were measured using the Revised Controlling Behaviors Scale (CBS-R). Depressive symptoms were assessed using the Chinese Beck Depression Inventory version II (BDI-II). Post-traumatic Stress Disorder (PTSD) symptoms were assessed using the Chinese PTSD Checklist Civilian Version (PCL). Individual, in-depth, semi-structured interviews were conducted to elicit the women's experiences of IPV, use of controlling behaviors in abusive intimate relationships, and their responses to IPV.

**Results:** Based on the preliminary analysis of qualitative and quantitative data collected from 98 women (64 shelter, 34 community), categories of Intimate Terrorism (IT) and Situational Couple Violence (SCV) were identified in 43 and 49 of the women, respectively. Among shelter residents, 52.5% and 47.6% were identified as IT and SCV survivors, respectively. In the community sample, 36.4% and 63.6% were identified as IT and SCV survivors, respectively. More IT survivors reported sexual intimate abuse than SCV survivors (55.8% vs 14.3%,  $p < .001$ ) as well as being afraid of their intimate partners (83.7% vs 49%,  $p < .001$ ). Significantly more controlling behaviors (economic, threatening, intimidating, emotional, isolating, using children) were reported by IT survivors than SCV survivors ( $p < .001$ ) and a pattern of coercive control was also confirmed by the qualitative data. Significantly higher scores in depressive and PTSD symptoms were reported by IT survivors compared with SCV survivors (mean difference = 20.9 and 23.7, respectively;  $p < .001$ ).

**Conclusion:** This is the first prospective, mixed methods study to differentiate types of IPV based on the use of controlling behaviors according to Johnson's typology of domestic violence. The differential effects of IT and SCV on the mental health of Chinese women survivors were clearly evident.

4 JUNE 2011 (10:30 - 11:00)

Lecture Theatre 4

**CONCURRENT SESSION VI: Doctoral Students' Presentations**

**CS32 Advanced Practice Nursing in Hong Kong**

S.L. NG, E.M.K. TO, I.C.Y. FU, A.Y.K. LAI, V.S.F. LAM, C.M.M. LAU, E.W.S. LO, N.F. SHUM, C.Y.S. YUEN, A.F.Y. TIWARI  
School of Nursing, The University of Hong Kong, HKSAR

**Background:** With the increasing complexity in health care services, advanced nursing practice has been strongly promoted globally to meet the high demands of patient care and the constantly changing clinical environment. In Hong Kong, Nurse Specialist (NS) was first introduced in 1994 for provision of advanced nursing practices in different specialty areas such as neonatal intensive care unit, renal unit, etc. After the system reform of Hospital Authority in 2002, nursing structure was further revised. Advanced Practice Nurses (APN) began to replace NS, and more experienced nurses have been promoted and designated to work in various clinical settings with diverse job natures.

**Aims:** This presentation aims at: (1) reviewing the development of advanced practice nursing; and (2) discussing the roles and responsibilities, and professional development of APNs in Hong Kong.

**Discussion:** The promotion of experienced nurses to APNs does not only help raising the professional status locally, but also allowing more autonomy for these highly specialized practitioners to contribute their expertise knowledge and skills towards improving the quality of nursing services. There are seven core competencies an APN should be constantly practicing in order to be qualified such as direct clinical practice, expert coaching and advice, and research, etc. To be able to achieve these core competencies, the role and responsibilities of an APN must be clearly defined and laid down. The role development of APN undergoes three phrases, which can be influenced by certain environmental elements such as health policy, marketing and stakeholders. Despite APN has been introduced for almost ten years, local development is in its second phase and its role remains unclear. There are role confusions and job duplications among APNs and other nursing positions, and standardization of graduate education of APNs is yet to be developed.

**Conclusion:** In the essence of professionalism and to be able to provide high quality nursing services to the community, there is a need to clearly define the roles of APN, establish core competencies and enhance education. Setting up of APN registration or licensure should also be considered to help enhancing the APN role functioning and prepare them in higher academic level for future advancement of the nursing profession.

4 JUNE 2011 (11:00 - 11:15)

Lecture Theatre 4

**CONCURRENT SESSION VI: Doctoral Students' Presentations**

**CS33 Professional Breastfeeding Support Intervention to Increase the Exclusivity and Duration of Breastfeeding in First-time Mothers**

I. FU, D.Y.T. FONG, W.H.E. HUI-CHOI, M. TARRANT  
School of Nursing, The University of Hong Kong, HKSAR

**Background:** Breast milk is considered the most natural and complete nutrition for infants. The World Health Organization recommends mothers to exclusively breastfeed their babies up to 6 months of age to optimize its immediate and long-term health benefits. More than 70% of mothers initiate breastfeeding in Hong Kong, however most of them stop breastfeeding within the first two months postpartum and among those who continue, only 13% exclusively breastfeed their babies for six months. The aim of this study is to determine whether an individualized professional support intervention in the early postpartum period improves the exclusivity and duration of breastfeeding.

**Methods:** Using a cluster randomized controlled trial study design this study aims to recruit approximately 700 mother-infant pairs from the postnatal units of three local public hospitals. Participants will be assigned to one of three treatment groups: usual postnatal care, in-hospital professional support, or telephone support. The in-hospital intervention consists of three 30-minute one-to-one breastfeeding counseling sessions and the telephone intervention provides weekly breastfeeding counseling and support up to 4 weeks postpartum.

**Results:** The prevalence of exclusive and any breastfeeding will be compared at 4, 8 and 12 weeks postpartum and the overall duration of exclusive and any breastfeeding will also be assessed.

**Conclusion:** This is the first study of a professional breastfeeding support intervention in Hong Kong. The high breastfeeding initiation rate and early cessation rate in mothers strongly indicates a need for effective intervention strategies to be developed by health care professionals that help improve breastfeeding exclusivity and duration and ultimately infant health in Hong Kong.

**Acknowledgement:** The study is supported by the Health and Health Services Research Fund (HHSRF# 07080881), Food and Health Bureau, Hong Kong SAR Government.



4 JUNE 2011 (11:15 - 11:30)

Lecture Theatre 4

**CONCURRENT SESSION VI: Doctoral Students' Presentations****CS34 Effectiveness of Nurse Led Telephone-based Intervention for Chinese Caregivers of Colorectal Cancer Patients: A Pilot Study**N.F. SHUM<sup>1</sup>, Y.L. LUI<sup>1</sup>, W.L. LAW<sup>1</sup>, D.Y.T. FONG<sup>2</sup><sup>1</sup> Department of Surgery, The University of Hong Kong, HKSAR<sup>2</sup> School of Nursing, The University of Hong Kong, HKSAR

**Background:** Colorectal malignancy is the second most common cancer in Hong Kong. According to Hong Kong Cancer Registry, there were 4018 new cases and 1628 deaths in 2008 and the trend is still rising. Colorectal cancer diagnosis and treatment affect both the patients and the entire family or their significant others. Burden of caregivers has found to be related to care of patients, and the negative feeling may increase their anxiety and depression as well as worsen their quality of life. Intervention programs for the caregivers had been proven effective in western countries to improve the care-burden and quality of life. However, there is lacking of intervention program for Colorectal Chinese caregivers that is culturally acceptable in Hong Kong.

**Objectives:** This study aimed to: (1) test the feasibility of a telephone intervention; (2) assess the appropriateness of measurement tools; (2) gather information necessary for planning a randomized, controlled study to properly assess the efficacy of a telephone nurse-led intervention.

**Methods:** A pilot study was conducted by convenient sampling. Six Chinese adult caregivers of newly diagnosed colorectal cancer patients were recruited in Queen Mary Hospital. Five structured telephone calls from the Nurse interventionist on bi-weekly intervals with psychosocial educational support were given to the participants. They were interviewed at 3 time points: pre-intervention, 4 weeks and 10 weeks after intervention. Outcome data were collected by using three established instruments.

**Results:** From November 2010 to February 2011, 6 patients (3 male and 3 female) at the median age of 60.5 years were recruited. Caregivers were found to have psychological, physical and social domain problems. They experienced different levels of stress and burden due to the handling of caregiving tasks related problems. The telephone intervention is useful and helpful to the caregivers except five telephone contacts were overly intense and one of the measurement tool was deemed to be inappropriate. Subsequent modifications were made with data and information based on the pilot results.

**Conclusion:** Nurse led telephone intervention is feasible to support the caregivers and reduce their stress and burden of care. A randomized controlled trial study will be plan ahead for the proper assessment of the efficacy of telephone nurse intervention.

4 JUNE 2011 (11:30 - 11:45)

Lecture Theatre 4

**CONCURRENT SESSION VI: Doctoral Students' Presentations****CS35 Efficacy of an Extended Education Programme for Improving Adherence to Continuous Positive Airway Pressure in Patients with Obstructive Sleep Apnea**A.Y.K. LAI<sup>1,2</sup>, M.S.M. IP<sup>1</sup>, J.C.M. LAM<sup>1</sup>, D.P. SVIKIS<sup>3</sup>, D.Y.T. FONG<sup>2</sup><sup>1</sup> Department of Medicine, Queen Mary Hospital, The University of Hong Kong, HKSAR<sup>2</sup> School of Nursing, The University of Hong Kong, H K SAR<sup>3</sup> Department of Psychology, Psychiatry, and Obstetrics/Gynecology, Virginia Commonwealth University, Virginia, U.S.A.

**Significance:** Adequate adherence to continuous positive airway pressure (CPAP) treatment for patients with obstructive sleep apnea (OSA) is essential to alleviate adverse health-related consequences and cost. Yet, adherence is often unsatisfactory. Effective CPAP education programme is necessary to enhance CPAP acceptance and adherence

**Objective:** To improve adherence to CPAP treatment in subjects with OSA, using brief motivational interviewing and social cognitive theory-based intervention.

**Methods:** A randomized controlled study of extended versus standard CPAP education and support (EE vs SE), was conducted in a Hong Kong university teaching hospital. Subjects diagnosed of OSA with apnea hypopnea index  $\geq 15$  were recruited. The SE group received patient information pamphlets and advice on CPAP use, while the EE group received an additional 45 minutes extended education session on CPAP use including video and brief motivational interviewing, as well as 10 minutes telephone follow-up. The primary outcome was the number of day of CPAP use (at least 4 hours per night) was assessed at 7 and 28 days. The Epworth Sleepiness Scale (ESS) was also taken at 28 days.

**Results:** 30 eligible subjects (28 men) with OSA aged from 33 to 74 years were recruited in this preliminary analysis. At 7 days, the average CPAP use was 3 (0, 6) nights versus 6 (5, 7) nights in the SE (n=14) and EE (n=16) groups, respectively ( $p=0.025$ ). At 28 days, it was 9.5 (0, 22) nights versus 22 (17, 27) nights in these groups, respectively ( $p=0.025$ ). There was no significant difference in ESS between the two groups ( $p=0.224$ ).

**Conclusions:** The extended CPAP education and support resulted in better acceptance and adherence of CPAP treatment in subjects with OSA in this preliminary analysis.

## ACUTE-CARE NURSING

- PS1 Recognition Discrepancies about the Care Needs of Emergency Department Patients from the Perspectives of Nursing Staff Members, Patients and Family Members  
**Hui Chi CHEN**<sup>1,2</sup>, Shu Ying CHUNG<sup>1</sup>  
<sup>1</sup> Department of Nursing, Central Taiwan University of Science and Technology, Taichung, Taiwan; <sup>2</sup> Department of Nursing, Tali Jen-Ai Hospital, Taichung, Taiwan
- PS2 Factors Predicting Korean Nurses' Safety Awareness and their Attitudes towards Accountability in Communication  
**Ki Kyong KIM**<sup>1</sup>, Mal Soon SONG<sup>2</sup>, Hea Kung HUR<sup>1</sup>, Su Kyoung CHUNG<sup>3</sup>, So Young YOON<sup>4</sup>, Jee Eun BACK<sup>5</sup>  
<sup>1</sup> Department of Nursing, Wonju College of Medicine, Yonsei University, Korea; <sup>2</sup> Division of Nursing, Gangnam Severance Hospital, Yonsei University Health System, Korea; <sup>3</sup> Department of Nursing, College of Health and Welfare, Woosong University, Korea; <sup>4</sup> Division of Nursing, Gangnam Severance Hospital, Yonsei University Health System, Korea; <sup>5</sup> Wonju Christian Hospital, Korea
- PS3 Explore the Peranalytic Problem of Blood Specimen in ICU  
**Wei-Chun SHIH**, Yu-Chen TUNG, Shu-Hui CHANG, Chia-Tzu CHANG  
Department of Nursing, China Medical University Hospital, Taiwan
- PS4 Effect of Using Computer Assisted Instruction on Injection Learning  
**Malinee BOONKERD**, Aornmira BOONPRADIT  
Boromarajonani College of Nursing, Praputhabat, Thailand
- PS5 Discharge Plan Compliance among Post-operative Patients at Selected Tertiary Government Hospitals  
Maridith AFUANG, **Michael LEOCADIO**, Roselle P. Del CARMEN, Keith Franchesca V. DELA, Normie Rose Anne C. DIAZ, Roldan Jayson K. ESPINOSA, Jerome D.P. FERRER, Luanne S. LAO, Giovanni S. TICAR  
Research Center, Manila Doctors College, Philippines
- PS6 Pagdikita (The Dictation): The Use of Herbal Medicines in Fever Management Practices of Mothers in guna, Philippines  
**Michael C. Leocadio**, Alrajii C. JABAIL, Jenylyn A. RULL, Louise Anne D. SANCHEZ, Rica Gertrude T. SAULER, Apple Mae A. TAN, Jopheth N. TAPISPISAN  
Research Center, Manila Doctors College, Philippines
- PS7 Effectiveness of Nipple Stimulation on Labor and Delivery among Mothers at Selected Lying-in Clinic  
**Marion Jake A. ALENTAJAN**, Marken Jeffrey G. AYES, Charlon T. BENOZA, Jennell BUENAFLOR, Cherrylyn Mary T. CADIZ, Duke Maverick S. CARUYAN, Michael C. LEOCADIO  
Research Center, Manila Doctors College, Philippines
- PS8 Advanced Nursing Practice in Community Care: Enhancing cost effective & managed care in mobile chest drain patients  
**C.K. CHIM**<sup>1</sup>, K.L. CHOO<sup>2</sup>, Sammei TAM<sup>1</sup>, K.K. WONG<sup>2</sup>  
<sup>1</sup> Community Outreach Service Team, North District Hospital, HKSAR; <sup>2</sup> Department of Medicine, North District Hospital, HKSAR
- PS9 Critical Care Nurses' Experience of Bereavement Care in an Intensive Care Unit in Hong Kong  
**Y.C. WONG**<sup>1</sup>, W.P. NG<sup>1</sup>, W.Y. CHAN<sup>1</sup>, All ICU staff of United Christian Hospital<sup>1</sup>, J. MORRISSEY<sup>2</sup>  
<sup>1</sup> Intensive Care Unit, United Christian Hospital, HKSAR; <sup>2</sup> The Nethersole School of Nursing, The Chinese University of Hong Kong, HKSAR
- PS10 The Bereaved Family Members' Experience of Bereavement Care in an Intensive Care Unit in Hong Kong  
**Y.C. WONG**<sup>1</sup>, W.P. NG<sup>1</sup>, W.Y. CHAN<sup>1</sup>, J. MORRISSEY<sup>2</sup>  
<sup>1</sup> Intensive Care Unit, United Christian Hospital, HKSAR; <sup>2</sup> The Nethersole School of Nursing, The Chinese University of Hong Kong, HKSAR
- PS11 The Nursing Care Plan of Head of Bed for Mechanically Ventilated Patient with Nursing Informatics  
**Y.C. WONG**  
Intensive Care Unit, United Christian Hospital, HKSAR
- PS12 The Exploratory Study for Implementing Oral Care to Reduce VAP Incident Rate  
**Shih-Yi CHAN**  
Surgical intensive care center, Changhua Christian Hospital, Taiwan
- PS13 Study on The Preparedness Status of Disaster Medical Rescue in Urban Community Health Service Centers of Jilin Province  
Libin AN, Wentao LI, **Huiru YIN**  
Nursing, School of Nursing, Jilin University, China

- PS14 Investigation and Tactics Research on Current Status of CPR Knowledge and Skills of CHD Patients' Family Members  
Wentao LI, Xin YIN, **Li SUN**  
School of Nursing, Jilin University, China

## CHRONIC DISEASE PREVENTION AND CARE

- PS15 Influence of Stroke History on Physical Functions of the Middle-aged and Elderly Population in Taiwan  
**Szu-Han WANG**<sup>1</sup>, Jiun-Yi WANG<sup>2</sup>  
<sup>1</sup> Nursing Department, Changhua Christian Hospital, Taiwan; <sup>2</sup> Department of Healthcare Administration, Asia University, Taiwan
- PS16 Determining Strategies to Reduce Postoperative Incision Infections by Using the HFMEA  
**Chia-Chan KAO**<sup>1</sup>, Tai-Hung CHAO<sup>2</sup>, Chun-Hsiang YEH<sup>3</sup>, Yi-Chun CHEN<sup>1</sup>  
<sup>1</sup> Healthcare Administration Department, I-Shou University, Taiwan; <sup>2</sup> Hospital Headquarters, Zuoying Armed Forces General Hospital, Taiwan; <sup>3</sup> Infection Control Section, Zuoying Armed Forces General Hospital, Taiwan
- PS17 Factors Associated with Fracture among Patients with Osteoporosis  
Sun Kim YOUNG, **Ja Yun CHOI**  
College of Nursing, Chonnam National University, Korea
- PS18 Effect of Cross-training Program in Respiratory Care Center  
**I-Na WU**, Yi-Tzu CHOU, Yu-Ting HUANG  
Department of Nursing, China Medical University Hospital, Taiwan
- PS19 Improve the Pulmonary Rehabilitation Exercise Training Implementation Rate in Respiratory Care Center  
**I-Na WU**, Yi-Tzu CHOU  
Department of Nursing, China Medical University Hospital, Taiwan
- PS20 Nurses' Difficulties and Needs in Communicating with Dementia Patients  
**Pei-Fang HSIEH**, Jing-Chih WANG, Hsiu-Fang HSIEH  
Department of Nursing, National Tainan Institute of Nursing, Taiwan
- PS21 Factors Influencing Competency of Nursing Instructions in Praboromrajchanok Institute, Thailand  
**Panomporn YONGTHONGMUKE**  
Saraburi Nursing College, Praboromrajchanok Institute, Thailand
- PS22 Effects of Massage and Music Therapy to the Biophysiological Processes of Clients with Hypertension  
**Ma. Lovella M. MONDERIN**  
De La Salle - Health Sciences Institute, Philippines
- PS23 Advocating Practices and Psychological Responses of HIV-AIDS Clients: Basis for a Patient-Care Advocacy Program  
**Czarina YANTO**, Joan LUGTI, Kristopher CALMA  
Global City Innovative College of Nursing, Philippines
- PS24 Lifestyle Management of Elderly People with Ischemic Heart Disease  
**Benjamas THAMCHAROENTRAKUL**, Kannika HANSOONGNOEN, Piromlak MESATTAYANAN, Ormusa THAMANITKIT, Kanyanat KERDCHUEN, Panassawee TRIRATTANAPIKUL, Viliporn RUNKAWATT, Siripensopa JANTHARASATAPORN, Nuanno SETTHAJAN, Pattira SUBSUNG  
Boromarajonani College of Nursing Nakhornratchasima, Thailand
- PS25 The Effect of Cognitive Therapy Program on Depression in Nursing Students  
**Prapas TANA**, Phongsakchat PAYAO  
Boromarajonani College of Nursing, Saraburi Thailand, Praboromrajchanok Institute of Health Workforce Development, Thailand
- PS26 A Survey of Health Care Services for Older Persons in Suphanburi Province  
**Supunee PEAWNALAW**, Wasana LUANGPITAK, Supawadee NOPPARUJJINDA, Suntree KHACHART, Tiwa MAHAPROM  
Boromarajonani College of Nursing Suphanburi, Boromarajonani College of Nursing Suphanburi
- PS27 The Relationships between Health Behaviors and Quality of Life in Elderly Taiwanese  
**Yi-Min HSU**  
Nursing Department, China Medical University Hospital, Taiwan

- PS28 The Effectiveness of School Screening for Adolescent Idiopathic Scoliosis in Reducing the Risk of Surgery  
**Y.Y.WAN<sup>1</sup>**, D.Y.T.FONG<sup>1</sup>, K.M.C. CHEUNG<sup>2</sup>, J.C.Y. CHENG<sup>3</sup>, T.P. LAM<sup>3</sup>, B.K.W. NG<sup>4</sup>, K.H. MAK<sup>5</sup>, K.D.K. LUK<sup>2</sup>  
<sup>1</sup> School of Nursing, The University of Hong Kong, HKSAR; <sup>2</sup> Department of Orthopaedics and Traumatology, The University of Hong Kong, HKSAR; <sup>3</sup> Department of Orthopaedics and Traumatology, The Chinese University of Hong Kong, HKSAR; <sup>4</sup> Department of Orthopaedics and Traumatology, Prince of Wales Hospital, HKSAR; <sup>5</sup> Department of Health, HKSAR
- PS29 The Social Context of Smoking Cessation in China: An Exploratory Interview Study  
**Jing-yu ZHANG<sup>1</sup>**, Sophia Siu-chee CHAN<sup>2</sup>, Daniel Yee-tak FONG<sup>2</sup>, Ruth E. MALONE<sup>3</sup>, Tai-hing LAM<sup>4</sup>  
<sup>1</sup> School of Nursing, Peking Union Medical College, Beijing, China; <sup>2</sup> School of Nursing, The University of Hong Kong, HKSAR; <sup>3</sup> Department of Social and Behavioral Sciences, University of California, San Francisco, U.S.A.; <sup>4</sup> Department of Community Medicine, The University of Hong Kong, HKSAR
- PS30 Can Health Literacy Change the Behavior of Exercise on Soon-to-be-aged and Older Patients with Type II Diabetes: A Systematic Review?  
Angela Yee Man LEUNG, **Michael Huen Sum LAM**, Sophia Siu Chee CHAN  
School of Nursing, The University of Hong Kong, HKSAR
- PS31 A Systematic Review on the Association between Smoking and HbA1c Level among Type II Diabetic Patients  
**Zoe S.F.WAN<sup>1</sup>**, Doris Y.P. LEUNG<sup>1</sup>, Kathryn C.B. TAN<sup>3</sup>, T.H. LAM<sup>2</sup>, Sophia S.C.C. CHAN<sup>1</sup>  
<sup>1</sup> School of Nursing, The University of Hong Kong, Hong Kong, HKSAR; <sup>2</sup> School of Public Health, The University of Hong Kong, Hong Kong, HKSAR; <sup>3</sup> Department of Medicine, The University of Hong Kong, Hong Kong, HKSAR
- PS32 A Family-based Intervention among Fathers Of Infants: A Qualitative Study  
**Catalina S.M. NG<sup>1</sup>**, Josephine P.L. YAU<sup>1</sup>, Doris Y.P. LEUNG<sup>1</sup>, Angela Y.M. LEUNG<sup>1</sup>, Daniel Y.T. FONG<sup>1</sup>, Karen EMMONS<sup>2</sup>, Tai-Hing LAM<sup>3</sup>, Sophia S.C. CHAN<sup>1</sup>  
<sup>1</sup> School of Nursing, The University of Hong Kong, HKSAR; <sup>2</sup> Harvard School of Public Health, U.S.A.; <sup>3</sup> School of Public Health, The University of Hong Kong, HKSAR
- PS33 An Exploration of Factors Influencing Compliance to Highly Active Anti-Retroviral Therapy (HAART) Among People Living With HIV/AIDS in Chiangmai, Thailand  
**Ruanjahn GANIGAH**, Suriya CHUTIGARN, Jandee MARASRI, Jarustanaput PLOYAPAPUS  
Boromarajonani College of Nursing, Chiangmai, Thailand
- PS34 Health-Promoting Behaviors in Thai Persons with Chronic Renal Failure  
**Polsingchan SARINYA**  
Boromarajonani College of Nursing Surin, Thailand
- PS35 Validation of the Chinese Health Literacy Scale: Using Item Response Theory  
**A.Y.M. LEUNG<sup>1</sup>**, S.S.C. CHNA<sup>1</sup>, M.K.T. CHEUNG<sup>1</sup>, F.H.W. CHAN<sup>2</sup>  
<sup>1</sup> School of Nursing, LKS Faculty of Medicine, The University of Hong Kong, HKSAR; <sup>2</sup> Hong Kong West Cluster, Hospital Authority, HKSAR

## FAMILY AND COMMUNITY HEALTH

- PS36 Social Recourses and Quality of Life of Filipino Older Adults in a Selected Community in the Philippines  
**Michael C. LEOCADIO**, Graciela Christina M. CLAUDIO, Angelica Beatrice P. DEROTAS, Jazel Anne Daphne DOMINGO, Fabegalie ESPIRITU, Kenneth Paul D. JAVIER, Jefferson Ray JIMENEZ  
Nursing, Manila Doctors College, Philippines
- PS37 Promote of Understanding and Participation in Community Health Development Project: Capacity Assessment of Tambon Ban On, Ngao District, Lampang Province  
Tookjit BHARATEE, Saisub SUDAWAN, **Wicha SUMITRA**, Sripattangkoon SIRIRATTANA, Phapho MATUSORN  
Boromarajonani College of Nursing, Nakhon Lampang, Thailand
- PS38 The Relationships among Emotional Quotient, Moral Quotient, and Learning and Study Strategies Inventory of First Year Nursing Students at Boromarajonani College of Nursing, Bangkok  
**Jintana PAIBOONTANANON**, Jitrada SRISARACARM  
Boromarajonani College of Nursing, Bangkok, Thailand

- PS39 Health Promotion Behaviors of Elementary Level Students in Nonthaburi, Thailand  
**Tararat DAUNGKHAE**, Pattana SATTAWATCHARAWANIJ, Plernta PROMBUASRI  
Boromarajonani College of Nursing Changwat Nonthaburi, Thailand
- PS40 Teenagers' Attitudes Toward Taking Care of the Elderly in Families at Phayao Province, Thailand  
**W. PANYACHAI<sup>1</sup>**, M. NAKASHIMA<sup>2</sup>  
<sup>1</sup> Boromrajonani College of Nursing, Phayao; <sup>2</sup> JICA, Thailand
- PS41 Sexual Values and Factors Related to Sexual Values of Teenagers in Phayao Province  
**J. KAEWJIBOON**, T. KAWILA  
Boromarajonani College of Nursing, Phayao, Thailand
- PS42 The Effects of Diet and Exercise Program on Community Residents with Metabolic Syndrome: An Example in Meinong District, Kaohsiung City  
**Li-Ling Chu<sup>1</sup>**, Yu-Hua Lin<sup>2</sup>  
<sup>1</sup> Postgraduate Programs in Management, I-Shou University; <sup>2</sup> Department of Nursing, I-Shou University
- PS43 Primary Health Care Leaders Appraisal and its Outcomes in Central Region of Thailand  
**Dusadee PONGSUMAL**  
Education Administration of Silpakorn University and Sirindhorn Public Health college, Suphunburi Province; Praboromarajchanok Institute, Ministry of Public Health, Thailand
- PS44 Psychometric Properties of the Chinese Version of the Health and Safety Executive's Management Standards Indicator Tool for School Health Executors in Taiwan  
**Chun-Mei CHENG**, Chia-Chan KAO  
Business Administration, I-Shou University, Taiwan
- PS45 Depression of elderly in Municipality Hua Thalee Muang District, Nakhon Ratchasima  
**Sriwan EMRATCH**, Junsuda SEELACATE, Patha SANGIAMNAIMUANG  
Boromarajonani College of Nursing Nakhon Ratchasima, Nakhon Ratchasima, Thailand
- PS46 Learning Problems and the Need for Enhancing the Nursing Program for Undergraduate Students of Boromarajonani Nakhornratchasima Nursing College, Affiliated with Praboromarajchanok Institute in the Boarder Provinces of Southern Thailand  
**Supisara SUWANCHAT**, Viliporn RUNKAWATT  
Department of Adults and Elderly, Boromarajonani College of Nursing, Nakhornratchasima, Thailand
- PS47 Steer, Adjustment and Emotional Intelligence among the First Year Nursing Students, Boromarajonani College of Nursing, Suphanburi  
**Prawida PHOTONG**, Supattra PHUMPHUANG, Soontaree KHACHAT  
Boromarajonani College of Nursing, Suphanburi, Thailand
- PS48 The Effectiveness of a Smoking Prevention Program among Students in Public School, Suphanburi  
S. Siritida, T. Jaruwan, **Lakana SIRATIRAKUL**, M. Yukon, Y. Sineeporn  
Boromarajonani College of Nursing, Suphanburi, Thailand
- PS49 Factors Related to the Decision of Receiving the HPV Vaccine of Women in Nakhonsawan Province, Thailand  
**Jiraporn SRIPIBOONBAT**  
Boromarajonani College of Nursing, Sawanpracharak Nakhonsawan, Thailand
- PS50 Health Promoting Model to Promote Parent-Child Relationships  
**Sumalee EAMSAMAI<sup>1</sup>**, Ratana MIHUANSIT<sup>2</sup>  
<sup>1</sup> Boromarajonani College of Nursing, Praputhabat, Thailand; <sup>2</sup> Health Promoting Hospital, Tambol Phukrang, Amphurs Phra Putthabat, Thailand
- PS51 The Relationship among Emotional Quotient, Ethics and Adversity Quotient of Nursing Students in Boromarajonani College of Nursing, Sawanpracharak Nakhonsawan  
**Pornwilai KLAYJUN**  
Boromarajonani College of Nursing, Sawanpracharak Nakhonsawa, Thailand
- PS52 The Situation of Banrai's Community Partnership for Developing Wat Sawang Ah-rom Child Development Center, Phitsanulok Province, Thailand  
**Supanat SUWANNAKIT**, Vannapa PRATHUMTONE, Adharawan CHANGPINIJ  
Boromarajonani College of Nursing, Buddhachinaraj, Phitsanulok, Thailand

- PS53 Relationships among the Personal Characteristics, Physical Activity and Quality of Life in Community-Dwelling Older Adults  
**Pei-Chi LIN<sup>1</sup>**, Chia-Chan KAO<sup>2</sup>, Hui-Man HUANG<sup>3</sup>  
<sup>1</sup> Department of Medical Education and Research, Taichung Hospital Department of Health, Taiwan; <sup>2</sup> Assistant Professor, Department of Healthcare Administration, I-Shou University, Taiwan; <sup>3</sup> Department of Nursing, Chang Jung Christian University, Taiwan
- PS54 Lived Experiences of Persons Who were Diagnosed with Sexually Transmitted Infection: A Phenomenological Study  
**E.C. SUMAGPAO**  
De La Salle Health Sciences Institute, College of Nursing and School of Midwifery, Dasmarinas Cavite Philippines, Philippines
- PS55 THE LUMINANCE OF CARING: THE LIFEWORLD OF SIGNIFICANT OTHERS OF PEOPLE WITH SCHIZOPHRENIA  
**Michael C. LEOCADIO**, Johanna Marie M. CABRERA, Karmina Erika B. PARCHEJO, Jely Ann M. RAMOS, Willeen Fatima H. SALVADOR, Nina Ricci P. SAMSON  
Manila Doctors College, Philippines
- PS56 A Souvenir from the Land of Experience: Meaning of Experiences of BSN Students in Community Immersion  
**Michael C. LEOCADIO**, Kevin Cloyd BRAGAS, John Paul Edward Menor BASIBAS, John Paul Tugado BARRIOS, George David BALINGASA, John Kaven Reyes NOVIO, Jericho Byron Ordanozo ACLAN  
Manila Doctors College, Philippines
- PS57 Surviving the Tempest: A Phenomenological Inquiry  
**Michael C. LEOCADIO**, Juanito BERNARDO, Hezel C. ADOYOGAN, Angeli Faye G. BUSILIG, Marichel Dawn L. CADAVOS, Rusanne Marie I. CASELA, Camille Bianca S. CEPE, Frezhel P. VASQUEZ, John Paul S. VILLEGAS  
Manila Doctors College, Philippines
- PS58 Personality Traits and Readiness to Quit among Hong Kong Chinese Smokers  
**D.Y.P. LEUNG<sup>1</sup>**, C.W. CHAN<sup>1</sup>, T.H. LAM<sup>2</sup>, S.S.C. CHAN<sup>1</sup>  
<sup>1</sup> School of Nursing, The University of Hong Kong, HKSAR; <sup>2</sup> School of Public Health, The University of Hong Kong, HKSAR
- PS59 Primary Prevention of Child Abuse Through a Community Based Model of Parents, Volunteers, and Professionals Collaboration  
**Agnes TIWARI<sup>1</sup>**, Helina YUK<sup>2</sup>, Polly PANG<sup>2</sup>, Felix YUEN<sup>1</sup>, Daniel Y.T. FONG<sup>1</sup>, Edward K.L. CHAN<sup>3</sup>  
<sup>1</sup> School of Nursing, The University of Hong Kong, HKSAR; <sup>2</sup> H.K.S.K.H. Lady MacLehose Centre, HKSAR; <sup>3</sup> Department of Social Work & Social Administration, The University of Hong Kong, HKSAR
- PS60 Who Are the Youth Smokers who Phoned the Youth Quitline? A Gender Comparison  
**D.C.N. WONG<sup>1</sup>**, S.S.C. CHAN<sup>1</sup>, D.Y.P. LEUNG<sup>1</sup>, A.Y.M. LEUNG<sup>1</sup>, D.Y.T. FONG<sup>1</sup>, D.O.B. LAM<sup>2</sup>, T.H. LAM<sup>3</sup>  
<sup>1</sup> School of Nursing, The University of Hong Kong, HKSAR; <sup>2</sup> Department of Social Work & Social Administration, The University of Hong Kong, HKSAR; <sup>3</sup> School of Public Health, The University of Hong Kong, HKSAR
- PS61 Psychological Responses and Coping Mechanisms of Sexually Abused Teenagers a Basis for Psychiatric Nursing Care  
**Jumar Talento UBALDE**  
College of Nursing, National University-Manila, Philippines
- PS62 Drug Use Behavior in Chronic Patient by Home Visit in Noontun Community Tambon Naimuang Amphure Muang Khonkaen Province  
**Apinya THAMMASAENG**  
Sirindhorn College of Public Health Khonkaen, Praboromarajchanok Institute for Health Workforce Development, Ministry of Public Health, Thailand
- PS63 Effect of Persistent Practice of Tai Chi on The Brain Function and Physical Function Improvement of The Elderly: A Randomized Controlled Trial in China  
**Jiao SUN**, Sasaki JUNKO, Ooki SJUICH  
School of Nursing, Jilin University, China
- PS64 Analysis on Behaviours of Family Member's Participation in Self-care of Patients with Heart Failure in Changchun City  
**Wentao LI**, Yuexia LI  
School of Nursing, Jilin University, China
- PS65 The Study on Evaluating The Coping Strategies of Autism Child's Parents with Applying F-COPES  
**Libin AN**, Wentao LI, Yunxiao BI  
School of Nursing, Jilin University, China

- PS66 Effects of Lavender on Autonomic Nervous System Activity and Mood State Changes  
**Thanradee JIRASINTHIPOK**, Winai SAYORWAN  
KMPHT Research Group, Kanchanabhisek Institute of Medical and Public Health Technology, Praboromarajchanok Institute, Ministry of Public Health, Thailand
- PS67 Effect of Integrated Learning Method with Family System toward on Learning Achievement, Attitude and Adaptation on Clinical Practice of Nursing Students, Boromarajonani College of Nursing, Surin, Thailand  
**Gallaya SORNKLA**  
Boromarajonani College of Nursing, Surin, Thailand
- PS68 Students' Experience of Good Student-Teacher Relationships at Clinical Practicum of a Japanese Four-Year Nursing College and Its Effect on Their Attitude Towards Nursing  
**S.YOSHIDA<sup>1</sup>**, K. KANDA<sup>2</sup>  
<sup>1</sup> Department of Advanced Clinical Nursing, Graduate School of Medicine, The University of Tokyo, Japan; <sup>2</sup> Department of Nursing Administration, Graduate School of Medicine, The University of Tokyo, Japan

## MATERNAL AND CHILD HEALTH

- PS69 An Investigation of Expectant Parents' Childbirth Expectations and the Related Factors  
**Xian ZHANG**, Hong LU  
Department of Maternal and Child Nursing, School of Nursing, Peking University, China
- PS70 Psychosocial Adjustment and Quality of Life of Children who Survive Hematopoietic Stem Cell Transplantation  
M. S. JEONG, **J.Y. CHOI**  
College of Nursing, Chonnam National University, Taiwan
- PS71 The Cooperation of Doctor and Nurse to Prevent Guide Wire Retention  
**Kwong Lik PUN**  
Nursing Service Division, Pamela Youde Nethersole Eastern Hospital, HKSAR
- PS72 Effects of Multi-media Instruction on Women's Childbirth Self-efficacy and Experience of Childbirth  
**Mei-Yueh CHANG<sup>1</sup>**, Chung-Hey CHEN<sup>2</sup>  
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