7th International GNPHN Conference

Building Resilience and Innovative Solutions: Amplifying Impact and Advancing Positive Global Public Health Change

July 28 - 30, 2025. Calgary, AB, Canada

Co-hosted by: UNIVERSITY OF CALGARY FACULTY OF NURSING | MOUNT ROYAL UNIVERSITY

CONFERENCE PROGRAMME

www.gnphn.com | #gnphnconf2025

Welcome from the Chairs

Welcome to the 7th International Global Network of Public Health Nursing (GNPHN) Conference, taking place from 28-30 July in the vibrant city of Calgary, Canada.

We are delighted that this conference brings together a diverse group of public health nursing professionals, researchers, and educators from across the globe to share insights, foster collaboration, and advance the field of public health nursing.

The theme of the conference is ***"Innovations in Public Health Nursing: Building a Healthier Future"*** which will guide our discussions and inspire new strategies to address the complex challenges faced by communities worldwide. We are thrilled to offer a comprehensive program featuring keynote presentations from leading experts, interactive workshops, and networking opportunities designed to enhance your professional journey.

As we engage in meaningful dialogue and exchange ideas, we encourage all participants to amplify our collective voice by sharing your conference experiences on social media. Make sure you tag **@nursing_GNPHN** and use the hashtag **#GNPHNConf2025** in all your posts to help create a dynamic online community. By doing so, you contribute to the global conversation and help highlight the essential work being done in public health nursing.

We look forward to your active participation and are excited to see how our shared efforts during these next few days will shape the future of public health nursing.

Together, let's shape the future of public health nursing!

Dr Zahra Shajani
Co Chair, 7th International GNPHN Conference | Associate Dean Undergraduate Programs, Faculty of Nursing, Dean's Office and Associate Professor (Teaching), Faculty of Nursing, Faculty

Dr Aliyah Dosani
Co Chair, 7th International GNPHN Conference | School of Nursing and Midwifery, Faculty of Health, Community and Education, Mount Royal University

Follow us on social media...

Message from the GNPHN Chair

As the Chair of the GNPHN, it is my distinct pleasure to welcome each of you to this extraordinary gathering of distinguished professionals, all united by our shared commitment to advancing public health nursing worldwide. A huge thank you to the University of Calgary and Mount Royal University for their generous contribution in hosting this conference which serves as a platform for dynamic dialogue, innovative ideas, and collaborative solutions to the pressing health challenges of our time.

If you are not already a GNPHN Member, please do consider joining us to connect with a vibrant community of like-minded professionals and stay updated on the latest global public health nurse initiatives. Visit www.gnphn.com for more information.

Very best wishes,

Cheryll

Dr Cheryll Adams, CBE

Acknowledgements

Organizing Committee

We extend our heartfelt gratitude to the Organizing Committee for their expertise and dedication in successfully delivering this conference. Your efforts and meticulous planning have contributed significantly to the event's overall success.

Diana Snell MN RN CCNE CCSCNE
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Faculty of Nursing, University of Calgary

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Heather Rusi MHDFS, MIHMEP, BN, BComm, RN
Doctor of Nursing Student
Faculty of Nursing, University of Calgary

Abstract reviewers

We would like to extend our heartfelt gratitude to the dedicated individuals who took the time to review the abstracts submitted for this conference. Your expertise, attention to detail, and thoughtful feedback have been invaluable in maintaining the high standards of our event and we thank you for your commitment and support in making this conference a success.

Our Sponsors

We would like to extend our heartfelt gratitude to our generous sponsors for their invaluable support of the conference. Your commitment and contributions have played a vital role in making this event a resounding success. Thank you for believing in our mission - your partnership is truly appreciated.

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BANFF SPRINGS

Monday 28 July 2025

Time	Subject	Room
08:00	Breakfast	A. Ballroom
	Registration	E. Foyer
	Set up: Exhibition and posters	F. MacHall A/B
09:00	Opening ceremonies	A. Ballroom
09:45	Transition and announcements	A. Ballroom
10:00	Mental health and wellness drop in & activities (available until 14:00)	G. That Empty Space
10:00	**KEYNOTE: Nursing power to change the world** *Howard Catton | CEO, International Council of Nurses*	A. Ballroom
10:45	Break | Exhibition opens (open daily from 08:00 to 17:00)	E. Foyer
	Silent Auction opens	F. MacHall A/B
11:00	**CONCURRENT SESSION #1**	
Option A	i. A national training plan to build public health nursing capacity for breastfeeding support | *Helen Mulcahy MSc DN | Senior Lecturer Community Health, School of Nursing and Midwifery, University College Cork*	A. Ballroom
	ii. The New Families project – a universal home visiting program - research results | *Kari Glavin MNS, PhD | Professor, VID Specialized University*	
	iii. Continuous support from the same public health nurse and parental satisfaction with maternal and child health services: a retrospective observational study | *Yoshie Yokoyama PhD | Professor, Osaka Metropolitan University*	
Option B	i. Exploring the knowledge, attitudes, and practices of registered nurses towards climate-driven vector-borne diseases | *Shannon Vandenberg RN PhD, INstructor, University of Lethbridge*	B. Cassio
	ii. Application of the Public Health Intervention Wheel to PHN Practice in the Indian Health Service | *Marjorie Schaffer, PhD, RN, PHN, Retired*	
	iii. Public health center for boys | *Per Arthur Andersen, Public Health Nurse, Bydel Frogner*	
Option C	i. School students experience being exposed, seen, and heard using structured questionnaires for health dialogues | *Thomas Westergren PhD, Professor, University of Stavanger*	C. Escalus
	ii. Core Competencies for Public Health: Governance for the Canadian context | *Claire Betker PhD, Scientific Director, National Collaborating Centre for Determinants of Health*	
	iii. Building positive leadership skills for public health workforce in the post-COVID era | *Tammy Troute-Wood RN MN, Provincial CDC Guidance & Training Team, Alberta Health Services*	
Option D	iv. Nurses caring for nurses: Building a foundational mental health & wellness clinic within a Faculty of Nursing | *Sandy Johannson NP, University of Calgary*	D. Bianca

Monday 28 July 2025 cont'd

Time	Subject	Room
12:00	**Welcome Remarks & White Hat Ceremony** | *Jyoti Gondek, Mayor, City of Calgary*	A. Ballroom
12:15	Lunch | Exhibition	A. Ballroom
13:00	**SYMPOSIUM**: Core Competencies of PHNs – Commonalities and Differences in Countries (until 14:45)	A. Ballroom
	DEEP DIVE: Mission possible - Closing the immunization gap with First Nations in Alberta, 2008-2025 | *Presented by OKAKI*	B. Cassio
	TOUR: Faculty of Nursing Clinical Simulation Learning Centre & Nurse Practitioner Clinic (90min)	E. Foyer
	POSTER PRESENTATIONS - see page 11	F. MacHall A/B
13:45	**CONCURRENT SESSION #2**	
Option A	Continued: Symposium: Core Competencies of PHNs – Commonalities and Differences in Countries	A. Ballroom
Option B	i. Impacts, Scale, and Spread of the Attachment and Child Health (ATTACHTM) Parenting Program | *Nicole Letourneau PhD RN, University of Calgary*	B. Cassio
	ii. A scoping review of planetary health in nursing | *Shannon Vandenberg RN PhD, Instructor, University of Lethbridge*	
	iii. The Evaluation of a Domestic Abuse Response Team Program in an Emergency Department | *Stefan Kurbatfinski BSc, Student, University of Calgary*	
Option C	i. Undergraduate Student showcase: Caring for the Caregiver | *Tegan Bey, Quentin Clowater, Lexie Fung, Joy Ly, Monica Ochieng, Misky Sanni, and Kaitlyn Watson (Sunju Jo)*	C. Escalus
	ii. Undergraduate Student Showcase: Radicare | Bill Zheng	
	iii. Undergraduate Student Showcase: Peer Tutorship for Nursing Students: Enhancing Resilience, Support, and Leadership | *Navroop Ganghas & Youjin Park*	
	iv. Undergraduate Student Showcase: SWaN: A Remote, interdisciplinary approach to Public Health in Rural Alberta as 2nd year Nursing Students | *Kristen Ingram-Cotton*	
Option D	**i. World Café**: Understanding and developing concepts of family resilience | *Michelle Teresa Thomas, Senior Lecturer, University of South Wales*	D. Bianca
14:45	Break | Exhibition	E. Foyer
15:00	**TOUR**: Faculty of Nursing Clinical Simulation Learning Centre & Nurse Practitioner Clinic (90min)	E. Foyer
	Networking Event and Fireside Chat with Keynote Speakers [preregistration required; additional $50]	A. Ballroom
END OF DAY ONE		

Monday 28 July 2025

#	Title	Author	Position
P01	A case study on public health nurses' heat stroke prevention activities during natural disasters in the "new normal" of extreme heat	Noriko Hatakeyama, MSN, PHN	Senior Researcher, National Institute of Public Health
P04	Working in the child's best interest? An ongoing study of confidentiality and information sharing in interprofessional collaboration for children, youth, and families	Eline Svenneby Halvorsen, public health nurse	Ph.d fellow, VID Specialized University, Norway, Oslo
P07	Typology of employment quality and corresponding health status differences among Korean workers	Bohyun Park, PhD	Professor, Changwon National University
P10	Adverse Childhood Experiences and Non-Suicidal Self-Injury among Korean adolescents - Exploring the Moderating Role of Social Support -	Jungok Yu, PhD, RN	Professor, Dong-A University
P13	Factors Associated with Isolation of Elderly Recipients with Public Assistance	Yukari Maeno, associate professor	Factors Associated with Isolation of Elderly Recipients with Public Assistance, Kyushu university
P16	Effects of tobacco smoking on chronic obstructive pulmonary disease in patients with Parkinson's disease in Japan	Takako Fujita, PhD, MPH	Assistant Professor, Kyushu University
P19	Current status and issues of developmental screening during infant health examinations in Japan—Focus on 5-year-olds' health checkups	Keiko Fujimoto, Public health nurse	Specially Appointed Lecturer, Kobe City College of Nursing
P22	The association between functional capacity and the changes in rural social capital due to the COVID-19 pandemic among Japanese older adults aged 75 years and over	Chiyo Inoue, PHN, RN	Associate Professor, Graduate school of Health Sciences , Niigata University,Niigata Niigata japan
P25	Emotional and Instrumental Support to Improve the Care Management Skills of Care Managers: A Cross-Sectional Study	Kazuki Yoshida, PhD	Professor, Iryo Sosei University
P28	Process leading to discontinuation of breast-cancer screenings among middle aged and older women in Japan	Rie Matsui, PhD	Assistant Professor, Gunma University
P31	Factors associated with the length of health consultation time by public health nurses during health checkups for children in Hiroshima, Japan	Yui Yumiya, RN, PHN,MPH,PhD	Assistant Professor, Hiroshima University

Tuesday 29 July 2025

Time	Subject	Room
08:00	Breakfast	A. Ballroom
	Information table	E. Foyer
	Exhibition opens	F. MacHall A/B
08:30	Announcements	A. Ballroom
08:40	**KEYNOTE: Nursing retention toolkit** *Leigh Chapman RN PhD, | Chief Nursing Officer, Health Canada* ***(via Zoom)***	A. Ballroom
09:15	**KEYNOTE: The Global Reach of Technology and Nursing** *Tracy Risling, President-Elect | Canadian Nurses Association*	
09:45	Transition and break	A. Ballroom
10:00	Mental health and wellness drop in & activities (available until 14:00)	G. That Empty Space
10:00	**CONCURRENT SESSION #3**	
Option A	i. Co-creating neuroinclusive resilience and workforce capacity in clinical learning environments with autistic student nurses - A pilot project | *Jo Sullivan PhD Student, Associate Professor, University of Salford*	A. Ballroom
	ii. Using public health nursing skills to enhance community engagement in a breastfeeding support initiative in underserved populations | *Helen Mulcahy MSc DN, Senior Lecturer Community Health, School of Nursing and Midwifery, University College Cork*	
Option B	i. Strategies to implement guideline recommendations in the school health services: A randomized factorial trial | *Malene Brekke PHN, MSN, PhD, Associate Professor, VID Specialized Univeristy / Centre for Child and Adolescent Mental Health, Norway*	B. Cassio
	ii. Expert to novice: the challenges of the transition to the UK Specialist Community Public Health Nurse (Health Visitor) role and its implications for workforce development | *Lorraine Henshaw DProf, MSc, RN, Associate Professor Children and Young Peoples Nursing, University of Salford*	
Option C	i. Developing a self assessment tool for family resilience | *Michelle Teresa Thomas, Senior Lecturer, University of South Wales*	C. Escalus
	ii. Conceptualizing the commercialization of human milk: A concept analysis | *Heather Rusi MHDFS, MIHMEP, BN, BComm, RN, Doctor of Nursing Student, University of Calgary*	
Option D	i. Tools for self-care & emotional regulation | *Sandy Johannson NP, University of Calgary*	D. Bianca

Tuesday 29 July 2025 cont'd

Time	Subject	Room
10:45	Break | Exhibition	E. Foyer
11:00	**CONCURRENT SESSION #4**	
Option A	i. Recent research into child and family health nursing practice: Global collaboration opportunities | *Louise WIghtman RN RM MLM PhD, Sessional Academic, Clinical Nurse Specialist Child and Family Health, Flinders University*	A. Ballroom
	ii. Still swimming against the tide? An exploration of Canadian Social Determinants of Health Public Health Nurses' (SDH-PHNs') experiences in role enactment | *Claire Betker PhD, Scientific Director, National Collaborating Centre for Determinants of Health*	
	iii. Re-imagining Community Health Nursing in Kenya, to address primary prevention of NCDs within Workplace Health Promotion milieu | *Isabel Kambo PHD, MPH, BSN, Lecturer, Aga Khan University, Kenya*	
Option B	i. Risk factors associated with birth asphyxia among newborns at Pumwani Maternity Hospital: a case control study | *Ruth Wagathu PhD (c), MScN, Aga Khan University*	B. Cassio
	ii. Unveiling Healthcare Workers' Knowledge about Ageism in Nigeria and the Need for Training Next Generation of Caregivers | *Assumpta Ude APRN, PhD, Lead Researcher, International Society of African Bioscientists and Biotechnologists*	
	iii. Strengthening health systems to support family resilience in India | *Anitha Livingstone, Senior Lecturer, University of South Wales*	
Option C	i. A Qualitative Study on the Reality of Mutual Support Among Residents in an I-Turn District with a High Elderly Population | *Yoshiko Ohno, Public Health Nurse, PhD, Professor, Gunma University of Health and Welfare*	C. Escalus
	ii. The experience of mothers with high levels of depression participating in a continuous nurse home-visiting program | *Yeonjae Jo PhD, Professor, Kyungil University*	
	iii. Is decolonization necessary in public health nursing education? Reflections on early Korean history | *Kyung Ja June PhD RN, Professor, Soonchunhyang University*	
Option D	i. Public health nursing education, training and regulation for practice in the global context - Results of a recent GNPHN survey | *Malene Brekke PHN, MSN, PhD, Associate Professor, VID Specialized Univeristy / Centre for Child and Adolescent Mental Health, Norway and Dr Cheryll Adams CBE, GNPHN Chair and Founding Director, Institute of Health Visiting*	D. Bianca
12:00	Lunch | Exhibition	A. Ballroom
	Sponsor Presentation: Merck - HPV disease prevention: What you need to know | *Dr Angel Chu MD FRCPC*	

Tuesday 29 July 2025 cont'd

Time	Subject	Room
13:00	**DEEP DIVE**: Transdisciplinarity in Action: Catalyzing Public Health Innovation | *Sue Crawford MN RN BN BSc, Dr. Christiane Job McIntosh, PhD MA BA, Nynke Van Den Hoogen, MSc PhD, Dr. Jessalyn Holodinsky, PhD*	A. Ballroom
	DEEP DIVE: A multimodal approach to health behaviour change | *Madison Fullerton, Vice President, Operations & Community Partnerships and Kara Patterson, Senior Director, Early Detection*	B. Cassio
	TOUR: Faculty of Nursing Clinical Simulation Learning Centre & Nurse Practitioner Clinic (90min)	E. Foyer
	POSTER PRESENTATIONS - see page 12	F. MacHall A/B
13:45	**CONCURRENT SESSION #5**	
Option A	**THINK TANK**: Role of nurses in mitigating the impact of climate change on population health outcomes | *Salimah Walani RN PhD, Dean, Aga Khan University of Nursing and Midwifery, Pakistan and Shahin Kassam PhD, RN, Postdoctoral Research Fellow, University of British Columbia*	A. Ballroom
Option B	i. The Public Health Intervention Wheel is a tool for nurse students' understanding of public health work in the community, both in theory and practice | *Kristina Carlén PhD, Senior Lecturer in Public Health, RN, School nurse, District nurse, University of Skövde*	B. Cassio
	ii. Standardised maternal postnatal care in the Public Health Nursing Service in the Republic of Ireland | *Helen Mulcahy MSc DN | Senior Lecturer Community Health, School of Nursing and Midwifery, University College Cork*	
	iii. Decent work: Four roles for nurses to address precarious employment as a social determinant of health and health equity | *Claire Betker PhD, Scientific Director, National Collaborating Centre for Determinants of Health*	
Option C	i. Transdisciplinary Work Integrated Learning: An Innovative Approach to Virtual Clinical Practice | *Stacy Oke MSN RN CCHN(C) CCNE, Assistant Professor, Teaching, Faculty of Nursing, University of Calgary*	C. Escalus
	ii. Building collective resilience to advance global public health through interdisciplinary collaboration | *Josephine Etowa PhD,RN,RM,FWACN,FAAN,FCANFCAHS, Professor and Canada Research Chair Tier 1, School of Nursing, Faculty of Health Sciences, University Of Ottawa*	
	iii. Development of an ultrasound hip screening education program for nurses in the effort to detect developmental dysplasia of the hip | *Kyoko Yoshioka-Maeda PhD., RN, PHN, Associate Professor, The University of Tokyo*	
Option D	**i. World Café**: Fostering a strong virtual culture for remote workers | *Tammy Troute-Wood RN, MN, Provincial CDC Guidance & Training Team, Alberta Health Services*	D. Bianca
14:45	Break | Exhibition	E. Foyer
15:00	GNPHN Annual General Meeting	B. Cassio
16:00	Indigenous Experience (traditional dancing): The Starlight Family	A. Ballroom
END OF DAY TWO		

Tuesday 29 July 2025

#	Title	Author	Position
P05	The Public health nurse's scepticism about participating in a study on interaction guidance in child health services- From resistance to a desire for guidance	Kari Glesne Ugland, PhD candidate	Public Health Nurse, The University of Stavanger, Norway
P08	Effectiveness of Lifestyle Improvement Support Program Using Strengths Perspective (Report 1)	Miyuki Tada, PhD	Assistant Professor, Institute of Biomedical Sciences, Tokushima University, Graduate School
P11	Effectiveness of Lifestyle Improvement Support Program Using Strengths Perspective (Report 2)	Reiko Okahisa, PhD	Professor, Tokushima University
P14	The effectiveness of School Nurse-based interventions in improving child uptake rates of the Human papillomavirus [HPV] vaccine.	Vanessa Guest, MSc, PG-Dip, BSC	Mrs, The University of Salford
P17	Instructors' use of metacognition in public health nursing practicum	Yuko Ushio, PhD	Professor, Yamaguchi University
P20	Interview Survey on Multi-Occupational Collaboration Among Individuals Providing Residential Environment Support for Hoarders in Japan	Yasuko Aso, Dr.	professor, Wayo Women's University ☐Japan,
P23	Japanese Public Health Nurses and Cross-Cultural Care: Lessons from the Field	Mariko Sakamoto, RN,PHN,Phd	Professor, PhD, Aichi Medical University, College of Nursing
P26	Current Status and Challenges in Understanding Family Caregivers Caring for Older People While Raising Children in Japan: A Literature Review	Kimi Sugiyama, PhD	Junior Associate Professor, Mie Prefectural College of Nursing
P32	Family planning decision-making process among Japanese women with severe mental illness: A qualitative study	Masako Kageyama, PhD	Professor, Osaka University
P35	Building better programs: Insights from a process evaluation of a shared site intergenerational program	Diana Snell, MN, RN, CCNE, CCSNE	Associate Professor (Teaching), University of Calgary

Wednesday 30 July 2025

Time	Subject	Room
08:00	Breakfast	A. Ballroom
	Information table	E. Foyer
	Exhibition opens	
09:00	**KEYNOTE: From Awareness to Action: A Decade of Igniting Global Movement for Congenital Anomalies (2014-2024)** *Salimah Walani RN PhD, Dean, Aga Khan University of Nursing and Midwifery, Pakistan*	A. Ballroom
09:45	Transition and announcements	A. Ballroom
10:00	Mental health and wellness drop in & activities (available until 14:00)	G. That Empty Space
10:00	**CONCURRENT SESSION #6**	
Option A	i. Advancing Health Equity Using Intersectionality Environmentalism: An Exemplar with Women Living at the Epicentre of Climate Crises, Racism, Gender-Based Violence & Migration Status | *Shahin Kassam PhD, RN, Postdoctoral Research Fellow, University of British Columbia*	A. Ballroom
	ii. Memory, meaning, and making: Integrating the arts into equitable public health nursing practice | *Julie Burns RN MAAiM BN CCHN(C) CCNE CCCI, Nursing Instructor, University of Calgary*	
Option B	i. A study on the interpretation of the concept of child rearing | *Ozeki Yumi, Public health nurse, Nihon University*	B. Cassio
	ii. Mapping the needs of public health professionals in child and adolescent health promotion services | *Marit Müller DeBortoli RN, PhD, Researcher, Norwegian Institute of Public Health*	
Option C	i. "Full to the brim" - Taking an ethnographic stance in evaluating the supportive nature of safeguarding supervision in health visiting practice | *Michelle Moseley BSc, MSC, PhD, Director of Programmes (Learning and Development), Institute of Health Visiting*	C. Escalus
	ii. Learning Outcomes of Nursing Students from Narratives of Community-Dwelling Patients with Psychosis: An On-Campus Practice During the COVID-19 Pandemic | *Akiko Mizuta PhD, Research Fellow, Hamamatsu University School of Medicine*	
Option D	i. Building intergenerational resilience through exploring the perspectives and experiences of Black seniors and youth on mental health | *Gbemisola (Bemi) Lawal, Asst. Prof., University of Calgary*	D. Bianca
	ii. Cultivating Connections: Best Practices for Thriving Shared Site Intergenerational Programs | *Diana Snell MN RN CCNE CCSNE Associate Professor, University of Calgary*	

Wednesday 30 July 2025 cont'd

Time	Subject	Room
10:45	Break | Exhibition	E. Foyer
11:00	Silent auction closes	F. MacHall A/B
11:00	**CONCURRENT SESSION #7**	
Option A	i. Advancing public health nursing practice in Canada: A national PHN postgraduate program | *Genevieve Currie PhD, Associate Professor, Mount Royal University*	A. Ballroom
	ii. Raising happy, healthy children together – changing practice and systems in a UK health visiting service | *Dr Cheryll Adams CBE, GNPHN Chair and Founder of the Institute of Health Visiting*	
	iii. Updating the Core Competencies for Public Health in Canada: Using a Modified Delphi Process to test agreement and Gain Feedback | *Clare Betker PhD, Scientific Director, National Collaborating Centre for Determinants of Health*	
Option B	i. Preparing current and future nurses to address climate-driven vector-borne disease | *Shannon Vandenberg RN PhD, Instructor, University of Lethbridge and Amanda Egert RN, MSN, CHSE, CCSNE, CCNE, BSN Manager*	B. Cassio
	ii. Abiding by primary health care and health equity: Exploring diverse public health nurses' insights and constraints during the COVID-19 pandemic in Ontario, Canada | *Margaret Lebold MScN, PhD(c), Graduate Student (Public Health Nurse), York University*	
Option C	i. Parents' experiences with answering electronic questionnaires | *Trine Holme MSc, Ph.D Student, University of Agder, Norway*	C. Escalus
	ii. Addressing Microaggressions: Anti-Racism Practice in Public Health | *Naika Thomas BscN, MPH, RN, Health Equity Specialist, Ottawa Public Health*	
	iii. Promotion of digital media balance and mental health with a school-based program | *Kristina Carlén PhD, Senior Lecturer in Public Health, RN, School Nurse, District Nurse, University of Skövde*	
Option D	i. The Climate-Health Nexus: Shaping Adaptation and Resilience | *Dr Jai K Das, Associate Director, Institute for Global Health and Development and Associate Professor for the Division of Women and Child Health at the Aga Khan University, Karachi.* ***(via Zoom)***	D. Bianca
12:00	Lunch | Exhibition	A. Ballroom
13:00	**DEEP DIVE**: Optimizing global perinatal mental health through multiple-collaborative partnerships: Prioritizing local voices while engaging in global health and implementation research | *Dr Aliyah Dosani BN MPH PhD, RN FCAN, Professor and Distinguished Faculty, School of Nursing and Midwifery, Mount Royal University, Josephine Etowa PhD,RN,RM,FWACN,FAAN,FCANFCAHS, Professor and Canada Research Chair Tier 1, School of Nursing, Faculty of Health Sciences, University Of Ottawa and Alexander Cuncannon, RN BN PhD Student*	A. Ballroom
	DEEP DIVE: Disentangling myths and misconceptions about intimate partner violence among sexual and gender minorities: An intial step to enhancing service deliver, health equity, and health policy | *Stefan Kurbatfinski BSc, PhD Student, University of Calgary*	B. Cassio
	TOUR: Faculty of Nursing Clinical Simulation Learning Centre & Nurse Practitioner Clinic (90min)	E. Foyer
	POSTER PRESENTATIONS - see page 13	F. MacHall A/B

Wednesday 30 July 2025 cont'd

Time	Subject	Room
13:45	**CONCURRENT SESSION #8**	
Option A	**THINK TANK**: The Global Reach of Technology and Nursing | *Tracy Risling, President-Elect | Canadian Nurses Association*	A. Ballroom
Option B	i. Results from an observational and interview study: Parental experiences from home visits in the New Families programme | *Kari Glavin MNS, PhD | Professor, VID Specialized University*	B. Cassio
	ii. The work of Public Health Nurses in catch-up immunization: the seen and unseen of program implementation | *Eunah Cha BScN RN, Research Assistant, Applied Immunization (AImm)*	
	iii. How Whiteness Shapes Nursing in Canada – What Does the Literature Say? A Rapid Review | *Clare Betker PhD, Scientific Director, National Collaborating Centre for Determinants of Health*	
Option C	i. Development of Health Promotion Policy Fellowship: Required Competencies, Admission and Completion Requirements, and Implementation Process | *Jonathan Guevarra RN, RM, MAN, PhD, Professor, College of Public Health, University of the Philippines Manila* ***(via Zoom)***	C. Escalus
	ii. Mining through pandemic crisis: a systematic review of the impacts of COVID-19 management strategies on mining industries in West Africa and Western Australia | *Esther Ayaaba* ***(via Zoom)***	
	iii. Effect of Healthy Ageing Clinic and Health Insurance Program on Accessibility and Affordability of Health Care among Older Persons in Nigeria Communities | *Amara Chizoba MPH, PhD, Co-Researcher, Mission to Elderlies Foundation, Nigeria* ***(via Zoom)***	
Opton D	**i. World Café**: Let's talk about what will be required of public health nurses to achieve universal health coverage! | *Dr Eri Osawa, Chief Senior Researcher, National Institute Of Public Health, Japan*	D. Bianca
14:45	Break | Exhibition	
15:00	Closing Ceremonies	A. Ballroom
CONFERENCE CLOSE		

Wednesday 30 July 2025

#	Title	Author	Position
P03	Human Resource Development System for Newly Appointed Public Health Nurses in Municipalities in Niigata Prefecture: Comparison by Population Size	Miyuki Sato, PhD	Professer, Niigata University
P06	Effects of health education video for managers to promote mental health help-seeking among workers in small and medium-sized enterprises: Protocol of a single-case experimental design study	Susumu Fukita, PhD	senior researcher, National Institute of Public Health
P12	Health education in India and Norway: improving learning outcomes through student exchange, teacher involvement and virtual mobility (HEIN).	Elisabeth Hansen, phd	professor, University of South -Eastern Norway
P15	A Study on Improvement of Public Health Disaster Response Guide (PHDRG) Based on the Characteristics of Community Health Issues in the event of an Earthquake in Japan	Hiroko Okuda, Public Health Nurse	Chief Senior Research Officer, National Institute of Public Health
P18	Dietary Behaviors Associated with Changes in HbA1c Levels in National Health Insurance Beneficiaries in Japan	Kimi Sugiyama, PhD	Junior Associate Professor, Mie Prefectural College of Nursing
P21	Association between social media use and potpartum depression among new mothers in Japan	Haruka Tamura, MSN, RN, PHN	PhD candidate, Nagoya university
P24	Work Engagement and Related Factors among Public Health Nurses Recruited during the COVID-19 Pandemic for Municipalities in Niigata Prefecture, Japan	Taichi Narita, PhD	Associate Professor, Niigata University
P27	Relationship between relative poverty and daily screen time in 3-year-olds in Japan	Yasue Ogata, PHN	Assistant Professor, Bukkyo University
P29	Determinants of Dietary Variety Score among the late elderly living in a rural village in Japan.	Seiko Tanabe, PHN, RN	Lecturer, Nagaoka Sutoku University, Nagaoka Niigata, Japan
P30	Construction of a Family Empowerment Model for parents with young children by simultaneous multiple populations analysis: An examination by age of children	Miki Sato, PHN,PhD	Chief Senior Researcher, National Institute of Public Health
P33	Spiritual needs of clients who lived their end-of-life at home	Yuko Sasaki, Public Health Nurse	Spiritual needs of clients who lived their end-of-life at home, Aichi Medical University College of Nursing

Howard Catton
CEO, International Council of Nurses

Howard was appointed the Chief Executive Officer of the International Council of Nurses (ICN) in February 2019. He is committed to ensure that ICN effectively represents nursing worldwide, advances the nursing profession, promotes the wellbeing of nurses and advocates for health in all policies. Throughout his career Howard has worked and written extensively on issues relating to the Nursing and Healthcare Workforce and he co-chaired the first ever State of the World's Nursing Report. He has led ICN's work to respond to and support nurses globally during the pandemic and has been at the forefront of advocating for the protection of and investment in the nursing profession.

Howard joined ICN in April 2016 as the Director, Nursing, Policy and Programmes. His team led the development of ICN policy and position statements. He also co-ordinated ICN Programmes and projects and oversaw the development of scientific programmes for ICN events. Howard qualified as a Registered Nurse in 1988 and held a variety of nursing posts in England and the United States and worked for the New Zealand Nurses Organisation. He studied Social Policy at Cardiff University (BSc Econ Hons) and Industrial Relations at Warwick University (MA) and then worked as a Personnel and Organisational Change Manager in the National Health Service in the UK. For 10 years Howard was Head of Policy & International Affairs at the Royal College of Nursing in the UK.

Leigh Chapman, RN PhD
Chief Nursing Officer, Health Canada

Dr. Leigh Chapman is committed to advancing the nursing profession in Canada to ensure equitable access to quality care. As CNO for Canada, she provides strategic advice to Health Canada, plays a convening role on key nursing issues, and represents the Federal Government at public forums. Leigh is a registered nurse (RN) who received her PhD from the University of Toronto's Lawrence S. Bloomberg Faculty of Nursing. Over the past 20 years, she has gained a deep understanding of nursing by working in both frontline and clinical leadership capacities. In addition to her role as CNO for Canada, Leigh continues to work at a community-based consumption and treatment site in Toronto, where she provides harm reduction services and frontline care.

Salimah R Walani, PhD, MPH, MSN, RN
Dean, Aga Khan University (AKU) School of Nursing and Midwifery, Pakistan

Dr. Salimah Walani is the Dean of the Aga Khan University (AKU) School of Nursing and Midwifery, Pakistan, since August 2024. Dr. Walani has extensive global health and academic experience. Before joining AKU, Dr. Walani was Global Policy and Advocacy Advisor at MiracleFeet – a US based not-for-profit organisation with programmes in 35 countries. Prior to that, she was Vice President of Global Programs at March of Dimes Foundation, USA, where she led the organization's maternal and Newborn health programs and partnerships in low- and middle-income countries.

In addition to these positions, she has held leadership, advisory, and consultative roles with notable organizations such as the New York City Department of Health, the World Health Organization, UNICEF, and New York University, among others. Dr. Walani has also taught in graduate programmes at Felician University in New Jersey, the University of Connecticut, Arizona State University, and Pace University in New York. Originally from Pakistan, Salimah Walani graduated from AKU's School of Nursing in 1987 and subsequently served as a faculty member at the university for six years. She then pursued a Master of Science in Nursing from Simmons University, Boston, a Master of Public Health from Harvard University, and a PhD in Nursing Research and Theory Development from New York University. Dr. Walani is well-known for her advocacy for the global birth defects agenda. She has served on several maternal and newborn health technical advisory groups. She is a member of the World Health Organization's Technical Advisory Group for Birth Defects, a member of the WHO's steering committee for developing a framework for newborn screening, diagnosis and management of birth defects and is an honorary member of the International Clearinghouse for Birth Defects Surveillance and Research. Dr. Walani serves on the editorial board of Policy, Politics & Nursing Practice. In 2014, Dr. Walani created a partnership to launch World Birth Defects Day which then became a global movement for advancing the prevention and care of congenital anomalies.

Andersen, Per Arthur | Public Health Nurse, Bydel Frogner

Session Title: Public health center for boys

Abstract:

The youth health center is a nation wide public health service that is grounden in law. This is a service that has existed since the 1990s and is widely know in the public, and target group. Adolecense and adults between the age of 12 - 25. This service has focus on sexual health, and provides contreceptives and guidance on abortion and STIs. The culture around this service has gradually developed to be a girls arena, and the responsibility of testing for STIs and seeking help for issues with sexual health has fallen to the girls. Even though boys and young men shows an increase in statistics involving, among others an elevated level of STIs, drug abuse, school difficulty and suicide. We have struggled with engaging the boys to utilize the health services that is free and easy to use. This is not a unique situation for the Norwegian population, but similar trends are found globally. Boys and young men have a higher threshold for seeking healthcare. This issue may have created a social understanding that, boys, and young men don`t struggle as much, or don`t require healthcare as much as other groups. Withholding to a cultural understanding that “boys will be boys” or a “toughen up” mentality.

We wanted to address this situation to try and lower the threshold and create a service that encouraged boys and young men to seek healthcare. To understand if there is a change needed in how we promote our services and legitimize the challenges boys and young men face. We based the service on the same model as the youth health center, but molded it to fit the target group. Through the years we have discovered a wide difference in issues with how the public health services is perceived by the target group. But also, how we as healthcare professionals need to adapt our way of providing care to create a higher level of compliance with boys ‘and young men.

In the following abstract you can read how we have tried to face this challenge and what we have experienced.

Aso, Yasuko | Professor, Wayo Women’s University, Japan

Session Title: Interview Survey on Multi-Occupational Collaboration Among Individuals Providing Residential Environment Support for Hoarders in Japan

Abstract:

Objective: Supporting the living environment through outreach is essential for people with extremely poor housing hygiene. Although healthcare and welfare specialists provide services from various perspectives, cooperation is necessary. This study aimed to clarify the cooperative system among specialists who provide living environment support to hoarders in Japan.

Methods: The participants were public health nurses, physical therapists, environmental health inspectors, and community social workers who work with hoarders in Japan. Semi-structured interviews were conducted using web cameras. Interview data were obtained from six individuals for 360 min from January to February 2023. The interview content was transcribed verbatim, and the meaning of speech was analyzed qualitatively and inductively. Assessment perspectives were analyzed according to job type. Tips for collaboration were categorized according to their content.

Results: The common viewpoints of the assessment were “respecting the values and intentions of the patient” and “whether it is possible to continue living at home.” However, the following viewpoints differed depending on job type: “Assessment of mental status,” “Presence of social isolation,” “Is the patient able to walk?” and “Is airflow obstructed?” The factors behind successful collaboration were “sharing of goals and plans,” “obtaining recognition that including different perspectives will lead to improvement,” and “knowing the assessment perspectives according to job type.”

Conclusions and implications: Cooperation through respecting patients’ values, sharing goals and plans, improving professionals’ understanding of patients, and increasing interprofessional understanding may further facilitate residential hygiene support for hoarding disorders.

Ayaaba, Esther | TBC

Session Title: Zoom: Mining through pandemic crisis: A systematic review of the impacts of COVID-19 management strategies on mining industries in West Africa and Western Australia

Betker, Claire | Scientific Director, National Collaborating Centre for Determinants of Health

Session Title: Updating the Core Competencies for Public Health in Canada: Using a Modified Delphi Process to test agreement and Gain Feedback

Abstract:

The Public Health Agency of Canada commissioned the National Collaborating Centres for Public Health to update the 2008 Core Competencies for Public Health in Canada. As a part of this work, a modified Delphi process which engaged a large number of public health partners, practitioners, decision makers, policy makers, educators, students and researchers was used to update the core competencies. The modified Delphi process was used to test agreement on a draft set of competencies developed through literature reviews and extensive engagement with the public health community. Using a 6-point Likert scale to prompt the level of agreement the respondents have with the competency statements, and an open box for comments provided an opportunity for respondents form across Canada to provide their input. The survey also gathered demographic information to ensure a broad and diverse engagement. The results will be both quantitative and qualitative will include descriptive statistics of the demographics as well as the responses to the Likert scale prompts. Comments provided by respondents will be summarized using syntax, thematic, and content qualitative analysis. As the Core Competencies for Public Health in Canada have not been updated in over 15 years, this work provides a timely and critical update to a well-used competency framework that has informed numerous workforce and education-related activities across the country.

Betker, Claire | Scientific Director, National Collaborating Centre for Determinants of Health

Session Title: Still swimming against the tide? An exploration of Canadian Social Determinants of Health Public Health Nurses' (SDH-PHNs') experiences in role enactment

Abstract:

An innovative Social Determinants of Health Public Health Nursing role was launched in Ontario, Canada public health units in 2012 to support health equity goals. A study completed in 2015 examined role development and implementation. Findings indicated that SDH-PHN leadership and factors influencing role implementation was characterized as "Swimming Against the Tide" (McPherson et. Al, 2016). The environment for SDH-PHNs since 2015 has changed considerably, with global movements such as Black Lives Matter, continued calls to action from the Truth and Reconciliation Commission of Canada and the global COVID-19 pandemic shaping commitments for social justice, racial equity and anti-oppression.

Our follow-up study, guided by a mixed methods approach using critical theoretical perspectives with attention to complex dynamics of power, explored the degree to which Ontario SDH-PHNs have enacted their roles since the 2015 inquiry. Using purposive and convenience sampling, a confidential survey with 30+ SDH-PHNs and a total of 3 focus groups with SDH-PHNs and Chief Nursing Officers from Ontario was analyzed using descriptive statistics and thematic analysis. Drawing on Cohen et AL's (2013) Conceptual Framework of Organizational Capacity for Public Health Equity Action in order to understand the complex micro, meso and macro supports and barriers for SDH-PHNs to enact their role enabled an understanding of the urgency of providing meaningful support for the SDH-PHN role and its potential for impacting health equity with public health nurses as leaders. The role serves as an exemplar for global PHN equity work through its explicit focus on the social determinants of health.

Betker, Claire | Scientific Director, National Collaborating Centre for Determinants of Health

Session Title: Core Competencies for Public Health: Governance for the Canadian context

Abstract:

Core competencies for public health (CCPH) define the knowledge, skills, and attitudes required of a public health workforce. Although numerous sets of CCPH have been established, few studies have systematically examined the governance of competency development, review, and monitoring, which is critical to their implementation and impact. Through an environmental scan which included a rapid review of the literature, recommendations for the governance of the core competencies for public health in Canada were made. Collaboration and community engagement is essential for governance of competency frameworks that is consensus-driven, transparent and accountable. The environmental scan and engagement resulted in the development of recommendations that highlighted both priorities and key activities that should be occurring as a part of the oversight and governance of the core competencies. Preliminary lessons emerging from the findings point towards the need for systems, structures, and processes that support ongoing reviews, revisions, and monitoring of CCPH.

Betker, Claire | Scientific Director, National Collaborating Centre for Determinants of Health

Session Title: How Whiteness Shapes Nursing in Canada – What Does the Literature Say? A Rapid Review

Abstract:

Globally and nationally there has been growing understanding and acknowledgement of systemic racism and its impacts as a structural determinant of health. The racial construct of Whiteness and the ideology of White supremacy are intimately linked to systemic racism yet are often unacknowledged. Literature discusses a need for solutions, but a first step in disrupting Whiteness is examining how it manifests. The profession of nursing has an obligation to carefully self-examine so it does not further contribute to systemic racism. Using the National Collaborating Centre for Methods and Tools Rapid Review methodology, this rapid review of the literature seeks to understand how Whiteness shapes the Canadian nursing profession. Findings from literature published between 2017-2023 reveal how policies, practices and perspectives uphold Whiteness within the Canadian nursing profession. Implications from the literature were grouped into five interconnected themes that provide examples of how leaders within the nursing profession can disrupt Whiteness: (1) accountability (through acknowledgement and commitment), (2) policy and procedures, (3) education, (4) leadership and mentorship and (5) partnerships.

Betker, Claire | Scientific Director, National Collaborating Centre for Determinants of Health

Session Title: Decent work: Four roles for nurses to address precarious employment as a social determinant of health and health equity

Abstract:

Precarious employment is a growing driver of poor health and health inequities for communities across Canada. It contributes to poverty, food insecurity and housing instability for workers and their families and is associated with poorer mental and physical health outcomes, including higher rates of occupational injury and illness for workers. In response to this disturbing trend, decent work is a shared agenda for change. Nurses play a key role in the movement for decent work. This presentation will explore four roles for nurses to advance decent work – as a social determinant of health and health equity – in their practice and communities. Each role will include concrete actions and real-world examples from nurses and other health providers in various settings across Canada. Nurses can use these roles to help identify gaps, set priorities and make decisions for how to begin or deepen their own action on decent work. After attending the session (which aligns with the conference's Health Promotion theme), participants will be able to: 1) explain the four roles for public health and community health to advance decent work and health equity, 2) describe real world examples of how nurses and others have responded to precarious employment and hazardous work in their communities, and 3) adapt and implement decent work actions to address local worker needs and improve health and health equity.

Brekke, Malene | Associate professor, VID Specialized Univeristy / Centre for Child and Adolescent Mental Health, Norway

Session Title: Strategies to implement guideline recommendations in the school health services: A randomized factorial trial

Abstract:

Background: In Norway, the National Guideline for School Health Services strongly recommends individual consultations with all 8th graders (12-13 years) and interprofessional collaboration with schools. To facilitate the implementation of these recommendations, the SchoolHealth tool was co-created with school nurses, youths, teachers, and leaders. SchoolHealth represents three implementation strategies:
1.Digital Feedback and Administration tool – audit and feedback (students and school nurses)
2.Dialog support – e-learning and consultations (school nurses)
3.Collaboration materials – targeted dissemination (school personnel and school nurses)

The GuideMe study aims to investigate the effects of these implementation strategies on fidelity to guideline recommendations and student outcomes, and examine user satisfaction among students and school nurses.

Methods: A randomized, factorial trial was conducted among 49 schools during the 2022/23 and 2023/24 school years to test different combinations of implementation strategies of SchoolHealth. Students in the 8th grade, school nurses, and teachers completed questionnaires at three timepoints and participated in individual- and focusgroup interviews. In the invited schools, parental consent was obtained for 1473 students (67%), of which 1425 students (96.7%) participated in the study.

Results: Preliminary results regarding the effects of the SchoolHealth strategies on fidelity to guideline recommendations and user satisfaction will be presented.

Discussion: Identifying successful strategies can support the school health services to work in line with guideline recommendations, thereby reducing unwanted variation in service delivery. This could benefit adolescents in a crucial life stage, ensuring their current and future health and well-being.

Brekke, Malene | Associate professor, VID Specialized Univeristy / Centre for Child and Adolescent Mental Health, Norway

Session Title: Public health nursing education, training and regulation for practice in the global context - Results of a recent GNPHN survey

Burns, Julie | Nursing Instructor, University of Calgary

Session Title: Memory, meaning, and making: Integrating the arts into equitable public health nursing practice

Abstract:

Achieving health equity in public health nursing requires innovative strategies that honor lived experience, challenge stigma, and amplify marginalized voices. This presentation examines how arts-based approaches can cultivate inclusive, empathetic, and community-engaged models of care across diverse populations. Drawing on interdisciplinary case studies and practice-based insights, we explore the role of creative methods in advancing health outcomes, enriching nursing education, engaging the public, and fostering systemic change.

Featured examples include: (1) an intergenerational visual arts program for individuals living with dementia; (2) online literary arts sessions designed for Black women; and (3) a neurodiversity-themed photovoice exhibition co-created with an on-campus community to promote inclusion and awareness. Though distinct in format and audience, these cases address important health priorities and are linked by shared goals of empowerment, equity, and transformation.

Research and evaluation findings suggest that each initiative fosters empathy, supports reflective practice, and nurtures cultural humility among both learners and practitioners. They also offer participants meaningful platforms for self-expression, storytelling, and self-advocacy. Together, these examples demonstrate the potential of integrating arts in medicine within public health nursing to reimagine dominant paradigms, address social determinants of health, and promote equity among historically overlooked populations.

By weaving together creative inquiry and public health values, this presentation invites dialogue on the evolving role of nurses as facilitators of care, creativity, and community change—bringing meaning to practice and making space for all voices in the pursuit of health equity.

Carlén, Kristina | Senior Lecturer in Public Health, RN, School nurse, District nurse, University of Skövde

Session Title: The Public Health Intervention Wheel is a tool for nurse students' understanding of public health work in the community, both in theory and practice

Abstract:

Objectives: Nurse education must incorporate a global perspective to grasp the significance of public health initiatives. In Sweden, a forthcoming reform aims to shift care responsibilities from hospitals to primary healthcare centres, referred to as Nearby Caring. For nursing students, a solid understanding of public health science is essential.

Methods: Nursing students participate in two lectures on the Public Health Intervention Wheel to gain insights into public health work. They then receive practical experience at elderly homes and healthcare centres during their clinical placements. At the end of the course, students write an essay reflecting on their practical experiences, focusing on different interventions within the model, such as Surveillance and Health Teaching.

Results: A total of 135 students completed essays on two interventions from the model. Their observations highlighted significant surveillance activities at health care centres, particularly in maternity and pediatric care, as well as extensive health teaching, especially during personal interactions with patients aimed at motivating behaviour change.

Conclusions: Nursing students represent a key group for learning about the Public Health Intervention Wheel. This education is crucial for enhancing their understanding of public health work in both theoretical and practical contexts.

Carlén, Kristina | Senior Lecturer in Public Health, RN, School nurse, District nurse, University of Skövde

Session Title: Promotion of digital media balance and mental health with a school-based program

Abstract:

Objectives: Adolescent mental health is a global issue that requires complex innovations to address. In the digital era, digital games, social media, and various apps like TikTok and Instagram are frequently used, affecting daily habits such as physical activity, sleep patterns, and relationships and in long term; adolescents´ mental health.

Methods: A community-based mental health promotion initiative is distributing an interactive digital program in schools for grades 7 to 9 and high schools in southern Sweden (n=4000 pupils). The program consists of five interactive video modules, each following a similar format: dramatized scenes leading to a common mental health challenge, automated prompts for discussion, scientific explanations by an expert, and exercises with self-help techniques. These modules address a range of common mental health challenges faced by young people today, including healthy habits, focus, thought distortions, performance anxiety, and habit-forming digital design. Questionnaires are administered to both children and their parents at four points: at the start of the program, and one and two years later. Interviews are conducted at the beginning and end of the program.

Results: Data collection will be analysed to investigate the effects of the program and identify factors related to mental health, as well as to monitor digital use and its impact on adolescent mental health. Preliminary results from the interviews shows expectation on the program.

Conclusion: Adolescents in the digital age often face mental health challenges. This program, which involves adolescents, their parents, and teachers in middle schools and high schools, may enhance their mental health status.

Cha, Eunah | Research Assistant, Applied Immunization (AImm)

Session Title: The work of Public Health Nurses in catch-up immunization: the seen and unseen of program implementation

Abstract:

Background: The COVID-19 pandemic significantly interrupted routine immunization of school-aged children across Canada and globally, creating the challenge of identifying and immunizing those who missed recommended doses. In Alberta, public health nurses (PHNs) were primarily responsible for addressing delays; however, their experiences implementing catch-up immunization programming is largely unknown.

Methods: Using a multi-method, multiple case study design, we collected data for two Alberta health zones in two concurrent phases. Phase 1 used administrative healthcare data to estimate monthly immunization doses delivered during school years impacted by pandemic-related closures and catch-up (2019-20 through 2022-23); then stratified by school-year cohort to assess trends/changes in catch-up over time. Phase 2 included semi-structured interviews with PHNs working in various capacities (leadership/managerial roles, front-line) involved in catch-up immunization. The Framework Method was used to guide comparative coding between the two zones and different PHN roles.

Results and Discussion: Preliminary findings indicate a 10-fold increase in dose delivery during July/August 2021, with efforts persisting through the end of the study period. Three preliminary themes were identified from interviews conducted to date (N=9): 1) (Re)building trust; 2) Dedication to public health; and 3) Teamwork. PHNs emphasized the importance of building on pre-existing relationships with schools while developing new strategies to connect with parents. Tension between catch-up and routine school teams was identified.

Conclusion: Public health emergency response may benefit from understanding the depth of nursing knowledge of community needs and the (in)formal roles PHNs play in building trust with parents and schools.

Chizoba, Amara Frances | Co-Researcher, Mission to Elderlies Foundation, Nigeria

Session Title: Effect of Healthy Ageing Clinic and Health Insurance Program on Accessibility and Affordability of Health Care among Older Persons in Nigeria Communities

Abstract:

Introduction/Background: There's global surge in population ageing including the African countries like Nigeria. However, while chronic and co-morbid conditions are prevalent among older persons leading to increasing cost of healthcare, weak health programs for older persons remains a challenge. These challenges result in their poor accessibility and affordability of healthcare.

Objectives: Study aimed to implement and evaluate innovative intervention models of healthy ageing clinic set-up and health insurance program on addressing this global health challenge.

Method: A prospective intervention cohort study design with control was used for a period of 12 months. Interviewer guided questionnaire was adapted for data collection.

Analysis: SPSS 21.0 used to analyze significance of intervention.

Results/Findings: here were 424 older persons who participated in the study with mean age of 68 years (60,74; 95% CI)) and 66% (280/424) were female. 45.3% (193/424) have no form of education and 35.5% (150/424) have no current occupation. There are low levels of accessibility of healthcare among older persons with mean scores of 34.25±16.35. There are low levels of affordability of healthcare with mean scores of 44.4±27.5. Poor affordability was significantly associated with earnings, where highest earners are most likely to afford healthcare (67.38±26.08). Within intervention group, mean score of accessibility of healthcare rose from 33% to 91%(33.0±15 to 91.0±23.7) with $p<0.0001$, while affordability rose from 42.4% to 85.4%(85.4±21.6 to 42.4 ±26.6) at $p<0.0001$. whereas for the control group, both indices remained poor at $p=0.12$ and 0.09 respectively.
Conclusion: Instituting healthy aging clinics and supporting health insurance increases accessibility and affordability of healthcare among older persons.

References
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Chu, Angel | Clinical Assistant Professor, University of Calgary Infectious Disease Specialist STI Clinic Calgary

Session Title: HPV disease prevention: What you need to know

Crawford, Sue | Manager, Health Systems Transformation Initiative (HIVE), Faculty of Nursing, University of Calgary

Session Title: Transdisciplinarity in Action: Catalyzing Public Health Innovation

Currie, Genevieve | Associate Professor, Mount Royal University

Session Title: Advancing public health nursing practice in Canada: A national PHN postgraduate program

Abstract:

There has been an erosion of community and public health theory and practice education in undergraduate nursing programs in Canada. This erosion has undermined a readiness for graduate nurses to practice in public health nursing, contributing to a diminished capacity to understand and address the unique and complex knowledge and skills required in public health nursing practice (Schofield et al., 2022). Through nursing leadership and collaboration with the Community Health Nurses of Canada (CHNC), Ontario Association of Public Health Nurses Leaders (OPHNL), Community Health Nurses' Initiatives Group (CHNIG) of Ontario, and several PHNs in practice and education, the PHN Postgraduate program certificate was developed in 2020. In November 2021, the Ontario Ministry of Colleges and University approved the national online postgraduate program at Mohawk College in Ontario, Canada. The mission of this postgraduate program is to advance innovative and competent public health nursing practice in Canada. The program has strengthened preparation in public health nursing practice for new nursing graduates and new hires in public health to adapt and address complex public health issues and challenges (Schofield et al, 2024). This presentation will provide insight in workforce development and capacity building in public health nursing practice with the development of a postgraduate program.

The learning outcomes are to: explain the history and contextual factors contributing to the existence of the PHN Postgraduate Program, discuss the vision, mission, program outcomes, philosophy, and curriculum plan, and outline future implications to practice, research, and education.

Das, Jai K | Associate Director, Institute for Global Health and Development and Associate Professor for the Division of Women and Child Health at the Aga Khan University, Karachi

Session Title: Zoom: The Climate-Health Nexus: Shaping Adaptation and Resilience

Dosani, Aliyah | Professor and Distinguished Faculty School of Nursing and Midwifery Mount Royal University

Session Title: Optimizing global perinatal mental health through multiple-collaborative partnerships: Prioritizing local voices while engaging in global health and implementation research

Egert, Amanda | BSN Manager, Canadian Association of Schools of Nursing

Session Title: Preparing current and future nurses to address climate-driven vector-borne disease

Abstract:

As a result of climate change, vector-borne diseases are on the rise across Canada, and as the landscape of education, prevent and treatment continue to shift, it is critical that nurses are supported in this role. Nurse educators are tasked with preparing the next generation of nurses to respond effectively to vector-borne disease, while nurses in practice require continuing education related to emerging vector-borne diseases. In 2018, the Canadian Association of Schools of Nursing (CASN) developed nursing education guidelines on vector-borne disease and a set of online modules to support preparation of future nurses in understanding primary, secondary and tertiary prevention of vector-borne disease and the nurses' role in advocating for healthy public policy.

However, the landscape of nursing and vector-borne disease in Canada has changed substantially since the time of development (2018), and a new project aims to better prepare the next generation of nurses to address climate-driven vector-borne diseases is underway. The goal of this innovative project is to further strengthen the capacity of current and future nurses in this area, providing evidence-based resources containing current information on vector-borne disease and the nurses' role. This presentation will share completed milestones and results of the project to date, including a scoping review was conducted to inform content update and support the integration of a planetary health perspective into the revised guidelines and online modules and the creation of a series of virtual simulations to showcase the critical role nurses play in navigating the health impacts of climate change.

Etowa, Josephine | Professor and Canada Research Chair Tier 1, School of Nursing, Faculty of Health Sciences, University Of Ottawa

Session Title: Building collective resilience to advance global public health through interdisciplinary collaboration.

Abstract:

This paper argues that the rising complexity of global health challenges, ranging from pandemics and climate change to social inequalities and fragile health systems, demands a shift from siloed public health approaches toward strategies grounded in collective resilience and interdisciplinary collaboration. Collective resilience refers to the ability of communities, systems, and institutions to adapt, recover, and transform in response to adversity. The paper presents a conceptual framework showing how integrating diverse disciplines such as public health, social sciences, environmental studies, technology, and policy can create more adaptable and sustainable health systems. This approach fosters inclusive decision-making, innovative problem-solving, and more equitable responses to public health crises.

A key case study is the African Centre of Excellence for Public Health and Toxicological Research (ACE-PUTOR) at the University of Port Harcourt, Nigeria. ACE-PUTOR exemplifies how interdisciplinary collaboration can be applied to real-world challenges, particularly in environmentally vulnerable regions like the Niger Delta. By combining expertise from toxicology, environmental science, policy, and community engagement, ACE-PUTOR addresses not only diseases but also the social and ecological factors influencing health outcomes.

Despite these successes, barriers such as institutional inertia, siloed disciplines, and poor data-sharing systems continue to limit progress. The paper recommends overcoming these obstacles through integrated training, incentivizing joint research, and strengthening community participation in health planning.
In conclusion, the paper emphasizes that interdisciplinary collaboration is essential, not optional, for building resilient, future-ready health systems. As global health threats become more interconnected, the ability to work across disciplines and sectors will define the success of collective public health responses.

Fujimoto, Keiko | Public Health Nurse, Specially Appointed Lecturer, Kobe City College of Nursing

Session Title: Current status and issues of developmental screening during infant health examinations in Japan—Focus on 5-year-olds' health checkups

Abstract:

Objectives: Studies have shown that children with disabilities often struggle with schooling and psychosomatic disorders at the elementary school level (Fujimoto et al. 2014). Identifying developmental tendencies early, guiding parenting (Munakata et al. 2010, Ozeki et al. 2002), and infant health check-ups are important to prevent secondary disorders. Diagnosing and providing support for children with developmental disorders is challenging (Kamio, 2007). Preschool screening for 5-year-olds is also necessary but is not widely used. This study examined how developmental screening was performed during preschool health checkups in Japan.

Methods: A questionnaire survey was conducted among 1174 Japanese municipal public health nurses who had performed infant health checks. The survey was conducted in April 2024, and the results were analyzed. The study protocol was approved by an institutional ethics committee; no conflicts of interest existed.
Results: A total of 480 (27.5%) public health nurses completed the survey, and 80.1% of respondents' children had not undergone a 5-year checkup. Most respondents in municipalities without 5-year-old health checkups said these would be beneficial but cited many challenges. Common obstacles were difficulty finding doctors and psychologists and increased workloads.

Conclusions: Communities differed in their efforts to provide developmental screening. Currently, it is difficult for municipalities to implement preschool health check-ups for 5-year-old children due to specialist shortages and the need to secure working hours. Considering the use of resources and ingenuity based on the regional characteristics of each municipality, it is necessary to develop a system that guarantees the accuracy of medical checkups.

Fujita, Takako | Assistant Professor, Kyushu University

Session Title: Effects of tobacco smoking on chronic obstructive pulmonary disease in patients with Parkinson's disease in Japan

Abstract:

Aims: Tobacco smoking is a well-established factor that exacerbates noncommunicable diseases, including chronic obstructive pulmonary disease (COPD). Other studies have suggested that smoking may prevent the onset or progression of Parkinson's disease (PD). In this study, we evaluated the association between smoking and a COPD diagnosis in patients with PD.

Methods: Data from the National Database of Health Insurance Claims and Specific Health Checkups, provided by the Ministry of Health, Labour, and Welfare in Japan, were utilized. The subjects included patients with PD who underwent health checkups in 2013. The follow-up period included fiscal years 2013 to 2022. A logistic regression analysis was conducted to assess the impact of tobacco smoking on patients who had received a COPD diagnosis; we adjusted for sex, age group, body mass index, frequency of alcohol consumption, exercise habits, sleep quality, severity of PD, and comorbidities (i.e., malignancy, ischemic heart disease, cerebrovascular disease, diabetes, dyslipidemia, and dementia).

Results: A total of 17,745 participants were included in the study. Smoking prevalence was 8.2% and the COPD diagnosis rate was 13.7%. Tobacco smoking habits significantly increased a COPD diagnosis, with an odds ratio of 1.64 (95% confidence interval: 1.39–1.93).

Conclusions: The study findings indicated that smoking habits in patients with PD are associated with a significantly higher risk of COPD. Although smoking has been reported to reduce the onset and progression of PD, the findings of this study underscore the need for smoking cessation support for patients with PD, as well as for the general population.

Fukita, Susumu | Senior researcher, National Institute of Public Health, Japan

Session Title: Effects of health education video for managers to promote mental health help-seeking among workers in small and medium-sized enterprises: Protocol of a single-case experimental design study

Abstract:

Purpose: There is a shortage of occupational health professionals, making it crucial for managers to acknowledge workers' mental health issues and promote help-seeking from appropriate professional sources in small and medium-sized enterprises. To address this, we developed a health education video aimed at enhancing managers' abilities to encourage mental health help-seeking among their workers. The study aimed to evaluate the impact of this video on managers in small and medium-sized enterprises.

Method: This study employs a single-case experimental AB design, with phase A as the non-intervention phase and phase B as the intervention phase. Participants are managers in small and medium-sized enterprises, with a sample size ranging from three to five participants, based on a previous single-case experimental AB design study using the Bayesian unknown change-point model. The intervention is a health education video for managers to improve their ability to promote their workers' help-seeking for mental health. Primary outcomes will include managers' attitudes, intentions, and efficacy in encouraging workers' help-seeking for mental health. Secondary outcomes will include managers' knowledge of workplace mental health and their efficacy of recognizing workers' mental health issues. We will analyze the effects of the health education video using the Bayesian unknown change-point model. We will conduct eight investigations in each phase as this analysis entail eight observations per phase for more stable estimates.

Results: Not applicable.

Conclusions: This intervention study identifies the effects of health education video and suggests implementation practices for small and medium-sized enterprises.

Fullerton, Madison | Vice President, Operations & Community Partnerships, Praxus Health

Session Title: A multimodal approach to vaccine behaviour change

Abstract:

There are many reasons why Canadians do and do not get vaccinated within specific communities. Understanding these reasons are important to tailor a range of strategies to support vaccine confidence and encourage uptake. Often to shift behaviour, such as vaccine uptake, a multimodal approach is needed to meaningfully make an impact. This workshop will explain how Praxus Health utilizes a multimodal approach to improve vaccine uptake and confidence focusing on using a blend of actionable insights, community engagement, health communications, and advocacy to develop education and impact practice change. Attendees will learn how to combine different approaches in understanding Canadians' behaviours around vaccination and consider a wide range of strategies to integrate into their day-to-day research, education, policy or implementation practice.

Glavin, Kari | Professor, VID Specialized University

Session Title: The New Families project – a universal home visiting program - research results

Abstract:

Introduction: The Child Health Services in Norway are part of the Primary Health Care (PHC) service for children 0-5 years and their families. The service is used by 98% of the eligible population and is legally regulated as part of the PHC at a municipal level. The New Families program (NF) is an early universal intervention which includes home visits provided by Public Health Nurses (PHNs) during pregnancy and until the child is two years old. The same PHN follow the families in the Child Health Clinic. NF is based on a salutogenic perspective, focusing on resource mobilization and parental support.

Aim: To present a universal home visiting program and some research results on this program.

Material and Methods: A prospective non-randomized controlled study with parallel group design was conducted to evaluate the impact of NF. First-time parents in three city districts received NF in addition to usual care, and first-time parents in two city districts received usual care. Parents were recruited before pregnancy week 28 and were followed until 12 months postpartum. Quantitative data were collected via self-reported questionnaires five times during the period. Qualitative data comprise in depth interviews with parents, and participant observation. PHNs' reflection notes were analysed to investigate their reflections on implementing the NF.

Conclusions: A total of 425 parents, 228 mothers and 197 fathers participated in the study. Results from the non-randomized controlled study and results from the qualitative studies, PHNs' reflection notes and the interviews with parents, will be presented.

Glavin, Kari | Professor, VID Specialized University

Session Title: Results from an observational and interview study: Parental experiences from home visits in the New Families programme

Abstract:

Background: In 2019, a supplement to the national child health centre (CHC) programme, known as the New Families programme (NF), was introduced across all city districts of Oslo. The suggested topics during NF prenatal home visits differed from the ordinary CHC programme as they are reflecting coparenting issues and the development of a coparenting relationship like focusing the prospective parents' own life history and childhood, and their expectations to the parental role. The NF's target audience includes first-time parents-to-be, couples expecting their first child together, or their first child in Norway.

Aim: To investigate how parents-to-be and first-time parents experience taking part in home visits in the NF and how these home visits occurred.

Methods: Participant observations of eight NF home visits (six before and two after birth). Individual interviews with nine parents after NF home visits. Regional Committees for Medical and Health Research Ethics approved the study. Preliminary results: Information was scarce ahead of the home visit in pregnancy and usually there was no common meeting agenda. The public health nurse (PHN) also avoided practical concerns of the couple at the home visit. Both parents were invited to participate on the same premises, which made the meeting successful. However, the parents decided all content in the meeting after birth.

Conclusions: There is a challenge that expectant parents do not receive needed information about the CHC and PHNs before they are supposed to avail the services. This information gap needs to be filled to provide sufficient information to those involved.

Guest, Vanessa | MSc Public Health, PG-Dip Specialist Community Public Health, BSc Children and Young Person Nursing, University of Salford

Session Title: The effectiveness of School Nurse-based interventions in improving child uptake rates of the Human papillomavirus [HPV] vaccine.

Abstract:

The effectiveness of school nurse-based interventions in improving child uptake rates of the Human papillomavirus [HPV] vaccine.

Background: HPV is responsible for approximately 630,000 cancer cases worldwide annually, 90% of which are in females. The World Health Organisation have called for a 90% vaccination rate to eliminate HPV-related cancers by 2030. School nurses, as public health specialists, have a duty to promote equity and reduce health inequalities. HPV vaccination is an effective preventative public health intervention to protect against cancer. However, HPV vaccination uptake in children remains suboptimal both in the UK and globally.

Aim: To critically evaluate the effectiveness of school nurse-based interventions in supporting HPV uptake in children.

Method: A pragmatist philosophy, underpinning a systematic review conducted as part of a public health master's dissertation, strived to identify effective evidenced- based school nurse strategies to increase HPV vaccination rates among children. The review included both qualitative and quantitative research which were thematically analysed to identify recurring and dominant themes.

Results: The evidence indicates consent processes should be improved and delivered in a targeted and inclusive manner. Complex factors such as poverty, culture, vaccine hesitancy and the school environment impede HPV vaccine uptake. Nonetheless school nurses are trusted by parents and children to provide individualised, inclusive and equitable health promotion supporting health literacy and increase HPV vaccination uptake.

Conclusions: Research indicated identification and supporting vulnerable communities, could be key in supporting a global effort in eradicating HPV cancers by 2030.
School nurses delivering tailored and targeted health promotion can increase HPV uptake. Destigmatising the vaccine and reframing it as a cancer prevention treatment can support vaccine hesitant parents.

Guevarra, Jonathan | Professor, College of Public Health, University of the Philippines Manila

Session Title: Zoom: Development of Health Promotion Policy Fellowship: Required Competencies, Admission and Completion Requirements, and Implementation Process

Abstract:

Background: The Philippines' universal health care strategy emphasizes the role of health promotion. The professional capacity of health promotion practitioners in the Philippines plays a pivotal role in creating environments that foster enhanced overall well-being. This scoping review aims to determine which competencies, selection requirements, and implementation strategies can inform a health promotion policy fellowship program.

Methods: The scoping review used PubMed, Scopus, and CINAHL databases, using articles written only in English and published between January 2013 and October 2023. The articles were assessed using Rayyan following a double-blind review model. The search strategy employed the People, Content, and Context (PCC) Framework. Data was charted according to the study objectives and analyzed using Kirkpartick's Model and the Context, Input, Process, and Product (CIPP) Evaluation Model.

Results: A total of 18 articles were included in the analysis after screening 1442 records. The studies were mostly from Western countries. Participants having tertiary education or enrollment in a specific program were the basis for admission. Conceptual didactics and evidence-generation skills using interactive approaches were the most common methodologies and competencies taught. A health promotion plan was cited as a completion requirement.

Discussion: A health promotion policy fellowship must remain contextually bound. Fellowship competencies should cover public and population health, social realities, health policy research and regulation, and health promotion practice. Flexibility in duration and mode of offering should be considered. Emphasis on evidence-generation skills and health literacy activities with the presence of tangible outputs linking expected competencies to practice should be weighed.

Halvorsen, Eline | Ph.d Fellow, VID Specialized University, Norway, Oslo

Session Title: Working in the child's best interest? An ongoing study of confidentiality and information sharing in interprofessional collaboration for children, youth, and families

Abstract:

Introduction: Public health nurses play a crucial role in preventing and detecting cases of violence, abuse and neglect among children and youth. Neglect, violence and abuse represent serious public health concerns in Norway and globally. There have been numerous cases in Norway and internationally where inadequate information sharing across public services has contributed to individual deaths Effective interprofessional collaboration for the benefit of children, youth, and families is therefore a high-priority concern.

Aim: To explore the management of confidentiality in professional work with children and youth, and considerations related to decisions about sharing information.

Material and Methods: This study employs a qualitative research design inspired by institutional ethnography, combining individual interviews and document analysis. The study began with interviews with public health nurses working in primary schools and later with teachers. The document analysis will explore the regulatory framework governing different professional disciplines working with children and youth.

Preliminary findings: Confidentiality makes public health nurses feel isolated in their judgments about at-risk children. Teachers describe confidentiality as a barrier against effective collaboration with public health nurses. Additionally, nurses often mistrust other professional groups, thinking they might not handle shared information in a responsible manner. What influences decisions about information sharing vary between public health nurses.

Conclusion: Preliminary findings highlight challenges in information sharing among collaborating professionals working with at-risk children and youth, underscoring the need to balance confidentiality with finding ways to collaborate effectively.

Hansen, Elisabeth Holm | Professor, University of South-Eastern Norway, Master of public health nursing

Session Title: Health education in India and Norway: improving learning outcomes through student exchange, teacher involvement and virtual mobility (HEIN)

Abstract:

The overall aim of the HEIN project was to enhance the quality of education at Savitribai Phule Pune University (SPPU), Bharati Vidyapeeth College of Nursing (BVCON) and the University of South-Eastern Norway (USN) through international collaboration.
Method: Implementing the three activities:
- student exchange
- teacher involvement and
- virtual mobility

The purpose of virtual mobility was Internationalization at home, where combined research and educational activities for bachelor, master, and PhD students through digital platforms were planned.
Results: In total, 26 bachelor-, master`s, and PhD students from Norway and India participated in the exchange program. All students participated in a digital introductory course before the exchange and on-site classes at SPPU / USN upon arrival. Master`s students in midwifery had practical placements at maternity wards in one hospital in Pune. BA students had 3 months of practical placements at different clinical wards at the hospital.
PhD students from SPPU in Norway visited different research groups and presented their research work, followed by discussions. Academic staff from Norway and India participated in the exchange program, which included workshops and mutual presentations of their educational systems.

Collaborative Online International Learning (COIL) sessions were conducted with bachelor students from both countries. One COIL session was held specifically for Master of Public Health Nursing students from India and Norway, followed by a discussion.

Examples of some topics: Nutrition food security, physical activity, maternity care and delivery, non-communicable diseases and prevention, childcare.

Hatakeyama, Noriko | Senior Researcher, National Institute of Public Health

Session Title: A case study on public health nurses' heat stroke prevention activities during natural disasters in the "new normal" of extreme heat

Abstract:

Objective: Recently, extreme heat has increased the risk of heat stroke and other heat-related illnesses during natural disasters in the summer. This case study provided an overview of the heat stroke prevention activities of public health nurses (PHNs) during a recent disaster and discussed the challenges of extreme heat.

Methods: This study extracts secondary damage prevention measures during extreme heat from the activities of PHNs who implemented a heat stroke prevention scheme for volunteers in affected areas in a municipality in Japan after typhoon FAXAI (T1915) in 2019 as the maximum temperatures reached 31–35°C.

Results: External support PHNs prepared various simple manuals in the field, such as checking the physical condition of local volunteers before and after support activities, standardizing the flow system for contact reception, preparing and posting media, encouraging rest and fluid intake, and the flow of transport to acceptable medical facilities, and proposed and implemented preventive activities. The manuals were shared with local authorities, subsequently contributing to the prevention of severe heat stroke in affected areas.

Conclusion: To prevent secondary health problems, disaster heat stroke prevention should be promoted against the "new normal" of extreme heat for individuals in affected areas, including healthcare for disaster volunteers.

Henshaw, Lorraine | Associate Professor Children and Young peoples Nursing, University of Salford

Session Title: Expert to novice: the challenges of the transition to the UK Specialist Community Public Health Nurse (Health Visitor) role and its implications for workforce development.

Abstract:

Background. There is a scarcity of studies directly exploring transition to the UK Specialist Community Public Health Nurse (Health Visitor) (SCPHN(HV)) role, contrasting with an abundance exploring transition to a newly registered nurse (NRN); which is recognized as difficult, affecting retention to the profession. Transition to the SCPHN(HV) role differs fundamentally to transition to a NQN, as it involves moving from a role where individuals are typically already highly skilled and autonomous practitioners, into to a new professional role.

Aim. To develop a substantive theory of the transition to the SCPHN(HV) role to support future aspirant SCPHN(HVs) and their educators.

Method. Using a constructivist grounded theory approach, this longitudinal study explored this important transition, providing a deep understanding. It incorporated focus group and interview methods over a series of data collection points, throughout the period of the SCPHN(HV)course and at 6 months post-completion with student and newly qualified SCPHN(HVs).

Results. The transition is demanding and multifaceted, being influenced by a range of factors, including role identity, community of practice, individual resilience and the support provided by the wider HV team. The three core categories of Role Identity, Way of Working and Living the Journey are encompassed by a conceptual model, providing a visual framework to support this complex transition process.

Conclusion. This multifaceted transition is extremely challenging. The greater understanding of the process supports future SCPHN(HV) students, educators, and workforce development, potentially enhancing future retention. The findings resonate with other similar role transitions, especially those involving a move from expert to novice.

Holm, Trine | Ph.D- student, University of Agder, Norway

Session Title: Parents' experiences with answering electronic questionnaires

Abstract:

Objective: To explore parents' experiences with answering electronic questionnaires concerning their child's health and development, as well as the parents' experiences of the public health nurses' handling of the information in the health consultations of children between 0-6 years.

Method: Sixteen parents were recruited from five child health centers and two school health services at their child's health consultation. Observations were made during the health consultations and parents were interviewed individually or in pairs using a semi-structured interview guide. Thematic analyses of verbatim transcripts and field notes were utilized to explore parents' experiences.

Results: Analyses revealed four themes addressing parents' experiences with answering electronic parent-reported questionnaires: easy to access and answer, challenging to select response alternative, new insight about their child and ambivalent feelings when answering the questionnaire. Three themes addressing the parents' experiences with the nurse's handling of the information were revealed: parents expected the nurse to discuss the results from the questionnaire, the questionnaire can be used to structure the conversation with the nurse and contribute to earlier identification and help.

Conclusion: Parents reported that electronic questionnaires can provide several benefits to parents and public health nurses. However, information and dialogue throughout the screening process are important to reduce or eliminate the insecurity and vulnerability that occur when answering the questionnaire.

Inoue, Chiyo | Associate Professor, Graduate school of Health Sciences, Niigata University, Niigata, Japan

Session Title: The association between functional capacity and the changes in rural social capital due to the COVID-19 pandemic among Japanese older adults aged 75 years and over

Abstract:

In this study, we measured the difference in rural social capital (SC) among the elderly aged 75 years and over before (2019) and after (2022) the COVID-19 pandemic and how their functional capacity in 2019 affected the SC change. The average rural SC value of the residents from 11 areas in Village A, calculated using 380 questionnaires that had completed all questions of the rural SC index, was assigned to each individual as their regional SC value for 2019. Similarly, the average SC value for 2022 was calculated using 265 completed responses for the rural SC index and allocated to each individual as the 2022 regional rural SC value. Further, 211 respondents who completed the survey in both 2019 and 2022 were extracted to analyze the correlation between the change in regional rural SC value and the JST index of competence, self-assessment of health, and WHO-5-J (Japanese version of the WHO-Five well-being index). Areas with higher living functioning, such as the use of modern equipment and the ability to gather information in 2019, tend to have higher SC in 2022. The findings indicated that the functional capacity of elderly people is an important resource for protecting rural SC even during the COVID-19 pandemic.

Jo, Yeonjae | Professor, Kyungil University

Session Title: The experience of mothers with high levels of depression participating in a continuous nurse home-visiting program

Abstract:

Purpose: This study aimed to explore the experiences of mothers with high levels of depression who participated in a continuous nurse home-visiting program.

Background: South Korea has introduced initiatives like the 'Seoul Baby Health First Step Project,' now expanded as the 'Early Childhood Health Care Project,' to reduce health inequalities within a generation. The program provides home visits by nurses to support families facing complex issues, including maternal depression. Postpartum depression negatively impacts both maternal caregiving confidence and child development. This study explored the experiences of mothers with high levels of depression who participated in this program.

Method: A qualitative approach was used, involving in-depth interviews with 12 mothers who scored 10 or higher on the Edinburgh Postnatal Depression Scale and had participated in the program for at least one year. The study addressed the following questions: (1) Did the program improve maternal self-efficacy in infant care? (2) Did the program enhance mothers' self-care abilities? (3) How did the program impact mothers' long-term role in child-rearing? (4) What were the overall experiences of mothers who participated in this program? Data were analyzed using content analysis, and key themes were identified from coded statements.

Results: The following key themes emerged: emotional support from nurses, learning caregiving skills through trust, increased confidence in parenting, and a strengthened sense of responsibility as mothers.
Conclusion: The continuous nurse home-visiting program provided effective support for mothers with high levels of depression. These findings have important implications for education, clinical practice, and future research.

Johannson, Sandy | Manager, Mental Health Wellness, Faculty of Nursing, NP Mental Health & Wellness Clinic, University of Calgary

Session Title: Nurses caring for nurses: Building a foundational mental health & wellness clinic within a Faculty of Nursing

Abstract:

Canadian undergraduate nursing students face significant levels of stress, burnout, anxiety, depression, and psychological stress, exacerbated by clinical exposure and academically challenging environments. Clinical learning, ethical dilemmas, and exposure to patient suffering are some of the many unique challenges that nursing students experience. Despite this, few mental health and wellness services tailored to the unique needs of nursing students exist among Canadian Universities. The Nurse Practitioner-led Mental Health and Wellness Clinic developed at the University of Calgary's faculty of nursing is a novel, nursing student tailored program that bolsters the innate resilience and emotional regulation of students through evidence-based interventions. Interventions include: counselling and psychotherapy, emotional regulation strategies such as HearthMath, LENS neurofeedback, Trauma Tapping, Flash technique, and more. Emotional regulation techniques and/or psychotherapy tailored to the nursing student are delivered by a nursing clinician. In-turn, students are stabilized, increasing their clinical attendance and their levels of anxiety and burnout are decreased, thereby, improving career retention.

Johannson, Sandy | Manager, Mental Health Wellness, Faculty of Nursing, NP Mental Health & Wellness Clinic, University of Calgary

Session Title: Tools for self-care & emotional regulation

Abstract:

Nursing is one of the most stressful and challenging professions worldwide. Make the time today to come and explore new ways of supporting your mental health & wellbeing; particularly around developing your emotional regulation skills. This interactive workshop will focus on developing tools for self care that involve nervous system downregulation. We will explore the benefits of the breath in a heart rate variability (HRV) biofeedback modality called Heartmath, as well as, a grounding energetic technique called Tapping (Emotional Freedom Technique). We look forward to having you join us.

June, Kyung Ja | Professor, Soonchunhyang University

Session Title: Is decolonization necessary in public health nursing education? Reflections on early Korean history

Abstract:

To control the spread of COVID-19, the South Korean government implemented quarantine and vaccination programs for contacts and confirmed cases through public health centers. Public health nurses (PHNs) played a key role in these programs. However, PHNs were overworked, burned out, and their contributions were overshadowed by hospital nurses treating inpatients. Nursing student placements in public health centers were suspended, and nurse educators struggled to adapt to virtual teaching during this critical period. In a health care system dominated by biomedical knowledge and clinical technologies, the question arises as to why PHNs have not been able to fully assume their roles as frontline community health workers.

To explore this question, I propose a historical analysis. Public health nursing in Korea began in 1924 with the introduction of nursing education by Western missionaries. The first Korean nurse to study public health nursing in Canada was Lee Geum-jeon, who was trained in the American nursing tradition. Upon her return, she led public health nursing through the Japanese occupation, the U.S. military regime, and into the 1960s. Her approach, however, overlooked Korea's unique social and political context and largely reflected U.S.-based practices. The focus on training nurses to work alongside U.S.-trained preventive medicine physicians enhanced the social status of some PHN leaders. However, it did little to improve the quality of education, strengthen nursing schools, or ensure adequate PHN staffing.

This historical review highlights the ways in which the lack of locally based nursing knowledge has contributed to the challenges facing PHNs today.

Kageyama, Masako | Professor, Osaka University

Session Title: Family planning decision-making process among Japanese women with severe mental illness: A qualitative study

Abstract:

Purpose: To determine the process by which women with mental illness decide whether to have children.
Methods: This study adopted the Grounded Theory Approach. Twenty-three women with mental illnesses were recruited using theoretical sampling, and individual interviews were conducted online. They were asked about their decision-making process for having children. This study was approved by the Ethical Review Board Osaka University Hospital (approval no. 23362; 11/01/2024).

Results: After developing a mental illness, most women went through a period when they "could not afford to think" about children. When their illness subsided, they began to "wonder" if they would have children. They worried about "whether they could tolerate the symptoms," "taking care of their children," "the effects of medication," and "heredity." An important environmental factor for their decisions was the presence of "role models" who were raising children with illnesses and the "attitude and opinions of those around them." They decided whether to have children with their partners. Their choices are uncertain. Those who had given up on having children found value in "life without children." Those who had children "looked back" on the birth and upbringing of their first child and "thought about the future."

Discussion: Early preparation, stable medical conditions, childcare support, financial stability, role models, and supportive attitudes of those around women with mental illnesses are important factors in deciding to have children.
The authors declare that they have no conflicts of interest.

Kambo, Isabel | Lecturer, Aga Khan University - Kenya

Session Title: Re-imagining Community Health Nursing in Kenya, to address primary prevention of NCDs within Workplace Health Promotion milieu.

Abstract:

Introduction: Kenya is currently experiencing rise in Non-Communicable Diseases(NCDs) burden with incidence set to rise by 27% by 2030.(Ongosi et al., 2020; Wanjau et al, 2021). Kenya plans to reduce NCDs related deaths by 1/3 in keeping with SDG3.4.(Banatvala et al., 2023; MOH, 2021)The workplace is an ideal place to access a well population for prevention of NCDs. However, there is little research done in Kenya workplace sites regarding and existing initiatives, contributing towards NCDs prevention.

Purpose: Explore employers' and employees' perceptions of health and well-being in the workplace.

Methods: This was a qualitative descriptive research design (Doyle et al, 2019), where 17 participants from two Kenya urban organization, were interviewed using a semi-structured questionnaire. Ethical approvals were done as required and trustworthiness established. All interviews were audio taped and transcribed thereafter. Data analysis was done by utilizing thematic analysis framework (Braun & Clarke, 2016).

Findings: Three themes and nine sub themes were generated through thematic analysis. Findings showed that participants were aware about NCDs and identified role models as useful in influencing positive health behaviors and that organization should provide resources for health promotion. Employers valued health promotion in enhancing productivity and were willing to establish workplace health promotion initiatives. However, participants had not been engaged by nurses for any health promotion and prevention initiatives.

Discussion: Nurses as front line healthcare workers are a key resource in primary health care as champions for prevention of diseases like NCDs, among population groups like those in workplace sites. In this regard a conceptual model has been designed and is proposed to integrate community health nursing scope of.

Kara, Patterson | Senior Director, Early Detection

Session Title: A multimodal approach to vaccine behaviour change

Abstract:

There are many reasons why Canadians do and do not get vaccinated within specific communities. Understanding these reasons are important to tailor a range of strategies to support vaccine confidence and encourage uptake. Often to shift behaviour, such as vaccine uptake, a multimodal approach is needed to meaningfully make an impact. This workshop will explain how Praxus Health utilizes a multimodal approach to improve vaccine uptake and confidence focusing on using a blend of actionable insights, community engagement, health communications, and advocacy to develop education and impact practice change. Attendees will learn how to combine different approaches in understanding Canadians' behaviours around vaccination and consider a wide range of strategies to integrate into their day-to-day research, education, policy or implementation practice.

Kassam, Shahin | Postdoctoral Research Fellow, University of British Columbia

Session Title: Advancing Health Equity Using Intersectionality Environmentalism: An Exemplar with Women Living at the Epicentre of Climate Crises, Racism, Gender-Based Violence, & Migration Status.

Abstract:

Planetary health is a framework that provides guidance for nurse leaders, practitioners, educators, and researchers to integrate equity and social justice into practice. However, we propose integration of intersectional environmentalism (IE) as defined by Leah Thomas (2022) to ensure capturing interconnecting health determinants including race, gender, and socioeconomic status, and the forces that shape experiences within the nexus of these determinants. We begin our presentation with briefly describing alignment between the planetary health framework and central tenets of IE followed by how IE adds a critical analytical lens to advance health among populations disparately affected by growing climate change impacts globally. We provide a population exemplar, women living within the axes of gender-based violence, racism, and migrant status, and how climate changes including rising temperatures, extreme rainfalls, and consequential food insecurity further intensify these women's health and well-being. How IE is an appropriate approach to analyse the complexities of this population and two central strategies to integrate into professional practice, undergraduate curriculum, and underpinnings of research approaches will be described. Our first strategy involves examining local and global histories and current persistence of colonialism with focus on impacts within the crossroads of climate change, gender-based violence, racism, and migrant status. Within the same axes, we will examine our second strategy of climate optimism as a sustainable approach to equity-oriented solutioning.

Reference: Thomas, L. (. (2022). The intersectional environmentalist: How to dismantle systems of oppression to protect people + planet (First ed.). Voracious, Little, Brown and Company.

Kurbatfinski, Stefan | Student, University of Calgary

Session Title: The Evaluation of a Domestic Abuse Response Team Program in an Emergency Department

Abstract:

Purpose: Domestic abuse (e.g., family violence) occurs globally and increases the risk for lifelong adverse health outcomes for all members involved. Although victims of domestic abuse often refrain from seeking support due to various reasons (e.g., fear), health centers such as emergency departments (EDs) can serve as outlets for assistance. The Domestic Abuse Response Team (DART) is a program working collaboratively with a regional hospital center in Alberta, Canada, uniquely providing immediate, expert, and patient-oriented services (e.g., safety plans) to domestic abuse victims within the ED. This study aimed to evaluate the DART program by: (1) using administrative data to characterize ED and DART patient characteristics, and (2) examining staff perceptions about DART's operations, effectiveness, challenges, and improvements.

Methods: A mixed-methods approach was used to collect data from April 1st, 2019 to March 31st, 2020. Quantitative data consisted of descriptive statistics on patient and staff characteristics and qualitative data was collected through two surveys to determine perceptions of the DART program.

Results: Approximately 60% of ED patients were screened for domestic abuse and 1% were referred to DART, of which 87% were female. All referrals received support within an hour and were provided patient-oriented assistance. Qualitative data revealed that the DART program offers important support to patient victims, increases comfort around dealing with domestic abuse, and decreases ED staff workloads.

Conclusions: The DART program offers valuable support to domestic abuse victims. Staff reported that DART is effective in providing victims with immediate care and services while also supporting ED staff.

Kurbatfinski, Stefan | Student, University of Calgary

Session Title: Disentangling myths and misconceptions about intimate partner violence among sexual and gender minorities: An intial step to enhancing service deliver, health equity, and health policy

Law, Clare | Director, Better Start/Centre for Early Child Development (presented by Dr Cheryll Adams)

Session Title: Raising happy, healthy children together – changing practice and systems in a UK health visiting service.

Abstract:

Background: Over the past decade, Blackpool Better Start has integrated research and evidence into service design and delivery to support families from pregnancy to starting school. A key element is enhancing the Health Visiting Service with three additional universal visits and upskilling practitioners through training and supervision to deliver a suite of relationship-based, trauma-informed, evidence-based tools, assessments and interventions. This transformation is central to Better Start's system-wide approach, focusing on relationships, resilience, and research.

Method: The new model, co-designed with parents and practitioners, includes Newborn Behavioural Observations, early identification of speech and language needs, the Baby Steps antenatal education programme, routine trauma enquiry, and behavioural activation for postnatal low mood. Increased supervision and support ensure staff wellbeing and quality delivery. Standardised data collection and sharing support evaluation and modification using a test-and-learn model.

Learning: This enhanced model provides comprehensive early help and support to all families, paving the way for additional support when needed, often delivered by the health visitor. Upskilling the workforce ensures families do not fall through the cracks of separate services and can engage in timely interventions with a trusted practitioner. By leveraging 10 years of Better Start's learning, we have identified the best approach to early child development and health, optimising resource use.

Lawal, Gbemisola (Bemi) | Asst. Prof., University of Calgary

Session Title: Building intergenerational resilience through exploring the perspectives and experiences of Black seniors and youth on mental health

Abstract:

Black immigrants in Canada are faced with distinct mental health challenges that are influenced by systemic racism, cultural dislocation, and intergenerational tensions. Despite these challenges, Black seniors possess cultural knowledge and life experiences that can serve as strong sources of resilience. Meanwhile, Black youth have the potential to drive meaningful change. This study aims to examine how intergenerational connections can be used to promote mental wellness and resilience within Calgary's Black community.

Guided by the Family Resilience Conceptual Framework (FRCF), this research centers on understanding the lived experiences and perspectives of Black seniors and youth regarding mental health, as well as strategies for promoting resilience across generations. Using a Participatory Action Research (PAR) approach, the study includes in-depth interviews and intergenerational focus groups. Data will be analyzed using reflexive thematic analysis to capture the complex, culturally rooted narratives of participants.

Findings will illuminate how belief systems, family organization, and communication patterns influence resilience and mental well-being in Black families. The project aims to identify holistic, community-driven approaches to mental health promotion and to bridge generational gaps through shared understanding and collaboration.

This work will not only contribute to a deeper understanding of mental health among Black Canadians but also offer a culturally informed framework for strengthening intergenerational resilience and mental health support within diasporic communities worldwide.

Potential conflicts of interest: Some of the authors are founding members and board directors of the CBSF.

Lebold, Margaret | Graduate Student (Public Health Nurse), York University

Session Title: Abiding by primary health care and health equity: Exploring diverse public health nurses' insights and constraints during the COVID-19 pandemic in Ontario, Canada

Abstract:

While the global COVID-19 pandemic shone a light on the work of nurses globally, the insights held by Canadian public health nurses (PHNs) related to their knowledge, skills, and values working comprehensively and upstream to promote primary health care and health equity remained largely underapplied. In this presentation, I will review a subset of preliminary findings from qualitative 1:1 in-depth virtual interviews with (9) diverse PHNs who worked in public health settings in Ontario, Canada during the pandemic. Recruitment was purposive and aimed to maximize diversity in the sample. Critical thematic analysis (Braun & Clarke, 2021) was used. The findings reveal that despite provincial COVID-19 mandates which led to the extended pausing of many regular public health programs, PHNs' attention to health equity remained strong. PHN narratives reveal the complex and variably constraining features of public health practice during the pandemic, including PHNs' different positionalities, that either limited or promoted their ability to take action about (1) their ability to act with agency to meet their equity-deserving clients' needs during this time; and (2) their identification of needs for public health practice that focused beyond the acuity of the COVID-19 pandemic. Implications include recommendations for public health nursing related to standards of practice, highlighting the value of the inclusive and creative voices of PHNs in advancing health equity goals in public health (both during and beyond times of crises).

Letourneau, Nicole | Professor & Research Chair, University of Calgary

Session Title: Impacts, Scale, and Spread of the Attachment and Child Health (ATTACHTM) Parenting Program

Abstract:

Introduction: Parental reflective function (PRF)—defined as a parents' insight into their thoughts, feelings, and mental states, as well as their child's—predicts more optimal parent-child relationships and children's healthy development. In contrast, concurrent and historical exposure to adverse childhood experiences (ACEs), such as parental depression, family violence, or low-income undermine children's development. Parenting interventions focused on PRF, such as the Attachment and Child Health (ATTACH™) program, may be effective for families vulnerable to the negative impacts of early life adversity.

Methods: ATTACH™ consists of 10-to-12-weekly sessions with a trained facilitator to support PRF capacity. Pilot studies used randomized controlled trial and quasi-experimental designs with parent-child dyads (n=64) vulnerable to ACEs. An effectiveness-implementation hybrid (EIH) type 2 quasi-experimental design study with (n=100) similar families is currently underway. Scale and spread of ATTACH™ In-Person and Online programs are also ongoing in Canada and internationally in Brazil, Denmark, and France.

Significant Findings: Pilot data from 64 families show that ATTACH™ significantly improves: (a) PRF (d=.50-.61, OR=1.2),[1, 2] (b) parent-child relationship quality (d=.34-.95),[3] (c) children's attachment security (OR=2.3),[1, 2] (d) children's mental health (d=.50-.98)[3-5] (e) motor development (d=.81),[4, 5] and (f) children's immune cell gene expression linked to inflammation [6]. Additional analyses are ongoing.

Conclusions: ATTACH™ targets PRF and improves multiple parent, child, relationship and immune health outcomes in families at risk, and may address intergenerational impacts of mothers' exposure to ACEs on their children's health. ATTACH™ is being adapted to other languages, spread globally, and tested for Zoom™ delivery to increase accessibility.

Livingstone, Anitha | Senior Lecturer, University of South Wales

Session Title: Strengthening health systems to support family resilience in India

Abstract:

Aim: To identify the concept of family resilience as understood by Indian community health workers.

Method: The GCM method is facilitator-led and uses GroupWisdomTM software for data collection, data integration, and analysis. Data was collected from a group of community health workers from Rishikesh, India. Group Concept Mapping (GCM) has three sequential parts - brainstorming, grouping/sorting, and rating .In the brainstorming activity, participants are asked to generate statements in response to a focus prompt. The team analysed and discussed the results together.

Results: Using an on-line asynchronous method like GCM was very helpful to identify the concept of family resilience among the community health workers in AIIMS Rishikesh, India. The 118 statements generated were analysed and presented to the researchers of USW and AIIMS who helped develop the FRAIT India. A map with 8 clusters was finally chosen as this best reflected the statement clusters found in the pool of 118 statements. The cluster labels were: 'Empowered Family', 'Discord in Family', 'Resources and Life skills', 'Social and Cultural family', 'Resourceful Family', 'Health and Hygiene', 'Educated Family and Women Empowerment' and 'Gender Equality'. There were 62 statements that were considered most important and most essential, and these will form the basis for developing the Family Resilience assessment instrument and tool.

Conclusion: The pattern matches comparing the various demographic details consistently revealed that the statements from the 'Educated family' cluster and 'Women empowerment and gender equality' clusters were most important, and the 'Resourceful family' and 'Resources and life skill' clusters were least important. The concepts identified through our GCM study is being used to develop training material for community health workers and in development of an assessment tool to strengthen resilience of Indian families with children.

Maeno, Yukari | Kyushu University

Session Title: Factors Associated with Isolation of Elderly Recipients with Public Assistance

Abstract:

Objectives: The mortality rate of suicide in Japan is very high, especially the elderly. It is a big problem. The aim of this study was to clarity factors associated with the isolation of elderly receiving public assistance who had high risks of suicide.

Methods: Interview with the questionnaire was conducted by caseworkers of public assistance. 165 people aged 65 and over who were receiving public assistance in City A, living at home. The objective variable is the availability of someone to listen to their concerns and complaints. Explanatory variables are age, gender, presence of family members, duration of receipt, and regular visits to medical facilities. Logistic regression analysis was performed to calculate odds ratios and 95% confidence intervals.

Results: The presence of a person who listens to one's concerns and complaints was positively associated with gender and regular visits to a medical facility. It was not associated with age, family status, or duration of receipt of public assistance.

Conclusion: Regular medical visits might be able to be useful in preventing isolation of the elderly receiving public assistance. Nevertheless, it is the challenge that recipients of public assistance receive medical visit excessively. It is a necessity that welfare support is needed as an alternative to medical institutions.

Matsui, Rie | Assistant Professor, Gunma University

Session Title: Process leading to discontinuation of breast-cancer screenings among middle aged and older women in Japan

Abstract:

Objective: While the incidence rate of breast cancer in Japan peaks among women in their 60s to 70s, the rate of screening uptake peaks in the 50s and then declines from the 60s onward. Previous studies have not captured the longitudinal changes in awareness and behavior related to screening participation. This study aims to clarify the process of change in awareness and behavior from the initiation to the discontinuation of breast-cancer screenings among older women.

Methods: Semi-structured interviews were conducted twice with three women in their late 50s to early 70s. The data were qualitatively and descriptively analyzed using the trajectory equifinality approach. Ethical approval was obtained from the ethics review board of the institution to which the researchers belonged (Approval No.: HS2022-128).

Results: Upon reaching the target age for screenings, the participants recognized the necessity of screening and thus initiated participation. Despite experiencing discomfort and embarrassment, they continued to participate due to the reassurance of monitoring for abnormalities. Discontinuation triggers included the closure of the screening facility, reaching the age of free-screening eligibility, and the coronavirus disease 2019 pandemic, which resulted in declining motivation. Factors influencing screening awareness and behavior were the screening system and the presence and attitudes of family or others around them.

Conclusion: Providing educational opportunities for breast-cancer screenings to women and revisiting the screening system in response to the pandemic are crucial in encouraging the resumption and continuation of screenings.

Mizuta, Akiko | Research Fellow, Hamamatsu University School of Medicine

Session Title: Learning Outcomes of Nursing Students from Narratives of Community-Dwelling Patients with Psychosis: An On-Campus Practice During the COVID-19 Pandemic

Abstract:

Objectives: On-campus practices were set, since on-community practices were stopped because of the COVID-19 pandemic. This survey aimed to clarify the learning outcomes of nursing students in a public health setting on listening to the narratives of community-dwelling patients with psychosis.

Methods: Before the lecture, a public health nurse explained the peer supporter training programs by the government and a social worker explained the role of supporting the governments' project. An anonymous survey was conducted. The students decided whether they would participate in the survey. The content of responses and whether they responded would not have any disadvantage. Written descriptions of the students' thoughts were analyzed using Text Mining Studio 6.1.2. The clusters of contexts obtained in figures as clues and descriptions were categorized through the original text. We repeatedly checked the original text to ensure the validity and reliability of the results.

Results: All 32 students in 2022 and 38 students in 2023 (valid response rate; 97%) participated in the survey, 3,324 words were analyzed; 1,970 nouns (59.3%), 936 verbs (28.2%), and 82 adjectives (2.5%). The word network analysis results classified the descriptions into four clusters: "the role and importance of peer supporters" and "transition to regional support through collaboration" "The party-centered support" "Coexistence with disease"

Conclusion: Students learned that empathy with peer supporters was important and patients with psychiatric disorders were part of the community. Moreover, peer supporters were indispensable collaborators.

Moseley, Michelle | Director of Programmes (Learning and Development) Institute of Health Visiting

Session Title: "Full to the brim." Taking an ethnographic stance in evaluating the supportive nature of safeguarding supervision in health visiting practice.

Abstract:

Background: Safeguarding supervision involves providing specialist support and advice to practitioners who are involved in the safeguarding of the most vulnerable children. Health visitors work with children and their families aged 0-5 years and are regularly involved in safeguarding situations where children have been placed at risk of significant harm. Health visitors (HV) need the opportunity to critically reflect and feel supported in decision-making processes.

Aim: To explore and interpret how HV's are supported in safeguarding work, investigating the supportive role of safeguarding supervision.

Methods: An ethnographic approach including observing health visitors in practice, observing group supervision, interviews with HVs and safeguarding supervisors, HV focus groups and safeguarding record keeping reviews. The overall sample size included 41participants across three Welsh health boards.

Results: HVs usually felt supported by peers and supervisors in group supervision situations. Most participants would like access to detailed one to one supervision at least once a year. Health Visitors need to prepare for supervision and safeguarding supervisors require supervision training.

Conclusion: Safeguarding supervision provides a structured discussion between supervisee and supervisor to support and advise on specific complexities and challenges within their caseloads. A recommendation for the supervisors was to take a person-centred, restorative approach to safeguarding supervision. Safeguarding supervision training is essential to allow the supervisor to engage authentically and share decision making. For safeguarding supervision to enhance safeguarding practice effectively placing the child at the centre of practice, accountability and responsibility is targeted to the organisation, the supervisor, and the supervisee.

Mulcahy, Helen | Senior Lecturer Community Health, School of Nursing and Midwifery, University College Cork

Session Title: Standardised maternal postnatal care in the Public Health Nursing Service in the Republic of Ireland

Abstract:

Public health nurses (PHN) in Ireland are mandated to visit families within 72 hours of discharge from the maternity services; this encompasses a comprehensive assessment of the postnatal mother. Preceding the development of this initiative, practices varied around the country in relation to this assessment. There was no national guideline on maternal postnatal care and there were 13 different maternal postnatal records in use in the country. The aim of the initiative

- To promote a standardized, systematic and methodological approach to the assessment, planning, implementation and evaluation of maternal postnatal care in the PHN service.
- To provide mothers and their partners/families with the knowledge they need to recognize sepsis and other potential complications in the early postnatal period and seek medical attention when necessary.

Mulcahy, Helen | Senior Lecturer Community Health, School of Nursing and Midwifery, University College Cork

Session Title: A national training plan to build public health nursing capacity for breastfeeding support

Abstract:

Public health nurses (PHNs) in Ireland visit all new mothers within 72 hours of birth and provide a National Health Childhood Programme based on progressive universalism. Like midwives they were required to undertake mandatory breastfeeding training. Delivering effective evidence-based training to achieve practitioner competence demanded a re-design of the national curriculum. This was informed by newly convened National Infant Feeding Education Group and underpinned by a systematic review emanating from a related project. The resulting National Infant Feeding Education Programme (NIFEP) curriculum was a 4-phase blended learning programme. These phases comprised online learning modules, self-directed activities, in-person skills workshop and facilitated clinical practice. PHN and Midwife facilitators (n=64) were trained and the NIFEP pilot tested in three areas with participants (n= 71). Evaluation data from the pilot indicates that co-facilitation of skills workshop by midwives and PHNs, and multidisciplinary attendance at the sessions helped engagement and identifying solutions to improving current practices. The blended learning approach was effective with appropriate support for learners. All participants in the pilot stated they were confident or very confident in supporting mothers and babies with skin-to-skin care, positioning and attachment and hand expressing. Following minor amendments, the programme is currently being implemented with a view to ensuring nationwide.

Mulcahy, Helen | Senior Lecturer Community Health, School of Nursing and Midwifery, University College Cork

Session Title: Using public health nursing skills to enhance community engagement in a breastfeeding support initiative in underserved populations

Abstract:

This project presents a cutting-edge approach to addressing persistently low breastfeeding rates in Ireland by leveraging public health nursing expertise along with community partner expertise and Public and Patient Involvement within a community-driven, evidence-based framework. Public health nurses (PHNs), with their extensive roles across individual, family, and community health, are ideally positioned to lead this initiative, utilizing their skills in community profiling and health needs assessment. The project begins with an in-depth profiling of two distinct regions in Ireland to uncover the social and health determinants influencing breastfeeding practices. It will examine geographical, environmental, demographic, and socio-cultural factors. A comprehensive mapping of the existing breastfeeding support landscape will follow, covering statutory, voluntary, commercial, and informal sectors. This aims to provide a clear overview of the current support ecosystem and identify gaps hindering breastfeeding uptake and continuation.

Central to this project is Public and Patient Involvement (PPI), ensuring the research remains grounded in the experiences and needs of the communities involved. The existing community engagement skills inherent in our community partners will be enhanced by collaboration with PPI participants to help shape the research, making interventions evidence based as well as culturally and contextually sensitive. Insights from community profiling and needs assessment will guide the co-creation of interventions with community stakeholders, ensuring they are tailored to the specific needs, preferences, and resources of each community. By aligning breastfeeding support initiatives within community dynamics, this project aims to foster sustainable change, highlighting gaps in services and uncovering latent community strengths to co-design innovative, enhanced support systems.

Müller DeBortoli, Marit | Researcher

Session Title: Mapping the needs of public health professionals in child and adolescent health promotion services

Abstract:

The Norwegian Institute of Public Health established the national center for child and adolescent health-promoting services (NASKO) in 2023 to enhance evidence-based practices in public health. To ensure alignment with the needs of professionals in this field, NASKO conducted a survey among public health professionals across Norwegian municipalities, gathering 1,141 responses. Through analysis and prioritization, key research areas were identified, resulting in top ten prioritized reserach areas for the services, emphasizing reserach on health literacy, interdisciplinary and systems collaborations. This study can guide research efforts to focus on critical issues identified by the public health professionals, fostering innovation, collaboration, and the application of evidence-based practices in child and adolescent health promotion services.

Narita Taichi | Associate Professor, Niigata University

Session Title: Work Engagement and Related Factors among Public Health Nurses Recruited during the COVID-19 Pandemic for Municipalities in Niigata Prefecture, Japan

Abstract:

Objective: This study investigates the status and factors related to work engagement among public health nurses (PHNs) recruited for municipalities during the COVID-19 pandemic.

Methods: We conducted a cross-sectional study of PHNs recruited for municipalities in Niigata prefecture from fiscal years 2020 to 2022 and collected data on work engagement (UWES), demographic characteristics, subjective achievement levels, and the education systems within the organizations. Descriptive and multiple regression analyses explored factors associated with work engagement.

Results: We received 63 completed questionnaires, a response rate of 68.5%. The average duration of experience as a PHN was 3.7 ± 3.7 years. Among the participants, 45.2% worked in municipalities with populations of less than 50,000. The total mean UWES score was 3.0 ± 0.9. Univariate analysis revealed that participants with preceptors had significantly higher UWES scores than those without preceptors (p=0.001). Additionally, participants who had reflection meetings with their preceptors once or more a month showed significantly higher UWES scores than those who had such meetings only several times a year (p=0.010). Multiple regression analysis identified the presence of preceptors as a significant factor associated with work engagement (p=0.048).

Conclusion: This study highlights the essential role of preceptors in enhancing the work engagement of newly employed PHNs.

Ogata Yasue | Assistant Professor, Bukkyo University

Session Title: Relationship between relative poverty and daily screen time in 3-year-olds in Japan

Abstract:

Objective: Due to the increased prevalence of electronic devices, concerns have emerged in recent years about the effects on children's health of early and prolonged media exposure, including television viewing. This study aimed to investigate the relationship between socioeconomic status and the daily screen time of 3-year-old children in Japan, focusing on television and other video content.

Methods: Anonymous self-administered questionnaires were distributed to the parents of 3-year-old children attending health checkups in four districts of City A in Japan. Fisher's exact test and logistic regression analysis were used to examine the relationships between daily screen time, relative poverty, and the mother's educational background. In the logistic regression analysis, the dependent variable was prolonged daily screen time (more than 2 h), while the independent variables were the presence of relative poverty and the mother's educational level. Adjustments were made for the child's sex, nursery attendance, and birth order, as well as the mother's age and employment status.

Results: The average daily screen time was 114.2±80 min, and 27.0% of the children watched screens for more than 2 h per day. The odds ratio for prolonged daily screen time among children from relatively poor households was 1.976 (95% confidence interval: 1.022-3.821) compared with children from non-poor households.

Conclusion: When supporting families living in relative poverty, it is important to gather information about children's daily routines, including screen time, and to provide appropriate interventions based on those insights.

Ohno, Yoshiko | Professor, Gunma University of Health and Welfare

Session Title: A Qualitative Study on the Reality of Mutual Support Among Residents in an I-Turn District with a High Elderly Population

Abstract:

Background: As Japan's aging society progresses, research on the reality and contributing factors of mutual support among the elderly is increasingly necessary but remains limited (Ohta, R., et al., 2021).
Purpose: This study qualitatively analyzes how experiences following relocation to an I-Turn District (a term referring to migration from urban to rural areas) with a 50% elderly population in Town O influence mutual support among elderly residents.

Methods: Semi-structured interviews with five residents (aged 77–90) and three community welfare commissioners (aged 69–74) were conducted from December 2021 to December 2022, totaling 312 minutes. Thematic analysis, based on Udo Kuckartz's qualitative text analysis, was employed, with coding and reanalysis focusing on mutual support through Trajectory Equifinality Modeling (TEM). The analysis was validated through repeated discussions among co-researchers. Ethical approval was obtained from G University.

Results: Acts of providing support included significant examples of neighbors offering assistance, such as escorting three critically ill neighbors to the hospital over the past 20 years, consulting welfare commissioners during repeated emergencies, and introducing volunteer services to those in need. Welfare commissioners helped with routine tasks, like garbage disposal for elderly residents who faced difficulty. On the receiving end, residents like Mrs. Q (90, living alone) received ongoing transportation to medical facilities and community centers. In contrast, some residents, like Mrs. P (85, living alone), reported both receiving and rejecting support, noting that while neighbors assisted during hospital stays, daily mutual aid was limited.

Discussion: The findings suggest that building relationships after relocation significantly influences mutual support. As residents age, their roles shift from giving to receiving support, reflecting the complex and evolving nature of mutual aid within aging communities.

Okahisa, Reiko | Professor, Tokushima University

Session Title: Effectiveness of Lifestyle Improvement Support Program Using Strengths Perspective (Report 2)

Abstract:

Objectives: The purpose is to verify the effectiveness of the lifestyle change support program using the Strengths Perspective that was developed. The second report focused on identifying changes in lifestyle, self-monitoring, and measurements among nursing students who participated in the program.

Methods: Thirty-seven third-year nursing students from University A were divided into two groups: an intervention group (strength program) and a control group. Both groups were self-monitored one month prior to the start of the study. At the beginning of the study in July 2024 and 3 weeks and 2 months later, both groups were given a self-monitoring review and a lifestyle survey, and the intervention group was also given a strength check using a dedicated tablet. The intervention group worked in groups by strength type (Utilization, Reconstruction, Connectedness, Self -awareness), and the control group worked in groups based on self-monitoring. This study was approved by the Ethics Review Committee of his university (Approval No. 4368).

Results: No significant changes were observed in lifestyle habits or number of steps taken. There was an increase in the Perceived Health Competence Scale (PHCS), which indicates health management ability, but the difference was not significant. There was a significant difference in weight loss both 3 weeks and 2 months after the intervention ($p<0.01$).

Conclusions: It was suggested that lifestyle change support using the Strengths perspective could improve the subject's Strengths and lead to behavior change and health management.
This study was supported by JSPS KAKENHI Grant Number 21K11141.

Conflict of interest: None.

Oke, Stacy | Assistant Professor, Teaching, Faculty of Nursing, University of Calgary

Session Title: Transdisciplinary Work Integrated Learning: An Innovative Approach to Virtual Clinical Practice

Abstract:

Post-secondary institutions are compelled to create innovative and purposeful experiences where learners develop skills that create resilience, flexibility, adaptability, and entrepreneurial thinking in today's healthcare environment. A three-year transdisciplinary teaching and learning project between social work and nursing is examining the following research question: How can educators create innovative, sustainable work integrated learning experiences (WIL) for students in a rapidly changing practice context of diminished resources? This project aims to integrate the essential areas of teaching, learning and research in an iterative way to establish innovative approaches to support clinical practice. The project is grounded in experiential-based learning, emphasizing the integral role of students, community partners and educators in both disciplines throughout all phases of the WIL context.

This presentation will focus on the practice experience related to the project and provide an overview of the practicum model and transdisciplinary experience for students, educators and community to date. Our focus is to build capacity for rural/remote vulnerable populations in collaboration with local healthcare service providers while promoting resourceful clinical practice learning opportunities for social work and nursing students. This opportunity develops community connections supporting service provision to consumers through virtual field practicums and optimizing student/stakeholder experiences via service/support to rural, northern, remote communities, and vulnerable diverse populations across the province of Alberta. A focus was placed on inter-professional and community collaboration, and education opportunities between nursing and social work —a partnership to stimulate the value/benefits of transdisciplinary education that will build community capacity for WIL opportunities.

Okuda, Hiroko | Chief Senior Research Officer, National Institute of Public Health

Session Title: A Study on Improvement of Public Health Disaster Response Guide (PHDRG) Based on the Characteristics of Community Health Issues in the event of an Earthquake in Japan

Abstract:

Objective: In recent years, Japan has experienced frequent earthquakes that have caused extensive damage. During these events, public health nurses/PHNs have played an important role in implementing health measures for local residents. This study examined health activities during the most recent earthquake disaster to identify points to improve existing guide.

Methods: We analyzed the records from the debriefing sessions of PHNs following the Noto Peninsula Earthquake of 2024. Additionally, relevant information published by government agencies and materials provided during the site visits were used in the analysis.

Results: The affected areas, with an aging population ratio of approximately 50%, were concentrated at the tip of the peninsula, which made aid workers and logistical operations face access problems. As a result, the older people could not stay in their area and were forced to evacuate over long distances. The residents undewent significant stress becouse of prolonged evacuation period, while staff members experienced both physical and psychological strain. However, the existing PHDRG was inadequate in their assumptions for such a scenario.

Considerations: The PHDRG was developed about 10 years ago and partially revised five years ago. Wide-area evacuation measures are likely to become more common in Japan due to the aging population. To address these challenges,the PHDRG need to be updated to deal with wide-area evacuations and incorporate strategies for mental health support in rescue environments, including support for PHNs. Our results will help improve preparedness for future disasters.

Osawa, Eri | Chief Senior Researcher, National Institute Of Public Health, Japan

Session Title: Let's talk about what will be required of public health nurses to achieve universal health coverage!

Abstract:

Background: Universal health coverage (UHC) means that everyone has access to the full range of quality health services they need, when and where they need them, without financial hardships. It has been globally monitored as part of SDGs. However, stagnant improvements in health service delivery and increases catastrophic health care costs make it difficult to achieve UHC by 2030. The contributions of the field of nursing is one of the keys to accelerating the achievement of UHC around the world. In th statement by ICN, UHC will not be achieved without bold and innovative approaches to educate, develop and retain the health workforce. In this world café, we share our views on what need for for public health nurses (PHNs) to accelerate UHC meeting people's needs.

Key questions: What education, training, and career opportunities are needed for PHNs to accelerate the achievement of UHC?

Expected participants: The expected participants are those who currently work or have worked as PHNs, educators, researchers, and those involved in health policy development and nursing students. Bringing together participants from such diverse backgrounds provides a wide range of perspectives. The number of participants may be limited depending on the size of the venue.

Process: Participants meet in groups of four or five people at small café-style tables and will have three rounds of conversations about key themes related to their work, experience, and community, approximately 20 minutes each. We write, doodle, and draw key ideas on placemats in the center of the table.

Osawa, Eri | Chief Senior Researcher, National Institute Of Public Health, Japan

Session Title: Let's talk about what will be required of public health nurses to achieve universal health coverage!

Park, Bohyun | Professor, Changwon National University

Session Title: Typology of employment quality and corresponding health status differences among Korean workers

Abstract:

Purpose: The aim of this study was to classify Korean workers' employment quality using the typological approach and to identify the effect of social determinants including employment quality on workers' health status.

Methods: Using data drawn from the 6th Korean Working Conditions Survey, a typological classification of employment quality was performed by means of latent class cluster analysis. A total of 15 indicators representing seven dimensions were included in this analysis. The covariates of this study were workplace hazard exposure (environmental, ergonomic, and psychological), job control, and socioeconomic characteristics. Logistic and multiple regression analyses were conducted to identify the effect of social determinants, including types of employment quality, on poor self-rated health (SRH) and subjective mental health (SMH).

Results: Employment quality was classified into four types: standard employment relationship (SER)-protected (the highest) 24.11%, SER-weak 6.44%, unstable-SER 52.03%, and precarious (the lowest) 17.42%. Among the four groups, in unstable-SER, the poor-SRH proportion was the highest at 39.4%, and the lowest mean at SMH, 52.77. According to the two regression models, for the workers in the unstable SER type, the likelihood of poor SRH was greatest and the likelihood of SMH was lowest among four types. Among other social determinants of health, presenteeism, age of 50 or older, and education under middle school were found to have a large negative effect on two dependent variables.

Conclusions: More than half of Korean workers were found to be unstable-SER, and their health status was the worst. In addition, our study indicated that employment quality is an important determinant of worker health. In order to enhance Korean workers' health equity, policies should be developed to reduce differences in employment conditions among the employment quality types.

Risling, Tracie | Associate Dean Innovation, Faculty of Nursing University of Calgary

Session Title: The Global Reach of Technology and Nursing

Abstract:

As the pace of technological change continues to accelerate around the world nurses have never been more needed to design, deploy, evaluate and advocate for technology advancement in the best interest of the health of people and the planet. Public health nurses in particular will play a critical role in advancing digital care and supporting communities to navigate the rapid changes technologies like artificial intelligence are creating on a global scale.

Risling, Tracie | Associate Dean Innovation, Faculty of Nursing University of Calgary

Session Title: Think Tank: Untitled AI & Tech

Rusi, Heather | Doctor of Nursing Student, University of Calgary

Session Title: Conceptualizing the commercialization of human milk: A concept analysis

Abstract:

Background: Donor human milk is recommended when infants are unable to be fed their mother's own milk or require supplementation. For-profit companies use technologies to create human milk products for infants in the neonatal intensive care setting without consistent guidelines and regulatory frameworks in place. This commercialization of human milk is inadequately conceptualized and ill-defined.

Research Aim: The aim of this study is to conceptualize and define the commercialization of human milk and discuss the need for policy guidelines and regulations.

Method: Using a concept analysis framework, we reviewed the literature on the commercialization of human milk, analyzed the antecedents and potential consequences of the industry, and developed a conceptual definition. The literature review resulted in 13 relevant articles.

Results: There has been a surge in the development and availability of human milk products for vulnerable infants developed by for-profit companies. Commercialized human milk can be defined as the packaging and sale of human milk and human milk components for financial gain. Factors contributing to the commercialization of human milk include an increased demand for human milk and consequences include potential undermining of breastfeeding. The lack of guidelines and regulations raises concerns of equity, ethics, and safety.

Conclusion: The industry is rapidly growing, resulting in an urgent need for consistent guidelines and regulatory frameworks.

Sakamoto, Mariko | Professor, PhD, Aichi Medical University, College of Nursing

Session Title: Japanese Public Health Nurses and Cross-Cultural Care: Lessons from the Field

Abstract:

Background: Prefecture A in Japan has a high proportion of non-Japanese residents, exceeding 7% of the population in some areas. Although cross-cultural nursing is part of basic education, many public health nurses (PHNs) lack this training. In such communities, PHNs face challenges and work to improve their practices through trial and error.

Aim: This study aims to explore the culturally sensitive responses developed by PHNs in areas with high concentrations of non-Japanese residents, based on their practical experience in providing health support.

Method: A qualitative inductive study was conducted through interviews with PHNs in areas with significant non-Japanese populations. Ethical considerations, including personal data protection, were addressed, with approval from the university ethics committee.

Results: We interviewed 12 PHNs from 9 local governments. They emphasized the need to clearly explain their roles and support, listen to non-Japanese residents' cultural backgrounds and health systems, and avoid imposing Japanese practices. The PHNs highlighted understanding residents' support networks, sharing information, and collaborating effectively. They used interpreters or translation devices for communication, noting it took longer than with Japanese residents. They also shared confusion from cultural differences and concerns about unintentionally pressuring non-Japanese residents with their advice.

Conclusion: PHNs in areas with many non-Japanese residents have gained experience and developed culturally sensitive approaches. However, they sometimes face confusion due to differences in customs and cultural perceptions.

Samanani, Salim | Medical Specialist and Founder, OKAKI

Session Title: Mission possible: Closing the immunization gap with First Nations in Alberta, 2008-2025

Sasaki, Yuko | Aichi Medical University College of Nursing

Session Title: Spiritual needs of clients who lived their end-of-life at home

Abstract:

Purpose: To clarify the spiritual needs of clients who lived their end-of-life at home

Methods: A qualitative descriptive study

Participants: Ten clients in their 40s to 100s

Data and data collection:Verbatim records of participants' narratives, semi-structured interviews

Analysis: Qualitative inductive analysis

Ethical consideration: The Ethics Committee of the University of Human Environments approved this study (2019N-005).

Results: 8 themes representing spiritual needs, comprising 40 major categories and 245 categories: [I want to live], [I want to have a deep appreciation of life and understand myself], [I want to explore the meaning of life], [I want to live my life to the full and acknowledge that I have found value in life], [I want to create my own life until the end], [I want to feel fulfilled throughout my life], [I want to continue being the one who gives love to the family at home], and [I hope a happy society will be created].

Discussion: The spiritual needs of clients living an end-of-life at home were to cherish their lives with people, have a strong motivation, and live as positive residents in the community. The reason for living at home under end-of-life care provides the spiritual needs of ""experience value"". They can experience something close to natural way of life and loving people.

Sato, Miki | Chief Senior Researcher, National Institute of Public Health

Session Title: Construction of a Family Empowerment Model for parents with young children by simultaneous multiple populations analysis: An examination by age of children

Abstract:

Background: In Japan, as societal connectivity declines, the issue of social isolation among families with children is becoming increasingly prevalent. To provide effective support to families during the child-rearing period, it is essential to adopt an empowerment perspective that enables the proactive addressing of their own health issues.
Aim of the study: This study aimed to examine a model of family empowerment for parents raising children 0-3 years old by child age.

Methods: An internet-based survey was conducted among five hundred parents (250men and 250 women) with children aged 0 to 3. A simultaneous multiple population analysis of five subfactor influences by child age was performed using covariance structure analysis, and a model was selected based on goodness of fit indices (CFI, RMSEA).

Results: The model of family empowerment by child age was a good fit with CFI=0.868 and RMSEA=0.040 according to five factors; "Relationships within the family," "Parental coping skills," "Recognition and combined use of services," "Connection to community" and "Sense of achievement as a parent." Differences by child age were evident in the path coefficients of the subfactors in the pathways from "Relationships within the family to "Recognition and combined use of services," and from "Connection to community" to "Parental coping skills" between 0-year-olds and other ages.

Conclusions: The magnitude of influence of the subfactors of family empowerment for parents with infants and toddlers differed by the age of the children, suggesting the possibility of using these factors to support families at different developmental stages.

Sato, Miyuki | Professer, Niigata University

Session Title: Human Resource Development System for Newly Appointed Public Health Nurses in Municipalities in Niigata Prefecture: Comparison by Population Size

Abstract:

Object: The purpose of this study was to clarify the human resource development system for newly appointed public health nurses in municipalities in Niigata Prefecture (hereinafter referred to as the development system) according to population size.

Methods: A self-administered questionnaire survey was conducted on 30 public health nurses in supervisory positions belonging to all municipalities in Niigata Prefecture by mail. The content of the survey is the population of the municipality, the development system, and its evaluation. The relationship between the development system and population size was analyzed using Fisher exact test . This research was approved by the Research Ethics Review Committee at Niigata University[2023-0147].

Results: There were 19 valid responses [63.3]. In the four items, the significant relationship between population size and the development system was identified, to which municipalities with less than ten thousand population tended to answer negatively.

Conclusions: This study suggests Niigata Prefecture Government should assist prefectural public health centers in coordinating municipalities in the region to establish training systems for newly appointed public health nurses beyond affiliated organizations.

Schaffer, Marjorie | Retired, NA

Session Title: Application of the Public Health Intervention Wheel to PHN Practice in the Indian Health Service

Abstract:

In 2023, public health nursing (PHN) leaders with expertise in application of the Public Intervention Wheel to PHN practice delivered five virtual sessions on using the framework to the Shiprock Unit of the Indian Public Health Service in the United States. The framework features 17 interventions grouped into five colored wedges of interventions often used together. Each session featured a 2.5-hour PowerPoint presentation on a specific wedge, work group time for application to a case study, and an interactive session with 11 health centers and hospitals located within the Shiprock Unit. Case studies selected for application to practice included:

1. responding to the increasing incidence of syphilis cases across the Navajo Nation population;
2. PHN interventions for diabetes care in the home;
3. maternal-child interventions to support healthy pregnancies and child health;
4. public health response to uranium mining in the Navajo Nation; and
5. policy implications of the Navajo Nation Healthy Diné Nation Act.

A follow-up evaluation indicated 93% to 97% of respondents strongly agreed or agreed that session content, application, and delivery were effective. Participant comments indicated PHNs planned to use more collaboration, advocacy, social marketing, case management, case-finding, and coalition building in their practice. Suggestions included recommendations for using Wheel interventions in PHN orientation, monthly reports, and discussion of interventions in team meetings.

Snell, Diana | Associate Professor (Teaching), University of Calgary

Session Title: Building better programs: Insights from a process evaluation of a shared site intergenerational program

Sugiyama, Kimi | Junior Associate Professor, Mie Prefectural College of Nursing

Session Title: Current Status and Challenges in Understanding Family Caregivers Caring for Older People While Raising Children in Japan: A Literature Review

Abstract:

Objective: Family caregivers who care for older adults while raising children include not only primary caregivers but also secondary caregivers. How support center staff perceive the burden of secondary caregivers affects the quality of support. This study aimed to clarify the extent to which staff at Japanese support centers are aware of the existence of family caregivers who care for older adult family members while raising children.

Method: Using the Ichushi Web database, a search was conducted using the Japanese keywords “”community comprehensive support center,”” “”family caregiver,”” and “”assessment.”” Search criteria were limited to literature published between 2014 and 2023, excluding conference proceedings, and nine articles were identified. Of these, five Japanese articles discussing caregiver assessment were collected. Additionally, one national survey report and one family caregiver support manual were collected, resulting in seven papers for analysis.

Results: A search of the Japanese literature revealed that none of the seven studies investigated family caregivers as primary or secondary caregivers. Yamaguchi et al. (2019) pointed out the vulnerability of family caregivers who play multiple roles in Japanese society. Nakata et al. (2022) showed that 72.1% of care workers recognized the need for support for caregivers who balance caregiving and child-rearing; however, a 2023 nationwide survey found that only 30.7% of facilities regularly evaluated family caregivers, and only 30.0% of centers included a question regarding whether caregivers “”balanced work and child-rearing”” as an assessment factor.

Conclusion: This study suggests that caregivers other than primary caregivers may not be fully recognized in Japan.

Sugiyama, Kimi | Junior Associate Professor, Mie Prefectural College of Nursing

Session Title: Dietary Behaviors Associated with Changes in HbA1c Levels in National Health Insurance Beneficiaries in Japan

Abstract:

Objective: To identify dietary behaviors associated with changing HbA1c levels among National Health Insurance (NHI) beneficiaries in Toyokawa City, Japan.

Methods: In total, 3,252 people who underwent Specific Health Examinations in 2010 and 2016 and were not on diabetes medication were invited to participate in this study. Dietary behavior data collected by questionnaires were anonymized and linked to HbA1c data recorded during the examinations. HbA1c levels were classified into four categories; low risk (<5.6%), high risk (5.6%–5.9%), borderline (6.0%–6.4%), and diabetes (☐6.5%). Next, HbA1c levels were compared between 2010 and 2016, and participants were categorized into three groups: improved, worsened, and unchanged. The improved and worsened groups were each compared to the unchanged group by Mann–Whitney U test, and multiple logistic regression analysis (adjusted for sex and age) was performed to identify factors influencing the changes.

Results: Of 1,969 respondents (response rate: 60.5%), 1,592 returned fully completed questionnaires that were included in the analysis. The factor “I avoid fried foods and oil” was associated with improved HbA1c in men, but no factors were significantly associated with improved HbA1c levels in women. Multiple logistic regression analysis identified “I avoid fried foods and oil” as an improving factor and “It’s my sweet tooth that makes me fat,” and “I am dissatisfied with the small number of dishes at dinner” as worsening factors.

Sullivan, Jo | Associate Professor, University of Salford

Session Title: Co -creating neuroinclusive resilience and workforce capacity in clinical learning environments with autistic student nurses: A pilot project.

Abstract:

1 in 68 people are thought to be on the autistic spectrum (Christensen 2018) and between 10-20% of the global population is estimated to be neurodiverse . However, little understanding exists regarding the unique challenges these individuals may face when wanting to join the healthcare workforce . Furthermore the barriers women face in receiving a diagnosis (particularly of autism) is well documented (Lockwood et al 2021), This compounds challenges in a globally female-dominated workforce and can lead to poor resilience and attrition from working environment (Cleary et al 2023).

This innovative project has national and international impact ; our project team created a 'toolkit' for workforce educators and a national eLearning resource to support an inclusive learning environment that build capacity and facilitate neurodivergent students' progression and entry into the workforce. Our work involved collaboration with our clinical education providers in creating enabling clinical learning environments for autistic students to build a resilient future workforce.

Uniquely, the knowledge and expertise was led by our autistic student nurses and utilised their live experience of clinical working to inform its direction. This project was exceptionally well evaluated by neurodiverse students describing the 'transformational' experience of learning in environments that had utilised our toolkit and accessed the eLearning resources we created . We would welcome the opportunity to globally share our experience .

This innovative project ensures that we can build resilience for future neurodivergent members of the global workforce, build greater capacity and understanding and drive global positive change.

Tada, Miyuki | Assistant Professor, Institute of Biomedical Sciences, Tokushima University, Graduate School

Session Title: Effectiveness of Lifestyle Improvement Support Program Using Strengths Perspective (Report 1)

Abstract:

Objectives: The purpose is to verify the effectiveness of the lifestyle change support program using the Strengths Perspective that was developed. The first report focused on identifying the actual strengths of the nursing college students who participated in the program.

Methods: Thirty-seven third-year nursing students from University A were divided into two groups: an intervention group (strength program) and a control group (standard program). Both groups were self-monitored one month prior to the start of the study. At the beginning of the study in July 2024 and 3 weeks and 2 months later, both groups were given a self-monitoring review and a lifestyle survey, and the intervention group was also given a strength check using a dedicated tablet. The intervention group then worked in groups by strength type (Utilization, Reconstruction, Connectedness, Self -awareness), and the control group worked in groups based on self-monitoring. Both groups also self-evaluated their goal attainment. In the first report, we report on changes over time in strength and goal attainment in the intervention group. This study was approved by the Ethics Review Committee of his university (Approval No. 4368).

Results: In terms of changes in strength in the intervention group, the overall score, Utilization, Reconstruction and Connectedness strength scores were higher after 2 months than at the beginning of the study, but the differences were not significant. In terms of change over time in goal attainment, achievement was significantly higher after 2 months than after 3 weeks ($p<0.05$).

Conclusions: It was suggested that lifestyle change support using the Strengths perspective could improve the subject's Strengths and lead to behavior change. We would like to further increase the number of subjects and continue to statistically verify the effectiveness of the program. This study was supported by JSPS KAKENHI Grant Number 21K11141.

Conflict of interest: None.

Tamura, Haruka | PhD candidate, Nagoya University

Session Title: Association between social media use and potpartum depression among new mothers in Japan

Abstract:

Background: The association between social media use and mental health in postpartum women is unclear. This study aimed to explore the association between social media use and postpartum depression using data from a study of Japanese mothers with toddlers.

Methods: Anonymous online surveys were conducted in January 2020 and May/June 2022 for new mothers. The survey included the Edinburgh Postpartum Depression Questionnaire (EPDS) and questions about lifestyle factors (e.g., diet, sleep, and physical activity). The analysis was performed using SPSS software. A χ^2 test was conducted to assess the relationship between persistent postpartum depression and lifestyle factors two years after childbirth. Logistic regression was used to analyze the association further, adjusting for age and employment status.

Results: Out of 771 initial and 339 follow-up responses, Facebook and Twitter use were associated with postpartum depression in both the initial and follow-up surveys. However, no association was found with time spent on Instagram or online chat.

Discussion and Conclusion: Facebook and Twitter use were linked to postpartum depression at two points: shortly after childbirth and two years later. Previous studies have shown that social media use, particularly the type of platform, can negatively affect women's mental health. This pattern appears to apply to postpartum mothers as well and should be considered when addressing postpartum mental health. While prior research has often considered overall smartphone or screen time, it is important to examine how specific social media platforms impact mental health.

Tanabe, Seiko | Lecturer, Nagaoka Sutoku University, Nagaoka Niigata, Japan

Session Title: Determinants of Dietary Variety Score among the late elderly living in a rural village in Japan.

Abstract:

Aims: To identify factors defining food intake diversity among elderly people in a rural Japanese village.

Methods: A questionnaire was sent in April 2019 to residents aged 75 and older eligible for health checkups. Survey items included demographics, living conditions, and the frequency of consuming 10 food groups like protein and vegetables. Food intake diversity scores were categorized as low (3 or less) and high (4 or more), and logistic regression was applied to analyze factors increasing diversity. This study was conducted after approval of the Research Ethics Committee of J. F. Oberlin University (No. 17037). Questionnaire were mailed to participants with an explanation of the study and a request for cooperation. Consent was deemed given upon submission of the completed survey form.

Results: Among the 504 respondents, 447 were included in the analysis after excluding those with incomplete data. Participants included 187 men (41.8%) and 260 women (58.2%) with an average age of 80.4 years. The average food intake diversity score was 3.9, with 46.5% in the low group and 53.5% in the high group. Factors associated with higher food intake diversity included living with others (Exp(B)=2.29), having a comfortable lifestyle (Exp(B)=1.69), frequent outings (Exp(B)=1.71), and avoiding certain foods for health reasons (Exp(B)=4.16).

Conclusions: Our findings indicate that factors like food access and health awareness may influence dietary diversity. Promoting diverse food consumption is essential for preventing nutritional deficiencies in the elderly. Future research should examine how food intake diversity changes over time as rural residents continue to age.

Thomas, Michelle Teresa | Dr, University of South Wales

Session Title: World Cafe - Understanding and developing concepts of family resilience

Abstract:

In Wales assessment of family resilience is intrinsic to the role of the Specialist Community Public Health Nurse -Health Visitor (SCPHN). Public health policy (Wales Government 2016) and practice in Wales however is not always straight forward. Since 2017 the Family Resilience Assessment Instrument and Tool (FRAIT) has been used by all Specialist Community Public Health Nurse Health Visitors in Wales to provide an evidence based assessment that supports decision making and referrals for support for the families that they work with.

Building on the portfolio of work already established, recognising that family resilience can be tested by health inequality we will facilitate a world cafe exercise around the concept of family resilience. The world café will replicate aspects of the group concept mapping research that underpinned the development of the Family Resilience Assessment instrument and Tools Wales and India. The activity will ask participants to address a prompt statement/ question, consider inequalities in health and to share their thoughts on family resilience. The key statements will be negotiated into key statements reflecting their understanding and ideas of family resilience.

This interactive session will encourage discussion and debate among the participants with a shared goal of raising awareness of and understanding each other's ideology around family resilience as opposed to individual resilience. The session will be underpinned by reference to research completed by the team involved in developing FRAIT Wales and FRAIT India and will build on a successful session previously facilitated with public health MSc students at AIIMS Rishikesh India.

Thomas, Michelle Teresa | Dr, University of South Wales

Session Title: Developing a self assessment tool for family resilience

Abstract:

In Wales assessment of family resilience is intrinsic to the role of the Specialist Community Public Health Nurse -Health Visitor (SCPHN- HV) (Wales Government 2021). The FRAIT was developed in partnership with PHN-HV to provide an evidence based assessment tool to assist decision making and referrals to support families receiving HV services. Since 2017 the (FRAIT) has been used by all SCPHNHVs in Wales and is embedded in public health policy (Wales Government 2021).

The concept of family resilience in Wales was explored and developed using group concept mapping software (Kane and Trochim 2007). Public health nurses- health visitors provided statements of what they looked for when working with families and after sorting and rating these statements were developed into the Family Resilience Assessment Instrument and Tool (Wallace et al 2018) (WWW.FRAIT.WAles). Ongoing research and validity testing of the FRAIT, eFRAIT and the self administered tool reinforce the value of this assessment in public health nursing.

A call for a self administered version of the FRAIT was addressed and a 10 question self administered assessment and user guidance utilising the key concepts identified in the GCM informing the FRAIT has been developed. Ethical approval was sought and granted by the ethics committee at the University of South Wales and the self assessment tool and guidance were tested for acceptability and usability in two settings in Summer/Autumn 2024 and the findings of the research will be presented.

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Thomas, Naika | Health Equity Specialist, Ottawa Public Health

Session Title: Addressing Microaggressions: Anti-Racism Practice in Public Health

Abstract:

This oral presentation will detail the obstacles and lessons learned from developing a microaggressions procedure at Ottawa Public Health (OPH), exploring the following themes: health policy and advocacy, workforce development and capacity building, health equity and the social determinants of health.

Background: The COVID-19 pandemic magnified inequities resulting from centuries of racist and discriminatory structural policies leading to disproportionate health impacts from the virus within equity-denied communities. As part of pandemic-recovery, OPH is working towards becoming an anti-racist, and anti-oppressive organization in both its client-facing operations and internal policies and procedures. In 2022, an organizational diversity audit revealed that microaggressions are common at OPH and have lasting impacts on equity-denied groups. The audit highlighted the lack of knowledge and safe mechanisms for employees and leaders to address microaggressions. An environmental scan determined that no local health units have a workplace microaggressions procedure, a gap addressed by OPH.

Methods: A multi-disciplinary working group representing multiple social and intersecting identities developed a procedure that addressed microaggressions through facilitated conversations. Two phases of consultations were held with hundreds of employees and leaders to inform changes and ensure buy-in. Case-based scenario training on microaggressions were held for leaders and employees to address future instances of reports of microaggressions.

Results: OPH's Microaggressions Procedure was piloted summer 2024 with a subset of leaders as designated "responders" for initial reports. Results are pending from the first month of submissions.

Conclusion: This procedure had several obstacles in its inception with with many lessons learned. Next steps and areas of exploration include scalability for other organizations.

Troute-Wood, Tammy | Provincial CDC Guidance & Training Team, Alberta Health Services

Session Title: Building positive leadership skills for public health workforce in the post-COVID era.

Abstract:

The goal of the oral presentation is to provide an overview of the practical application and evaluation of the Positive Leadership Series initiative to develop leadership and resiliency capacity of frontline Alberta Health Services (AHS) Provincial Communicable Disease and Control (CDC) workforce who work remote.

Background: Healthcare workers are the heart of public health service delivery. The pressures on workers including staff and resource constraints, changing working environments and post-COVID burnout are universal. Innovative approaches to build resilience and leadership in the workforce are needed to drive positive change. The mandate of AHS CDC is to prevent and control notifiable diseases under the Communicable Disease regulations of the Public Health Act of Alberta. During the pandemic AHS CDC adapted to meet operational demands including increasing the number of workforce employees and moving to remote work. During the COVID-19 response, leadership enhancement sessions were facilitated with team leaders, and evaluation demonstrated value and desire to continue with leadership capacity building. Work continues in the post-COVID era. The AHS CDC Guidance & Training (GT) team will be launching the Positive Leadership Series in Fall 2024 with evaluation summer 2025. The series is comprised of four, one-hour virtual facilitated sessions including: Being an Agile Leader, Effective Communication, Promoting a Culture of Growth and Building Connections.

Troute-Wood, Tammy | Provincial CDC Guidance & Training Team, Alberta Health Services

Session Title: World Cafe - Fostering a strong virtual culture for remote workers.

Abstract:

Goal: The goal of the World Café discussion question is to create dialogue and produce practical strategies to foster a strong virtual culture for a public health workforce who work remotely.

Question: Describe practical strategies to foster a strong virtual culture for public health workforce that work remotely.

Background: Healthcare workers are the heart of public health service delivery. The pressures on workers including staff and resource constraints, changing working environments and post-COVID burnout are universal.
During the COVID response, Alberta Health Services (AHS) Communicable Disease Control (CDC) program adapted to accommodate increasing workforce size and virtual work. Addressing the needs of a remote workforce is a relatively new phenomena in healthcare.

Ude, Assumpta | Lead Researcher, International Society of African Bioscientists and Biotechnologists

Session Title: Unveiling Healthcare Workers' Knowledge about Ageism in Nigeria and the Need for Training Next Generation of Caregivers.

Abstract:

Introduction/Background: Ageism in healthcare can negatively impact older adults' health and quality of life. Despite its prevalence, many healthcare workers (HCWs) remain unaware of their own ageist attitudes. This preliminary study assessed HCWs' knowledge of ageism in Nigeria, highlighting the need for training among the next generation of caregivers.

Objectives: The purpose is to unveil Nigerian HCWs' awareness of ageism and identify the need for targeted training.

Method: The Health Belief Model and surveys developed by various ageing health experts guided the study design and framework. Researchers distributed 18-item cross-sectional survey to HCWs across all geopolitical zones in Nigeria.

Analysis: Authors utilized Google Surveys and Excel to analyze and summarize responses on demographics, knowledge of ageism, and experiences with ageism.

Results/Findings: Of 75 participants, most were nurses (61%) and young professionals (age 25-34, 41%). While 71% rated themselves as 'somewhat or very aware of ageism' 73% correctly identified observed ageist behaviors. Half reported experiencing ageism themselves. Bias in treatment decisions, dismissal of decisions, lack of respect, and stereotyping were common ageist behaviors observed.

Study Implication: This preliminary study findings underscore further need for a large-scale study in Nigeria and for planning future innovative training on ageism.

Strength: The online survey efficiently engaged younger HCWs (Gen Z and Millennials).
Limitation: Many of the respondents were nurses, which may limit generalization.
Conclusion: While some awareness of ageism exists among Nigerian HCWs, there is need for targeted education to foster a more inclusive and equitable healthcare environment for older adults.
Ethical Considerations: Participation was voluntary, and researchers ensured.

Ugland, Kari Glesne | Public Health Nurse, The University of Stavanger, Norway

Session Title: The Public health nurse's scepticism about participating in a study on interaction guidance in child health services- From resistance to a desire for guidance

Abstract:

Health promotion at the family health clinics in Norway should focus on the parent-child interactions, and knowledge is needed about counseling. To learn from experienced-based knowledge, we need public health nurses (PHNs) to share their experiences. We explored the PHNs´ willingness taking part in research to uncover their practices of counseling on parent-child interactions.PHNs were invited by email through their managers (n=55) from 38 municipalities. A personal presentation in two different regional groups were also conducted. A preliminary thematic analysis of comments concerning participation from written responses, conversations, interviews and diaries was conducted. Within five months, a total of nine PHNs had agreed to participate, six PHNs were recruited through a request from their manager and three through direct personal contact. We received no response from 20 municipalities. PHNs articulated skepticism and uncertainty for participating. They found our research scary and weren't sure they could share or show. Throughout observations and interviews, PHNs´ approach towards sharing insights developed from initial skepticism and fear to a desire for feedback and deeper knowledge including naming previously tacit practice. PHNs articulated skepticism and uncertainty for participating. They found our research scary and weren't sure they could share or show. Throughout observations and interviews, PHNs´ approach towards sharing insights developed from initial skepticism and fear to a desire for feedback and deeper knowledge including naming previously tacit practice. The research process seemed to demand elements that PHNs´ embrace in interaction guidance: trust and care, an open door for vulnerability and reflection, and new insights. Such openness might create discomfort, but also allow room for personal and professional growth. The study process and nurses´ experiences could be interpreted as a parallel to possible parental experiences in counseling.

Ushio, Yuko | Professor, Yamaguchi University

Session Title: Instructors' use of metacognition in public health nursing practicum

Abstract:

Aim: In an era characterized by volatility and uncertainty, nurses must be adaptive and autonomous. Metacognition can help nurture such ability. The purpose of this study is to explore how instructors utilize metacognition in public health nursing practicum.

Methods: Semi-structured interviews were conducted with five instructors at three universities in Japan; the participants were asked to recall specific teaching situations and describe what they did. The interviews were audio-recorded and transcribed. Using Artzt and Armour-Thomas' framework(1998), one or more of the four components of metacognition (knowledge, beliefs, goals, monitoring and regulating) was identified in each meaning unit; next, how the components appear in the instructors' narratives was analyzed. This study was approved by the first author's University Research Ethics Committee.

Results: The ""knowledge"" metacognition component included student characteristics, their level of comprehension and interest, and the tasks and goals of the practicum. The ""beliefs"" component included beliefs about the role of instructors and students, and the value of nursing; the ""goals"" component included the learning objectives they believed to be important. Reflective comments about their own teaching were categorized as ""monitoring and regulating"". In some instances the instructors employed many components of metacognition while in others they used only a few.

Discussion: These findings suggest the instructors' metacognition was oriented toward both the situations in which the practicum took place and their internal belief system. How instructors utilize metacognition in student instruction appears to be influenced by factors related to the situation and those associated with the instructors themselves.

Vandenberg, Shannon | Instructor, University of Lethbridge

Session Title: A scoping review of planetary health in nursing

Abstract:

As one of the largest health professions, nurses are integral in advancing human and planetary health. Although adopting a planetary health perspective is crucial for nurses to mitigate ecological disruptions and human health, little is known of how planetary health is incorporated into nursing literature. Thus, a scoping review was conducted to determine how the term "planetary health" is incorporated into nursing literature and what has been published about planetary health. Using Arksey & O'Malley methods, 67 articles met the criteria for the scoping review, with the majority published between 2017 and 2024. This scoping review revealed that there is an abundance of recent literature on planetary health in nursing; however, the literature primarily includes calls to action within commentaries, editorials, and discussion papers, and a lack of original research is apparent. Given that planetary health is a relatively new term, particularly in nursing, and it is an emerging field, there is acknowledgement in the published literature of the need to adopt planetary health within the profession. With the increased trajectory of publications in planetary health nursing over the past five years, nursing is well-positioned to build on the momentum of establishing a unique nursing voice in the discourse on planetary health. There is a need to publish the important work nurses are doing in planetary health to answer the calls to action presented in the retrieved results to integrate planetary health into the profession to ensure nurses continue their critical role in caring for patients and the planet.

Vandenberg, Shannon | Instructor, University of Lethbridge

Session Title: Preparing current and future nurses to address climate-driven vector-borne disease

Abstract:

As a result of climate change, vector-borne diseases are on the rise across Canada, and as the landscape of education, prevent and treatment continue to shift, it is critical that nurses are supported in this role. Nurse educators are tasked with preparing the next generation of nurses to respond effectively to vector-borne disease, while nurses in practice require continuing education related to emerging vector-borne diseases. In 2018, the Canadian Association of Schools of Nursing (CASN) developed nursing education guidelines on vector-borne disease and a set of online modules to support preparation of future nurses in understanding primary, secondary and tertiary prevention of vector-borne disease and the nurses' role in advocating for healthy public policy.

However, the landscape of nursing and vector-borne disease in Canada has changed substantially since the time of development (2018), and a new project aims to better prepare the next generation of nurses to address climate-driven vector-borne diseases is underway. The goal of this innovative project is to further strengthen the capacity of current and future nurses in this area, providing evidence-based resources containing current information on vector-borne disease and the nurses' role. This presentation will share completed milestones and results of the project to date, including a scoping review was conducted to inform content update and support the integration of a planetary health perspective into the revised guidelines and online modules and the creation of a series of virtual simulations to showcase the critical role nurses play in navigating the health impacts of climate change.

Wagathu, Ruth | Ms., Aga Khan University

Session Title: Risk factors associated with birth asphyxia among newborns at Pumwani Maternity Hospital: a case control study

Abstract:

Background: Birth asphyxia (BA), defined as failure of a neonate to initiate and maintain breathing after delivery is the second leading cause of neonatal mortalities globally. This accounts for 23% of all neonatal deaths. In Kenya, it is responsible for 29% of neonatal mortalities. Despite guidelines addressing prevention and management of BA being in place, neonatal mortalities secondary to it are still unacceptably high in Kenya.

Aim: The aim of this study was to establish risk factors associated with BA among newborns at Pumwani Maternity Hospital.

Methods: This was a matched case-control study in Pumwani Maternity Hospital. The sample size was 540 (270 cases and 270 controls). Cases were newborns with an APGAR score <7 at the fifth minute, while controls had an APGAR score of ≥ 7 at 5 minutes. A pretested questionnaire and a data extraction tool were used for data collection. Data collected was entered into Epi Info and analysed using SPSS. Bivariable logistic regression analysis was employed to identify significant risk factors of birth asphyxia.

Results: Malpresentation (AOR = 4.13, 95% CI: 1.55, 11.04), non-reassuring fetal status (AOR = 3.59, 95% CI: 1.28, 10.19), prolonged labour (AOR = 5.11, 95% CI: 1.90, 13.15) and being primiparous (AOR = 5.59, 95% CI: 2.13, 13.88) were found to be significant risk factors of BA.

Conclusion: Malpresentation, non-reassuring fetal status, prolonged labour and primiparity were associated with BA event. Correct use of partograph, provision of quality antenatal and intrapartum care would avert BA, and this would consequently reduce neonatal mortalities.

Walani, Salimah | Dean, Aga Khan University of Nursing and Midwifery, Pakistan

Session Title: Think Tank: Role of nurses in mitigating the impact of climate change on population health outcomes

Westergren, Thomas | Professor, University of Stavanger

Session Title: School students experience being exposed, seen, and heard using structured questionnaires for health dialogues

Abstract:

Screening questionnaires and structured health dialogue in school health services may improve focus on, and adjustment to, children's needs as well as strengthen their well-being and participation (1,2). The StartingRightTM project in Southern Norway has piloted online tools for school health services to assess and address health related quality of life and general mental health in children aged 10 and 13 years. Hence, we aimed to explore school students' experiences with the online tool, the questionnaires, and the subsequent health dialogue with their school nurse.

We conducted five focus group discussions and three individual semi-structured interviews with 18 children / adolescents (2 males). Audio recordings were transcribed verbatim, and analyzed using reflexive thematic analysis (3). The study was approved by the Faculty Ethics Board at the Faculty of Health and Sport Sciences, University of Agder.

Participants experienced to expose themselves while being seen and heard. They desired to be in control of their personal information, and that shared information was addressed in subsequent health dialogues. They were uncertain about how to respond to certain questions to maintain authenticity and still being in control of how the school nurse perceived them and their health. All participants preferred using the questionnaires in addition to, and in advance of, their health dialogues. They experienced learning about how to promote their own health, and opportunities of getting to the bottom of their problems in an appropriate tempo.
Questionnaires structuring health dialogues in school health services may promote students' health, provided students remain in control.

Wightman, Louise | Sessional Academic, Clinical Nurse Specialist Child and Family Health, Flinders University

Session Title: Recent research into child and family health nursing practice: Global collaboration opportunities.

Abstract:

Child and Family Health Nurses (CFHNs) in Australia are the primary workforce tasked with supporting families to promote optimal growth and development in infants and children from birth to five years. CFHNs' work is distinctive because it is conducted in homes and community settings, is relational and is in the preventative health and early intervention domain (Wightman et al., 2021). This study aimed to identify the elements of competence in the specialist practice of child and family health nursing to ensure quality care for children and families.

Focused ethnography and a constructivist-interpretivist lens were used to explore the individual perspectives of 60 CFHNs in health jurisdictions across all Australian states and territories, through online, in-depth semi-structured interviews, complemented by examination of 84 organisational documents related to child and family health nursing practice. Current assessment of quality and competence focuses on task-based skills assessments for initial employment of qualified CFHNs or a transition to practice programme for postgraduate students.

Diverse, innovative approaches to assessing quality and competence in the ongoing practice of CFHNs were evident across jurisdictions. Closely exploring these inconsistencies, with a focus on service provision, may hold the keys to considering on a global basis the full benefits of different approaches for families who rely on support from community public health nurses. The findings have implications for transition-to-practice programmes that offer valuable platforms for supporting inexperienced practitioners. It is imperative to build skilled and resilient workforces to provide infants and children with early intervention and preventive care.

Yokoyama, Yoshie | Professor, Osaka Metropolitan University

Session Title: Continuous support from the same public health nurse and parental satisfaction with maternal and child health services: a retrospective observational study

Abstract:

Aim: Continuity is considered essential for high-quality maternal and child health care services, but studies to show this effect on parental well-being are still rare. We studied whether receiving support from the same public health nurse has a beneficial effect on the use of childcare support services and their satisfaction with maternal and child health care services.

Methods: Maternal and child health care services were provided by different nurses in a Japanese municipality until March 2019. From April 2019, all families with infants received continuous support from the same assigned nurse. A questionnaire covering parental satisfaction and the use of services was sent by postal mail to 1,341 families with infants. The data were analyzed using $\chi 2$-test, t-test and logistic regression.

Results: A total of 655 families returned the questionnaire, yielding a response rate of 59%. Out of these families, 414 received continuous support from the same assigned public health nurse, while 237 received services from different nurses. Parental degree of understanding about available other childcare support services, the degree of utilizing other services, and satisfaction with health care services were higher in parents who received continuous support from the same assigned nurse compared to those who received services from different nurses. Continuous support was associated with the degree of understanding about available other childcare support services after adjusting the results for socioeconomic factors.

Conclusions and implications: Continuous support from the same assigned nurse has benefits for parents. This offers a cost-effective way to improve parental well-being.

Yoshida Kazuki | Professor, Iryo Sosei University

Session Title: Emotional and Instrumental Support to Improve the Care Management Skills of Care Managers: A Cross-Sectional Study

Abstract:

Background and Objective: Japan's population is aging, leading to an increase in elderly people, who require long-term care certification from the government. As a result, care managers play a crucial role in the management of the elderly. Additionally, they handle difficult cases, which places excessive burdens on them. Therefore, it is important to clarify the actual state of social support for care managers. This study aimed to clarify the instrumental and emotional support received by Japanese care managers.

Methods: This study utilized a cross-sectional design and was conducted by mail. A self-administered, unmarked questionnaire, distributed by mailed according to a list of care managers' offices. The recipient population consisted of 414 care managers, from which we received 222 answered questionnaires (response rate: 53.6%). Items included information about care-manager status (11 items). The questionnaire also included items about job and mental health. Emotional support was asked in "Do you have any organizations or people you can talk to when you are worried?" Instrumental support was checked with the item "Do you have any organizations or people you can ask for help when you are in troubled?" This study was approved by the Ethics Committee of Ota Atami Hospital.

Results: 46 respondents were male (20.7%), and the mean of their age was 54.8 (min-max:34-77). 185 care managers received emotional support, 83.3%. 183 care managers received instrumental support, 82.4%

Conclusions: The study clarified that care managers received emotional and instrumental support: 83.3% and 82.4%, respectively. In order to improve care managers' skills and capabilities, it is necessary to monitor their status and provide necessary, additional support."

Yoshioka-Maeda, Kyoko | Associate Professor, The University of Tokyo

Session Title: Development of an ultrasound hip screening education program for nurses in the effort to detect developmental dysplasia of the hip.

Abstract:

Objectives: Developmental dysplasia of the hip (DDH) causes gait disabilities in children. Early detection of DDH is crucial for newborns and infants to improve their quality of life. The study aims to develop an education program regarding ultrasound hip screening for nurses responsible for newborn and infant home visits.

Methods: This study was conducted in three municipalities in Okinawa and Aichi Prefecture, Japan, from November 2023 to July 2024. Participants were 13 public health nurses (PHNs) and one midwife working in these municipalities. The research team collaborated with three pediatric orthopedic surgeons to develop an educational program with e-learning content and a two-day hands-on session. E-learning covered hip anatomy, ultrasound screening, the Graf method, and procedures for home visits. The hands-on session included exercises with phantoms and infant volunteers and an objective structured clinical examination (OSCE) evaluated by two researchers and a pediatric orthopedic surgeon. Outcomes included the OSCE test results (36 items × 10 points) and the ability to capture a standard image within three minutes. This study was approved by the Research Ethics Committee of the primary investigator.

Results: All participants could complete this program. The mean score for OSCE items was 9.09 (SD: 0.56, range: 7.57–9.86). Thirteen participants were able to capture a standard image within three minutes.
Conclusions: After attending the educational program, nurses successfully conducted an ultrasound hip screening, which can contribute to the early detection and treatment of DDH.

Yu, Jungok | Professor, Dong-A University

Session Title: Adverse Childhood Experiences and Non-Suicidal Self-Injury among Korean adolescents - Exploring the Moderating Role of Social Support

Abstract:

NSSI is a severe health problem closely related to adverse childhood experiences (ACEs). However, studies on the relationship between ACEs and NSSI, and how social support (SS) influences this relationship, are relatively unknown.

Relevant self-report questionnaires were used to evaluate ACEs, SS, and NSSI. Data were collected cross-sectionally from a survey of 1,000 Korean adolescents (Mean age = 16.27) conducted by Macromill Embrain, an online survey agency. The survey was conducted in compliance with ethical guidelines. Logistic regression analysis was used to explore the associations between ACEs, SS, and NSSI. A subgroup analysis was conducted to examine the moderating effect of social support on the relationship between ACEs and NSSI.

Compared to low ACEs, high ACEs increased NSSI risk by 4.65 times. Low social support raised NSSI risk by 2.37 times compared to high support. The subgroup analysis revealed that, compared to the Low ACEs/High SS group, the Low ACEs/Low SS group was 2.83 times, the High ACEs/High SS group 6.13 times, and the High ACEs/Low SS group 7.66 times more likely to engage in self-injury. The group with high ACEs and low social support was found to have the highest risk for NSSI.

Despite the protective effect of social support, high levels of ACEs remain a significant factor influencing NSSI in adolescents. Practitioners who suspect high levels of ACEs in adolescents with NSSI should intervene early by administering the ACEs questionnaire.

Yumi, Ozeki | Public health nurse, Nihon University

Session Title: A study on the interpretation of the concept of child rearing

Abstract:

Japan's total fertility rate was 1.57 in 1989, a figure known as the ""1.57 shock."" Since then, efforts have been made to support child-rearing, but the total fertility rate in 2023 shows no signs of improvement and is expected to remain at 1.20. The purpose of this survey is to understand people's attitudes toward child-rearing and to help consider the best way to support child-rearing in the future.

Objective: To provide an overview of how child-rearing is perceived and researched in Japan, and to reexamine how child-rearing is perceived.

Method: Papers published between 1990 and March 2024 were extracted using the Japanese paper search engine CINII with the keyword ""child-rearing"". Six public health nurses extracted child-rearing concepts.This was a literature review and did not undergo ethical review, but the keywords were faithfully extracted.

Results: 45 papers were reviewed. There were 437 codes for descriptions related to child-rearing. Categories included marital relationships, support content, wives' (mothers')thoughts, husbands' (fathers') thoughts, etc. Subcategories extracted as support content for forming an image of child-rearing included building relationships in the community, support from caregivers, making friends with other mothers, building relationships that provide a place for interaction, using child-rearing support systems, using family support, and providing information. Mothers have both positive and negative feelings about child-rearing. Fathers become more positive when they understand how difficult child-rearing is.

Conclusion: Raising a child requires nursing support. It is important to understand and support these conflicting feelings.

No conflict of interest.

Yumiya, Yui | Assistant Professor, Hiroshima University

Session Title: Factors associated with the length of health consultation time by public health nurses during health checkups for children in Hiroshima, Japan

Abstract:

Background: Identifying the factors that influence long health consultations would help public health centers improve their preparedness and response to residents' concerns and needs. We examined the factors related to the length of health consultations that were administered by public health nurses at the Public Health Center to eligible children aged 1 year 6 months, and 3 years old and their families, who underwent health checkups Methods: This cross-sectional study used no-resident identifiable data from 386 health consultations that were collected using the Maternal and Child Health Services version of Japan Surveillance in Post-Extreme Emergencies and Disasters (J-SPEED) form by public health nurses in Hiroshima Prefecture, from 1 April to 31 August, 2024. Multivariable analysis was conducted to identify factors related to longer health consultation time (more than 16 minutes). Approval for ethical review was obtained from Hiroshima University, 2024 (approval number: E-2024-0029). Results: Longer consultations accounted for 36.0% of the total (n=136).The factors related to longer health consultations were consultations on mothers' mental problems (aOR=4.83 ; 95%CI:1.17–19.93) and children's mental development (aOR=2.42; 95%CI:1.19–4.90) in the 1-year and 6-month checkup group, and consultations on children's mental development (aOR=2.42; 95%CI:1.15–5.06) in the 3-year-old checkup group. Conclusions: Compared to children aged 3 years, children aged 1 year and 6 months are considered to have greater individual differences in mental development and higher family concerns about developmental disabilities. These results may be useful in building a system that leads to early detection and intervention for developmental disorders in children.

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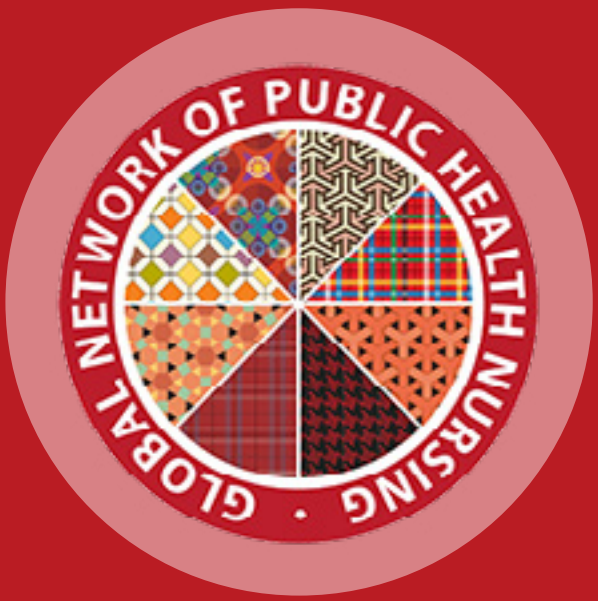

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