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Single, After All These Years... The Impact of Spousal Loss on Elder Widowers

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Coping with life's adversities requires strength of character. Widowhood is no exception. However, limited evidence exists that fosters understanding of the needs of men who outlive their wives. The purpose of this study is to interview widowed men to try to understand their thoughts and concerns regarding widowhood. A qualitative, hermeneutic-phenomenological study design was used. A significant level of independence was expressed by the widowers. Knowledge deficit concerning the location and availability of community resources was apparent, particularly among those participants who eschewed the rituals of religion. Social interaction and physical activity were preferred by most widowers, but each claimed that it was a personal decision. Of note, many expressed a significant desire for female companionship that was platonic and mutually supportive. There exists support for the independence of widowers in structuring their lives to suit their needs. However, for older men who have been married for a number of years, the absence of the companionship of their spouses leaves a void in their lives that they are not always prepared to fill. A concomitant desire for practical resources is not always met. The highly personal and individualized issue of spousal bereavement yields an abundance of data supporting the theory of stress in widowers. While depression was not a significant factor, further research may more clearly support its absence. In addition, the caveat of the potential relationship between positive bereavement practices and successful or happy marriages warrants exploration.

Migration, Minorities, and Maternity Services: A Three-Country International Comparison

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A collaborative research team from three countries—Canada, Germany, and the United Kingdom—undertook preliminary studies to gain understandings of and develop conceptual and methodological frameworks for comparing maternity care services as provided for and experienced by

migrants/minorities. The objectives were to establish (a) a comprehensive conceptual framework informed by the three countries, (b) a detailed methodological approach to achieve meaningful comparison and operational feasibility across settings, and (c) an explicit operational structure enabling effective collaboration and active involvement of policy makers, practitioners, and users/consumers. A review of key policy documents and published literature, and e-consultation with selected experts, provided for exploration and documentation of relevant terminology and theoretical concepts. Consultation within practice settings and user groups, three country-specific workshops, and a joint-country symposium (in Berlin, Germany) generated substantial insights into the phenomena and provided guidance for comparative study across diverse settings. Several understandings were found to be instrumental for guiding frameworks: similar challenges of maternity service exist despite contrasting policy and practice; a qualitative metasynthesis will be appropriate for some countries offering adequate literature bases (United Kingdom and Canada), yet comprehensive qualitative study will be necessary to gather data from others (Germany); and effective mechanisms to engage service users, practitioners, and academic advisors will enhance methodological contributions (e.g., pertinence of research questions). This preliminary work suggests that there is significant potential for cross-country learning, although at present the availability of quality data and detailed understandings of migrant/minority maternity experiences and outcomes is shockingly absent across all three countries.

Understanding the Manitoba Medical Licensure Program for International Medical Graduates (MLPIMG): Exploring Accreditation Gap, Barriers, and Multiple Mentoring

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The access of international medical graduates (IMGs) to the Canadian physician workforce has been a central issue in both health and immigration policy. Recognition of the foreign credentials of immigrants to Canada has been particularly controversial in the case of physicians. Although many contend that IMGs face artificially constructed barriers created by the profession, others emphasize the concern with the quality of their training. MLPIMG is a one-year program designed to enhance the training of IMGs and then provide a provisional license for work in an underserved rural/remote community. It admits about 20 IMGs each year. However, there is limited information of how IMGs appraise the program and the extent to which they experience barriers to enter it and provide practice after graduation. Mentoring has been widely used in many organizations and acknowledged as a valuable tool for retaining employees and promoting career success. In Canada's dynamic and diverse health care environment, having a variety of different types of mentoring relationships that are comprised of both intraorganization and extraorganization networks, multiple mentoring, is perhaps indispensable to IMGs. We propose to conduct semistructured interviews of recent IMGs to understand what and how they encounter during and after MLPIMG and how multiple mentoring help them to assimilate in the profession. Interviews will be digitally recorded and transcribed in verbatim. NVivo 8 will be used for an analysis. We are recruiting physicians who have participated in MLPIMG since 2007, with the support from CME in the University of Manitoba. Preliminary results will be presented at the conference.