



# The Centre for Critical Qualitative Health Research - 2009-2013

APPRAISAL OF CONTRIBUTIONS  
TO TEACHING AND RESEARCH

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# Executive Summary

The Centre for Critical Qualitative Health Research (CQ) is a hub and network of qualitative researchers that promote the practice, teaching and development of critical qualitative research in the health field. Since its inception in 2009, CQ has implemented a number of programs and resources that have developed, furthered, and promoted critical qualitative research not only in the academic field of health, but also included practitioners, users of the health care system, and community members. This report catalogues the impact of CQ in three main areas: [\(1\) Capacity Building and Education](#); [\(2\) Research and Innovation](#); and [\(3\) Knowledge Mobilization and Exchange](#).

**Capacity Building and Education:** CQ hosts the largest and most extensive offering of methodology courses in qualitative health research among the top research-intensive universities in North America. An environmental scan completed in August 2013 indicates that no other institution paralleled CQ in the number and range of courses offered in qualitative health research. The evaluation of these graduate courses reveal students are very satisfied with CQ instructors, courses, and their learning experience, referring to positive intellectual stimulation, learning enjoyment, and course relevance to degree completion. CQ's *Essentials of Qualitative Research* certificate is also appreciated as it acknowledges students' strong theoretical and methodological preparation and contributes to future professional opportunities. CQ academic fellows stated they value their affiliation to the Centre because, among other reasons, they regularly engage in scholarly discussions, have expanded their research and scholarship networks, and feel supported to create new initiatives that advance critical methodologies. Finally, CQ's educational and capacity building activities are aligned with the University of Toronto's Strategic Research Plan in three categories: Promote, Build, and Engage in terms of course content, seminars, and national and international academic visitors.

**Research and Innovation:** CQ is an innovation hub for qualitative research design and the development and implementation

of flexible research methods that can meet the needs of today's multi-disciplinary health research teams. CQ has been an incubator of methodological advances through the work of its academic fellows. Briefly, we can highlight several contributions across important research domains such as:

- Providing new lenses to think health and health-related topics; for example, in the area of work and health; rehabilitation practices; early intervention and prevention of mental illnesses; Alzheimer's disease; and acquired brain injury.
- Leading the advancement of qualitative research across different health domains; in advanced academic and applied settings; and in local, national and global health contexts.
- Conducting community-focused research and increasing community participation in the conduct and implementation of research findings leading, for example, to new service development, practice change, and professional education initiatives; CQ is an institutional member of the International Collaboration for Participatory Health Research (ICPHR).
- Improving quality of care based on qualitatively-driven, research-informed evidence in various health domains and across all phases of human development.
- Contributing expertise to policy development and evaluation.
- Innovating methods and methodology; see examples focused on: Theorizing Methods; Qualitative Secondary Analyses; Research Ethics; Disability Studies; Occupational Health and Safety Research; Mental Health Program Evaluation; Teaching Research Methods; and Methods for Knowledge Translation.
- Publishing and disseminating influential and landmark papers.

### **Knowledge Mobilization and Exchange:** CQ

has made several contributions to advancing the theory, method, and practice of knowledge mobilization and exchange. A number of CQ's activities develop, build on, and promote excellence in approaches for sharing research methods and findings with relevant users. Those activities are:

- CQ fellows have developed innovative methods and theories for knowledge translation and exchange, such as research-based theatre productions, frameworks for knowledge translation, and an online teaching module.
- CQ fellows have produced research findings that have been taken up by community groups and/or key decision/policy makers in a manner that promotes health and social equity in, for example, the areas of work injury and human rights policy.
- CQ Fellows have developed and/or participated in innovative strategies for local and global outreach to deliver critical qualitative health research and methods to relevant audiences near and far. Such strategies include developing online resources, hosting public exhibitions of research findings, producing research-based theatre and film, and widely presenting findings to a range of stakeholder groups and via frequently cited publications.
- Through its Speaker Series, CQ brings together researchers and scholars to exchange ideas and debate key issues of qualitative health research methodology.
- Finally, CQ promotes critical and theoretically-informed qualitative inquiry in the health sciences by exchanging expert knowledge and demonstrating excellence in research through: committee membership and consultancy work; reviewing research grants for key local, national and international funding agencies, and; and acting as editors, editorial board members, and/or reviewers for academic journals.





# 1 Capacity Building and Education

The Centre's main educational mission is to build capacity for the development of high quality, critical qualitative research in the health sciences at the University of Toronto, as well as nationally and internationally. Educational activities include an interdisciplinary and integrate course series which bring together instructors from several Faculties at the University of Toronto. A broader, 'glocal' community of students and novice and expert researchers are reached through seminars, forums, workshops, and educational resources posted on the website.

## 1.1 Essentials of Qualitative Research Course Series

CQ is unique in its mandate for education and training opportunities, achieved in part by the CQ course series. This series offers a range of interdisciplinary and integrated courses in qualitative methodology for graduate students. Course offerings range from introductory level explorations of qualitative inquiry for master's students to advanced lessons in qualitative approaches that provide students with the necessary methodological expertise for doctoral research. Courses are offered by CQ's two sponsoring Faculties, as well as its six contributing member faculties/departments.

## 1.2 CQ's uniqueness in range of course offerings

Based on a survey conducted between October 2012 and August 2013, no other institution in North America parallels CQ in the number and range of courses offered in qualitative health research (3 master and 7 PhD courses). CQ has the largest number of course offerings in qualitative health research among the top 15 research-intensive universities in Canada and the U.S., as pre-

sented below (Tables 1, 2 and 3). CQ also offers the greatest breadth of focus of all institutions surveyed, from introduction to qualitative research to advanced analysis and interpretation. It

is fair to say *CQ hosts the largest and most extensive offering of methodology courses in qualitative health research among the top research-intensive universities in North America.*

**Table 1 - Comparison to qualitative health research courses offered in Canada's top 15 research-intensive universities, not including the University of Toronto (2013).**

Institution	Comparative to CQ?	Number of courses in qualitative health research found
University of Alberta	No	None
University of British Columbia	No	5
University of Calgary	No	2
Dalhousie University	No	None
Université Laval	No	4
University of Manitoba	No	7
McGill University	No	2
McMaster University	No	4
Université de Montréal	Not available	Information not readily available to non-students
University of Ottawa	No	None
Queen's University	No	2
University of Saskatchewan	No	3
University of Waterloo	No	None
University of Western Ontario	No	4

**Table 2 - Comparison to qualitative health research courses offered in the U.S.A.'s top 15 research-intensive universities (as defined by the Center for Measuring University Performance, 2011).**

Institution	Comparative to CQ?	Number of courses in qualitative health research found
Columbia University	No	3
MIT	No	None
Stanford University	No	3
University of Pennsylvania	No	4
Harvard University	No	1
Duke University	No	None
University of Michigan	No	None; (two possible – department unclear)
Washington University in St. Louis	No	7
John Hopkins University	No	5
Yale University	No	1
University of California – Berkeley	No	3
University of California – Los Angeles	No	None
University of Washington – Seattle	No	1
University of Wisconsin – Madison	No	8
University of Minnesota – Twin Cities	No	3

**Table 3 - Comparison to qualitative health research courses offered in other universities surveyed in the U.S.A.**

Institution	Comparative to CQ?	Number of courses in qualitative health research found
Pennsylvania State University	No	2
University of Florida	No	None
Syracuse Maxwell University	No	None
Andrews University	No	None
University of Nebraska	No	None
University of San Francisco	No	None
University of Illinois – Urbana	No	None
University of Arizona	No	None
University of Utah	No	2
North Carolina Chapel Hill University	No	3
East Carolina University	No	1
St. Thomas University	No	None

In addition to courses offered, we explored the existence of similar centres or institutes in the U.S.A (Table 4). In Canada, the International Institute of Qualitative Methodologies, University of Alberta, founded in the 1980s, is partially

dedicated to health sciences research methods. Other Canadian centres exclusively dedicated to health research methods have been created more recently and are CQ's partners (e.g. McGill University, University of Ottawa).

**Table 4 - Qualitative health research centres found in the U.S.A.**

Institution	Comparative to CQ?	Reasoning
University of Washington Community-Campus Partnerships	No	Functions as a repository of syllabi – not a suite of courses
QUALQUANT	No	Focus on cultural anthropology, not health research.
The Consortium	No	Focus on politics and public administration, not health research.
SOEQUAL	No	Functions as a repository of syllabi – not a suite of courses
Berkeley Summer Training	No	Offers internship but no coursework over academic year
ODUM Institute	No	Offers short courses in methods, no focus on qualitative health research.
Paulo Freire Institute	No	Focused on education research
Pennsylvania State Social Science Research Institute	No	No courses in qualitative health research methods found
University of Pennsylvania Mixed Methods Research Lab	No	Offer project development and support, no qualitative health research courses found
Pennsylvania State Qualitative Interest Group	No	Two courses in qualitative health research Found; other foci overall
Stanford Qualitative Methods Initiative	No	Appear to be currently developing courses – unclear whether these will have a qualitative health research focus



## 1.3 Evaluation of the Courses

Since its establishment, CQ offers a range of research methodology courses for graduate health sciences students at University of Toronto. We have compiled the course evaluations for the period 2010-2013 and found out that these courses and their instructors consistently receive high ratings from students. Evaluations were conducted using standard University of Toronto or Faculty-specific forms; they focus on instructor performance and quality of the course, but we have also identified several comments (open questions) regarding the quality of students' learning experience.

On average, students agree or strongly agree with all positive measures of instructor evaluations (i.e. the instructor is accessible to students, clearly communicates concepts and connections, stimulates critical thinking and creates positive learning experiences). Graduate students' comments on their course instructors are vastly positive (Table 5).

Instructors are integral to the success of CQ's offered courses. They are either cross-appointees teaching a course for free or faculty members in a tenure-stream appointment. They meet annually to assess the curriculum, exchange successful pedagogical strategies, and plan for the continu-

ity of the course series as well as being in contact with CQ directors throughout the year.

Regarding courses, on average, students agree or strongly agree on all positive course measures. This indicates that the course met stated objectives, was relevant to student learning and future careers, provided appropriate resource materials, and employed appropriate methods of evaluation. In a few cases, particularly pertaining to items specific to Nursing, master students were neutral, not identifying a connection between research content and clinical practice. Some examples of student feedback demonstrating satisfaction with the focus of CQ courses on critical, theory-driven qualitative research methods are shown in Table 6.

In addition, student comments included considerable feedback about their very positive learning experience, despite facing new or challenging course content. They refer to intellectual stimulation, learning enjoyment, and relevance to degree completion (Table 7). Together, the high calibre of course instructors, the articulation of course content through an interdisciplinary curriculum, and very positive student experience reveal that CQ not only delivers a unique kind of graduate education in North America, but does so very successfully.

**Table 5 – Sample of master and PhD students' evaluation of instructors**

<i>"Ellen [MacEachen], Joan [Eakin] and classmates a great resource. Lovely range of theoretical positions in the class helps us think through our work a little differently."</i> <b>CHL5122 Winter 2010</b>
<i>"The professors made the course outstanding. Hard to believe it was their first year running a course. Dr. Kontos' experience and understanding of the area, as well as her thoughtful questioning of students during class were instrumental in making the course a success [Barbara Gibson and Pia Kontos]."</i> <b>JRP1000 Winter 2009</b>
<i>"Dr. Gibson's critical questioning of my ideas and methods were instrumental in facilitating the writing of my dissertation proposal and, ultimately, putting forth a grant proposal that was successfully funded. Dr. Gibson's insight and experience was eclipsed in its formative nature only by the opportunity to observe an esteemed scientist who is an exemplary role model in her multiple roles of teacher, researcher and critic."</i> <b>JRP1000 Winter 2009</b>
<i>"Pia [Kontos] was a fantastic instructor – probably the most committed instructor I've had in grad school. She has gone out of her way on several occasions to make sure I was understanding important concepts. I really appreciated her openness about her research experiences."</i> <b>JRP1000 Summer 2012</b>
<i>"Barb and Gail [Teachman] were extremely knowledgeable and enthusiastic instructors. I appreciated both of their contributions."</i> <b>JRP1000 Winter 2013</b>



<i>"The instructor, Dr. Brenda Gladstone, was excellent. She was always engaged, enthusiastic and obviously knowledgeable about the subject matter. She encouraged the class to think critically about the course readings and our discussions. Her responses to questions posed by students were always thoughtful and clear. The course had a good combination of instructor and student participation via class participation and time for discussion. The atmosphere in the class was definitely conducive to sharing ideas and taking risks."</i> <b>NUR1024 Summer 2011</b>
<i>"Dr. Facey is a very dedicated and effective instructor. She used multiple pedagogical approaches appropriate to adult learning, introduced complex theoretical concepts clearly and effectively, then reviewed them to ensure students understood. Safe learning environment. Very open to questions in class and accessible outside of class. Excellent blend of theory and practical critical appraisal skill building, ambitious course outline, but successfully achieved."</i> <b>NUR1028 Winter 2011</b>
<i>"The teacher [Joan Eakin] is excellent. Stimulates excellent discussion. She is also fantastic at relating the subject matter. Very useful course!"</i> <b>CHL5115 Fall 2011</b>
<i>"Joan Eakin is one of the best teachers I have ever had."</i> <b>CHL5115 Fall 2011</b>
<i>"Joan [Eakin] is pure brilliance. I'm so much more engaged with my project because of her infectious enthusiasm for good research."</i> <b>CHL5115 Fall 2012</b>
<i>"Izumi [Sakamoto] was an amazing instructor. Best course in the semester."</i> <b>SWK6307 Fall 2009</b>
<i>"Izumi [Sakamoto] and Billie [Allan] were amazing. The classes were wonderful, and the readings were very helpful in understanding qualitative research. Izumi and Billie are so warm and caring, and really made the classroom a safe and happy place. But in addition to that, they also taught a great course in terms of content. As a newcomer to qualitative research, I feel like I learned so much! Thank you!"</i> <b>SWK6307 Fall 2010</b>
<i>"The quality of instruction for this course is exceptional. Dr. Angus is thoughtful and asks questions that stimulate critical thinking and encourages students' engagement with course materials and discussion."</i> <b>NUR1025H</b>
<i>"Dr. Hsiung, thank you for an interesting course; the enlightening lecture and discussions; thank you for sharing your insights, having the class share their insights, and for dispelling my fear of qualitative research theories and methodology."</i> <b>SOC6713</b>
<i>"Thank you [Fiona Webster] very much for teaching the qualitative course. It was a personally insightful journey for me, as I am more willing now to take a critical perspective."</i> <b>HAD Spring 2013</b>
<i>"Thank you [Fiona Webster] for being so kind in encouraging me and the other students to open our minds - even if it led me much farther astray (in a good way, I think) than the department, or maybe even you yourself, ever intended - and thank you for being a sympathetic reader of my confused attempts at defining myself as a writer. The real value of the course was [in] finding voice and defining my interests."</i> <b>HAD Spring 2013</b>

**Table 6 - Sample of master and PhD students' evaluation of courses**

<i>"The course was perfect for allowing me to get back into the theory of qualitative research and helping me create a more solid foundation of qualitative research methods. The readings and discussion were very useful, and I felt that you facilitated an optimal learning environment. As I mentioned in class, we were so fortunate to have a small class and two excellent teachers."</i> <b>JRP1000 Winter 2011</b>
<i>"It covered a range of topics in qualitative research, helped to foster critical thinking, gave students opportunity to lead discussion."</i> <b>JRP1000 Winter 2013</b>
<i>"This course gave me a better understanding into qualitative research. This course showed me how to analyze and view research from a different perspective and to "hold truth lightly". Professor Facey was very knowledgeable in the course content and her feedback was very useful for the assignments."</i> <b>NUR1028 Winter 2011</b>
<i>"This course has been integral to my learning and next steps of my doctoral work. It has provided me with tools and resources I have been trying to locate but have been unable to find in other spaces. I highly recommend this be offered in subsequent years. Thank you!"</i> <b>SWK6305 Summer 2010</b>
<i>"It has opened my eyes to significant elements of analysis that I previously did not even know existed or that I'd be able to fathom. This course has tremendously contributed to my learning."</i> <b>CHL5115 Fall 2011</b>
<i>"This course has helped my critical thinking in ways that theory courses have been unable to."</i> <b>CHL5115 Fall 2012</b>
<i>"I learned about using myself as a research instrument."</i> <b>SWK6307 Fall 2012</b>
<i>Most valuable learning in course: "How to incorporate issues of reflexivity and responsibility into research, engage with dissemination of knowledge."</i> <b>SWK6307 Fall 2009</b>
<i>"This course made me know and master the technique of qualitative interviewing, and learn more about methodology. Additionally, it made me to think in a more logical way."</i> <b>SOC6713 2009-2010</b>

**Table 7 – Graduate students’ evaluation of their learning experience attending the CQ course series**

**Intellectual Stimulation and Learning Enjoyment**

<i>“I enjoyed it all; I only wish there was more time.”</i> <b>CHL5122 Winter 2010</b>
<i>“For a quantitative researcher – this class was a real ‘eye opener’. It was a great intro to qualitative work and I would recommend to all.”</i> <b>JRP1000 Winter 2013</b>
<i>“I really enjoyed the class. I am happy that I took it because it has offered me a good foundation for future qualitative pursuits.”</i> <b>NUR1024 Winter 2011</b>
<i>“I thoroughly enjoyed my experience in this course and appreciate having had opportunity to participate.”</i> <b>JRP1000 Winter 2012</b>
<i>“This was a very valuable and enjoyable course (especially for research methods). I learned a lot from it and it helped provide me with great tools to draw on for future research projects. I would highly recommend it.”</i> <b>SWK6305 Summer 2010</b>
<i>“Loved this class. It has inspired me to do better qualitative research. Value added.”</i> <b>CHL5115 Fall 2011</b>
<i>“Great course overall. I learned much just hearing everyone else discuss their research and its challenges.”</i> <b>CHL5122 Winter 2011</b>
<i>“The format, structure, timing, delivery of the course is spot on.”</i> <b>CHL5115 Fall 2012</b>
<i>“An excellent experience overall.”</i> <b>SWK6307 Fall 2010</b>
<i>“I didn’t know anything about qualitative research beyond this class. Really learned a lot.”</i> <b>SWK6307 Fall 2011</b>
<i>“Very good, engaging! The class activities stimulated a lot of learning.”</i> <b>NUR1028</b>
<i>“This course was exceptionally interesting and the material was thought-provoking and inspiring. Thoroughly enjoyed all aspects/topics covered in the course.”</i> <b>SOC6713 2010-2011</b>
<i>“Excellent course; one of the best I have taken. Readings were fantastic and wonderful to write reflections; excellent learning tool.”</i> <b>SOC6713 2011-2012</b>

**Relevance for Stage of Studies**

<i>“This is an excellent course and the instructors are fantastic. This course is exactly what I needed at this stage of my degree.”</i> <b>CHL5122 Winter 2010</b>
<i>“It was very practical and extremely helpful to my learning at this point in my research.”</i> <b>CHL5115 Fall 2011</b>
<i>“Loved the hands-on opportunity to do analysis on our own work. Extremely helpful at this stage in my PhD.”</i> <b>CHL5115 Fall 2011</b>
<i>“An excellent course – offered at a time during the PhD trajectory that is extremely important and valuable for the student.”</i> <b>CHL5122 Winter 2011</b>
<i>“This class is very valuable for students on the writing stage.”</i> <b>CHL5122 Winter 2011</b>

## 1.4 CQ’s Essentials of Qualitative Research Certificate Program

The *Advanced Training in Qualitative Health Research Methodology Certificate* is available to students who have completed CHL5115 (Qualitative Analysis and Interpretation) and two other eligible courses in the Essentials of Qualitative Research (EQR) course series. To date, 13 students have completed the program and received a certificate.

Former students from the program were contacted by an independent researcher (RM) to evaluate their experience (summer 2014). Certificate holders indicated that the course series strongly prepared them for qualitative health

research in graduate studies and in their careers (Table 8). They felt that they have a strong theoretical and methodological foundation in qualitative research. Furthermore, the readings and resources made available in courses were of use to certificate holders in thesis writing and beyond. Peers and colleagues regard the certificate holders as experts in qualitative research, and they have been invited to collaborate in qualitative and mixed-methods projects as a result of this training. Table 8 summarizes opinions regarding quality of educational experience.



CQ certificate holders found the courses both challenging and enjoyable. They felt they benefited from the hands-on and practical nature of the courses in the series. They also found value in small

class sizes for the personal attention and class interaction provided. They also appreciated the learning opportunities through the availability of courses tailored to different stages of the thesis process.

**Table 8 – Educational experience of certificate holders**

<i>"The courses provided an in-depth training on how to conduct qualitative health research with aims of understanding the theoretical and practical understandings of qualitative research in health research."</i>
<i>"When I compare my knowledge base to those of my peers from other universities, I would say that the CQ provides outstanding education."</i>
<i>"All of the courses I took were of incredibly high standard and prepared me for my career as a qualitative researcher. The broad array of course readings and further references provided by each course instructor were essential in writing my dissertation and which I continue to use in my current work."</i>
<i>"The courses build on one another and helped me to develop a solid foundation in qualitative research and my ability to defend use of qualitative research methods."</i>
<i>"I like the small class sizes as you are able to connect with other classmates and share your qualitative research ideas."</i>
<i>"All of the courses I took included very practical and applied course work that enabled me to apply the theory that was taught."</i>
<i>"The courses were very challenging intellectually and enjoyable at the same time. What was most beneficial about the courses I took was they supported me in dealing with each phase of my journey to completing my PhD."</i>

## 1.5 Capacity Building through Fellowship Opportunities

When contacted by an independent research (RM) to comment on their experience, CQ Academic Fellows find value in their affiliation with CQ for a number of reasons. They appreciate being situated in a network of strong critical qualitative health researchers across various disciplines, and the opportunities afforded for expanding their engagement in scholarly discussion and research collaboration networks. They also appreciate the fact that CQ legitimizes and advances qualitative research methods applied to the health field. Many

CQ fellows have submitted grant applications with each other. Fellows also mentioned their appreciation of CQ's support for new initiatives that advance critical qualitative health research. CQ also supports Fellows' teaching by providing a network and set of resources, and by bringing exposure to their courses. Finally, Fellows are also appreciative of the resources provided by CQ to the qualitative research community at large. Table 9 summarizes comments from CQ fellows regarding their academic experience.

**Table 9 – Academic fellows membership experience**

<i>"CQ gives me fellowship – people with like minds who push me to learn and be critically reflective of my own work."</i>
<i>"CQ increased my scholarly/research collaborative network."</i>
<i>"CQ provides me with a space to engage in critical discussion and to confirm my ability to be a critical scholar."</i>
<i>"CQ provided financial support for the Lives &amp; Legacies project at a critical moment. It allowed the project to come into fruition."</i>
<i>"It is an oasis of support within an empiricist health sciences environment where justifications and explanations for qualitative methods and theory are continually required."</i>
<i>"I appreciate the ability to interact with my CQ colleagues on a regular basis. Such interactions stretch my thinking, inspire me to methodological innovation, and have led directly to new collaborations between institutions."</i>
<i>"Help to form linkages with other researchers using commensurate theoretical and methodological frameworks."</i>

*"Peer support, generating new ideas of teaching qualitative research, getting in touch with those scholars who I usually don't meet..."*

*"The CQ group provides a much-needed legitimacy for social science within the hierarchal and biomedical dominated field of health-related research."*

## 1.6 Capacity Building with Respect to the University of Toronto Strategic Research Plan

CQ is engaged in numerous activities that build capacity in the qualitative health research community in alignment with the goals of the University of Toronto Strategic Research Plan. The most relevant categories identified in the Research Plan include:

- **Promote** healthy people, healthy communities, and a healthy world
- **Engage** mind, language, culture, and values
- **Build** communities and livable societies

**"Promote"** is concerned with improving health and well-being through health promotion and illness prevention locally and globally. There is a focus on cooperative solutions and engaging those affected by certain health conditions in the research process. CQ aids in achieving this goal through investigating health-related research problems that are not well-addressed through clinical and epidemiological research; conceptualizing and explaining phenomena rather than attributing numeric properties and statistics. A critical perspective is maintained by questioning assumptions and acknowledging the role of power and inequity in health-related phenomena. Examples of capacity building through courses, seminars and academic visitors' work that address this goal are as follows:

### a) Courses

- EX5510: *Qualitative Inquiry and Physical Cultural Studies*
- NUR1085H: *Topics in Critical Perspectives in Health and Health Care*
- CHL5101: *Social Theory and Health*
- CHL5102: *Social and Political Forces in Health*

### b) Academic visitors

- *Dr. Maria Ines Gandolfo Conceição* (Department of Psychology, University of Brasília, Brasília): qualitative research methods related to addiction, HIV, harm reduction
- *Dr. Joao Tadeu de Andrade* (Department of Anthropology, State University of Fortaleza, UNIFOR): qualitative research applied to health promotion

### c) Seminars

- *It's your body but...: Politicizing young women's personal narratives of HPV vaccine decision making using critical narrative methodology* (Jessica Polzer, Francesca Mancuso and Debbie Laliberte Rudman, The University of Western Ontario)
- *Critical dramaturgy: A methodology for studying a psychoeducational support group for children of parents with mental illnesses* (Brenda Gladstone, University of Toronto)
- *Attending to the "active properties" of texts: Using municipal bylaws as an entry point into trans-biopolitics and the negotiation of urban space* (Melanie Rock, University of Calgary)
- *Returning the gaze: ethical-methodological approaches in a study with persons with intellectual disabilities* (Ann Fudge Schormans, McMaster University; Adrienne Chambon, University of Toronto)
- *Hearts, bodies and identity: Towards a critical visual phenomenology of heart transplantation* (Jennifer Poole, Ryerson University; Oliver Mauthner, University Health Network; Enza DeLuca, University Health Network)
- *Shifting subject positions: examining expertise and citizenship in relation to human*



genetics (Sarah Cunningham-Burley, University of Edinburgh)

- *Arts-informed research for public education: The Alzheimer project* (Ardra Cole, Maura McIntyre, OISE)
- *Telling health insurance stories: Towards a dialogic social science* (Tim Diamond, University of Michigan)
- *A spy in the house of healing: Challenges of doing critical qualitative research in clinical settings* (Fiona Webster, University of Toronto)

**“Engage”** is concerned with engaging with various aspects of human experience, in order to understand diversity and transform inequitable practices. “Engage” also involves understanding the implications new media and information and communications technologies; exploring meaning making and construction of narratives in order to understand human behaviour and modern society. CQ furthers this goal by advancing critical qualitative methodological theory and practice, developing and adapting these methods to new disciplines and topics. CQ also maintains globalized thinking with regards to research, and continues to develop a global network of qualitative researchers and educators that can lend insight into different fields and global diversity.

#### **a) Courses**

- CHL5115H: *Data Analysis and Interpretation*
- SWK6307H: *Designing and Implementing Qualitative Social Work Research*

#### **b) Academic visitors**

- *Dr. Shams Hamid* (Faculty of Education, Iqra University, Pakistan): visual methods in the qualitative health research field

#### **c) Seminars**

- *Body-map storytelling as research: Documenting physical, emotional and social*

health as a journey (Denise Gastaldo, University of Toronto)

- *Think with your senses, feel with your mind: A strategy for integrating and analyzing multisensory data in qualitative research* (Paula Gardner, Bridgepoint Research Collaboratory)
- *Critical dramaturgy: A methodology for studying a psychoeducational support group for children of parents with mental illnesses* (Brenda Gladstone, University of Toronto)
- *Theatre as hermeneutic methodology: A case study of the use of theatre in bioethics research* (Kate Rossiter, Laurier Brantford)
- *UnMasking Power Relations: From interview research to dialogue for social change* (Blake Poland, University of Toronto)
- *Other ways of knowing: How does photo-voice work?* (Lilian Magalhaes, University of Western Ontario)
- *Arts-based approaches to knowledge translation in health research: Exploring theatre and dance* (Pia Kontos & Katherine Boydell, University of Toronto)
- *Hearts, bodies and identity: Towards a critical visual phenomenology of heart transplantation* (Jennifer Poole & Enza DeLuca, University Health Network)
- *Data Co-production and Analysis: The example of Video Diaries* (Barbara Gibson, University of Toronto)
- *Methodology as cultural practice: dialoguing with the arts* (Adrienne Chambon, University of Toronto)
- *Pompous pedants, medical monsters and humane healers: Learning from the representations of physicians in opera and literature* (Linda Hutcheon & Michael Hutcheon, University of Toronto)
- *Making a mess and spreading it around: Critical reflections on the process of creat-*

ing and performing research-based drama (Ross Gray, Sunnybrook)

- *Arts-informed research for public education: The Alzheimer project* (Ardra Cole, OISE)

**“Build”** is concerned with building livable societies, which are defined, in part, by health and access to affordable health care, as well as social stability and equity. CQ has a goal of advocating for and facilitating change in health research environments, breaking down barriers to conducting qualitative health research, which can offer valuable input in achieving the goals related to building livable communities.

#### **a) Courses**

- SWK6307H: *Designing and Implementing Qualitative Social Work Research*
- CHL5010: *Social Theory and Health*
- CHL5102: *Social and Political Forces and Health*

#### **b) Academic visitors**

- *Dr. Shiva Sadeghi* (Ontario Institute for Studies in Education, University of Toronto, Toronto): social determinants of health and mental health literacy

#### **c) Seminars**

- *Attending to the ‘active properties’ of texts: Using municipal bylaws as an entry point into trans-biopolitics and the negotiation of urban space* (Melanie Rock, University of Calgary)

- *Ethical reflexivity in community-based research: Unpacking the implications of engaging community members as co-researchers* (Sarah Flicker, York University; Adrian Guta, University of Toronto; Brenda Roche, Wellesley Institute)
- *The privileges and pitfalls of conducting narrative research: deconstructing my collaborative storytelling methodology* (Dan Mahoney, Ryerson University)
- *Doing research on aging when nobody is old* (Stephen Katz, Trent University)
- *Knowing, knowing how, and knowing what to say: Transferring knowledge between the academy and the community* (Adrienne Chambon & Deborah Knott, University of Toronto)
- *Data co-production and analysis: The example of video diaries* (Barbara Gibson, University of Toronto)
- *Research outreach in qualitative research* (Denise Gastaldo, University of Toronto)

In addition to courses that teach students how to think through and use qualitative methods, CQ also offers courses that teach students how to apply these learned theories and knowledge to a variety of contexts. In particular, courses with a focus on health in society, arts-based research, community-based/participatory action research, and physical culture and health research provide novice researchers with training relevant to the University of Toronto’s strategic research goals.





## 2 Research and Innovation

CQ and its members produce high quality critical qualitative health research that has a transformative effect on policy and care across numerous health domains. Furthermore, CQ and its members develop and implement methodological innovations to help explore pertinent health issues from a critical perspective.

### 2.1 Providing a new lens to think health issues

CQ members conduct research that promotes new perspectives on health and health-related topics including, for example:

- Work and health; the discourse of abuse (J. Eakin) and health consequences of globalization, in particular for undocumented workers working in Canada (D. Gastaldo)
- Rehabilitation practices; leading an international consortium to rethink core assumptions about independence, quality of life and disability that underpin rehabilitation practices (B. Gibson)
- Early Intervention/prevention of mental health and illness; a sociology of childhood lens to recast thinking about children of parents with mental illnesses as an inter-generational experience of illness that is consequential for early intervention and prevention efforts, including children's participation in the health and well-being of the family (B. Gladstone)
- Alzheimer's disease; rethinking the self through the lens of embodiment (P. Kontos)
- Traumatic brain injury; understanding it in the context of therapeutic landscape theory (P. Kontos)

## 2.2 Leading the advancement of qualitative research in different health domains

CQ fellows have applied and advanced qualitative research skills with implications for various facets of health and health care, such as:

- *Qualitative Research from Feminist Perspectives* was published in the official journal of the Chinese Sociological Association; it is the first article published in China to raise the issue of critical perspectives in qualitative research and has been cited 41 times (P-C Hsiung)
- *Brokered Dialogue* is a research method that received provincial and federal funding (Canadian Agency for Drugs and Technologies in Health as well as the Ministry of Health and Long Term Care); it is of interest to the Bill and Melinda Gates Foundation and opportunities to apply the method to address significant global health topics are currently being explored (J. Parsons)

## 2.3 Increasing community participation in research and knowledge translation to practice; conducting research with a community focus

CQ fellows develop community-based partnerships, increasing the profile of qualitative research and promoting its utility for program development, evaluation and implementation. CQ is an institutional member of the International Collaboration for Participatory Health Research ([ICPHR](#)). See for example:

- *Practice Change and Community Collaboration*: Joan Eakin's research on the experience of workers and employers with workplace injury generated an influential new concept that has been widely cited and used in the occupational health, safety, rehabilitation and compensation community, locally and internationally: the notion of the 'discourse of abuse' and its damaging effect on injured worker recovery, rehabilitation and post injury lives and prospects. This research-generated concept and related research findings became the basis for a collaboration between Dr. Eakin and the injured worker activist community in Ontario that led to the production with a playwright and professional theatre director of a play called "Easy Money". The production was performed in various forms and locations in Ontario and was funded by labour organizations and private donations. A video of the live production was also made and widely circulated in the injured worker, legal and rehabilitation communities. Dr Eakin's research on work injury and occupational health in small workplaces also contributed in a significant way to organizational service changes made at the Ontario Workplace Safety and Insurance Board, resulting from a collaboration between researchers, injured workers and WSIB administrators (between 2009 and 2012) (J. Eakin)
- *Service Development*: A study of adequate home environments as enabling or disabling places for adults with significant mobility disabilities living in Ontario; presentation to patients, family members and staff at West Park Health Care Centre informed the development of a new on-site independent living residence (B. Gibson)
- *Practice Change*: Implementation of research findings in a community-based family mental health service and support organization; research based on doctoral thesis used to guide improvements to several components of a long-term children's mental health support group in-

cluding: changes in the group structure and scheduling, tailoring information and support according to expressed needs and wants of participant children, providing one-to-one support as required, improved training for adult group facilitators, and improved community partnerships (B. Gladstone)

- *Practice Change*: Research turned into a practice guide that is now one of the most popular downloaded items from the Institute of Work and Health website, and was requested by the Workplace Safety and Insurance Board for each of their 400 case managers; this research also resulted in advisory reports to the Occupational Health and Safety group and the Workplace Safety and Insurance Board, as well as presentations to community groups (E. MacEachen)
- *Integrated Knowledge Translation and Community Collaboration*: Collaboration with the Catholic Children's Aid Society of Toronto on a "Picturing Foster Care" funded grant, which will be informative to the Society's service provision to young families (J. Parsons)
- *Service Development and Professional Education*: Collaboration with the Canadian

National Institute for the Blind on a constructivist grounded theory study that explored service and other environmental influences on the social participation, activity engagement and social inclusion of seniors with age-related vision loss; recruiting seniors at the time of their intake into CNIB services; results informed the re-design of service pathways for seniors with age-related vision loss at the CNIB; and were used to develop a webinar for service providers and managers designed to enhance their sensitivity to and awareness of environmental barriers encountered by seniors with age-related vision loss. Dr. Rudman is now also a member of the Research Advisory Committee at the CNIB and provides input into approaches for examining service needs and impacts (D. Rudman)

- *Community Based Participatory Research*: Conducted a community based participatory research study titled "Coming together: Homeless women, housing and social support" that used "staged photography" as a method of data collection. This work received the honorary mention of the CBR Award of Merit by the Wellesley Institute and the Centre for Urban Health Initiative (I. Sakamoto)

## 2.4 Research with direct implications for improved quality of care

CQ fellows have conducted work that has direct implications for improved care pathways, through training and preparing health care providers as well as increasing understanding of care needs and quality service and care provision. See for example:

- *Improving Older Adult Care*: Findings from research on the health and social impact of computer training with older adults was used by the Older Adults Technology Services (OATS) organization to help ob-

tain \$2 million in funding from the City of New York. The funds are being used to establish a training facility and enhance computer training programs across the city (P. Gardner)

- *Improving Care for Adults with Mobility Disabilities*: CIHR study at the U of T Joint Centre for Bioethics investigated the adequacy of home environments as enabling or disabling places for adults with significant mobility disabilities living in



Ontario. Findings suggest that provincial policies and practices continue to focus narrowly on the basic physical needs of disabled people without consideration to broader notions of citizenship, rights, dignity and social inclusion. Output included a framework of seven conditions for assessing the adequacy of home environments using social dignity as a guiding principle. Also included in community participation, policy and methodological innovations. Dr. Gibson's research investigating the social exclusion of young men with Duchene Muscular Dystrophy was featured at a consortium of Parent Project Muscular Dystrophy (USA) who are launching a major initiative to improve transitions experiences of boys with DMD (B. Gibson)

- *Improving Nursing Care:* A study at CAMH relevant to nurses and their perceptions and realities of power and status within a broader inter-professional team on one particular unit resulted in the implementation of a "nursing supervision" group, co-led by Dr. Hart and a social worker colleague. The group meets every 4-6 weeks with nurses on the unit to discuss issues related to their roles on the broader inter-professional team, particularly issues related to perceptions of power and control over their work (C. Hart)
- *Improving Dementia Care:* Dramatized vignettes featuring examples of embodied selfhood (a theoretical notion of selfhood that emphasizes the importance of bodily movements and gestures for self-expression by persons living with Alzheimer's disease) were incorporated into a 12-week educational program about person-centered care, developed for dementia care practitioners. A qualitative evaluation of the educational pro-

gram affirmed the efficacy of drama as a knowledge translation strategy and the importance of embodied selfhood for individualizing care, reducing agitation, and improving the time efficiency of practice. These dramatized vignettes were incorporated into an e-learning course offered by the Registered Nurses' Association of Ontario (RNAO) on best practice guidelines for person-centered care, which has had 1700 registrants since its launch. Course evaluations demonstrated improved understanding of the principles of client-centered care and practitioners' perception that the course will improve their ability to implement the knowledge-based recommendations about client-centred care into practice (P. Kontos)

- *Improving Client-Centred Brain Injury Rehabilitation:* A play was developed based on a focus group study of survivors of traumatic brain injury, their families, and health care practitioners concerning experiences with the health care system, and day-to-day challenges and coping strategies. An evaluation study demonstrated its effectiveness in improving client-centred brain injury rehabilitation. The play has been publicly performed 36 in cities across Canada (in rehabilitation hospitals, and at conferences in the field of rehabilitation science). It also ran at the Toronto Fringe Festival. Audience members have approximated 3,000 (P. Kontos)
- *Improving Perinatal Child Health Care:* Research in health disparities and maternal-and-child health – explored the impact of child custody loss on perinatal child health care provision amongst young parents who are homeless or marginally housed. "Picturing Foster Care" will also provide important evaluative data on

three different models of foster care and their intersection with perinatal health care delivery (J. Parsons)

- *Improving Care in Age-Related Vision Loss*: CNIB study resulted in re-design of service pathways for seniors with age-

related vision loss. Also resulted in development of case modules regarding low vision that have been implemented within Occupational Therapy curricula at Western University and McMaster University (D. Rudman)

## 2.5 Policy development

CQ fellows have conducted work with important health policy implications, and have been called upon to lend their expertise in policy development processes.

- Qualitative research as evidence/basis of discussion in numerous policy arenas, including the Ontario Workplace Safety and Insurance Board and a consultation with the federal Minister of Labour (J. Eakin)
- Findings from study of adequacy of home environments used in the development of a white paper by the Ontario Community Living Association regarding the problems of inadequate attendant care support for people with disabilities in Ontario (B. Gibson)
- Employed the “Brokered Dialogue” method to evaluate a new initiative on drug system reform by the Ontario Citizens’ Council; report delivered to the Ontario Ministry of Health and Long Term Care (J. Parsons)
- Developed a novel approach to policy analysis using a critical ethics perspective, which is currently being used to analyze

policy changes occurring in Spain as a result of austerity measures; findings also used to inform Health Canada and a parent with a disabled child to lobby the BC Ministry of Health (E. Peter)

- Conceptualized/problematised the notion of “Canadian Experience” for immigrant employment; and working with the Ontario Human Rights Commission on a policy on “Canadian Experience” as a requirement for immigrant employment; calls into question the discriminatory hiring practice of using Canadian experience as an employment requirement for immigrants (I. Sakamoto)
- Numerous policy reports for the Ontario Ministry of Health and Long Term Care (regarding Ontario’s Emergency Department Process Improvement Program), the American Society of Regional Anesthesia (knowledge translation), CIHR Institute of Circulatory and Respiratory Health (knowledge translation framework) (F. Webster)

## 2.6 Methodological innovations

CQ fellows are innovators, bringing qualitative research to the health field and promoting methodological advancement in qualitative research.

- *Qualitative Methodology in Occupational Health and Safety Research*: One of the first qualitative researchers in the medic-

al sciences in Canada; pioneer trail blazer of the application of qualitative research methodology in the field of occupational health and safety research (J. Eakin)

- *New Methods in Hospital Settings*: Developed a methodological strategy for collecting and analyzing multisensory data

that is of use in hospitals where senses are heightened and play a role in patient experience (P. Gardner)

- *New Method for Studying the Body and Health Journeys*: In a 56-page free on-line publication "[Body-map storytelling as research](#)" this research method is described from definitions to data analysis; the publication has been referenced in articles and thesis from several countries (D. Gastaldo)
- *New Methods in Disability Studies and Ethics Research*: Developed innovative methods for optimizing single interviews with children with disabilities, led by a student; integrated the use of solicited audio diaries, photography and interviews to illuminate intersectionality of gender, disability and generation (life stages) identities in a study with disabled young men transitioning into adulthood; developed a unique methodology that combines empirical qualitative research and normative ethical analysis in a process of "reflective equilibrium" (B. Gibson)
- *New Methods in Mental Health Program Evaluation and Qualitative Secondary Analysis Methodology*: Employed Critical Dramaturgy using Discourse Analysis to consider the program manual used to educate and support children of mentally ill parents as a particular kind of health care text; invited publication on Qualitative Secondary Analysis, an innovation in thinking about the potential of re-using qualitative data for different theoretical, methodological purposes (B. Gladstone)
- *Theorizing Methods*: Exploring the notion of "emotion management" as a methodological tool rather than simply an area of substantive research (C. Hart)
- *Methodological Teaching Innovation: Lives and Legacies: A Guide to Qualitative*

Interviewing ([open access courseware](#)) (P-C Hsiung)

- *New Methods in Knowledge Translation: Drama as an innovative method for translating prominent examples of "embodied selfhood" (a theoretical notion of selfhood that emphasizes the importance of bodily movements and gestures for self-expression by persons living with Alzheimer's disease) into a framework meaningful and relevant to dementia care practitioners; also used to challenge assumptions of loss that define current conceptions of dementia, and to advocate a new ethic of care premised on the importance of bringing relationships to the forefront, supporting embodied self-expression, and ensuring the humanity of those living with dementia is fully supported; also used to foster cultures of best practice in brain injury rehabilitation and renal rehabilitation (P. Kontos)*
- *New Methods for Contested Dialogical Spaces*: Brokered Dialogue method, which is designed to study and understand contested dialogic spaces (i.e. those where dialogue either does not occur naturally or where it is charged with controversy); invites participants into respectful dialogue with one another, using the medium of film and a participatory editing process (J. Parsons)
- *New Methods for Occupational Therapy and Occupational Science*: Introduced use of critical discourse analysis into the fields of occupational therapy and occupational science; building on this work helped to facilitate a 'critical turn' in the study of occupation that shifts the lens from individual coping/adjustment/impairment to consideration of the socio-political shaping of disability, marginalization and health inequity (D. Rudman)



## 2.7 Influential and landmark publications

CQ fellows are influential both in health and research methodology fields, and have published landmark work that has been taken up widely. Some examples are (in alphabetical order):

- **Bisaillon, L. & Rankin, J.** (2013). Navigating the politics of fieldwork using institutional ethnography: Strategies for practice. *Qualitative Sozialforschung Forum: Qualitative Social Research*, 14(1), Art.14 (open access).
- **Bisaillon, L.** (2012). An analytic glossary for social inquiry using institutional and political activist ethnography. *International Journal of Qualitative Methods*, 11(5):607-627.

*These articles engage with the political dimensions of qualitative research and reveal the strength of Canadian contributions to institutional ethnography and critical inquiry.*

- **Eakin, J. & Mykhalovskiy, E.** (2003). Reframing the evaluation of qualitative health research: Reflections on a review of appraisal guidelines in the health sciences, *Journal of Evaluation of Clinical Practice*, 2003, 9 (2) 187-194.

*Signature and widely cited paper on the evaluation of qualitative health research; it has been used by editorial boards and to teach in several graduate programs in Canada and internationally.*

- Mercado, F. J., **Gastaldo, D.** & Calderón, C. (2002) (Eds.)
- Book 1: Paradigmas y diseños de investigación cualitativa en salud. Una antología iberoamericana [Paradigms and designs in qualitative health research – An Ibero-American anthology], 620 pages.
- Book 2: Investigación cualitativa en salud en Iberoamérica. Métodos, análisis y ética. [Qualitative health research in Ibero-America – Methods, analysis and

ethics], 517pages. Guadalajara, Mexico: Universidad de Guadalajara Press.

*This collection on Ibero-American qualitative health research is the only publication to date that brings together authors from over 15 countries from Latin America, Spain and Portugal and is highly utilized in graduate studies in Portuguese and Spanish-speaking countries.*

- Teachman, G, & **Gibson, B. E.** (2013). Innovative Methods for Single Qualitative Interviews with Disabled Children and Youth. *Qualitative Health Research*, 23(2):264 - 274.
- **Gibson, B.E.** (2005). Co-Producing Video Diaries: The presence of the “absent” researcher. *International Journal of Qualitative Methods*, 4(4) (open access).

*These highly cited papers have been utilized by health sciences researchers studying disability and other topics to support the utilization of innovative methods to engage with research participants.*

- **Gladstone, B.M.,** Volpe, T. and Boydell, K.M. (2007). Issues encountered in a qualitative secondary analysis of help-seeking in the prodrome to psychosis. *Journal of Behavioral Health Services & Research*. 34(4):431-442.

*This is an early and invited paper applying qualitative secondary analysis as a method to empirical data from the field of children’s mental health.*

- **Hsiung, P.C.** (2012). The globalization of qualitative research: Challenging Anglo-American domination and local hegemonic discourse. *Qualitative Sozialforschung Forum: Qualitative Social Research*, 13(1), Art 21 (open access).

*This is a visionary and internationally relevant publication that has been cited by authors*

*in many countries as the globalization of qualitative research has posed important academic challenges.*

- **Kontos, P.**, Miller, K.L., Gilbert, J.E., Mitchell, G.J., Colantonio, A., Keightley, M.L., Cott, C. (2012). Improving client-centered brain injury rehabilitation through research-based theater. *Qualitative Health Research*, 22(12):1612-1632. .
- **Kontos, P.**, Mitchell, G.J., Mistry, B., Ballon, B. (2010). Using drama to improve person-centred dementia care. *International Journal of Older People Nursing* (Special Issue: Outcomes from the Promotion of Personhood in Gerontological Nursing), 5:159-168.

*These two papers represent an outstanding innovation in the field of research-based theater and knowledge translation in health sciences.*

- Ravenek, M. & **Laliberte Rudman, D.** (2013). Bridging concepts of quality in moments of qualitative research. *International Journal of Qualitative Methods*, 12:436-456.
- **Laliberte Rudman, D.** (2013). Critical discourse analysis: Adding a political dimension to inquiry. In M.P. Cutchin & V.A. Dickie (eds). *Transactional Perspectives on Occupation* (pp.169-181). New York: Springer.

*These two publications have innovated the field of occupational therapy; they promote rigour in qualitative research while adopting a critical, political perspective of knowledge production.*

- Khanlou, N. & **Peter, E.** (2005). Participatory action research: considerations for ethical review. *Social Science & Medicine*, 60:2333-2340.

*This is one of the first papers to address the unique ethical issues in participatory action research. It has been cited consistently since its publication.*

- **Poland, B.** and Pederson, A. (1998). Reading Between the Lines: Interpreting Silences in Qualitative Research. *Qualitative Inquiry*, 4 (2):293-312.

*This paper is widely utilized in graduate education to teach data analysis and interpretation in qualitative research.*

- DeForge, R., **Shaw, J.** (2012). Back-and-for-grounding ontology: exploring the linkages between critical realism, pragmatism, and methodologies in health & rehabilitation sciences. *Nursing Inquiry*, 19 (1): 83-95.

*This paper represents an advanced contribution to rehabilitation sciences paradigmatic perspectives on theory and methods.*



# 3 Knowledge Mobilization and Exchange

CQ is a hub for knowledge mobilization and exchange (KME) of critical qualitative health research. CQ and its members advance the theory, method and practice of sharing research findings with research users by developing new concepts and ways of thinking about KME activities as well as innovative strategies for implementing them. Fellows, students, researchers, and community members find value in the various knowledge translation activities offered by the Centre, which are described below.

## 3.1 Expanding repertoire, theory of knowledge translation, exchange tools, and theory

CQ Fellows develop innovative methods and theories for knowledge translation and exchange.

- Knowledge Translation through research-based theatre: A CIHR Casebook on Knowledge Translation that examines the use of political theatre as a medium for and vehicle of research knowledge dissemination and exchange. The author, a qualitative health researcher, analyses her own experience using this approach as well as the opportunities and limitations of it for social and organizational change (J. Eakin)
- Knowledge Translation of complex knowledge through arts-based research: Informed by the theory of tacit knowledge, an arts-based research approach was developed and conducted to explicate culturally informed knowledge that is difficult to explain. Specifically, a theatre specialist was engaged to design a research method



informed by theatre of the oppressed and drama therapy in exploring the notion of “Canadian experience” that is used to exclude immigrants from workplace and professional accreditation (I. Sakamoto)

- Critical Realism and the Arts Research Utilization Model (CRARUM): a knowledge translation framework that combines critical realism and arts-based methodologies to facilitate theoretically informed qualitative and arts-based approaches to health services research. The combination of critical realism and the arts within the CRARUM model addresses the complexities of practice as a meaning-making activity; optimizes interventions for local circumstances; targets crucial factors in the organizational context that influence behaviour; and disseminates research in a way that captures the imagination of practitioners and engages them in critical

thought. This framework has been successfully used in two CIHR-funded studies; success in securing CIHR funding demonstrates the effectiveness of argument for the expansion of intervention studies beyond ‘whether’ the intervention is effective to include qualitative exploration of why, for whom, and under what circumstances it is effective (P. Kontos)

- Five-year framework for CIHR: guiding knowledge translation activities for the Institute of Circulatory and Respiratory Health at the Canadian Institutes of Health Research (F. Webster)
- Course Module on Knowledge Translation: Offered in the Institute of Medical Sciences at University of Toronto, this course module explicitly teaches students critical sociological critiques of the discourses of evidence-based medicine and knowledge translation (F. Webster)

### 3.2 Application of knowledge that promotes health and social equity

The research findings of CQ Fellows have been taken up by community groups and/or key decision/policy makers in a manner that promotes health and social equity.

- Research contributions to work injury policy and programs: CQ research has made an original contribution to knowledge of the stigmatization of workers injured on the job and its negative implications for recovery and return to work. This research was extensively taken up by injured worker groups and the labour movement in Ontario and has and is still being used by occupational health and safety (OHS) labour-oriented activists in their efforts to remove and reduce inequities in work-related access to health. It has also played a role in government policy debate and has been cited on numerous occasions

in parliamentary Hansard proceedings, and in legal representations, submissions and appeals. Joan Eakin’s research on the nature and operation of front-line adjudication and case management services for small workplaces at the Ontario Workplace Safety and Insurance Board contributed directly to change in the policies and procedures of the Board. Dr. Eakin was a member of a collaborative community/WSIB committee directed to examine the sources of stigma and inequity for injured workers in their treatment in the compensation process, and which initiated a number of internal changes that sought to eliminate disadvantages for injured workers. One significant example of a research finding that was acted upon was the discovery of inequities in how employer and

worker clients were regarded and treated at the Board - a finding that was made possible by the research methodology (observation, critical qualitative data collection and analysis) (J. Eakin)

- Research contributions to human rights policy: research regarding the problematic notion of “Canadian Experience” resulted in a policy directive issued by the Ontario Human Rights Commission (I. Sakamoto)

- Research contributions to advocacy towards access to health care: Toronto Public Health white paper “Medically Uninsured Residents in Toronto” used extensively the community research report written by D. Gastaldo and she was also an Expert Witness for the Supreme Court of Canada on the issue of access to health care by uninsured residents of Canada ([link 1](#) and [link 2](#)) (D. Gastaldo)

### 3.3 Local and global activities and resources that mobilize knowledge

CQ Fellows develop and/or participate in innovative strategies for local and global outreach to deliver critical qualitative health research as well to relevant audiences near and far. A key way in which CQ extends its reach is through the development of resources for knowledge mobilization.

#### 3.3.1 Online Resources

- Qualitative Health Research Video Lecture Series including topics such as qualitative interpretation and analysis, phenomenology applied to health studies, use of social theory to support qualitative studies, etc.
- Online Resources for [The Mobility Project](#): Drawing on studies of community mobility and active aging, resources were developed and contributed to a website devoted to empowering the community of wheelchair users, assistive technology users and their families by promoting dialogue and sharing ideas that can advance their many abilities and opportunities [www.themobilityproject.com](http://www.themobilityproject.com) (P. Gardner)
- Online publication on body-mapping: in a study involving undocumented workers in the GTA, a body-map storytelling technique, involving a series of drawing and

painting exercises, was used to create life-size body images or “body maps” to help participants to tell their migration stories and visually depict the impact of being undocumented on their health and wellbeing (D. Gastaldo)

- Online Resource for Innovative Teaching: “Lives and Legacies: A Guide to Qualitative Interviewing” is available as open-access courseware and linked to the CQ website (P. Hsiung)

#### 3.3.2 Research-based theatre and film

- A play about Canadian Experience: “The Theatre of Canadian Experience” (I. Sakamoto)
- Theatre production: “After the Crash: A Play About Brain Injury” is based on a focus group study of survivors of traumatic brain injury, their families, and health care practitioners concerning experiences with the health care system, and day-to-day challenges and coping strategies (co-produced by P. Kontos)
- Research-based film: “Fit for Dialysis” is based on qualitative research that critically examines the barriers and facilitators regarding exercise in older hemodialysis patients (co-produced by P. Kontos)

### 3.3.3 Public Exhibitions

- (In)visible Exhibition: Body maps exhibit on the experience of undocumented migrant workers (mentioned above as an online resource); the life-size body maps telling migration stories were publicly displayed at Toronto City Hall in June 2012 (D. Gastaldo)
- Photos and stories exhibit on foster care: “Picturing Foster Care” employs a novel KTE strategy that incorporates a public exhibition of photographs and stories from three groups of stakeholders (young parents, child welfare workers, and health care providers) in order to facilitate cross-sectoral dialogue and public engagement on the topic (J. Parsons)
- Photovoice exhibit on First Nations youth access to education: As part of a SSHRC Aboriginal Research Development Grant, a partnership with First Nations youth and several Indigenous organizations em-

ployed a Photovoice Exhibit to raise critical awareness of barriers to post-secondary education access and success for First Nations youth in the London, ON area (D. Rudman)

### 3.3.4 Presentations and publications

- Presentations to stakeholder groups including representatives of the Ministry of Health, consumers and their parents, clinicians, the Canadian Muscular Dystrophy Association, health administrators, and researchers in Canada, USA, New Zealand, Scandinavia (B. Gibson)
- Research Citations in landmark publications: CQ research has been cited in two reviews of major contributions to the research investigating disabled men and masculinities and was cited in an international consensus paper regarding transitions to adulthood for boys with DMD (B. Gibson)

## 3.4 Disseminating methodological and theoretical excellence through consultancy for high quality qualitative work

CQ Fellows lend their expertise in a variety of contexts to promote critical and theoretically-informed qualitative inquiry in the health sciences. For example, CQ Fellows:

- participate on the Research Advisory Committee at the CNIB that is providing input into approaches to examining service impacts and needs (D. Rudman)
- provide expert consultation to the Ontario Human Rights Commission Commissioners regarding issues of “Canadian experi-

ence” (I. Sakamoto)

- led or contributed to the qualitative evaluation of many local and provincial projects, at the hospital and health care systems levels, including the Ontario Stroke Strategy (F. Webster)
- provided consultation to researchers working for the Ministry of Health and Long Term Care (Ontario) on methodological rigour in qualitative health research (B. Gladstone, D. Gastaldo)



### 3.5 At the Centre Speaker Series

CQ's 'At the Centre' Speaker Series is the vehicle for bringing together researchers and scholars to exchange ideas and debate key issues of qualitative health research methodology. CQ hosts a speaker series seminar at least six times during the academic year, September to May. Traditionally, leading and emerging scholars in the field are invited to present on methodological and theoretical topics that speak to researchers across all substantive areas. The series also functions as site for Toronto-area scholars to meet and network. A survey of speaker series attendees revealed that they enjoy the range of speakers and topics and value the opportunity to hear about innovative qualitative health research methodology. Feedback from an online survey conducted in 2013 included aspects of the seminar series that attendees like; they said, for example:

*"New approaches to research, frequently insightful discussion following, some networking opportunities."*

*"I like the collaborative atmosphere under which the seminars take place, the wide range of topics presented and interdisciplinary backgrounds of presenters."*

*"The quality of the speakers is wonderful."*

*"I like the topics because they represent a good range of qualitative research."*

*"They are a helpful way of getting an overview of both theoretical and empirical issues around qualitative research."*

*"Interesting content from great speakers."*

### 3.6 Grant reviewing

CQ Fellows have also lent their qualitative research expertise by participating as grant reviewers for a variety of international, national and local funding agencies.

#### International

- Fondo de Investigación Sanitaria, Ministry of Health, Spain.
- Medical Research Council, Methodology Research Review Panel

#### National

- Canadian Institutes of Health Research (several institutes)
- Government of Canada, Canada Research Chairs Program, College of Reviewers
- Social Science and Humanities Research Council

#### Provincial and local

- Alberta Heritage Grant Program, Occupational Health
- Alzheimer Society of Canada
- British Columbia Health Research Foundation
- Northern Illinois University Intramural Grants
- Ontario Graduate Scholarships
- Ontario Respiratory Care Society
- Ontario Workplace Safety and Insurance Board
- Saskatchewan Health Research Foundation Establishment Grant
- SickKids Clinician Scientist Training Program and Canadian Child Health Clinician Scientist Program
- Sunnybrook Health Sciences Centre
- Syme Fellowship Committee, Institute for Work and Health
- University of Toronto
- Worksafe Manitoba

### 3.7 Editing and reviewing for academic journals

CQ Fellows have lent their expertise in qualitative health research by acting as editors, editorial board members, and/or reviewers for numerous journals (this is not a comprehensive list).

- Age, Culture, Humanities
- Ageing and Society
- American Journal of Community Psychology
- American Journal of Industrial Medicine
- American Journal of Kidney Disease
- American Journal of Public Health
- Australian Occupational Therapy Journal
- Bioethical Inquiry
- BMC Public Health
- British Journal of Occupational Therapy
- British Journal of Social Work
- British Medical Journal
- Canadian Journal on Aging
- Canadian Journal of Community Mental Health
- Canadian Journal of Nursing Research
- Canadian Journal of Public Health
- Canadian Medical Association Journal
- Canadian Pharmacists Journal
- Canadian Psychology
- Canadian Social Work Review
- Cancer
- Clinical Psychology Review
- Chronic Diseases in Canada
- Critical Public Health
- Dementia: The International Journal of Social Research and Practice
- Disability and Rehabilitation
- Drug Safety
- Early Intervention in Psychiatry
- Economic and Industrial Democracy: An International Journal
- European Journal of Work and Organisational Psychology
- Evaluation Review
- Focus on Alternative and Complementary Medicine
- FQS – Forum Qualitative Sozialforschung
- Gender & Society
- Gender, Work and Organization
- Health and Canadian Society
- Health and Place
- Health Education and Behaviour
- Health Policy
- Health Promotion Practice
- Human Relations
- Industrial Relations
- International Journal of Aging and Later Life
- International Journal of Canadian Studies
- International Journal of the Creative Arts in Interdisciplinary Practice
- International Migration
- Journal of Aging and Health
- Journal of Aging Studies
- Journal of Alternative and Complementary Medicine
- Journal of Applied Gerontology
- Journal of Canadian Studies
- Journal of Cancer Integrative Medicine
- Journal of Clinical Epidemiology
- Journal of Clinical Ontology
- Journal of Complementary and Integrative Medicine
- Journal of Ethnic and Migration Studies
- Journal of Health and Social Behavior
- Journal of Health Psychology
- Journal of Implementation Science
- Journal of Interprofessional Care
- Journal of Occupational Health Psychology
- Journal of Occupational Medicine
- Journal of Occupational Rehabilitation
- Journal of Occupational Science
- Journal of Public Health Policy
- Journal of Qualitative Health Research
- Journal of Quality and Safety in Health Care
- Journal of the Canadian Chiropractic Association

- Journal of Youth Studies
- Medical Anthropology
- Medical Decision Making
- Medical Journal of Australia
- Movimento
- Nursing Ethics
- Nursing Inquiry
- Osteoarthritis and Cartilage
- OTJR: Occupation, participation and health
- Paediatrics and Child Health
- Pain
- Patient Education and Counselling
- Pharmaceutical Development and Regulation
- Physical Therapy Reviews Special Issue: Qualitative Research
- Physiotherapy Canada
- Physiotherapy Theory and Practice Special Issue: Philosophy and Physiotherapy
- PISTES
- Psychiatric Services
- Psycho-Oncology
- Qualitative Research
- Qualitative Health Research
- Qualitative Inquiry
- Scandinavian Journal of Work, Environment and Health
- Small Enterprise Research Journal
- Social Science & Medicine
- Sociologie et Société
- Sociology of Health and Illness
- Social Problems
- Social Science and Medicine
- Urban Public Health
- Work





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