

Exploring the Information Practices of Cannabis Nurses

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Dissertation Research - Work in Progress

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Models & Methods

nterdisciplinary Study

- Communication
- **Information Science**
- Knowledge Management

- Social Phenomenology
- Qualitative Methods
- Purposive Sampling

Theoretical Basis

• Structuration Theory

• Community of Practice

- Situativity Theory
- Practice Theory

Subject of Analysis

Cannabis Nurses

Unit of Analysis

Object of Analysis

Cannabis nursing

Information Practices (see model)

Data Collection

- One 60 minute semi-structured recorded interviews (36 hours total)
- Transcriptions (over 900 pages)

Data Analysis

- Thematic coding based on model (120+ codes emerged)
- nVivo coding and analysis

IRB Approval

Word

based on

question

cannabis

• Pro2017000073

Sample Demographics

Sample Size	N = 31	• Reside in a legal state • RN, BSN, LPN, NP degree
Gender	Female = 27 Male = 4	
Race / Ethnicity	Caucasian = 27	'cannabis nurse'Working as a nurse/ educator in cannabis-based

Hispanic = 2

- medicine Mixed race = 1Not disclosed =
 - Have pursued education in cannabis-based medicine
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Abstract and Research Question

Abstract

In the United States, three quarters of the cost of healthcare (over \$2 trillion dollars) goes towards caring for people with chronic health conditions.

Of even greater concern is the average amount spent on healthcare in comparable countries (\$5,198/ person) is half the cost of healthcare in the U.S. (\$10,348/ person), yet our health outcomes and morbidity rates are average to poor. (Source: Healthcare at a Glance OECD, 2017).

At the same time, cannabis-based medicine is being shown to improve the health outcomes of people with a wide range of health conditions and, if implemented on a wide enough scale could improve public health overall.

understanding how they seek information, who they believe, and how they are developing their knowledge around cannabis-based medicine is an important and urgent topic of study.

> RQ: What are the information practices of cannabis nurses?

Aims & Objectives

Produce a rich description of the information practices of the sample set of cannabis nurses

Explore how the information practices of cannabis nurses are normalizing the use of cannabis-based medicine

Search for patterns in the use of information practices among a sample set of cannabis nurses

Test the concept of information practices as a unit of analysis for information science research

Determine who the sample set of cannabis nurses deem to be cognitive authorities

Selected References

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Adolescent use

Theoretical Elements and Information Practices Model

Information Practice Modes

Given that nurses are on the frontline of both issues

INFORMATION PRACTICES MODE

Attributes Definition Information Information Cognitive Cognitive **Authority Practices Practices Authority**

Importance Cognitive

authorities

contact wit

Practice / Action Description Searching PubMed Systematic search Seeking out a known | Asking a planned Active "I know what I'n Seeking Identifying likely Semi-directed browsing for "I'll know it when information in locations that will Scanning Observing, Interjecting oneself Nonencountering or **Browsing Forbes** Unexpected overhearing, or monitoring and "My ears perk up into a conversation Magazine and encounter with an engaging with recognition of a Directed when I hear the strangers and / coming across a word 'cannabis' Monitoring or acquaintances needed / desired cannabis study / desired information source about cannabis

l To educa e advocate Being told abou Openly revealing an information self as an Potential cannabis Primary care source; Being identified as patient searches contact or physician refers contacting t an information state medical interacts with patient to a cannabis To shar information Offering to help cannabis registry for information seeker or nurse for care and with other

Communication Phases

-----Individuals may become a

Examples

an information source to tell sources through names of cannab them about an education the actions of information information seeker

Implications

Identity as a Nurse

ated activi

agreemen

bout ways

knowing

uated acti

- 77% (n = 31) identified as a 'Cannabis Nurse'
- 23% (n = 31) identified as a "Nurse who advocates for Cannabis"

Reason for Becoming a Cannabis Nurse Triggering Event

- o Personal or family member health challenge o Learning about endocannabinoid system
- Tipping point o Frustration with mainstream nursing

- Lack of knowledge o About how the endocannabinoid system
- o How to best care for patients

o Legalization of medical cannabis

• Stigma o Fear of drug testing

o Feat of being labeling Attitude Towards Research

- Evidence Based o Evidence based research and randomized controlled clinical trials seen as useful but problematic due to difficulty in researching whole plant and federal legalization
- Qualitative Based o Anecdotal, case study and first-hand experience seen as valid evidence that cannabis works as medicine

Patient Centered

sources of information

• 55% (n =27) rated patients as most trusted source of information • 70 % (n = 31) are themselves medical cannabis patients

Human Sources / Cognitive Authorities

• 100 % (n = 31) actively asserted themselves as cognitive authorities • 60% (n = 27) rated doctors as not trusted sources of information • 65% (n = 27) rated pharmaceutical representatives as not trusted

mergence of the Domain of Cannabis Nursing

• Signs of Community of Practice (CoP) developing • Distinct nursing practices appearing including o Dispensary system knowledge o Patient education focus

Concerns about Cannabis as Medicine

- Side effects and drug interactions • Product labelling, testing, standards, regulations
- Dosage and product choices • Lack of patient education • Lack of physician education and support

Technology and Information Systems

- Lacking purpose built EMR software to healthcare service delivery • Lacking searchable knowledge base for research
- Lacking diagnostic tools and technology

• Useful for making a distinction between the sociological influence of information seeking from the psychological and cognitive focus of information behavior.

Modes of information practices were useful to solate information work Information from behavior by looking at Science information work from a resource expenditure perspective.

By- Proxy

- Social and dialogic by nature, the phases of the model are useful in isolating communication practices, identifying barriers, and observing communicative actions to overcome barriers.
- Shows communication is constitutive as information practices of cannabis nurses are constructing the domain of cannabis nursing and normalizing this as acceptable path.

Communication

Knowledge

Managemer

- Key to sensemaking and personal knowledge development through information seeking as learning practices and the performance of information work.
- Shows the influence of cognitive authority on the opportunity and circumstances surrounding the development of firsthand experience and

71 % (22) of nurses in this sample re very early

Health Condition 40 different chronic health conditions mentioned. The following are top three

in order:

1. Chronic Pain 2. Cancer 3. Polypharmaceutical overload / opioid use disorder

Preliminary Findings

Diverse Nursing Backgrounds The nurses came to

cannabis nursing from a

wide range of

backgrounds such as

hospice, home health, oncology, pain management, holistic medicine

adapters in cannabis nursing and identify as entrepreneurs

Active Seeking

 Information seeking and knowledge development occupies and structures the nurses' daily lives

Early Adapters and

Entrepreneurs

Active Scanning

Non-Directed Monitoring • Nurses were in a constant state of non-directed monitoring and used their cognitive authority to

Nurses sought out sources and

contacts in information grounds

By Proxy

strangers

• Nurses were often the object of by- proxy information practices as patients often found them by

connect and interact with

Depends on Location

The nurses all shared similar journeys into cannabis nursing with their exact experience more dependent on the state / state laws where the nurse resides

Homogenous Sample

- 87% (27) female
- 65 %(20) are RNs

• 74% (23) having 11 - 25+ years of experience

annabis Nursing

Experience

The range of experience in cannabis nursing went from less than one vear to more than 10 years with the biggest percentage of this sample 32% (10) having 2 years of cannabis ursing experience

- 87% (27) Caucasian • 35% (11) from California • 65 % (20) other states
- 45% (14) are 51 65 Cannabis

Demand for specialized knowledge on cannabis-based medicine is rapidly

Nurses

• Integrating cannabis-based medicine Medicine requires specialized skills and knowledge

growing

Comments

• The model is largely based on

Information Practices Model

and now further refined by this

researcher over the course of

• Information practices are used

by individuals in context as

communication strategies in

the face of connection or

communication barriers.

Not all communication

barriers can be successfully

source (cognitive authority) of

Information seeking

as learning is an area

• Information systems

are almost entirely

absent in cannabis

Stigma is falling away

and normalization is

• Patients are starved

information, and care

for guidance,

occurring

based medicine

for systems

development

information for others in a

mesh of interactions

as refined by Yeoman (2011)

McKenzie's (2003)

this study.

navigated.

nformation

 Develop education on the endocannabinoid

For Nurse • Train nurses on how **Educators** to educate patients, answer question

system

about cannabis

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