

***Information for youth perinatal health:
Experiences of pregnant youth and their health care providers***

This research project will explore the way pregnant youth and their health care providers (HCPs) think about, seek, access, value and use health-related information: their perinatal health information behaviour. Via qualitative inquiry into the health-related information experiences of pregnant youth and their HCPs in British Columbia, I seek to shed light on knowledge translation and health behaviour change processes related to youth perinatal health. Drawing on information science, critical studies and health services research traditions, this interdisciplinary project aims to uncover values, rationales and theories behind the use and non-use of medical evidence in perinatal health decision-making.

Background

Effective communication of health information to target audiences is a key element of knowledge translation (KT) aimed at impacting both professional practice and public health. Information is also a major concept in many models of health decision-making and behaviour change. Yet, our knowledge of health information behaviour – the “receptor side” of KT - is limited.

Canada dedicates substantial resources to KT with the aim of improving the health of pregnant women and newborns. Despite our investment in perinatal health information campaigns, we know little about the role of such information in informing health decisions. While teenage pregnancy is associated with a higher risk of many health problems to mother and baby, we know even less about the information behaviour of and relating to pregnant youths than we do about mothers in general.

What health information do young (13-19 yrs) pregnant women and their perinatal HCPs think about, seek, access, value and use? What is the role of such health information in informing perinatal health decisions? In an attempt to explore answers to these questions, this project will investigate the information behaviour related to youth perinatal health in British Columbia.

Objectives and Research Questions

By exploring the information experiences of pregnant youth in BC and their HCPs, I aim to: (1) describe the health information behaviour of pregnant youth and perinatal HCPs, (2) identify values, rationales and theories behind the use and non-use of medical evidence in perinatal health behaviour and care in the study population, and (3) compare and contrast the observed health information experiences with existing theories of health behaviour, information behaviour and knowledge translation.

This project will simultaneously explore: (a) the known public health priority area of medication use during pregnancy and lactation, and (b) other health issues that emerge as priorities of the research participants. Research questions will centre on ways young pregnant women and perinatal HCPs interact with information to support perinatal health. How do participants identify information needs relating to pregnancy or childbirth and health? Where do participants seek information, how do they go about it, and why do they use the sources they do? What do they do with the information they find and receive?

Theoretical Approach

While researchers may use quantitative research methods to observe what is happening in youth perinatal health (e.g., what patient or prescriber attributes appear to be correlated with potentially-teratogenic prescriptions), qualitative exploration uniquely uncovers the why and how -- the meanings of observed phenomena (e.g. how is the decision to prescribe or consume a high-risk medication made?). Due to this project’s constructivist aim of understanding participants’ own perspectives and truths, I will apply principles of emergent design in data collection and analysis. My methodology is further influenced by critical feminist studies perspectives; thus power structures and hierarchies of privilege and oppression will be significant concerns of both the ethics and analysis.

Methods and Procedures

Data Collection

This project will centre on a set of information experience studies of pregnant teens and perinatal HCPs in British Columbia. Focus group interviews of purposively sampled peer groups will be the primary mode of data collection. Focus group methods may allow better access to elite professionals, put lay participants more at ease than one-on-one interviews, and allow us to explore social sharing of information among peers – a concept central to the theory of Information Grounds. In-depth individual interviews will be employed as needed in order to access individuals with perspectives of theoretical value who are unwilling or unable to participate in a group setting. Interviews will be facilitated in a semi-structured manner, embedding the pre-determined topic of medication decisions with an otherwise open agenda to allow other themes to emerge as participants deem them important.

Interviews will make use of the Critical Incident Technique (CIT), asking participants to recall and recount specific information-related experiences. CIT allows the interviewer to gather rich data on topics that are important to participants and attempt to capture a close representation of the interviewee's experience in her own words. While CIT does not have the breadth of prospective techniques such as information needs journaling, its strength lies in depth of the data, as well as the simplicity of completion when compared to longitudinal data collection, with which participants may frequently be unwilling or unable to comply.

Analysis

Data analysis will be inductive in nature, based on grounded theory strategies, but informed by postmodern critical studies paradigms to look for themes of power hierarchies, privilege and oppression, and faceted identities. Data will be examined iteratively, using constant comparison across data sources, coded themes and memos. Analysis will be informed by Charmaz's constructivist grounded theory techniques, expanding the focus beyond processes to social worlds, and clearly acknowledging the impact of participants' social locations. Clarke's postmodern situational analysis mapping techniques will be drawn upon as analytic tools.

Contribution to the Advancement of Knowledge

Strong qualitative research that answers some of the how's and why's behind youth perinatal health behaviours will enrich our understanding of how best to "do KT" in this important area. Policy makers, equipped with these results, will have a better understanding of the types of information that are valued and used by health professionals and the public. Libraries and publishers need this information in order to evolve to better meet the health information needs of patrons and customers. Health care practitioners will gain an increased understanding of what information is influential to patients.

Significance to fields supported by the Canadian Institutes of Health Research (CIHR)

CIHR's mandate includes the "translation of knowledge into improved health for Canadians, more effective health services and products and a strengthened Canadian health-care system." In accordance with this mandate, CIHR's current strategic direction #3 is to "Accelerate the capture of health and economic benefits of health research." Research on the theory and practice of KT, such as this project aimed at understanding the information behaviour of populations who are targets of KT campaigns, supports this mandate and strategic direction.

This research, being highly interdisciplinary in nature, contributes toward goals within two of the four CIHR "pillars": health systems and services; and the social, cultural and other factors that affect the health of populations. Further, it spans topics of interest to multiple Institutes, including the Institute of Gender and Health, Institute of Health Services and Policy Research, and Institute of Population and Public Health.

Candidate's Role

Under the guidance of my proposed supervisor, Dr. ~~Elizabeth~~ CIHR Chair in Improving Youth Sexual Health), I will design the research protocol and carry out the interviews and analysis. I will lead in the authorship of peer-reviewed articles resulting from the research and present findings to academic, birth-related, and health-information/KT focused audiences.