



Detailed Program

Indiana University Purdue University Indianapolis (IUPUI)
University Tower, 911 W. North Street, Indianapolis, IN 46202

Monday, June 26, 2017

7:00-8:15 am	<p style="text-align: center;">REGISTRATION/BREAKFAST Registration will take place in the University Tower Lobby Breakfast will be available in the University Tower Dining Hall, 1st Floor</p>
8:30 am	<p style="text-align: center;">WELCOME/OPENING University Tower Ballroom, 1st Floor</p>
9:00-10:15 am	<p style="text-align: center;">PLENARY PRESENTATION University Tower Ballroom, 1st Floor</p> <p style="text-align: center;">Rita Charon, M.D., Ph.D. Professor of Medicine at Columbia University Medical Center Executive Director, Program in Narrative Medicine, Columbia University, New York, USA</p> <p style="text-align: center;">"The Shock of Attention: Arts, Sciences, Creativity, and Doubt"</p> <p>Abstract: Why health care may be the best milieu in which we can overcome chasms between the arts and the sciences and why the care of the sick is perhaps the best or even the only way in which human beings can confront the problems of time. It follows that the care of the sick and its related efforts to research aspects of that care embroil its practitioners in confrontations with those questions that bedevil and humanize us.</p>

Monday, June 26: CONCURRENT PRESENTATIONS - SESSION 1

	Indiana Room, 2nd Floor	Purdue Room, 2nd Floor	Tower Ballroom, 1st Floor (WIP)	Presidents Room, 2nd Floor
10:30-11:00	<p>Lars C. Hydén & Christina Samuelsson</p> <p>Dementia, common ground and reality disjunctions</p>	<p>Stephanie Fox & Boris H.J.M. Brummans</p> <p>Interprofessional collaboration as joint employment</p>	<p>Shawnea Sum Pok Ting</p> <p>Seeking medical help in Hong Kong using English as a lingua franca: Patients' perspective</p>	<p>Panel 1: Health care systems in transition: Equality, access and health literacy in three Scandinavian welfare states</p> <p>Coordinator: Inger Lassen</p> <p>Aase Marie Ottesen, Jeanne Strunck & Inger Lassen (Danish)</p> <p>Health care policy at a crossroads? - A discursive study of political moments and patient roles in national health quality strategies between 1993 and 2015</p> <p>Berit Misund Dahl & Elin Aasen (Norwegian)</p> <p>The construction of patients' positions in the Norwegian Patients and Service User's Rights Act: a critical discourse analysis</p> <p>Elisabeth Dahlborg Lyckhage, Sandra Pennbrant & Åse Boman (Swedish)</p> <p>"The Emperor's new clothes": discourse analysis on how the patient is constructed in the new Swedish Patient Act</p>
11:05-11:35	<p>Clarissa Surek-Clark</p> <p>Narratives of illness and death among the Zulu</p>	<p>Ruth Gwernan-Jones, Elina Baker, Maria Cox, Laura Gill, Catherine McCabe, Ameeta Retzer, Claire Planner, Humera Plappert, Vanessa Pinfeld, Siobhan Reilly, Richard Byng, Linda Gask, Nicky Britten & Max Birchwood</p> <p>PARTNERS collaborative care for people with psychosis in the UK: Using tape assisted recall to explore practitioner-client interactions</p>	<p>Chia-Chun Tang, Clair Draucker & Diane Von Ah</p> <p>The experience and communication of symptoms in advanced pancreatic cancer patients and their caregivers</p>	
11:40-12:10	<p>Adam Hayden</p> <p>Inside my head: An illness narrative from a brain cancer patient's perspective</p>	<p>Loretta Gasparini, Lesley Stirling & Jean Lillian Paul</p> <p>"Has what I've said been understood?" Managing alignment in genetic consultations</p>	<p>Dawn S. Opel</p> <p>Connecting interprofessional IT: Care coordination across community and clinical contexts</p>	

12:15-1:15	<p style="text-align: center;">Monday, June 26, 2017</p> <p style="text-align: center;">LUNCH Tower Dining Hall, 1st Floor</p>
1:30-2:45 pm	<p style="text-align: center;">PLENARY PRESENTATION University Tower Ballroom, 1st Floor</p> <p style="text-align: center;">Gary L. Kreps, Ph.D., FAAHB University Distinguished Professor, Department of Communication Director, Center for Health and Risk Communication, George Mason University, Fairfax County, Virginia, USA</p> <p style="text-align: center;">“The Ethical Imperative for Conducting Translational Health Communication Research”</p> <p>Abstract: A primary benefit that can be derived from conducting engaged health communication inquiry is the potential to improve the outcomes of health promotion and health care delivery efforts. Indeed, health communication scholars have an ethical responsibility to conduct relevant, rigorous, and revealing research that can illustrate key communication issues and opportunities for enhancing health outcomes. This can only be accomplished by carefully designing health communication studies to address critically important health issues, collecting the most valid and generalizable communication data that represent the perspectives and needs of key health care system participants (such as health care consumers, providers, administrators, and policy-makers), translating research findings into relevant applications, programs, practices, and policies, and working with partners within the health care system to evaluate, implement, and sustain the best evidence-based interventions to achieve important health goals. This presentation will examine the best strategies for conducting translational health communication research that can significantly promote improved health and well-being.</p>

Monday, June 26: CONCURRENT PRESENTATIONS - SESSION 2				
	Indiana Room, 2nd Floor	Purdue Room, 2nd Floor	Tower Ballroom, 1st Floor (WIP)	Presidents Room, 2nd Floor
3:00-3:30	<p>John Skelton, Connie Wisikin, Jan Whetstone & Jon Ward</p> <p>Language and professional development: How are they linked?</p>	<p>Talia Isaacs, Zsofia Demjen & Finoa Severson</p> <p>What does it take to understand? A text-based analysis of the language demands of English-medium ethical materials provided to patients in randomized controlled trials</p>	<p>Nicole Pillinger</p> <p>Reflective practice on critical moments in physician-patient conversations in the context of complex diseases using the example of endometriosis: What coaching research and practice can contribute to the debate</p>	<p>Panel 2: Examining health communication through the lens of Communication Privacy Management theory</p> <p>Coordinator: Sandra Petronio</p> <p>Rachael Hernandez & Diana S. Ebersole</p>
3:35-4:05	<p>Jill P. Grant & Tanya E. Gregory</p> <p>The Sacred 7: Integrating humanities into Physician Assistant (PA) education</p>	<p>Sara Newman</p> <p>Translating lived experience into practice: An ethical, practical, and collaborative methodology for medical/healthcare research</p>	<p>Kristina A. Wenzel Egan</p> <p>Dying spaces: The experience of space and place on end-of-life communication with dying parents</p>	<p>A spectrum of explicitness: Parent-adolescent perceptions of family privacy management at the intersections of health, technology and parental drug use</p>
4:10-4:40	<p>Anthony Sanchez, Seuli Brill, Gabriella Modan & Kimberly Frier</p> <p>Listening strategies: Psychosocial and medical discussions and documentation in primary care complex chronic disease encounters</p>	<p>Pamela Knight-Davidson</p> <p>Ethical considerations relating to conducting linguistic research in the UK National Health Service: How to make studies applicable to practitioners and of benefit to participants</p>	<p>Alexia M. Torke, Susan Hickman, Bernard Hammes, Steven Counsell, Patrick Monahan, James E. Slaven, Dawn Butler, Kianna Montz, & Lev Inger</p> <p>Physician orders for life-sustaining treatment (POLST) facilitation in complex care management: A pilot study</p>	<p>Timothy Barshinger</p> <p>Using Communication Privacy Management (CPM) theory to interpret the communication experiences of pharmaceutical and biotech company-sponsored patient navigations</p> <p>Katharine J. Head, Sandra Petronio & Jennifer J. Bute</p>
4:45-5:15	<p>Elena Semino, Andrew Hardie & Joanna Zakrzewska</p> <p>A corpus-based linguistic assessment of a diagnostic pain questionnaire</p>	<p>Colin Lewis & Olga Zayts</p> <p>Ethics in genetic counselling: Risk communication for SADS in family-oriented contexts</p>	<p>Jill Tyler</p> <p>Friendship, social class, and health</p>	<p>Patients' reflections on disclosure of genetic disease diagnosis to family members</p>
6:00-10:00 pm	<p>CONFERENCE DINNER: A NIGHT AT THE EITELJORG</p> <p>Eiteljorg Museum of American Indians and Western Art, 500 W. Washington St.</p>			

Tuesday, June 27, 2017

7:00-8:15 am	<p style="text-align: center;">BREAKFAST Breakfast will be available in the University Tower Dining Hall</p>
8:30 am	<p style="text-align: center;">DAY 2 OPENING REMARKS University Tower Ballroom, 1st Floor</p>
9:00-10:15 am	<p style="text-align: center;">PLENARY PRESENTATION University Tower Ballroom, 1st Floor</p> <p style="text-align: center;">Srikant Sarangi, MA, PGCTE, PGDTE, MLitt, PhD, FAcSS. Professor in Humanities and Medicine, Danish Institute of Humanities and Medicine (DIHM), Aalborg University, Denmark</p> <p style="text-align: center;">“The Translational Gap in Health Communication Research and Its Uptake in Clinical and Educational Practice”</p> <p>Abstract: Translation of research into practice is a key driver in the Academy, which is increasingly becoming a prerequisite for funding streams and professional career advancements. The domain of medicine/healthcare is no exception, given the historical disconnect between biomedical research and clinical practice. This can be attributed to a general lack of shared agenda in the research-practice continuum. The same scenario conveniently extends to what can be broadly characterised as health communication research embedded within the humanities and social scientific disciplines and its lack of uptake in clinical and educational practice. In this presentation I identify both challenges and affordances in bridging this two-fold translational gap.</p> <p>Patient-provider communication is assuming visible significance as both a diagnostic and therapeutic tool in healthcare delivery. However, the problem, for the most part, lies in the drastically different ways in which the scientific field of communication is conceptualised across disciplinary and professional boundaries. Communication as a dynamic and complex system – as dependent on a host of contextual and cultural variables – is far from shared. There is thus the urgent need for a transdisciplinary dialogue about the basics governing the communication process for affording translationality. By extension, an adequate level of description of the multi-layered healthcare communication process is a necessary precondition for the purposes of education and assessment in the curricular setting and for its operationalisation in real-life clinical practice. Through illustrative exemplars taken from a number of healthcare sites, I will suggest at least six parameters (e.g. affordable presence, Reciprocity of perspectives, joint problematisation, thick participation, collaborative interpretation and provision of hot feedback) through which translational research can be conceived of more productively to optimise impact.</p>

Tuesday, June 27: CONCURRENT PRESENTATIONS - SESSION 3

	Indiana Room, 2nd Floor	Purdue Room, 2nd Floor	Tower Ballroom, 1st Floor (WIP)	Presidents Room, 2nd Floor
10:30-11:00	<p>Donna Elkins</p> <p>With a little help from my friends: How women navigate communication privacy management</p>	<p>Ping-Hsuan Wang</p> <p>Vulnerable being gay: Reframing through epistemic positioning in a therapy session</p>	<p>Zsófia Demjén</p> <p>Exploring the effects of bibliotherapy through linguistic analysis - a pilot study</p>	<p>Panel 3: Implementation Challenges of Health Communication Research</p> <p>Coordinator: Ulla Connor</p> <p>Mary de Groot, Kent Crick, Tamara Smith & Lisa Fleetwood</p>
11:05-11:35	<p>Patricia J. Scott</p> <p>The disconnect: Life ≠ meaningful life - Advancing translational research from 'bench to enactment' with an insider view</p>	<p>Maha Alayyash</p> <p>Patients' perceptions of chaperones' roles and gender variation in Saudi Arabia</p>	<p>Susanna Foxworthy Scott</p> <p>Exploring patient information preferences and feedback after clinical trial participation</p>	<p>Promoting health in healthcare: Voices of healthcare employees</p> <p>Ulla Connor, Lucina Kessler, Mary de Groot & Robert Mac Neill</p>
11:40-12:10	<p>Margareta Hydén</p> <p>Breaking the cycle of violence and sexual abuse - transformation as a story of the expanded family network</p>	<p>Joanna Pawelczyk & Malgorzata Talarczyk</p> <p><i>Most men uhm well are not able to understand these problems of ours: Are gender(ed) propositions worked with in psychotherapy with women suffering from bulimia?</i></p>	<p>Rebecca L. Garner, Laurel Smith Stvan & Sridhar Panchapake Nerur</p> <p>What students believe is healthy: Language clues in pre-diabetic populations</p>	<p>Implementing linguistics to improve patient health: An intervention study</p> <p>Manyun Zou, Liping Guo & Yuling Qiao</p> <p>Physicians' affective behavior and patient satisfaction with clinical consultations in mainland China</p> <p>Discussants: Seuli Brill Lucina Kessler</p>

12:15-1:15	Tuesday, June 27, 2017 LUNCH Tower Dining Hall, 1 st Floor		
1:30-2:45 pm	PLENARY PRESENTATION University Tower Ballroom, 1 st Floor Alice Dreger, Ph.D. Author -- <i>Galileo's Middle Finger: Heretics, Activists, and the Search for Justice in Science</i> "Taking the History, and Never Giving It Back" Abstract: It's a funny thing that we are this far along in our understanding of the importance of narrative to human psychology and human culture yet we persist in taking patients' histories and never giving them back. Does having a coherent story matter? Research in historiography, clinical psychology, cross-cultural anthropology, narrative medicine, and evolutionary biology would strongly suggest it does. The speakers' own experience—providing victims of iatrogenic trauma with short, private, client-centered, personal medical histories—also indicates it does. So why do we talk about the biopsychosocial model yet largely ignore, the biology, the psychology, and the sociology of patients' stories in the clinical setting? How might we mobilize historians of medicine to do micro histories?		
3:00-4:00 pm	POSTER SESSION University Tower Ballroom Foyer, 1 st Floor		
	Poster Number	Poster Presenter	Title
	1	Peter M. Anderson , Stacy Zahler, Lynelle Houser & Nicole Ehrman	Patient summaries, virtual visits, and the EMR can be more informative & friendly
	2	Katherine Hubert Chan, Janet Panoch & Elhaam Bandali	Engaging families in decision-making for hypospadias surgery: Development of a decision aid
	3	Rukhsana Ahmed & Peter Schulz	The role of religious beliefs and values on knowledge and attitude toward organ and tissue donation and transplantation among Muslims in Canada: An exploratory study
	4	Cynthia Martiny & Myra Deraîche	Intercultural rhetoric within immigrant-counselor conversations
	5	Thian Huat Goh , Shameem Begum Binti Mohd Rafik Khan, Chan Mei Yuit & Afida Binti Mohamad Ali	Genre analysis: Determining the moves and steps of English informative medical podcasts
	6	Kenneth H. Lazarus , Andea Pfeifle, Dan Lodge-Rigal, Rebecca Rose, Kathryn Goggin, Tochukwu Iloabuchi, Matthew Segar & Bradley Allen	Creation of a course to educate 3rd year medical students utilizing synchronous/asynchronous methodology, interprofessional consultations and the teaching electronic medical record

7	Timothy Barshinger	Healthcare providers' education engagement as a predictor of diabetes patient activation
8	Janet Panoch, Nerissa Bauer, John Parrish-Sprowl & Amira Nafiseh	Translating advocacy videos to interactive video games for high school health classes: Teens inform <i>PACE-talk – The Game</i>
9	Mary E. Riner	Understanding contextual communication issues related to adopting Helping Babies Breathe program in low income African setting
10	Wendy Vaughn , Christina Zarcadoolas, Ignasi Clemente & Michelle G. Dresser	Understanding perceptions and knowledge of diabetes and prediabetes among New York City residents: Development of the Public Health Detailing Diabetes Action Kit
11	Roxana Delbene	Narrative medicine, literature, and the hidden curriculum
12	Nathalie Egalite	"The healing power of philanthropy": Situating medical discourse in an ethical examination of grateful patient giving
13	Dodie M. Stein , Michael A. Kraus & Ulla Connor	Psycholinguistic segmentation and patient-centered communication to increase dialysis patients' adherence to treatment
14	Ulla Connor , Esen Gokpinar-Shelton, Lucina Kessler & Robert Mac Neill	The CoMac Descriptor™ and psycholinguistic Tailored Communication to Promote Self-Management (TCPS) in patients with type-2 diabetes
15	Grace Hildenbrand	Examining tensions between the biomedical and psychosocial models in physician communication training
16	Esen Gokpinar-Shelton , Ulla Connor, Daniel Rueckert, Diane Lorant, Rylin Rodgers, Jennifer Akers	Developing a targeted English-language curriculum and materials for Latino caregivers of infants with special needs as part of a NICU pre-discharge education program
17	Rachael Hernandez	A measure of college student's management of private information about condom use
18	Barbara K. Giambra, Stephen M. Haas , Maria T. Britto, Ellen A. Lipstein	Exploration of parent-provider communication during clinic visits for children with chronic conditions

Tuesday, June 27: CONCURRENT PRESENTATIONS - SESSION 4

	Indiana Room, 2nd Floor	Purdue Room, 2nd Floor (WIP & Oral Pres.)	Presidents Room, 2nd Floor
4:15-4:45	<p>Ekua Essumanma Houphouet & Nana Aba Appiah Amfo</p> <p>“I will attend antenatal but deliver at home”: The choice of home delivery for women in a semi-urban Ghanaian community</p>	<p>Giovanni Biglino, Sofie Layton, Jo Wray & Lindsay-Kay Leaver</p> <p>First person composite narrative and artist-mediated narratives: the experiential landscape of congenital heart disease</p>	<p>Panel 4: Partnering with patients: Advocacy advances in technology and education Chair: Gary Kreps</p> <p>Peter Anderson Virtual visits and personalization of the ERH</p> <p>Susan Wieczorek eMessaging and patient/provider communication</p> <p>Mike Warner Co-authorship of the medical history in the HER</p> <p>Janet Panoch & Don Cegala Patient self-advocacy training in high school curriculum</p>
4:50-5:20	<p>Aoxuan (Jessica)wan Cao</p> <p>Metaphor of cancer in the Chinese news media</p>	<p>Bettina Zimmerman, Steffen Kolb, David Shaw & Bernice Elger</p> <p>Perception of genetics among the public: a content analysis of Swiss media</p>	
5:25-5:55	<p>Esen Gokpinar-Shelton & Matthew Hume</p> <p>Addressing the lack of cross-cultural communication skills among international dentists: The case of Indiana University International Dentist Program (IU-IDP)</p>	<p>Janet Farrel Leontiou</p> <p>Is it getting darker In here?: Gaslighting as part of medical culture</p>	

Tuesday, June 27: SPECIAL INTEREST DINNERS

Join other conference attendees for dinner and conversation on various COMET-related topics.
 A list of conversation hosts, topics, meeting times, and restaurants will be available at the Registration Desk. Sign up if you're interested.

Wednesday, June 28, 2017

7:00-8:15 am	<p style="text-align: center;">BREAKFAST Breakfast will be available in the University Tower Dining Hall</p>
8:30 am	<p style="text-align: center;">DAY 3 OPENING REMARKS University Tower Ballroom, 1st Floor</p>
9:00-10:15 am	<p style="text-align: center;">PLENARY PRESENTATION University Tower Ballroom, 1st Floor</p> <p style="text-align: center;">Ellen Barton, Ph.D. Professor of English and Linguistics, Wayne State University, Detroit, Michigan, USA</p> <p style="text-align: center;">“Analyzing the Discourse of Deliberation on Institutional Review Boards: Do Community Members Have an Effective Voice?”</p> <p>Abstract: Post Tuskegee, the first version of the US federal regulations for the review of research with human subjects mandated both the presence of community members [CMs] on IRBs and the requirement that the review of protocols consider “community attitudes” in deliberation (US DHEW 45CFR46, 1974). These regulations were openly contested at the time, and more subtly worded ambivalence about the roles and responsibilities of CMs has continued in the IRB literature (Amdur and Bankert, 2011). Based upon a larger observational project analyzing the recorded and transcribed deliberation of a behavioral IRB over the period of one year (Barton et al., forthcoming), the purpose of this study was to examine the discourse of CMs on this behavioral IRB: the specific research question was whether these CMs had an effective voice in the deliberation of this IRB (or not). For the discourse analysis, we developed an interactional definition of effective and ineffective voice in terms of the linguistic uptake of CMs’ contributions to deliberation (n=55). We found that CMs had an effective voice in constructing the compliance of individual research protocols under review; however, we also found that the interactional practices of IRB deliberation sometimes functioned to make CMs’ voice ineffective in their representation of community attitudes. We consider the implications of our research at several levels: the interactional level of IRB meetings, the administrative level of institutional policy, and the need to consider IRB regulations with respect to justice, the third principle of The Belmont Report (1979).</p>

Wednesday, June 28: CONCURRENT PRESENTATIONS - SESSION 5

	Indiana Room, 2nd Floor	Purdue Room, 2nd Floor	Tower Ballroom, 1st Floor (WIP)	Presidents Room, 2nd Floor
10:30-11:00	<p>Krista Hoffmann-Longtin & Elizabeth Weinstein</p> <p>Improv(ing) communication with the public: An innovative curriculum for pediatric residents</p>	<p>Joy L. Lee, Michael Weiner & Nir Menachemi</p> <p>A critical appraisal of guidelines for electronic communication: The need for modernization</p>	<p>Sarah Hemmersbach</p> <p>YouTube and mental health: A comprehensive assessment of YouTube video content</p>	<p>Panel 5: Difficult medical conversations: Patients' and health care providers' perspectives</p> <p>Coordinator: Marilyn Ritholz</p>
11:05-11:35	<p>Diana L. Awad Scrocco</p> <p>"Let's talk more about this": An analysis of how experts engage novice physicians in pedagogical dialogue</p>	<p>David A. Haggstrom & Thomas Carr</p> <p>Perceived usefulness of personal health records for cancer patients among patients, caregivers, and providers</p>	<p>Rachael Lussos</p> <p>Ethical implications of routine urine drug testing of pain patients</p>	<p>Marilyn D. Ritholz, Tara MacNeil & Katie Weinger</p> <p>Discussing diabetes complications: Balancing medical information/diagnosis with patient activation and hope</p>
11:40-12:10	<p>Tiffany Hecklinski & Janet Panoch</p> <p>Metaphors matter</p>	<p>Katharine J. Head, Amanda Harsin & Rebecca J. Bartlett Ellis</p> <p>Identifying sources of patient dissatisfaction when seeking care for a chronic and complex disease: A content analysis</p>	<p>Jennifer K. Ptacek & Daniel Kamal</p> <p>Analyzing the social networks of electronic support groups for contested illnesses</p>	<p>Karie Cook, Darlene E. Berryman, Melissa Standley & Elizabeth A. Beverly</p> <p>Providers' perceived challenges to treating diabetes in rural Appalachia</p> <p>Elizabeth A. Beverly, Sue Meeks, Johnna Preston, Anne Rubin, Karie Cook, & Melissa Standley</p> <p>Diabetes patient navigation: A promising model to improve communication between patients and providers</p>

12:15-1:15	<p style="text-align: center;">Wednesday, June 28, 2017</p> <p style="text-align: center;">LUNCH Tower Dining Hall, 1st Floor</p>
1:30-2:45 pm	<p style="text-align: center;">PLENARY PRESENTATION University Tower Ballroom, 1st Floor</p> <p style="text-align: center;">Sandra Petronio, Ph.D. Professor of Communication, Indiana University-Purdue University Indianapolis (IUPUI) Founding Director, Communication Privacy Management Center at IUPUI, Indianapolis, Indiana, USA</p> <p style="text-align: center;">“Dilemmas of Managing Healthcare Disclosures and Confidentiality: Understanding through the Lens of Communication Privacy Management Theory”</p> <p>Abstract: Providing and receiving healthcare is a complex enterprise in which communication plays a significant role. However, understanding the way communication processes work is often challenging, especially when it comes to choices about disclosing and protecting private information. Successfully providing high quality healthcare necessarily incorporates the way people define and enact behaviors regarding disclosures of their private information. For example, physicians need patients to disclose symptoms. Yet, patients can hold back private health information because they may fear a negative outcome. Not telling might give the patient a feeling of protection, yet, telling might expedite care. This type of dilemma is witnessed when patients wait until the last minute of the doctor’s visit to disclose the most problematic symptoms. Dilemmas faced in managing disclosures and confidentiality within the context of healthcare are often difficult to discern and at times tricky to detect. Communication Privacy Management Theory offers an approach to understanding ways people define and regulate their private information and takes into account the role of confidant. This presentation explores the types of dilemmas patients and providers encounter regarding the management of disclosing or protecting private information relevant to achieving effective healthcare.</p>

Wednesday, June 28: CONCURRENT PRESENTATIONS - SESSION 6

	Indiana Room, 2nd Floor	Purdue Room, 2nd Floor	Tower Ballroom, 1st Floor	Presidents Room, 2nd Floor
3:00-3:30	<p>Rebecca J. Bartlett Ellis, Kiersten Boyer, Kristin Mabry, Caeli Malloy, Michelle L. Mravec & Alyssa Wickham</p> <p>Coding smartphone medication management app design features using behavior change techniques</p>	<p>E. Angela Chan, Shirley Ching, Winsome Lam & Fiona Wong</p> <p>Cancer patient’s perspective of their nurse-patient communication in a hospital ward</p>		<p>Panel 6: Professional ethics and communicative vulnerability in healthcare delivery Coordinator: Srikant Sarangi</p> <p>Rukhsana Ahmed</p> <p>Online health information seeking among female Muslim immigrants in Canada: At the crossroads of communicative empowerment and vulnerability</p>
3:35-4:05	<p>Lisa Carter-Harris, Robert Skipworth Comer, Anurag Goyal, Emilee Vode & Susan M. Rawl</p> <p>Development and testing of a computer-tailored decision aid to support lung screening decisions</p>		<p>Cynthia Ryan 161</p> <p>From health disparities research to tailored health messages: Street Smarts™ cancer education program for homeless women</p>	<p>Ellen Barton</p> <p>Vulnerability and motivation in phase 1 cancer consultations</p> <p>Michael C. Brannigan</p>
4:10-4:40	<p>Aaron Deason & Daniel Y. Park</p> <p>Metaphors for depression among paramedics in the Code Green Campaign: An application of the Job Demands-Resources Model</p>	<p>Nathalie Egalite</p> <p>Dora and the specter of therapeutic failure: Freudian influences on narration, themes and thought in the narratives of illness The Man with a Shattered World and Awakenings</p>	<p>Georg Marko</p> <p>“If I were you, I would maybe look into getting a second opinion.” The social implications of advice giving in lay-to-lay and expert-to-lay communication in online health forums</p>	<p>Communicative vulnerability and our disembodied selves</p> <p>Lauris C. Kaldjian</p> <p>Process injustice in shared decision making due to communicative vulnerability</p>
4:45-5:15	<p>Staci Defibaugh</p> <p>Direct to consumer advertising and the reproduction of medical consumerism</p>	<p>Lucia D. Wocial</p> <p>Woltman Interprofessional Communication Scholars Program (WISP): A blending of two proven techniques to improve communication skills</p>	<p>JesAlana Stewart</p> <p>Memoria, verdad, y justicia: Commemorative acts of solidarity for memory, truth, and justice in South America</p>	<p>Srikant Sarangi</p> <p>Accounts of ‘communicative vulnerability’ in hospital complaints</p> <p>Kirk St.Amant</p> <p>Addressing vulnerability through usability: A design-based approach to communicating care to vulnerable populations</p>
5:30-7:00 pm	<p>CLOSING CEREMONY University Tower Ballroom, 1st Floor</p>			

Thursday, June 29, 2017

8:30 am-
4:30 pm

POST-CONFERENCE MASTERCLASS

Regenstrief Institute

1101 W. 10th Street

"Engaging Qualitatively with Healthcare Discourse Data"

Language/communication-based healthcare studies – concerned with talk, text and other modalities (discourse, more generally) – have been carried out over the past four decades, both within quantitative and qualitative research paradigms. Within the qualitative tradition, researchers adopt different methodological and analytic perspectives when engaging with talk data (e.g. clinical encounters, research interviews) and text data (e.g., websites, media representations, illness narratives). Within what can be broadly captured as theme-oriented discourse analysis, this masterclass will be primarily devoted to ‘activity analysis’ which is distinctive in at least three ways: mapping of structural, interactional and thematic trajectories; relationality concerning focal themes and analytic themes; and role performance vis-à-vis participant structure. Additionally, attention will be given to ‘account analysis’ which orients to the rhetorical properties of language/communication data.

Course leader:

Professor Srikant Sarangi

Director, Danish Institute of Humanities and Medicine (DIHM)

Aalborg University, Denmark