

## Qualitative Example –MScPT Student Research Project Outline (Example only)

<b>Project Title</b>	<b>Are you ready? Determining readiness to engage in exercise among people living with HIV and complex multi-morbidities</b>
<b>Investigator(s) / Advisor(s)</b>	Kelly O'Brien Soo Chan Carusone
<b>Investigator's contact info</b>	Department of Physical Therapy 160-500 University Avenue Toronto, Ontario M5G 1V7 416-978-0565 <a href="mailto:kelly.obrien@utoronto.ca">kelly.obrien@utoronto.ca</a> <a href="mailto:schancarusone@CaseyHouse.on.ca">schancarusone@CaseyHouse.on.ca</a>
<b>Research Location</b>	Casey House Toronto
<b>Purpose of Study</b>	The overall purpose of this study is to explore readiness to engage in community-based exercise among adults living with HIV who access community programs associated a specialty hospital in Toronto.
<b>Specific Objectives</b>	<ol style="list-style-type: none"> <li>1) To describe the current level of physical activity among people living with HIV who access community programs associated with a specialty hospital in Toronto (Casey House)</li> <li>2) To determine the readiness to engage in physical activity / exercise among adults living with HIV.</li> <li>3) To describe the influence of disability (e.g. physical challenges such as pain; cognitive challenges; mental health challenges; social challenges; uncertainty) on current physical activity and the readiness to exercise among adults living with HIV.</li> <li>4) To describe the influence of extrinsic (stigma and social support) and intrinsic contextual factors (living strategies such as addictions, substance use, and personal attributes such as age, comorbidities) on current physical activity and readiness to exercise among adults living with HIV.</li> </ol>
<b>Rationale and Relevance to PT Practice</b>	<p>With HIV considered a chronic illness in developed countries, more individuals are living longer with disability related to the health- related consequences of HIV, comorbidities and potential adverse effects of treatments. People living with HIV/AIDS (PHAs) are experiencing a high prevalence of disability, defined as symptoms and impairments, difficulties with day-to-day activities, challenges to social inclusion, and uncertainty that may fluctuate on a daily basis and over the entire course of living with HIV. Exercise is one self-management strategy that may be individually employed by people living with HIV in order to address their disability. Results from two Cochrane Collaboration systematic reviews suggest that a combination of aerobic and resistive exercise is safe and may be beneficial for improving outcomes of cardiovascular fitness, strength, weight and body composition, and quality of life for adults with HIV who are medically stable. However, evidence is limited to those who continue to exercise, often requiring highly supervised interventions that can be costly and unrealistic for PHAs to sustain as part of their everyday lifestyle. So despite the benefits, few PHAs engage in regular physical activity. It is essential to consider exercise interventions that are accessible and practical for a broad range of people living with HIV to sustain over the long term to maximize their health outcomes. However, people with HIV also may be living with multiple morbidities including issues related to mental health, income security, substance use, addictions, which can add further complexity to their health and pose challenges for engaging in health interventions such as exercise. Casey House is a 13-bed sub-acute specialty hospital with community programming including home care nursing and outreach. Casey House, located in downtown Toronto, provides health care to people living with HIV with multiple co-morbidities and complexity using an inter-disciplinary team of physicians, nurses, rehabilitation therapists and social workers. Casey House currently serves approximately 100 community based clients. In 2016 Casey House will launch a day health program for people living with HIV, expanding its services to meet the needs of more</p>

	<p>clients and to expand the continuum of care. The day health program will engage individuals in the community by providing clinical services and community programs, in one location, to promote the health and well-being of clients. Rehabilitation and physical activity including exercise has the potential to be a key component of care and programming provided in this holistic program. In order to maximize the impact of such interventions and ensure health equity to services, it is critical to establish an understanding of the readiness to engage in physical activity, including exercise among people with HIV and multiple morbidity and the potential facilitators and barriers to exercise among this population. The aim of this research is to determine the readiness to engage in community-based exercise among adults living with HIV with multiple health and social vulnerabilities accessing community programs at a specialty hospital in Toronto. Results will help to inform the development of community-based exercise interventions for people living with HIV and multiple morbidities.</p>
<b>Journal Article Citations</b>	<p>O'Brien K, Nixon S, Tynan A-M, Glazier R. Aerobic exercise interventions for adults living with HIV/AIDS. Cochrane Database of Systematic Reviews 2010, Issue 8. Art. No.: CD001796. DOI: 10.1002/14651858.CD001796.pub3 O'Brien K, Tynan AM, Nixon S, Glazier RH. Effects of progressive resistive exercise in adults living with HIV/AIDS: systematic review and meta-analysis of randomized trials. AIDS Care. Jul 2008;20(6):631-653.</p> <p>Gomes-Neto M, Conceicao CS, Oliveira Carvalho V, Brites C. A systematic review of the effects of different types of therapeutic exercise on physiologic and functional measurements in patients with HIV/AIDS. Clinics (Sao Paulo). 2013;68(8):1157-1167.</p> <p>Gomes Neto M, Ogalha C, Andrade AM, Brites C. A systematic review of effects of concurrent strength and endurance training on the health- related quality of life and cardiopulmonary status in patients with HIV/AIDS. BioMed research international. 2013;2013:319524.</p> <p>Clingerman E. Physical activity, social support, and health-related quality of life among persons with HIV disease. Journal of community health nursing. Fall 2004;21(3):179-197.</p> <p>Clingerman EM. Participation in physical activity by persons living with HIV disease. J Assoc Nurses AIDS Care. Sep-Oct 2003;14(5):59-70.</p> <p>Schuelter-Trevisol F, Wolff FH, Alencastro PR, et al. Physical activity: do patients infected with HIV practice? How much? A systematic review. Curr HIV Res. Sep 2012;10 (6):487-497. President's Council on Physical Fitness and Sports. Physical Activity and The Stages of Motivational Readiness for Change Model. March 2003. Research Digest. Series 4. Number 1.</p> <p>Swendeman D, Ingram BL, Rotheram-Borus MJ. Common elements in self-management of HIV and other chronic illnesses: an integrative framework. AIDS Care. Oct 2009;21(10):1321-1334.</p>
<b>Study Design</b>	<p>We will conduct a cross-sectional qualitative descriptive research study that involves qualitative interviews with adults living with HIV who access Casey House (residence or community programs) to determine their readiness to engage in exercise.</p>
<b>Participants (inclusion/exclusion criteria)</b>	<p>Participants will include adults (18 years of age or older) who are clients of Casey House community programs who self-identify as living with HIV (who may or may not be physically active) able to communicate in English and has the capacity to consent to participate in this research (n=12-15). We will exclude current inpatients of Casey House as our aim is to focus on people living with HIV with multiple morbidities independently in the community.</p>
<b>Data Collection Tools</b>	<p>We will conduct one-on-one face-to-face interviews using an interview guide. Specifically, we will ask participants their perspectives on their current state of physical activity,</p>

	<p>facilitators and barriers to participating in exercise, their readiness to engage in exercise to improve health outcomes living with HIV, the influence of disability (e.g. pain, mental health challenges), intrinsic and extrinsic contextual factors as either barriers or facilitators to exercise (e.g. substance use, stigma, social support), and recommendations for establishing a community-based exercise program for adults living with HIV for people with HIV through the Casey House Day Health Program. We will also administer a series of questionnaires including the 1) IPAQ (International Physical Activity Questionnaire Short Form) and 2)) HIV Disability Questionnaire (to describe presence, severity and episodic nature of disability) and 3) Demographic questionnaire (to describe participant characteristics)</p>
<b>Data Source (e.g. charts, existing database, survey)</b>	Face-to-face one-on-one interviews
<b>Proposed Number of Participants</b>	10-12 adults living with HIV
<b>Recruitment Method</b>	Participants will be recruited by staff at Casey House. Rooms will be booked at Casey House to conduct the interviews.
<b>Costs associated with project (e.g. stamps, special equipment, etc.) Identify who will assume these costs.</b>	Audio-recorders, photocopying recruitment materials and consent forms. Participants will be offered an honorarium of \$25 for their participation in the study as well as a TTC token to facilitate travel to and from the interview. Kelly O'Brien and Soo Chan Carusone will cover these costs through University of Toronto and Casey House.
<b>Role of Students</b>	<p>Conduct a literature review; complete an ethics protocol; develop an interview guide, obtain ethics approval; recruit participants; conduct interviews; transcribe audio recordings; check transcripts for accuracy, analyze data; prepare a manuscript and poster, complete study completion form. Students may draw on the Episodic Disability Framework and existing questionnaires such as the 'Readiness to Change Exercise Questionnaire (<a href="http://www.humankinetics.com/excerpts/excerpts/questionnaire-measures-readiness-to-change-physical-activity-behavior">http://www.humankinetics.com/excerpts/excerpts/questionnaire-measures-readiness-to-change-physical-activity-behavior</a>) to help draft their interview guide. Students will also engage in tour of Casey House, and present the study findings to the Casey House staff at the completion of the project.</p>
<b>Role of Advisors (specify type of faculty assistance required, e.g. methodology)</b>	<p>As lead advisor, Kelly O'Brien will oversee all aspects of the proposed research with the students. Soo Chan Carusone will co-advise on this research and will assist with orienting students to Casey House, assist with recruitment of people living with HIV participants, and provide space for interviews. Kelly O'Brien will advise on the methodological and content related areas of this research and facilitate REB submission with the HIV REB at the University of Toronto.</p>