

**The 2<sup>nd</sup> International Nursing Research Conference on  
“Future Nursing Research and Innovation for Sustainable Global Health”  
to Commemorate the 125<sup>th</sup> Anniversary of the Birth of HRH Princess  
Srinagarindra**

**Jointly Organized by WANS, TNMC & NAT**

**2 - 4 December 2025  
The Miracle Grand Convention Hotel, Bangkok, Thailand**

**Abstracts of Conference Speakers**

**Day 3**

**4 December 2025**

## **Keynote 3: Challenges and Mega-Trends in Collaborative Research and Leadership for Policy Development**

Professor Dr. Caroline Susan Elizabeth Homer

*Princess Srinagarindra Awardee 2024*

*Burnet Institute, Melbourne and the University of Technology Sydney, Australia*

Time: 8.30 - 9.15 a.m.

Room: Grand Ballroom

### **Abstract**

In today's rapidly evolving health landscape, evidence-informed policy is more critical than ever. As healthcare systems grow in complexity, the need for research that identifies and supports high-value care becomes essential—not only to improve outcomes but also to ensure sustainability and equity. This presentation explores the challenges and emerging mega-trends in collaborative research and leadership that are shaping policy development in nursing, midwifery, and broader health disciplines.

Key trends include the increasing emphasis on clinically embedded research that reflects real-world practice, and the integration of both quantitative and qualitative methodologies to capture the full spectrum of patient and system experiences. The development of living guidelines—dynamic, continuously updated frameworks based on the latest evidence—is another transformative trend, enabling policy and practice to remain responsive and relevant.

A central theme is the inclusion of consumers and people with lived experience in the design, planning, and implementation of research. Their involvement ensures that research is grounded in the realities of care and community needs, and that policy outcomes are both meaningful and equitable.

Despite these advances, significant challenges remain. Effective collaboration requires multidisciplinary respect, particularly for the contributions of nurses and midwives. Structural barriers such as limited funding, unequal access to PhD training, and the need for robust mentoring and sponsorship pathways continue to hinder progress. Addressing these challenges is essential to building a diverse and capable research workforce that can lead policy innovation.

This presentation will highlight how doctoral students and emerging researchers can navigate these dynamics, and how institutions can better support collaborative leadership. By embracing inclusive, practice-based research and fostering strong mentorship, we can shape policies that are not only evidence-informed but also deeply connected to the communities they serve.

## **Plenary Session 5: Nursing Research and Innovation in Disaster Management and Public Health Emergency**

Professor Dr. Sonoe Mashino  
*University of Hyogo, Akashi, Japan*

Time: 9.15 - 10.30 a.m.

Room: Grand Ballroom

### **Abstract**

In recent years, the concept of disaster nursing has evolved from emergency response-oriented practice to a more comprehensive approach that integrates disaster preparedness, primary health care, and community resilience. Disasters and public health emergencies are no longer viewed solely as acute events requiring temporary interventions; rather, they represent complex social and health disruptions that expose vulnerabilities within communities and health systems. Consequently, the expectations for nurses in disaster health management have expanded significantly.

Nursing professionals are increasingly recognized as key actors not only in saving lives during disasters but also in sustaining people's health and daily living in the face of adversity. This expanded role underscores the importance of strengthening health system resilience and community-based preparedness as fundamental components of disaster risk reduction and sustainable development. The integration of disaster risk management into primary health care and public health practice enables nurses to act as coordinators, educators, and advocates who bridge the gap between clinical care and community well-being.

Recent trends in disaster nursing research highlight the growing emphasis on multi-sectoral collaboration, leadership development, and the use of innovative approaches such as digital technology and data-driven decision-making in health emergencies. Moreover, the post-pandemic global agenda has accelerated the shift toward resilience-oriented nursing education and practice, emphasizing competencies that foster adaptability, ethical leadership, and policy advocacy.

This presentation will discuss how disaster nursing contributes to the strengthening of community and health system resilience through interdisciplinary collaboration, innovation, and evidence-based leadership. It will also explore future directions for research and education that support nurses as change agents in promoting sustainable health security and equity across all phases of disaster management.

## **Plenary Session 5: Nursing Research and Innovation in Disaster Management and Public Health Emergency**

Assistant Professor Dr. M.L. Somjinda Chompunud  
*Srisavarindhira Thai Red Cross Institute of Nursing, Thailand*

Time: 9.15 - 10.30 a.m.

Room: Grand Ballroom

### **Abstract**

Thailand, a country frequently affected by floods, storms, landslides, and emerging infectious diseases, provides a dynamic setting for advancing nursing research and innovation in disaster management and public health emergencies. The increasing frequency and complexity of crises—such as the 2011 nationwide floods, the 2004 Indian Ocean tsunami, and the COVID-19 pandemic—underscore the vital role of nurses as first responders, educators, and researchers in strengthening community resilience and ensuring the continuity of care.

Nursing research and innovative practices are transforming Thailand's disaster management and public health systems through the integration of technology, educational reform, and community engagement. The Thailand Nursing and Midwifery Council has incorporated disaster management into the national nursing curriculum, emphasizing leadership, ethical decision-making, situational awareness, and psychosocial support. Guided by the *ICN-WHO Core Competencies in Disaster Nursing*, these reforms aim to develop competent and compassionate nurses capable of responding effectively to crises while promoting sustainable and equitable health systems.

At the community level, participatory research and collaboration among nurses, local authorities, and village health volunteers have strengthened preparedness and resilience, empowering communities to respond to and recover from disasters. Nursing innovations increasingly employ mobile health (mHealth) technologies, simulation-based learning, and interdisciplinary teamwork to enhance readiness and emergency response capacity. Simulation-based and virtual reality (VR) disaster training has significantly improved critical thinking, decision-making, and teamwork among nursing students. Similarly, tele-nursing and mHealth applications developed during the COVID-19 pandemic expanded access to healthcare and improved communication in remote and underserved areas, reducing disparities and promoting inclusivity in service delivery (SDG 3).

Through the integration of education, technology, and community partnership, Thailand's nursing profession exemplifies how collaboration among academic, governmental, and technological sectors can foster a resilient, innovative, and sustainable healthcare system. These efforts not only advance nursing leadership and national health preparedness but also contribute to achieving global commitments toward resilient health systems and sustainable development.

## Concurrent Special Topic 2: Nursing Research on Integrated Complementary Therapy and Modern Medicine

Associate Professor Dr. Piyanee Klainin-Yobas  
*Alice Lee Centre for Nursing Studies, Yong Loo Lin School of Medicine,  
National University of Singapore*

Time: 10.45 a.m. - 12.00 p.m.

Room: Venus

### Abstract

#### **Exploring mechanisms of a Digital Palouse Mindfulness on thoughts and emotions among cancer survivors: A realist analysis**

**Background:** Mindfulness plays a critical role in helping individuals achieve positive health outcomes and psychological well-being. Mindfulness refers to an ability to pay cautious attention to the current moment non-judgmentally. Theoretically, mindfulness encompassed three major components: attention regulation, meta-awareness (decentering), and nonjudgemental attitude. Evidence suggests that mindfulness-based interventions improve psychological well-being, stress, anxiety, depression, pain, physical health, positive functioning, work performances and academic outcomes. There is a need to explore mechanisms of Digital Palouse Mindfulness program among people with chronic conditions, including cancer survivors.

**Methods:** A qualitative descriptive design was employed, using purposive sampling to recruit cancer survivors from a tertiary hospital in Singapore. The intervention, Digital Palouse Mindfulness, comprised eight weeks of interactive sessions delivered through a videotelephony platform. Subsequently, adult cancer survivors participated in focus group discussions guided by a structured interview protocol. All sessions were audio-recorded and transcribed verbatim. Data were analyzed using realist methods in an iterative manner, and findings were presented using a heuristic Context–Mechanism–Outcome (CMO) configuration. Measures were taken to ensure the trustworthiness (credibility, transferability, dependability and confirmability) of the results.

**Results:** A total of 27 cancer survivors completed the intervention and participated in focus group discussions. The analysis elucidated the mechanisms through which Digital Palouse Mindfulness influenced four domains: mindfulness knowledge, emotional experiences, cognitive processes, and self-compassion/loving-kindness. Overall, four Context–Mechanism–Outcome configurations and 11 thematic categories were identified. The CMOs addressed cancer survivors' description of mindfulness, emotional management, thought management, and loving-kindness. A diagram representing interrelationships among concepts and mechanism of mindfulness will be presented.

**Conclusion:** The Digital Palouse Mindfulness program is beneficial for cancer survivors. Findings from study informs clinical practice, whereby the program can be offered to cancer survivors via online platforms.

**Keywords:** Palouse Mindfulness Program, Emotion Management, Thought Management, Loving Kindness.

#### **Research Grant:**

This research received funding from the NUS Global Asia Institute NIHA, National University of Singapore, Singapore. Grant reference number: NIHA-2020-003.

## **Concurrent Special Topic 2: Nursing Research on Integrated Complementary Therapy and Modern Medicine**

Professor Dr. Wen-Yu Hu

*School of Nursing, National Taiwan University, Taipei, Taiwan*

Time: 10.45 a.m. - 12.00 p.m.

Room: Venus

### **Scope of Content**

Integrating traditional and modern medicine: the role of nurses in bridging traditional healing with contemporary practices; case studies highlighting nursing research and innovations in mindfulness-based interventions; and future directions for advancing integrative approaches in healthcare.

## **Concurrent Special Topic 2: Nursing Research on Integrated Complementary Therapy and Modern Medicine**

Professor Dr. Jung-Ah Lee

*Asian American/Pacific Islander Nurse Association, Inc*

*Sue & Bill Gross School of Nursing, University of California, Irvine, U.S.A.*

Time: 10.45 a.m. - 12.00 p.m.

Online

### **Abstract**

As healthcare systems worldwide grapple with the growing dementia crisis, there is an urgent need to integrate culturally sensitive, complementary approaches with evidence-based modern medicine to address health disparities in care delivery. This presentation will explore innovative translational research that bridges traditional community-based interventions with cutting-edge digital health technologies to improve outcomes for underserved dementia family caregivers.

Drawing from a federally funded randomized controlled trial (NIH/NIA), Dr. Lee will present findings on a community health worker-delivered home-based intervention that combines stress reduction education with wearable technology for real-time monitoring of caregivers' physiological stress and sleep patterns. This integrative approach exemplifies how complementary therapeutic strategies—including culturally tailored psychoeducation, mindfulness-based stress reduction, and community partnership models—can be synergistically combined with modern technological innovations to create more holistic, person-centered care solutions.

Through community-based participatory research conducted in partnership with local organizations serving diverse older adults and their families, this work demonstrates the critical importance of cultural and linguistic concordance in intervention design and delivery. The presentation will highlight lessons learned from developing and testing interventions with underserved Asian American, Pacific Islander, and other ethnic minority populations, offering practical frameworks for implementing age-friendly, culturally responsive care models that honor traditional healing practices while leveraging modern medical advances.

This research underscores nursing science's unique position to lead integrative care innovations that address the complex biopsychosocial needs of vulnerable populations, ultimately advancing health equity in dementia care globally.

### **Concurrent Special Topic 3: Nursing Research and Innovations on Digital Health Technology in Nursing Practice**

Professor Dr. Melissa O'Connor  
*Villanova University, Pennsylvania, U.S.A.*

Time: 10.45 a.m. - 12.00 p.m.  
Online

#### **Scope of Content**

Roles of nursing research in the development and evaluation of digital health technologies, including AI-based and other digital approaches in patient care; innovative applications such as telehealth/telenursing, mobile health tools, and remote monitoring; the integration of information technology into health research; and future directions for advancing digital innovation in nursing practice.



### **Concurrent Special Topic 3: Nursing Research and Innovations on Digital Health Technology in Nursing Practice**

Dr. Bordin Sapsomboon

*Faculty of Medicine Siriraj Hospital, Mahidol University, Thailand*

Time: 10.45 a.m. - 12.00 p.m.

Room: Grand C

#### **Scope of Content**

Roles of nursing research in the development and evaluation of digital health technologies, including AI-based and other digital approaches in patient care; innovative applications such as telehealth/telenursing, mobile health tools, and remote monitoring; the integration of information technology into health research; and future directions for advancing digital innovation in nursing practice.

### **Concurrent Special Topic 3: Nursing Research and Innovations on Digital Health Technology in Nursing Practice**

Professor Dr. Usavadee Asdornwised  
*Faculty of Nursing, Mahidol University, Thailand*

Time: 10.45 a.m. - 12.00 p.m.

Room: Grand C

#### **Scope of Content**

Roles of nursing research in the development and evaluation of digital health technologies, including AI-based and other digital approaches in patient care; innovative applications such as telehealth/telenursing, mobile health tools, and remote monitoring; the integration of information technology into health research; and future directions for advancing digital innovation in nursing practice.

## **Concurrent Special Topic 4: Digital Health Technology in Nursing Education**

Associate Professor Dr. Ameporn Ratinthorn  
*Faculty of Nursing, Mahidol University, Thailand*

Time: 10.45 a.m. - 12.00 p.m.

Room: Grand B

### **Scope of Content**

Roles of nursing research in the development and evaluation of digital health technologies in nursing education; innovative applications such as online learning modules, virtual classrooms, and AI-based simulation labs; approaches to assessing and evaluating students' performance in digital learning environments; strategies for fostering digital literacy among nursing students; case studies illustrating effective practices; and future directions for advancing digital integration in nursing education.

## **Concurrent Special Topic 4: Digital Health Technology in Nursing Education**

Associate Professor Dr. Jeanette Ignacio  
*Alice Lee Centre for Nursing Studies, Yong Loo Lin School of Medicine, Singapore*

Time: 10.45 a.m. - 12.00 p.m.

Online

### **Abstract**

Digital innovation is rapidly transforming healthcare delivery, requiring nursing education to evolve in parallel so learners can confidently navigate technology-enhanced clinical environments. This presentation examines the purposeful integration of simulation, virtual and augmented reality, mixed-reality environments, and digital learning platforms as core components of digital health technology in nursing education. These technologies, when aligned with pedagogy, can strengthen clinical competence, emotional resilience, reflective capacity, and cognitive integration across learning domains.

Simulation remains a central strategy for developing technology-ready nurses. High-fidelity simulation provides a controlled, psychologically safe environment where learners can practise clinical decision-making, communication, and teamwork while engaging with technology-supported scenarios of varying complexity. Structured debriefing deepens reflection, integrates knowledge, and enhances adaptive reasoning. When paired with digital tools, simulation becomes a powerful vehicle for bridging theory and real-world practice.

Immersive technologies such as virtual, augmented, and mixed reality further expand opportunities for experiential learning. VR enables learners to rehearse procedures and encounter diverse clinical situations with minimal risk. AR overlays can support conceptual understanding, while MR environments allow multiple participants to interact within the same digital scenario, facilitating team-based learning and collaboration. These tools also offer enhanced accessibility, scalability, and standardisation of learner experiences.

Digital platforms that promote cognitive integration—such as gamified learning, team-based learning systems like LAMS, and virtual collaborative environments—help students synthesise information across disciplines. These tools encourage reasoning, problem-solving, and the transfer of learning across varied clinical contexts. Digital debriefing and reflective prompts also support metacognition and long-term retention.

The presentation emphasises the need to maintain culturally sensitive, human-centred values within technology-rich education. As digital tools increasingly mediate communication, educators must ensure that empathy, inclusivity, and respect for diversity remain integral components of learning.

Challenges such as digital fatigue, cost, faculty readiness, ethical considerations, and maintaining pedagogical alignment are discussed, along with strategies to ensure technology enhances rather than overwhelms learning. The session concludes by presenting a forward-looking vision of digitally fluent nurses who are reflective, resilient, adaptable, and equipped to deliver compassionate, safe care in an increasingly digital healthcare landscape.

## **Concurrent Special Topic 4: Digital Health Technology in Nursing**

### **Education**

Associate Professor Dr. Piyanut Xuto  
*Faculty of Nursing, Chiang Mai University, Thailand*

Time: 10.45 a.m. - 12.00 p.m.

Room: Grand B

### **Abstract**

#### **Bridging the Theory-to-Practice Gap: Cross-Institutional Implementation of an AI-Powered Virtual Nurse Lab**

The contemporary healthcare environment demands nurses who are adept clinical reasoners; however, traditional assessment methods often measure recall rather than complex reasoning or rely on subjective observation. To address this critical need for standardized, objective measurement, the Faculty of Nursing at Chiang Mai University developed the “Virtual Nurse Lab” (VNL), an innovative online platform powered by the patented ‘AI-Assisted Answer Assessment (4A)’ engine.

The VNL facilitates a structured mastery learning loop where students engage with multimedia clinical scenarios across various specialties, including Maternal and Child, Medical, and Surgical Nursing. Students record themselves verbally explaining and physically demonstrating their responses, after which the AI engine analyzes their performance to provide immediate, data-driven feedback. This technology evaluates clinical reasoning, communication skills, and procedural knowledge simultaneously.

A key component of this initiative is the strategic collaboration between academic institutions to validate the platform's effectiveness across diverse educational contexts. This presentation highlights the cooperative implementation of the VNL with Boromarajonani College of Nursing, Chakriraj (in-bound collaboration) and the Faculty of Global Nursing, Otemae University (out-bound collaboration). These partnerships aim to test the platform’s scalability and cross-cultural applicability, ensuring that graduates meet consistent standards of clinical readiness regardless of their location.

Early results demonstrate that the VNL significantly enhances student self-efficacy. By leveraging AI to create a safe, on-demand practice environment, the VNL allows educators to identify at-risk students and provide targeted support, ultimately bridging the gap between theoretical knowledge and clinical practice. The collaborative implementation process is still run on with our partner institutions, and available implications for the future of global nursing education.

## **Concurrent Special Topic 5: Nursing Research and Innovation in Elderly Care**

Professor Dr. Siriorn Sindhu  
*President of the Nurses' Association of Thailand*

Time: 10.45 a.m. - 12.00 p.m.  
Room: Grand A

### **Abstract**

This study developed an integrated primary care model and a set of innovations to strengthen geriatric care in Thailand's "new normal." Conducted across all four regions of Thailand, one province was randomly selected from each region—Phayao (North), Nonthaburi (Central), Nakhon Ratchasima (Northeast), and Nakhon Si Thammarat (South)—to represent diverse community contexts. A mixed-methods approach engaged 800 dependent older adults, 800 family caregivers, 140 community caregivers, 16 nurse care managers, and 16 local administrative organizations to identify problems, needs, and factors influencing quality of life.

Key innovations included fourteen practice tools, the Network Collaborative Action Plan (N-CAP) for chronic conditions integrated into the Awuso.net digital platform, eighteen educational videos, and a Safe Environment Assessment Tool for evaluating community and home environments. This tool supported systematic collaboration with Subdistrict Administrative Organizations to enhance environmental safety through improvements in lighting, walkways, accessibility, and home safety features for older adults.

After 12 months of implementation, older adults experienced improved quality of life, greater health literacy, enhanced ADL performance, better chronic disease control, and reduced frailty. At least 80% of hypertension and diabetes cases showed improved control, and overall satisfaction among older adults, caregivers, and providers was high.

Quantitative analysis showed that the Awuso.net innovations significantly predicted ADL improvement. Key predictors included improved environmental management ( $\beta = 0.44$ ,  $p < .000$ ), frequency of N-CAP use ( $\beta = -0.324$ ,  $p < .000$ ), weekly assignments by nurse care managers ( $\beta = 0.192$ ,  $p < .000$ ), duration of volunteer caregiver home visits ( $\beta = 0.162$ ,  $p < .000$ ), changes in ADL scores ( $\beta = 0.162$ ,  $p < .000$ ), reductions in vulnerability/frailty ( $\beta = -0.162$ ,  $p < .000$ ), and improvements in health literacy ( $\beta = 0.162$ ,  $p < .000$ ). Together, these factors explained 54.4% of the variance in ADL performance ( $R^2 = .544$ ,  $p < .000$ ).

Overall, the model demonstrates strong potential to enhance community-based elderly care and support Thailand's transition into a super-aging society. Recommendations include national scale-up, establishment of geriatric primary care standards, interoperable digital health systems, and strengthened collaboration with local governments to ensure safe environments and sustainable, equitable care for older adults nationwide.

## **Concurrent Special Topic 5: Nursing Research and Innovation in Elderly Care**

Mr. Yuki Takata

*Visiting Nursing Station of Care-pro Tokyo-Adachi Station,  
Care-pro Home Medical Care Co., Ltd., Japan*

Time: 10.45 a.m. - 12.00 p.m.

Room: Grand A

### **Abstract**

Japan's elderly population ratio has surpassed 29.3% and is projected to reach 34.8% by 2040, placing it at the forefront of the world's super-aged societies. Within this context, Japan's home-visit nursing services, which support local communities, operate under both medical insurance and long-term care insurance, utilizing the appropriate insurance based on the patient's condition and age. Currently, there are over 15,000 home-visit nursing stations providing care at patients' homes. While they assist with treatments like IV drips and pressure ulcer care, they also excel at preventive care such as medication management, nutritional support, and rehabilitation. Most recently, in 2014, the "Home-Visit Nursing Action Plan 2025" was formulated. It aims to support individuals in continuing to live in their communities by focusing on four major areas: expanding the quantity of home-visit nursing services, expanding their functional scope, enhancing their quality, and adapting to the Community-Based Integrated Care System. Moreover, amid the recent trend toward nuclear families, services provided by facilities operated by for-profit corporations, such as service-provided senior housing, and nurse-led facilities like small-scale multifunctional home care services, are expanding, broadening the scope of nurses' activities. Facilities are also being developed that play a role in discharge support and respite care, and that incorporate diverse individuals, including local residents, within the facility to foster an inclusive society. To support these visiting nursing practices, efforts are being made to cultivate an educational culture. These include introducing home care nursing theory in nursing schools, training new graduates to become visiting nurses, and creating career ladders for visiting nurses. In the past, Japan had a support system within communities and families, relying on mutual aid within neighborhoods and assistance among family members. However, this foundation is weakening due to an aging population and declining birth rates. Moving forward, Japan requires comprehensive community support systems encompassing medical care, nursing, and welfare services to realize/recognize a society where all age groups live together. Consequently, nursing support enabling individuals to maximize their potential—from maintaining health and preventing chronic disease progression to living through life's final stages—becomes increasingly vital.

## **Concurrent Special Topic 5: Nursing Research and Innovation in Elderly Care**

Professor Dr. Suparb Aree-Ue

*Ramathibodi School of Nursing, Faculty of Medicine Ramathibodi Hospital,  
Mahidol University, Thailand*

Time: 10.45 a.m. - 12.00 p.m.

Room: Grand A

### **Abstract**

#### **Decoding Multimorbidity: Emerging Insights and Challenges in Geriatric Healthcare**

The intricate landscape of multimorbidity within aging populations is of increasing significance, yielding substantial insights for research while also posing numerous challenges. Multimorbidity is defined as the simultaneous presence of two or more chronic diseases within an individual, frequently exemplified by prevalent combinations such as hypertension and diabetes. Research indicates that these combinations exert profound effects on health outcomes, resulting in heightened risks of falls, disability, and mortality.

The concept of the "Geriatric Triangle," along with various studies, underscores the importance of understanding risk factors such as inflammation, oxidative stress, and lifestyle choices. This presentation delineates critical research domains, including intervention strategies, clinical decision-making, and patient-centered approaches. Notably, it advocates for a paradigm shift from treating individual diseases to managing symptoms holistically.

The integration of multimorbidity and gerontechnology has the potential to enhance the quality of care provided to older adults. This integrated approach encompasses the promotion of personalized medicine, the improvement of healthcare systems, and the adoption of comprehensive strategies to understand and address the complex health challenges faced by older adults.



## Presentation of Research Award Contestants

Professor Dr. Warunee Fongkaew  
*Faculty of Nursing, Thammasat University*

Time: 10.30 a.m. – 12.30 p.m.

### Synopsis of 10 research award contestants

**Background:** This synopsis provides a summary of ten research studies conducted in 5 countries including China, Indonesia, Japan, Morocco, and Thailand from 2020-2025.

**Objectives:** To identify research methods and conclusions on knowledge generation.

**Research methods:** Diverse methodologies and multifaceted strategies were employed: Three randomized controlled trials (personalized diabetes messaging with peer support; nurse-led behavioral therapy for post-stroke insomnia; role-play education for myocardial infarction decision-making); a quasi-experimental transitional care program for alcohol dependence; a four-year longitudinal study of nursing students' innovation capacity; a participatory action research to develop purpose in life enhancement model for Thai older people living in rural Thailand; a qualitative study of community-based tourism using multiple field visits in Morocco and Japan; a scoping review of frailty instruments in older orthopedic inpatients; a portfolio narrative from eight-year journey to understand intimate partner violence in Thai culture; and psychometric validation of the Thai Cardiac Rehabilitation Barriers Scale.

**Conclusions on knowledge generation:** Digital peer-led diabetes education achieved glycemic remission rates of 35.7% (three months) and 50.0% (six months), compared to 3.7% with professional education. Nurse-led brief behavioral therapy for insomnia (BBTI) yielded remission rates of 93.3% (web-based) and 86.7% (face-to-face) compared to 33.3% (sleep-hygiene education), with significant improvements in sleep onset latency, wake after sleep onset, and sleep efficiency. Role-play combined with home visits significantly enhanced knowledge, beliefs, and decision-making capacity. Transitional care reduced heavy-drinking days and hospital readmissions. Four years longitudinal analysis identified trajectories of innovation ability among nursing students influenced by self-directed learning and creative self-efficacy. A purpose in life model cultivates community harmony through intergenerational engagement and enhances older adults' self-value. Community-based tourism (CBT) is a salutogenic resource to promote cross cultural interactions in contexts of aging societies. A scoping review (31 studies, 15 instruments) identified no gold-standard frailty measure; Fried's phenotype and the Frailty Index predominated, requiring  $\leq 10$  minutes with acceptable psychometric properties. The Thai Cardiac Rehabilitation Barriers Scale demonstrated a four-factor structure (work/time conflicts, perceived need, comorbidities, and logistics), explaining 61.8% of the variance.

Evidence converges on nurse-led, culturally anchored strategies, digital augmentation, and pragmatic measurement. Effects span clinical control (glycemia, sleep), decision-making, service uptake, and community well-being. Priorities include validating culturally responsive frameworks (e.g., BRIDGE), optimizing hybrid digital-peer models, standardizing frailty assessment in orthopedic services, and scaling transitional care and enhancing intergenerational approaches.

## **Keynote 4: Strengthening Nursing Research and Innovation in Primary Care**

Associate Professor Dr. Tassana Boontong

*Chair, Board of Directors, World Academy of Nursing Sciences  
Founder Dean, the Princess Ajarajakumari Faculty of Nursing,  
Chulabhorn Royal Academy, Thailand*

Time: 10.30 a.m. – 12.30 p.m.

Room: Grand Ballroom

### **Abstract**

Primary care is the cornerstone of every strong and sustainable health system. In a world facing demographic transitions, chronic disease burdens, the emergence of diseases, and climate challenges, strengthening primary care through research and innovation has become an urgent global priority. This keynote address highlights the essential role of nurses and midwives in leading this transformation.

Drawing on Thailand's Baan Lak Si Project, the presentation illustrates how participatory action research can align practice, education, and policy to build equitable community-based health systems. The clinic at Baan Lak Si is also called "Warm Community Nurse Clinic", a nurse-led, evidence-based innovation now implemented in more than 5,000 clinics nationwide and registered under the National Health Security Office.

This journey demonstrates the power of research-informed, nurse-led innovation to influence national policy and promote sustainable primary care. It also emphasizes that innovation is not limited to technology—it includes community engagement, local wisdom, and culturally sensitive models of care.

Looking ahead, new research directions for the Warm Community Nurse Clinics will include: integrating mental health and physical health services, expanding diabetes self-management programs, leveraging digital health technologies to reach remote populations, and developing value-based, outcome-driven nursing models. Empowering individuals and communities, as well as strengthening data systems, mentoring young researchers, fostering interdisciplinary collaboration, and promoting community organization and international collaboration, are essential to sustaining progress.

Ultimately, the vision is of a global community where primary care serves as the bridge between science and society, and where nurses and midwives stand as researchers, innovators, and compassionate leaders driving health equity. When nursing science connects evidence with empathy and innovation with inclusion, it transforms not only healthcare but also the global communities.

**Keywords:** primary care, nursing research, innovation, sustainability, leadership, equity, global health