

HEARNet News

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The UNIVERSITY
of NEWCASTLE
AUSTRALIA

Edspace

Welcome to the first edition of HEARNet News for 2006. We have recently received a funding agreement from the Department of Health and Ageing that will ensure the continuation of our CAPRE Program until 2009.

I would like to take this opportunity to introduce our CAPRE Team for 2006.

Dr Parker Magin, a GP, has recently joined the team as a part-time research academic and is available for research mentoring and assistance with individual research skills training.

Ms Susan Goode is continuing in the role of Program Coordinator and should be the first point of contact for HEARNet or CAPRE enquires.

Dr Terry Joyce is continuing her appointment at 2 days per week as a qualitative support officer.

Mr Andrew Hampson, the quantitative support officer is working 2 days per week.

Ms Debbie Mutton is fulfilling the role of Administrative Assistant and will be helping with the organisation of events and administration of the CAPRE small grants.

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HEARNet Tip

The Primary Health Care Research Information Service (PHC RIS) has recently added a Roadmap of Australian Research (ROAR) database to their website. ROAR is an access point to a compilation of Australian Primary Health Care research and researcher information.

To find out more visit the ROAR website:

<http://www.phcris.org.au/products/roar.php>

CAPRE Small Grants

Our CAPRE Small Grants Round that was held at the end of 2005 was a great success. We received eight high quality applications for funding, with CAPRE Small Research Grants being awarded to five PHC researchers, the details of which are below.

Mr Grant Lyall, a Psychologist/ Project Officer at James Fletcher Hospital. Project title "A validation and normative study of the tape administered cognitive screen, version 2 (TACS-II)".

Ms Annette Roberts, a Clinical Nurse Consultant in Enablement at Newcastle Health Centre. Project title "The evaluation and comparison of the existing model for the provision of personal care in a community setting, and the Clinical Pathway in Enablement for community nurses".

Ms Kate Gleeson, a Clinical Dietitian at Nutrition Services- Wyong Hospital. Project title "How do Central Coast general practitioners and paediatricians perceive their capacity for the management of overweight and obesity in children and adolescents?".

Dr Peter McInerney, a GP at Scone Medical Practice. Project title "Colonoscopy and gastroscopy services in rural general practice".

Mr Peter Miller, a Physiotherapist at NU Moves Physiotherapy, The University of Newcastle. Project title "The exploration of the physiotherapy clinical reasoning process".

Feature Article

Reflection on the 5th Annual Regional CAPRE PHC Research and Evaluation in Practice Conference

'From idea to fruition' was the theme of the 5th Annual Regional CAPRE PHC Research and Evaluation in Practice Conference held on December 3rd 2005 at the Industry Development Centre, Newcastle. The conference theme focused on an examination of the ways in which research questions can be translated into research output.

The primary aims of the day were to provide Primary Care practitioners and early career PHC researchers with (1) a local forum to present their research findings, (2) opportunities for networking and collaboration, (3) knowledge about how to develop their research ideas and (4) opportunities to discuss research ideas with more experienced researchers.

The morning session opened with two keynote speakers. The first of these Professor Nick Zwar's (UNSW) address titled *From Research question to research project: thoughts on keeping it real* provided early career researchers with a thorough understanding of the stages of the research process. This was followed by Professor Mike Hazelton's (UoN) address titled *From Idea to fruition: Lessons from two studies addressing the efficacy/effectiveness gap in mental health services research*. Professor Hazelton provided some well illustrated examples of challenges associated with mental health research.

Paper presentations provided fruitful discussions on a range of topics such as experiences of interviewing ethnic women, breastfeeding into toddlerhood and beyond, GP workforce issues and nutrition counselling in GP.

A lunch time session of Tai Chi was provided by Ken Pearsall from the Australian Academy of Tai Chi. This served to provide partici-

pants with some relaxation prior to embarking upon a stimulating afternoon commencing with concurrent workshops, as well as providing them with a hands on experience of this form of exercise.

A workshop on *Making primary care evaluation useful* facilitated by Dr Janet Dunbabin (NSWRDN) and Ms Susan Goode (UoN) focused on the techniques that can be implemented to ensure that evaluation results are useful. *Issues in primary care research ethics* facilitated by Prof Nick Zwar included a discussion of the ethical principles that need to be considered in human research. The application of these principles to the primary care setting was explored through several research scenarios.

The conference concluded with a research paper presentation by Dr Helen Tolhurst (PhD Candidate) on her conceptual framework for understanding and developing models of sustainable rural GP.

As in past years, the conference was well received and similar events are planned for the future.

"I especially appreciated the intimate feel about the conference which fostered good questions and more honest discussion which is not possible at larger state or national conferences. Overall, an excellent day well worth getting up at 5am to go to this conference. Well organised with excellent papers and presenters" (Evaluation Comments from a Conference Delegate).

Quantitative Column

Qualitative Column

The Odds Ratio

The odds ratio is a relative measure of risk, telling us how much more likely it is that someone who is exposed to the factor under study will develop the outcome as compared to someone who is not exposed. An odds ratio is used to compare the odds for two groups. An odds ratio is calculated by dividing the odds in group 1 by the odds in group 2.

The odds of an event happening is the probability that the event will happen divided by the probability that the event will not happen. If the odds are greater than one, the event is more likely to happen than not. If the odds are less than one, the event is less likely to happen than not.

Example:

The probability of dependent feeding in those who eat $\leq 3/4$ of served food is $59/92=0.641$. The probability of independent feeding in those who eat $\leq 3/4$

Eats $\leq 3/4$ of served food		Dependant	Independent	Total
	Yes	59	33	92
No	17	44	61	
Total	76	77	153	

of served food is $33/92=0.359$.

The odds of dependent feeding in those who eat $\leq 3/4$ of served food is $(59/92)/(33/92)=1.79$. This can be calculated as the number in the group who experience the event divided by number in the group who do not experience the event, that is $59/33=1.79$.

The odds of dependent feeding in those who do not eat $\leq 3/4$ of served food is $17/44=0.386$.

An odds ratio is used to compare the odds for two groups. An odds ratio is calculated by dividing the odds in group 1 by the odds in group 2.

For example, the odds ratio (OR) for dependent feeding those who do (group 1) and those who do not (group 2) eat $\leq 3/4$ of served food is:

$$OR = (59/33)/(17/44)=4.63$$

The odds ratio:

Provide an estimate (with confidence interval) for the relationship between two binary ("yes or no") variables.

Enable us to examine the effects of other variables on that relationship, using logistic regression.

Have a special and very convenient interpretation in case-control studies.

Content Analysis

Content analysis (Mayan, 2001) is a qualitative approach to data analysis and can be divided into two forms- 'manifest' and 'latent'

Manifest analysis - focuses on tallying up certain words or ideas. The results will confirm or negate the significance of a factor or an idea. For example, if a researcher was interested in studying depression in diversional therapists working in a nursing home, one could count how many times the study participant mentions the word depression or feeling depressed. This score could be used to argue the significance of depression in the workplace.

Latent analysis - In this instance, data is identified, coded and categorized. In latent content analysis, the aim of the researcher is to discover meaning of specific groups of data and ideas within the context of the whole passage. For example, in the example above, rather than merely totalling the incidence of depression, the investigator would code (familiarise ones self with the data) for the type of depression or the context of depression. These would then be categorised followed by a more sophisticated level of analysis. That is, relationships among the categories would be analysed to discover themes.

The source of this information can be found in: Mayan, M. (2001). *An introduction to qualitative methods: A training module for students and professionals*. (City/Publisher unknown).

Article written by:

Dr Terry Joyce

Senior Research Officer -CAPRE

Odds Ratio con't

References

Bland, J. M. and D. G. Altman (2000). "The odds ratio." *British Medical Journal* **320**(7247): 1468.

Crichton, N. (2001). "INFORMATION POINT: Odd ratio." *Journal of Clinical Nursing* **10**(2): 268.

Article written by:

Andrew Hampson

Quantitative Research Officer - CAPRE

HEARNet News and Events

Newsletter of the Health Evaluation and Research Network

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For your information.....

RACGP Grants

General practice researchers are asked to start considering their research questions to be ready for the next round of RACGP Research Foundation grants which open 1 March 2006 and close on 8 May 2006.

For further information on these grants, guidelines for applications and application forms please visit www.racgp.org.au/researchfoundation

Senior PHCRED Research Fellowships

The Department of Health and Ageing is calling for applications from outstanding primary health care researchers to take up a Research Fellowship under the Primary Health Care Research Evaluation and Development (PHCRED) Strategy.

The Fellowships will be available on a full-time basis for a period of 4 years.

Details on how to apply and copies of the PHCRED Research Fellowships

Funding Policy, Guide to Applicants, Full Application Form and Draft Deed of Agreement are available from

<<http://www.phcris.org.au/phcred/index.php>>
<http://www.phcris.org.au/phcred/index.php>

If you have any queries please call Cath Williams on (02) 6289 8461 or Diane Fraser on (02) 6289 4927.

Applications close 5 pm, 21 March 06.

HEARNet upskilling seminars for 2006. Let us know what you want!

A workshop has been set for March as stated below. We are interested in hearing from our members as to what topics you would like us to cover this year and whether you would like our workshops to be monthly or bi monthly.

Time: 9:30am-12:30pm

Venue: Meeting Room, Discipline of General Practice, Newbolds Building, Gavey St, Mayfield

Date	Topic
1st Mar	Coding and thematic analysis

Research Opportunity

PHC Researcher Development Program (RDP) Placements

4 Part-time Positions—1 day per week
(9 Months Fixed-term)

The CAPRE Program will soon be recruiting for RDP placements. The positions will be available for individuals already employed in a primary health care role who:

- Are considering a career in research, or
- Want to explore a research issue relevant to their work, or
- Want to further develop their research skills and expertise through participation in research.

Further details, including selection criteria and eligibility will be circulated within the next few weeks.

Enquires: Program Coordinator, Susan Goode on (02) 4968 6737 or email

Susan.Goode@newcastle.edu.au

Other events

GP & PHC Conference - 5-7 July 2006

Perth Convention Centre

The call for abstracts is now on-line and closes on 10 March 2006. Abstracts can be submitted for paper presentations, posters and the coveted AAAGP Distinguished Paper Award, to highlight excellence in research.

More details visit: www.phcris.org.au