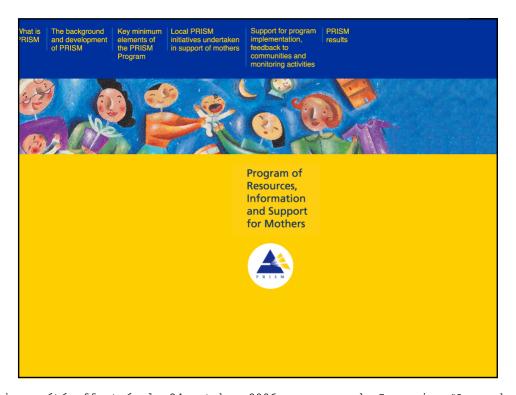
Using Intervention Research to Guide Public Health Actions and Policy

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Essav

Contested ground: how should qualitative evidence inform the conduct of a community intervention trial?

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This paper presents issues which arose in the conduct of qualitative evaluation research within a cluster-randomized, community-level, preventive intervention trial. The research involved the collection of narratives of practice regarding the intervention by community development officers working in eight communities over a two-year period. The community development officers were largely responsible for implementing the intervention. We discuss the challenges associated with the collection of data as the intervention unfolded, in particular, the disputes over cues to revise and adjust the intervention (i.e. to use the early data formatively). We explore the ethical uncertainties that arise when multiple parties have different views on the legitimacy of types of knowledge and the appropriate role of research and theory in various trial stages. These issues are discussed drawing on the fields of ethnography, community psychology, epidemiology, qualitative methodology and notions of research reflexivity. We conclude by arguing that, in addition to the usual practice of having an outcome data-monitoring committee, community intervention trials also require a process data-monitoring committee as a forum for debate and decision-making. Without such a forum, the relevance, ethics and position of qualitative evaluation research within randomized controlled trials are destined to be a point of contention rather than a source of insight.

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Haes WFM de, Voorham AJJ, Mackenbach JP. Wijkgericht werken aan gezondheidsbevordering in vier achterstandswijken inRotterdam (1) Opzet, uitgangspunten en beschrijving van het proces *TSG* - *Tijdschrift voor Gezondheidswetenschappen*. 2002;**80**:425-430

Voorham AJJ, de Haes WFM, Mackenbach, JP. Wijkgericht werken aan gezondheidsbevordering in vier achterstandswijken in Rotterdam (2) Leerpunten uit de praktijk *TSG -Tijdschrift voor Gezondheidswetenschappen*. 2002; **80**:431-435

The "theory of the problem" versus the "theory of the solution"

McLeroy, et al. Health Ed Research 1993

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Today

What is intervention research?

What demands should be made of IR and intervention researchers in order to improve the way IR is used to guide public health action and policy

Take home message

There needs to be more intervention research to inform population-level prevention policies and programs – whole system approach.

Intervention researchers are potentially illequipped in terms of skills required for real-time accountability

unique, urgent training needs

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Definitions

Intervention research (IR) knowledge that comes

from intervening in a putative causal pathway

Population health IR use of scientific methods to

produce knowledge about

policy and program

interventions that operate within or outside the health sector and have the potential to impact health at the population level

IPPH of CIHR interventions which

focus shift the distribution of risk

Definitions

health research

Intervention research (IR) knowledge that comes

from intervening in a putative causal pathway

Population health IR use of scientific methods to

produce knowledge about

About 5% of pop. policy and program

interventions that operate within or outside the health sector and have the potential to impact

health at the population level

IPPH of CIHR interventions which

focus shift the distribution of risk

More than just causal enquiry

assessment of reach, implementation, quality, participant satisfaction, adjustment to local context, interaction with context, costs, cost effectiveness, sustainability, multiplier effects, unintended effects

Current state of the field

Lack of sufficient evidence in enough areas

In 50% of the interventions reviewed the US Preventive Services taskforce has found that there is insufficient evidence to make practice recommendations.

Zaza et al, 2005

Evidence is skewed

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A Census of Economic Evaluations in Health Promotion 1990-2001

Strategic Intent of the intervention	Studies
Clinical - preventive	41%
Developing personal skills	33%
Creating supportive environments	20%
Strengthening community action	2%
Building healthy public policy	1%

SOURCE: (1) Rush, Shiell et al. Health Education Research, 2004;

n = 414 studies

Census of Economic Evaluations of Health Promotion 1990-2001

Risk Factor Addressed	Studies
Biological risk factors	49%
Behavioural risk factors	41%
Environmental risk factors	9%
Social risk factors	1%
Economic risk factors	< 1%

SOURCE: (1) Rush, Shiell et al. Health Education Research, 2004

Made worse because.....

- Ineffective and harmful programs proliferate e.g., school substance abuse prevention
- Funding allocations are still made on the evidence of the problem not the effectiveness of possible solutions
- Charismatic champions and premature dissemination
- Divide arisen between IR and evaluation research in population health

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THEORY AND METHODS

Criteria for evaluating evidence on public health interventions

L Rychetnik, M Frommer, P Hawe, A Shiell

J Epidemiol Community Health 2002;56:119-127

See end of article for authors' affiliations

Public health interventions tend to be complex, programmatic, and context dependent. The evidence for their effectiveness must be sufficiently comprehensive to encompass that complexity. This paper asks whether and to what extent evaluative research on public health interventions can be adequately approised by applying well established criteria for judging the quality of evidence in clinical practice. It is adduced that these criteria are useful in evaluating some aspects of evidence. However, there are other important aspects of evidence on public health interventions that are not covered by the report in evaluating some aspects of evidence. However, there are other important aspects of evidence must distinguish between the fidelity of the evolution process in detecting the success or failure of an intervention, and the success or failure of the intervention itself. Moreover, if an intervention is unsuccessful, the evidence should help to determine whether intervention are intervention and its context, so that the transferability of the evidence can be determined. Study design alone is an inadequate marker of evidence quality in public health intervention evaluation.

Population Health Intervention PHIRIC Research Initiative for Canada

New 10 year initiative to increase the quantity, the quality of IR and use of results by policy makers and practitioners

Catalyst agencies:

Canadian Institutes of Health Research CIHR Canadian Institute for Health Information CIHI **CDPAC** Chronic Disease Prevention Alliance for

Canada

PHAC Public Health Agency of Canada

Training Implications: the skill set of the intervention researcher

Technological e.g., research design, data collection, analysis, interpretation, write up

People skills

Social skills

Communication

Policy analysis

Political Analysis

Evaluability assessment

etc

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A "problem-based" learning that recognises the (inevitable) role of the intervention researcher in the change process.



