South Australian Community Health Research Unit

REPORT OF ACTIVITIES 2002/2003
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ROLE OF THE RESEARCH UNIT

The South Australian Community Health Research Unit (SACHRU) strives to enhance health and wellbeing in South Australian communities. It does this by assisting community health and primary health care agencies and groups to undertake and use the findings from research and evaluation to make services more effective in maintaining and improving the health of their communities.

SACHRU undertakes and advocates for primary health care research and evaluation which:
- focuses on issues of equity
- takes a social view of health and wellbeing
- has implications for policy and practice
- involves, and is responsive to, all relevant players
- is independent, rigorous and has academic excellence
- is disseminated widely and in appropriate ways.

SACHRU is funded by the South Australian Department of Human Services (DHS) to provide a primary health care research and evaluation service for community health services and related agencies and groups that are funded by the DHS in metropolitan and country South Australia. It is also funded to provide advice to the DHS on research and evaluation within the context of the DHS Strategic Plan.

The Role of SACHRU is to:
- assist the DHS and service providers to determine needs and priorities for community and primary health care research and evaluation
- develop research and evaluation methodologies suitable for use in a primary health care setting
- design and conduct primary health care research projects
- obtain and manage externally funded research grants and consultancies in community and primary health care
- disseminate research and evaluation findings
- provide research and evaluation support to community and primary health care workers in relation to research, evaluation and primary health care development
- monitor and disseminate Australian and overseas research relevant to primary health care policy and practice
- undertake critical appraisal of policy and programs relevant to primary health care.

Key Directions
At the Management Advisory Committee meeting in February 2002 the following 3 key directions for Focus and Direction for SACHRU 2002-2006 were endorsed:
- understanding the social and economic determinants of health and how these form a program logic for human services interventions including social inclusion strategies
- understanding and researching the dynamics and outcomes of health settings approaches to health promotion, including the evaluation of community based health promotion
- ensuring the transfer of research knowledge relating to primary health from research to policy and practice, including policy analysis and strategic planning.
MANAGEMENT ADVISORY COMMITTEE

Since its formation in 1991, SACHRU has been supported by a Management Advisory Committee, which meets every three months. At each meeting, the SACHRU Director reports on activities and progress, and seeks advice on various management matters including workshop programs and planning days. An Executive consisting of the Chair and Deputy Chair can be called upon for matters requiring urgent attention.

2002/2003 Membership

Prof. Fran Baum South Australian Community Health Research Unit
Ms Karen Dixon (until Dec 2002) Noarlunga Health Services
Mr Richard Hicks (from Jan 2003)

Ms Joanne Gell Northern Metropolitan Community Health Service
Mr Andrew Stanley (until Dec 2002) Strategic Planning and Population Health, Research &
Ms Helen van Eyk (from Jan 2003) Evaluation Division, Department of Human Services

Prof. Andrew Butcher (until Dec 2002) School of Medicine, Flinders University of South
A/Prof Libby Kalucy (from Jan 2003) Australia

Ms Julia Lamont Inner Southern Community Health Service
Mr Kevin Eglinton Hills Mallee Southern Regional Health Service, representing Rural Regional General Managers

Ms Adair Garrett (Chair) Northern Metropolitan Community Health Service, representing Community Health Centre CEOs

Ms Debbie Law (until Dec 2002) Flinders Medical Centre
Ms Elaine Golding (from Jan 2003)

Ms Bernadette Roberts Women’s Health Statewide
Ms Marj Ellis Adelaide Central Community Health Service and South
Australian Community Health Association

Mr George Beltchev (until May 2003) Primary & Community Care, Metropolitan Division,
Mr Keith Evans (from May 2003) Department of Human Services

Staff Nominee This position is filled by rotation.
Staff nominees for 2002-2003 were:
Stacey Masters
Catherine Hurley
Helma Hooper
Megan Kyriacou
# STAFF MEMBERS

## As at June 2003

### Director

Professor Fran Baum  
B.A. (Hons.), Ph.D.  
(also Head, Department of Public Health, Flinders University of South Australia)

### Senior Research Officer

Michael Bentley  
B.Sc. (Maths), Grad.Dip. (Health Admin. & Info. Systems)

### Senior Research Officer

Gwyn Jolley  
B.Sc. (Hons.), PGCE, GDOH

### Senior Research Officer

Lisel O’Dwyer  
BA (Hons), PhD

### Contract Research Officer

Catherine Hurley  
B.A., B.Soc. Admin., Grad.Cert.PHC, Research and Evaluation

### Contract Research Officer

Stacey Masters  

### Research Assistant

Megan Kyriacou  
B.Hlth.Sc.

### Information Officer

Vicki Barrett  
B.Sc.

### Personal Assistant

Robyne Ridgeway

### Administrative Assistant

Helma Hooper
2002-2003 was a busy, exciting and productive year for SACHRU. Our work to support community health continued through our core research work and through winning research grants and consultancies. Our work covers a range of areas relevant to the work of community health. The strategic directions that cover our work from 2002-06 are as follows:

**SACHRU should develop and enhance a research and training profile that focuses on:**

- Understanding the social and economic determinants of health and how these form a program logic for human services interventions including social inclusion strategies;
- Understanding and researching the dynamics and outcomes of healthy settings approaches to health promotion, including the evaluation of community based health promotion; and
- Ensuring the transfer of research knowledge relating to primary health care from research policy and practice, including policy analysis and strategic planning.

These directions support the future for the South Australian health system as set by the Generational Health Review. They do this by emphasizing the social basis of health and health inequities and the importance of primary health care and promotion to the South Australian health system.

### Projects

The core of SACHRU’s work concerns conducting evaluations for community health services, often of innovative programs and services. A number of these are reported here including evaluations of: an early action CVD/Diabetes project; Talking Realities, a project that provides training for young parents to become peer educators, a youth drug peer action project in Noarlunga, the Coorong Good Food Program and the Southern Fleurieu Early Learning for Families Project. Each of these initiatives is breaking new ground in providing services and experimenting with ways of promoting health and our evaluation work documents the successes and the reasons concerned.

A highlight of the year was the launch of the report “Investing in Community Health Services: Finding the Evidence for Effectiveness” in February 2003. Two hundred and fifty people attended the launch where Minister Lea Stevens not only launched the report in style but also announced that a revitalized Primary Health Care policy would be written and launched on 12th September 2003. This was exciting news for SACHRU as it meant our core business was also becoming the core business of the Department of Human Services. A further highlight of the “Investing in Community Health Services” launch was the panel session that asked key stakeholders from the health system to discuss what criteria would make them invest in community health. We hope the report and the morning’s discussion have contributed to a greater sophistication about the forms of evidence we use to prove the effectiveness of community health.

We have also continued to conduct consultancy work for the World Health Organisation through a contract to write a book on civil society and health, which builds on earlier work done on this topic. This work is being done jointly with the School of Public Health, University of the Western Cape in South Africa. These international links are important to
SACHRU as they help us maintain excellence in our work and provide opportunities to learn from those working in other settings.

We were very pleased that SACHRU is a partner in a $580,000 grant from the NHMRC to examine the impacts of location on health. The Chief Investigators for this project are from the Department of Public Health and the School of Geography and Information Science. The project started in January 2003 and will run for 4 years. It combines the use of qualitative and quantitative research methods to explore the ways in which household characteristics and neighbourhood characteristics influence health status. Members of community health services have joined the project advisory committee.

Training
SACHRU’s training program drew heavily on the skills of staff in the Department of Public Health. As well as our standard course, new sessions were run on policy development, participatory action research and gaining consumer feedback.

SACHRU staff have worked with the Department of Public Health, Flinders University to run successful short courses on Healthy Cities and Evaluation for Primary Health Care courses. The Healthy Cities course has become an annual tradition and represents a very successful and long-standing collaboration with Healthy Cities Noarlunga.

Budget Pressures
In 2000-2001 SACHRU received a budget cut of approximately 12% and we have struggled to cope with this cut since then. Funding from DHS now covers only 3.4 FTE research positions (including all management functions) and 1.5 FTE administrative staff. As a consequence, Unit staff are under continual pressure to generate additional income to fulfil SACHRU’s mandate. Discussions started in May 2003 about the feasibility of transferring the governance of SACHRU to Flinders University, which will ensure SACHRU’s future as part of a broader public health grouping and hopefully a guaranteed longer term future.

Review of Structure of Public and Community Health Research in South Australia: SA Institute of Population Health
The Brennan Review of Public Health Research and Training was conducted in 2000-2001. SACHRU was included in the terms of reference of the Review. A major implication from the Brennan Review for SACHRU is that our service agreement includes a clause requiring SACHRU to be involved in the working group considering mechanisms to further the recommendations of the Review. SACHRU has been attending these meetings for two years and hopefully the new financial year will see moves to establish the SA Institute of Population Health. This would have major advantages in terms of consolidating community and public health research expertise in the State and enabling South Australia to compete more successfully in the national arena.

Management Advisory Committee
Our Management Advisory Committee (MAC) (membership listed on page 6 of this report) continues to offer strong support to SACHRU. The Committee contains members from the community health services, Department of Human Services and key groups such as SA Community Health Association. The MAC is crucial to SACHRU maintaining formal links with our key constituency, the community health sector. Adair Garrett, as Chair of MAC,
has been very willing to attend meetings, launches and to take on an advocacy and lobbying role for SACHRU. We are very grateful to her and fellow MAC members for this.

The support and encouragement we have received from Andrew Stanley (Director, Research and Evaluation Branch), and his staff, Sarah Golding (who left in December 2002), Heather Petty and Helen van Eyk, has been crucial to SACHRU’s work. They are always timely in providing advice and encouraging us in our work despite the very heavy workloads they all carry.

Staff
This year we said farewell to Paul Aylward, Danielle Bament, Janice Duffy, Maryann Martin and Cecilia Moretti. Maryanne was a long standing staff member and we miss her cheerfulness and expertise often.

2002-03 saw several new staff joining SACHRU including Catherine Hurley, Michael Bentely, Lisel O’Dwyer and Vicki Barrett. In 2003, Gwyn Jolley completed her M.Sc. (Primary Health Care) and we were happy to join her in celebrating the high distinction she achieved for this work.

In Conclusion
The 2003-04 year promises to be full of positive change for the South Australian health system. The reforms resulting from the Generational Health Review will really begin to take shape. SACHRU can play a crucial role in providing information and intelligence to help shape these reforms and looks forward to doing so.

SACHRU’s effectiveness and successes result from the partnerships we have with Flinders University, DHS, the community health centres and many other government and non-government agencies. We thank all of our partners as we couldn’t operate without you and look forward to working with you all in the coming year.

Fran Baum (Professor)
Director

Maryanne Martin

Maryanne filled the position of Information Officer at SACHRU from 1994 to 2002. In October 2002, after juggling two part time positions, Maryanne decided to leave SACHRU in order to focus on her work at the Drug and Alcohol Services Council. We have all missed her, both as a colleague and friend.

During her years at SACHRU, Maryanne worked with enthusiasm and energy to support the work of the Unit. Her desk-top publishing and graphic design skills led to a new look for our newsletter Research Matters, annual Report of Activities and other promotional material. Maryanne had a keen eye for marketing opportunities and led this aspect of research dissemination. Her skills were invaluable in design and layout of our published reports and resources. She was both creative and a stickler for detail in terms of the quality of the finished product.

Maryanne played a key role in the production of the Program Evaluation Wizard (PEW), working closely with Charlie Murray and Paul Aylward to bring this long-standing project to
a successful conclusion. She also kept our website up-to-date and helped staff with computing and IT issues.

Maryanne’s commitment and energy was most clearly demonstrated in her support to the organisation and running of three conferences hosted by SACHRU: Research Matters in Practice, 1996; Re-inventing Community, 1998; and Health for All: Research and Evaluation in the 21st Century, 1999.

Maryanne is remembered for her commitment to SACHRU, her readiness to try new ideas and the caring support she gave to colleagues and friends. On many occasions she acted as our social secretary, arranging Christmas parties, a bowling competition and other social events. Even during her period of illness, she remained strong in her willingness to help others both professionally and personally.

SACHRU’s loss is DASC’s gain and we wish Maryanne well in her current position and for the future.
RESEARCH AND EVALUATION ACTIVITIES
Urban Locational Disadvantage & Health

The Department of Public Health, with the School of Environment and Population Management, has won a 4-year NHMRC grant to explore urban locational disadvantage and health, particularly the factors that contribute to the differing health outcomes within Australian urban populations. The project aims to help reduce health inequalities in areas characterised by low socioeconomic status and locational disadvantage by comparing those compositional factors (ie characteristics of individuals) and contextual factors (ie characteristics of the social and physical environment) that contribute to health in areas of both low and high socio-economic status. From this research, the project will also develop a series of key indicators of social and environmental factors that contribute to the health promoting potential of local neighbourhoods.

This multi-disciplinary project will utilise SACHRU’s experience in the spatial mapping of health inequities through Lisel O’Dwyer’s expertise in Geographical Information Systems (GIS).

Staff involved:
Fran Baum,
Lisel O’Dwyer
Andrew Beer,
Christine Putland,
Anna Ziersch,
Andrew Lyons-Reid
and Catherine Palmer

The project commenced in February 2003. The team has established a project advisory committee comprised of representatives from a broad range of health and other human services. The researchers are currently working on the first phase of the project which involves developing and administering a telephone survey to households across the entire Adelaide metropolitan area. The survey asks questions about neighbourhood life, social capital and health to gather information about individual and area level social capital. Part of this first
phase also involves the development of a series of key indicators by which to independently measure the health promoting potential of local government areas. These independent measures include: provision and accessibility of resources and services in the broad categories of health, recreation, transport and retail, to name a few. The analysis of survey data and independent area level measures will identify four urban LGA’s (two low SES and two high SES) in which to undertake detailed case studies, which the project team will undertake via a mix of quantitative and qualitative methodologies in 2004 and 2005.

**Location and Health**

*Staff involved: Fran Baum, Anna Ziersch, and Anne Magarey*

This project was funded by the Department of Human Services to enable: continued analysis of data from an earlier study; a process of engagement between researchers and policymakers on issues relating to location and health; and the preparation of cross-discipline research grants. Most of the work on the second aim happened in the previous year. The work was completed this year with the submission of a paper to the journal *Social Science and Medicine*, based on a path analysis of the data from the Health Development and Social Capital Project. Two papers were presented to the Public Health Association of Australia Annual conference in Adelaide. One concerned the links the project had forged between researchers and policy makers and the other presented data that have been analysed for the paper above. Finally, the investment from this grant in the preparation of an NHMRC research grant paid off as the grant application was successful, leading to the Urban Locational Disadvantage and Health project described above.

**Housing Tenure, Location and Social Capital: A Preliminary Study of the Implications for Health**

*Staff involved: Fran Baum, Lisel O’Dwyer, Catherine Palmer and Andrew Beer*

The neighbourhoods we live in, the social connections we make, as well as the kinds of houses that we live in, can have an impact on our health and well being. To provide a preliminary examination of some of the ways in which these elements contribute to health inequities, Fran Baum, Lisel O’Dwyer, Catherine Palmer (from Department of Public Health) and Andrew Beer (from School of Geography, Population & Environmental Management) are undertaking a pilot qualitative research project entitled: Housing Tenure, Location and Social Capital. The project, funded by Flinders Institute of Health Research, aims to examine the interactions between housing (both the condition of the housing infrastructure and whether it is
owned or rented), social capital and location, and the potential impacts that this has on people’s health.

The project commenced in June 2003, and involves developing case studies of three suburbs in the southern region of Adelaide selected according to their different ‘mix’ of housing tenure. One area (Hackham West) has a high concentration of public housing, one (Hallett Cove) has a high concentration of private owner-occupation and one (Christie Downs) has a mix of public housing and private owner-occupation.

In each study area, the researchers will conduct two focus groups, one with ‘renters’ (through either public housing or privately), and one with homeowners. Each focus group will discuss issues relating to housing tenure, location, social capital and health, including: health status/behaviour, impact of housing on health and well being, participation and involvement in community/neighbourhood activities, features and facilities of their neighbourhood and perceived impact of involvement in community/neighbourhood activities on health.

The focus groups will be supported by an observational audit of the features of the areas to independently measure and validate the relationship between health and housing tenure that are carried through the physical and environmental features of an area. Here, the researchers will visit each suburb on several occasions to record aspects of the physical environment that may impact on residents’ health and well being. In familiarising themselves with people’s homes, neighbourhoods, shopping centres, parks, schools, backyards and so on, the researchers can learn about important dimensions of residents’ lives that will complement the information elicited through the focus group.

The project is at a very early stage. The team has identified the areas for study, undertaken an initial literature review of previous research and completed the required ethics approval. Fieldwork is expected to take place in August – October, with preliminary findings completed by November. We anticipate this research will be the starting point for a more developed research program examining the relationships between health inequities and housing.

A final report on this project has been submitted to the Department of Human Services.
Investing in Community Health: Finding the Evidence for Effectiveness

In 2001, SACHRU commenced a project to examine issues concerning the effectiveness of community health services. The goal of the project was to contribute to the establishment of an evidence base in community health. The project aimed to:

- examine the existing evidence base for the effectiveness of community health services
- assess the applicability to community health of established methods of measuring the effectiveness of health care

The report from the project was launched by the Minister for Health, Minister Assisting the Premier in Social Inclusion, Lea Stevens on February 11, 2003.

The report provides an overview of the role and function of community health in South Australia. Each chapter in the report considers alternative means of assessing the effectiveness of community health services. Each takes a critical approach and uses local examples to illustrate the general points made.

The chapter on economic analyses of health promotion provides a critical assessment of their feasibility for community health. The literature reports a lack of consensus about the ability of economic analyses of health promotion to adequately provide data to underpin priority setting in health promotion. The chapter concludes that several important methodological and process issues need to be addressed in order for economic analyses to be useful to community health.

Routine data collection in community health services in metropolitan SA and its contribution to assessing effectiveness is
examined. This chapter was informed by interviews with community health managers and staff with information management responsibilities. The Metropolitan Community Health Service Review confirmed the limitations of the existing data set and foreshadowed a new client information system and advanced information communication technology for community health services. The chapter documents current thinking and practice in community health services re data collection and information retrieval. It also describes emerging information needs for community health.

The use of performance measurement as a tool to assess effectiveness of community health services is examined in the next chapter. The first section discusses performance measurement in the public sector, tracing the history and describing the terminology and approach. Uses, advantages, disadvantages and challenges are presented. The second part reviews the use of performance measurement in community health settings and the challenges in this environment. The third section includes a brief report on the South Australian project that trialed a collaborative approach to identification of performance indicators in the community health sector.

Systematic reviews and meta-analyses, the methodologies under which they operate and the extent to which they are appropriate for community health are examined next. This chapter also considers other methodologies that may be used to inform an evidence base for community health practice.

The report concludes by drawing general lessons from the chapters concerning the effectiveness of community health and makes some suggestions for future directions.

A second stage of this project is now underway and is reported below.

**Effectiveness of Community Health Services: Stage 2**

_Staff involved: Fran Baum, Gwyn Jolley, Catherine Hurley and Megan Kyriacou_

The second stage of the Effectiveness of Community Health Services project commenced in February 2003 following the launch of the report *Investing in Community Health Services: Finding the evidence for effectiveness*. This stage aims to design, conduct, report and disseminate the findings of a systematic review of evaluations conducted in community health services in metropolitan South Australia. This will facilitate an analysis of the evidence for the effectiveness of community health services. The work builds on Stage 1, which considered current methods of
measuring effectiveness and the problems associated with applying these methods in a community health context.

The purpose of conducting a systematic review is to facilitate the aggregation of the evidence from a number of evaluations into one document that allows the evidence to be analysed collectively rather than individually. If this process could be applied to community health evaluations it would help to build a credible body of knowledge on the effectiveness of community health services that is greater than the sum of the parts.

Research objectives:

1. To identify and document CHS evaluations
2. To trial the application of systematic review and analysis to the evaluations
3. To assess the effectiveness and appropriateness of systematic review to CH evaluations
4. To determine areas in which common assessment tools could be used by CHS
5. To contribute to an evidence base for CH services and approach

The SACHRU team is working closely with a working group made up of representatives from metropolitan community health services and DHS.

The first step was to draft a detailed plan for the research including the inclusion criteria for evaluation reports, a systematic review framework, and the review process. These were all agreed by the working group and collection of reports from community health services (n=102) was completed by May 2003. Each report will be reviewed by a SA community health practitioner or SACHRU researcher and by an external consultant, Denise Fry, in NSW. Training for the review team was conducted in June in order to facilitate consistency in scoring and finalize the review framework. Reviews will begin in July and are planned to be completed by the end of September.

In response to requests from the community health services representatives on the working group, SACHRU researchers will be visiting each service to conduct a workshop investigating the promoters and barriers to evaluation in the community health sector.
Following data collection and analysis, a report from the research is expected to be drafted by the end of 2003, with a launch seminar to be held early in 2004.

**A Systematic Review of the Effectiveness of Locational Interventions to Reduce Socioeconomic Inequalities in Health**

This project commenced in 2002 and is based on the link between socioeconomic status and health. Socioeconomic status tends to be expressed spatially (i.e. has a locational or areal dimension, and geographic distribution). In addition to the socioeconomic profile as a key compositional factor of a location, locations also have contextual factors (such as the nature of the physical environment and the facilities within an area). It follows therefore that socioeconomic inequalities in health can be addressed by taking a locational approach to interventions. Such interventions may focus on either the contextual or compositional factors in an area or location, or both. The literature review aims to identify, appraise and report on locational interventions to reduce socioeconomic inequities in health that have been formally evaluated.

Internationally, there has been growing interest in the social and economic determinants of health and addressing these is now recognized as a necessary precondition for health. The existence of health inequities and their underlying socioeconomic conditions have been well described - there is now substantial evidence that public health programs have produced more benefits for people in higher socioeconomic groups than in middle and lower groups. The failure of public health programs to reach lower socioeconomic groups, however, has led to the development and practice of innovative ways of reaching them. This has prompted the trial of interventions which are based on locations and their compositional and contextual factors. The Healthy Cities and Health Action Zone programs are examples of a locational approach to improving health outcomes.

To date there is no systematic review of locational interventions to reduce socioeconomic health inequities. Reasons for this include the multidisciplinary nature of many of the interventions and the methodological and procedural challenges of evaluating health interventions that do not have clinical outcomes. The challenge of filling this gap will be addressed by the research team.

At this stage the relevant databases have been searched using a comprehensive set of search terms or keywords; the inclusion/exclusion criteria have been devised; key national and
international contacts have been identified and approached to uncover any unpublished work or work in progress, and reviewing is underway. The project is due to be completed in 2004.

Noarlunga Community Action on Drugs and Youth Drug Peer Action Project

Staff involved:
Fran Baum,
Danielle Bament,
Gwyn Jolley and
Megan Kyriacou

An extension of the Healthy Cities Evaluation Framework Testing Project (2001) involved an intermediate term impact analysis of Noarlunga Community Action on Drugs (NCAOD), which is a collaborative intersectoral community initiative auspiced under Healthy Cities Noarlunga. The evaluation also included a short term impact analysis of an initiative auspiced under NCAOD and Child and Youth Health’s ‘The Second Story’ at Christies Beach, the ‘Youth Drug Peer Action Project’ (YDPAP). NCOAD is an intersectoral community based forum that has been operating for four years with the aim of reducing the harm caused by drugs to the community of the Onkaparinga local government area. The YDPAP was an eighteen month peer education program that specifically aimed to reduce the harm caused by drugs to young people in the region.

At the time of the Evaluation Framework Testing project, YDPAP was in a relatively early stage and thus evaluation of the program was more limited. However, a literature review was conducted on peer education programs to clarify the term ‘peer education’ and highlight strategies that are most effective.

A draft evaluation plan using the Healthy Cities Evaluation Framework was drawn up to help clarify what project participants hoped to achieve as the short, intermediate and long term impacts of the project on the Onkaparinga community.

During 2002-03, SACHRU continued to support the evaluation of the YDPAP. Questionnaires were distributed to young people and service providers who had been involved in the project. A community report is planned for later in 2003.
Early Learning for Families (ELF) Project

SACHRU has been contracted by the Southern Fleurieu Health Service to conduct an external evaluation of a three year project entitled “Early Learning for Families” or ELF. The project works with children 0–8 years with developmental delay living in Alexandrina (Goolwa), Yankalilla and Victor Harbor council areas. The project is funded by the Commonwealth Department of Families and Community Services under the “Stronger Families and Communities Strategy, Early Intervention, Parenting and Family Relationship Support Initiatives” program.

The project aims to provide transdisciplinary assessment, treatment and support services to the children and their families in order to enhance their capacity to participate in normal activities and to raise parent awareness and understanding of their children’s behaviour and needs through individual, group and residential programs.

The evaluation will use the following methods:

- Quantitative analysis of client data collected by the project on the demographics and service needs and use of their clients, both at baseline and at the conclusion of the project.
- A survey and two interviews of a sample of the parents or caregivers involved in the project
- A survey of local service providers.

The baseline project data was analysed and a report produced in April, 2003. The main findings included:

- There are twice as many boys as girls enrolled in the program.
- More than 60% of current clients are between five and seven years of age.
- Nearly half of the families are in Victor Harbor with a high proportion (relative to population) in Goolwa. Much smaller numbers reside around Yankalilla.
- Most children come from two parent families.
- The most common referral sources are schools, the Southern Fleurieu Health Service, doctors and parents/caregivers.
- Fine motor difficulties is the most common primary issue identified, followed by fine and gross motor problems, speech problems and global issues. Boys are more likely to have fine motor, fine and gross motor, speech and behaviour difficulties than girls.
• Two thirds of the clients have a second issue identified, the most common of which are handwriting, behaviour and speech difficulties.

• The most frequently provided services were home programs and group programs. Of the 40% of children with a second service, most were receiving reviews.

The evaluation will continue into 2004 and conclude in early 2005.

**Putting Access and Equity into Practice: Inner Southern Aboriginal/Torres Strait Islander Regional Collaboration Project, Minonndi Tappa Inbarendi**

**Staff involved:** Catherine Hurley and Janice Duffy

SACHRU has been contracted to carry out an external evaluation of this project that is being undertaken by five partner agencies in the inner south of Adelaide. The agencies are: Inner Southern Community Health Service, Marion Family and Youth Services, Marion Housing Trust, Karpa Ngarattendi and Southern Mental Health Services for Older People. The objectives of this project are as follows:

• To identify and engage the inner southern Aboriginal and Torres Strait Islander communities in order to develop culturally appropriate collaborative mechanisms to assist with meeting their health, housing and community service needs.

• To contribute to the development of respectful and accessible service for Aboriginal and Torres Strait Islander people through increasing the understanding of Aboriginal and Torres Strait Islander culture, aspirations and the effects of colonisation on Aboriginal and Torres Strait Islander people for staff in participating DHS agencies.

• To develop a sustainable regional approach to increase access and uptake of mainstream and Aboriginal and Torres Strait Islander specific services by Aboriginal and Torres Strait Islander people.
The evaluation will consist of a number of activities including:
- Analysis and reporting of data collected by the project’s survey of local DHS staff and local Aboriginal community members. These surveys will attempt to identify the levels of cultural awareness among staff, and the facilitators and barriers to using mainstream services among community members.
- Document analysis and attendance at meetings and project activities such as Cultural Days.
- Focus groups with DHS staff and Aboriginal community members
- Interviews with members of the Project Advisory Group.

The analysis and reporting of survey data is already underway. The other activities will be undertaken in the latter part of 2003/early 2004.

Healthy Food Choice in Family Day Care

Healthy Food Choice in Family Day Care is a project auspiced by Family Day Care in partnership with Noarlunga Health Services and Flinders University, and funded through the National Child Nutrition Program, Commonwealth Department of Health and Aged Care.

The project aims to support and promote healthy food choices in the family day care setting throughout South Australia. The main strategies of the project are to strengthen organisational commitment for nutrition promotion through the development of a ‘Healthy Food Choice’ policy, to increase care-provider capacity to promote healthy food practices by developing training and resources in consultation with end-users and to increase care-provider confidence to promote healthy food choice to parents.
SACHRU has been engaged as the evaluation consultant is providing ongoing support, as well as analysing and reporting on pre and post project surveys.

A pre-project survey of 300 family day providers and 105 field workers was completed in May 2002. The survey established base-line data on attitudes and behaviour in relation to food and nutrition for children on family day care, and information on resource and training needs for workers.

A follow-up survey is planned for early in 2004 and the expected completion date for the project is June 2004.

Talking Realities...Young Parenting Project

The Talking Realities...young parenting project supports young parents to raise the awareness of parenting issues for secondary school students and young people in general. The project is funded through Parenting SA, Department of Human Services, and the Commonwealth Department of Family and Community Services and is auspiced by Adelaide Central Community Health Service. SACHRU has been contracted to undertake the evaluation of the project.

The goals of the Talking Realities...young parenting project are to:

- Contribute to increasing the capacity of young people in the Adelaide metropolitan area to make informed choices regarding parenting and health
- Improve the social health outcomes for young parents (peer educators) in the Adelaide Central Community Health Region

Talking Realities...young parenting provides early intervention with young people who are parents as well as those who are likely to become parents. Young parents are given training and support to develop a parenting and health program and to take on a role as peer educators. The peer educators then present the program to school students and other groups of young people. The content of the program is intended to demonstrate to recipients the significant impact that teenage pregnancy has on young people and their children with regards to their life choices. Topics include education, employment, careers, housing and relationships. The content highlights the emotional and social consequences of young parenting as well as children’s needs and responsibilities in children’s development.
Project workers and peer educators collect and record feedback sheets from teachers and students who are recipients of the *Talking Realities* program. SACHRU is analysing and reporting on this data. The evaluation will also include focus groups with the peer educators and students, and interviews with teachers and key stakeholders.

An interim evaluation report was drafted in June 2003, summarising the data analysis to date. Data collection will continue during 2002-2003, with the final report due in December 2003.

**Northern Dementia Respite Initiative**

SACHRU successfully tendered for the evaluation of the Northern Dementia Respite Initiative (NDRI), a collaborative venture to provide flexible respite options for carers of people with dementia. The project is funded through the Office for the Ageing, Department of Human Services.

Project partners include:

- Metropolitan Domiciliary Care - Northern Region
- Helping Hand Aged Care
- Alzheimer’s Australia SA
- North & West Metropolitan Adelaide Commonwealth Carer Respite Centre

The Northern Dementia Respite Initiative has a built facility – a secured residential property that can accommodate three overnight or weekend clients – and encompasses a range of education and counselling services for carers. Styles House had its first overnight client mid-February 2003. In addition to established day programs, extended hours care is available to meet the needs of carers of people with Sundowners Syndrome who often experience increased agitation as evening falls. Consultation with Aboriginal and multicultural agencies is proceeding, in an effort to better meet the needs of carers of people with dementia from culturally and linguistically diverse communities.

A formative evaluation is being undertaken to inform ongoing planning and development of service options. Questionnaires are disseminated as close as possible to the episode of overnight or extended hours care, to document the level of need, concurrent carer or family stressors, current level of respite and/or domiciliary service provision and satisfaction with care provided at Styles House. The questionnaire has contact numbers for carers.
who wish to pursue counselling or education initiatives, or are seeking assistance with personal care services.

A final report is due early in 2004.

**Culturally and Linguistically Diverse Carers**

*Staff involved:*
*Catherine Hurley and Megan Kyriacou*

SACHRU was contracted by the SA Carers Association to provide an external evaluation of the Culturally and Linguistically Diverse (CALD) Carers project in 2002/2003. This project aims to promote carer issues and resources to meet the needs of carers among four selected CALD communities, using selected past or current carers to act as “ambassadors”.

The objectives of this project are:

- To develop the knowledge and skills of key carers or past carers to enable them to act as ‘ambassadors’, ‘cultural bridges’ and ‘guides’, linking the selected CALD communities to the Carers’ Association and other carer support services
- To have carers in selected CALD communities learn directly from their ambassadors about the nature of ‘caring’, to encourage identification with this role and to gain knowledge about the services available to them.
- To have carers in selected CALD communities learn from each other about the nature of caring and the services available to help them.
- To encourage carers within the CALD communities to access information, support services and respite.

The four communities selected are the Italian community, the Polish community, the Lebanese community and the Vietnamese community.

Evaluation methods include:

- Interviews with the CALD ambassadors
- Focus groups with members of the CALD communities
- An e-mail survey of key stakeholders in the project.

These evaluation activities are currently underway and the report for the project is expected to be completed by the end of September 2003.

**Coorong Good Food Program**

*Staff involved:*
*Gwyn Jolley*

The Coorong Good Food Program was a nutrition promotion project undertaken in the rural Coorong District Council area of...
South Australia, 2001-2003. The program represented a partnership between health, local government and community, being administered by the Women’s and Children’s Hospital (WCH), in partnership with the Coorong District Council and two WCH auxillaries (Meningie and Tintinara), local to the Coorong region. The Coorong Good Food Program was funded by Health Promotion SA. The project commenced in February 2001 and concluded in February 2003.

The project aimed to improve the nutrition of women, children, young people and their families in the Coorong District Council area. It had two objectives:

**Objective 1:** To improve the supply of affordable, good quality, nutritious and safe food available to women, children, young people and their families in the Coorong District Council area.

**Objective 2:** To increase the consumption of nutritious, safe and environmentally-friendly food by women, children, young people and their families in the Coorong District Council area.

The project aimed to link a range of stakeholders: Meningie & Tintinara Auxiliary, Coorong District Council, schools and local community organisations.

There were four main strategic areas:
- Promoting local produce
- Good food for kids
- Productive gardening
- Food access and availability

SACHRU was contracted to undertake aspects of the evaluation.

As part of the mid-program review, focus groups were held with the Steering Committee and representatives from Coorong-based organisations involved in the project. This formative evaluation focused on the extent and effectiveness of the promotion of linkages between organisations in the area and processes to increase the consumption of nutritious, safe and environmentally-friendly food.

The second phase of the evaluation consisted of a further focus group with the Steering Committee and telephone interviews with representatives from community organisations.
The evaluation findings concluded that:

- Existing partnerships were strengthened
- New partnerships were forged and sustained
- There was an increase in productive gardening, availability and choice of good food.

The **Coorong Good Food Program** has created a more supportive environment for people to make healthy food choices.

The evaluation report was submitted to project management in April 2003, and a poster presentation given at the General Practice & Primary Health Care Research conference in June.

**Identifying Models and Effective Approaches to Workforce Development for Primary Health Care**

*Staff involved: Gwyn Jolley and Stacey Masters*

Health Promotion SA, Department of Human Services engaged SACHRU to undertake a literature review with the aim of identifying models and effective approaches to workforce development for primary health care. The review was particularly concerned with models and approaches that might be useful for public health nutrition.

The review drew on published literature, reports and expert knowledge to identify models and effective approaches to workforce development for the nutrition, primary health care and other relevant non-health sector workforces.

Three main approaches to workforce development were identified: action research, capacity building and competencies. None of these approaches appeared to have been evaluated systematically, in terms of their contribution to workforce development.

In summary, the review found that:

- there does not appear to be a body of evidence on workforce development methodologies in the peer-reviewed literature or the grey literature reviewed
- there appears to be little evaluation of workforce development models and programs for the primary health care, including specialist nutrition, workforces
- there are acknowledged limitations of current education/training in supporting the primary health care workforce to incorporate change
- workforce development approaches tend to be individualistic, rather than environmental
• there is a need to integrate workforce development into the broader context of the organisation and public health policy
• capacity building and competency-based approaches both have a place and show promise
• transfer of new evidence into practice is key and needs organisational support as well as support for the primary health care workforce.

A report was submitted to Health Promotion SA in April 2003 and is also available on the SACHRU website.

An Introduction to the Australian Health Care System for AusAID Students

SACHRU conducted an 8-week program for AusAID students within the Department of Public Health at Flinders University from March to May 2003. The program aimed to provide students with an overview of the Australian health care system, with particular reference to the primary health care sector.

Graduating AusAID students with Anne Johnson, Fran Baum and John Coveney

Six students from Pakistan, Laos, Cambodia, Nepal and Papua New Guinea participated in the program. Most had worked as doctors or nurses in their home country before undertaking primary health care studies at Flinders University.

The program was developed as a mix of guest speakers and visits. Professor Baum conducted the introductory lecture with Professor John Blandford, a Consultant for the Health Services Management Development Unit at Flinders University, as guest lecturer. Representatives from the Commonwealth Dept. of Health & Ageing and the SA Department of Human Services participated as guest speakers.

Five site visits were conducted. Drawing on the professional background and responsibilities of students within their countries of origin, visits included SHine SA, Child &Youth Health, the AIDS Council, Noarlunga Health Services and the Aboriginal...
Health Council. Relationships Australia also provided a speaker to discuss their multicultural HIV/AIDS awareness program.

**Australian Medical Workforce Advisory Committee (AMWAC) Survey of Career Decision making by Doctors in Training.**

Staff involved: Catherine Hurley and Megan Kyriacou

In June 2003, SACHRU was contracted to analyse the qualitative answers (approximately 800) given to two questions in the AMWAC 2002 Survey of Career Decision-making by Doctors in Training. The survey sought the views of doctors from seventeen medical college training programs on their career planning needs, experiences and motivations for their career choices. The qualitative data consisted of respondents’ comments on their satisfaction with the training program and any other comments they wished to make about the factors that influenced their career planning. The report produced from the qualitative analysis of the responses to these questions will be included as an Appendix to the main report with credit to SACHRU.

**Journal Watch**

Staff involved: Catherine Hurley

In December 2002, SACHRU was approached by the one of the Directors of the Primary Health Care Research and Information Service (PHCRIS) based at the Department of General Practice, Flinders University to provide a Guest Editor for their April 2003 edition of a regular publication *Journal Watch*. This publication was on the subject of primary care teams and teamwork, with a particular emphasis on the role of teams in general practice. This consult involved a literature review of published work on this subject between 1999 and 2002, a selection of five articles for review and a summary of the main points arising from this overview. The publication examined the factors that contribute to creating successful teams in primary care, the models that are currently in use and their evaluation and whether increasing teamwork in primary care is meeting its policy objectives.

**Survey of PHAA members about experiences of NHMRC**

Staff involved: Fran Baum, Jackie Street, Megan Kyriacou and Daren Weber

This survey was commissioned by the Public Health Research Advisory Group (PHRAG) of the Public Health Association of Australia (PHAA), who approved the survey design, analysis and report. The project was undertaken in partnership with the Department of Public Health, Flinders University.

The goal of the survey was to determine the extent of concern among members of the PHAA about the National Health and Medical Research Council (NHMRC) funding process for public
health research. A questionnaire was designed and emailed to all members of the PHAA. The survey aimed to collect quantitative and qualitative data on perceptions of the NHMRC funding priorities, the process of applying for NHMRC grant support and the process of grant assessment.

Statistical analysis was carried out using SPSS 11.5 for Windows. Qualitative comments presented by the respondents were categorised by thematic analysis and quotes selected on the basis that they illustrated the themes expressed. A report was prepared and published on the PHAA website:

The response rate for the survey was low although this may reflect the portion of PHAA members who are engaged in research rather than the PHAA membership as a whole. Within the respondent group, the study found that there is a significant degree of dissatisfaction about NHMRC support for public health research along with dissatisfaction with NHMRC processes.

Findings included concern about:
- A perceived bias against public health research and in favour of biomedical research.
- To a lesser degree, a perceived bias within public health, towards funding epidemiological studies, a sector of public health that can more readily conform with standard academically rigorous biomedical assessment criteria.
- Perceived bias against the methodologies used in other areas of public health research, in particular areas incorporating qualitative research, public health social science and health policy/health services research.

The perception of bias coupled with the time-consuming nature of the NHMRC application process gave rise to widespread pessimism about the chances of being funded.

Many respondents believed that a separate funding committee for public health research would be preferable to one that combines public health and biomedical research. Most respondents also considered that the research funded by NHMRC does not reflect national health priorities. Significant concerns were raised about the operation of peer review in grant assessment and on the grant assessment panels.
Northern Young Carers

SACHRU was engaged by Northern Carers Network Inc. to conduct an evaluation of the Northern Metropolitan and Country Young Carer Project. This twelve month developmental project aimed to develop a model of service provision for children and young people ranging in age from 5 to 25 years who undertake a caring role for a family member. Participant populations included young carers in the Davoren Park, Barossa and Lower North (Clare) regions. The project also aimed to promote a positive image of young carers and to raise awareness of their issues among service providers and the community.

The evaluation used the following methods:
- Focus groups with young carers from each of the three areas
- E–mail surveys were sent to major stakeholders involved in the project
- Interviews with selected parents and key project workers.

The evaluation and report of its findings was completed in September 2002. The findings included:
- There was a variable level of knowledge amongst the respondents about the project, largely influenced by their level of involvement in it.
- The project’s services were seen as appropriate and useful by the young carers although those in the non–metropolitan areas felt they had less input and activities than they would have liked. Access to transport was identified as a key factor in assisting these young carers.
- The project had been successful in promoting a positive image for young carers through the development of the “breakthru” concept, in consultation with young carers. Greater awareness of young carer roles and issues had also been promoted by the project among service providers and the wider community.
- The project had fostered a number of successful collaborations among service provider agencies dealing with young carers and had successfully initiated a service provider networking group: SANSYC (South Australian Network of Services for Young Carers)
- The project had been hampered in fully achieving all its objectives by its short timeframe and large geographical area.

Overall the evaluation found that the project had been largely successful in achieving its aims and had provided a good

Staff involved
Cecilia Moretti
and Catherine Hurley
foundation for future work between young carers, their families and service providers.

**Early Action for CVD/Diabetes Project**

Adelaide Central Community Health Service – Enfield invited SACHRU to evaluate several components of the *Early Action for Cardiovascular Disease/Diabetes Project* that had received funding from Health Promotion SA, Department of Human Services.

SACHRU staff were responsible for the evaluation of health promotion and education interventions developed for population groups at high risk of diabetes and cardiovascular disease, specifically the Polish and Vietnamese communities. Evaluation methods included pre and post questionnaires for Polish people with diabetes who attended one or more diabetes education sessions in November 2002. SACHRU staff attended the education forums to explain the purpose of the questionnaire and to seek consent to recontact participants three months later. A Polish interpreter assisted with the delivery of the questionnaire and program content.

A focus group was conducted with Vietnamese mothers to elicit feedback concerning the compilation of a nutrition booklet for Vietnamese families with young children. Despite the presence of an interpreter and several cultural brokers, the focus group highlighted the distance that needs to be traversed to build trust across cultures. Copies of the nutrition booklet were disseminated to a range of service providers including community and migrant health, dental and family services, together with a feedback form. Telephone contact with service providers was useful in engaging those who work with Vietnamese families and ensuring that the booklet would reach the intended audience.

SACHRU was also involved in the evaluation of a continuing education session for Practice Nurses that looked at enhancing their role in identifying community members at risk of diabetes and cardiovascular disease, patient education and follow-up. Pre and post measures explored nurses’ awareness of risk factors, signs and symptoms, clinical parameters and community resources for people with, or at risk of, diabetes. Additional questions explored nurses’ perceptions of how the Divisions of General Practice, and general practice itself, could support an expanded role for practice nurses in health promotion and early intervention.

**Staff involved:**  
Stacey Masters  
and Janice Duffy
The evaluation highlighted some of the opportunities and constraints that exist for nurses in general practice in relation to an expanded and autonomous primary care role. Project staff had initially been optimistic about the opportunities afforded by the Enhanced Primary Care (EPC) items, in terms of structural support for an expanded role for nurses in health promotion and early intervention, but these were not realised. Practice nurses also perceived that policy and infrastructure support was needed to shift the focus of care to early identification and action.

The evaluation found that the Early Action for CVD/Diabetes Project had developed effective partnerships across diverse cultures and organisations. As well as enhancing sustainability, the partnerships ensured that interventions were well informed, culturally appropriate and integrated as part of the fabric of existing services and community groups.

Civil Society and the Health Sector

This project is funded by a contract from the World Health Organisation and was completed this year. The end product is the production of a book on civil society and health that has been edited by Dr. Haile Kahssay (WHO), Fran Baum and David Sanders (University of the Western Cape) and will be published by WHO. The book considers the history of civil society involvement in health and development and reports on research work on local civil society and health spanning a decade. Fran had a final planning with her co-editors on a visit to Geneva in May 2003.

‘Gear’d Up’ Project

Gear’d Up was a three year project funded through the National Illicit Drug Strategy and based at the Adelaide Diocesan AIDS Council. It aimed to minimise the personal, social and economic harm associated with illicit drug use by young gay men. The main strategies included providing one-to-one support, research and training. A major focus of the project over the last twelve months was the preparation and performance of an interactive drama presentation featuring four young gay men who use illicit drugs performing their own stories and life experiences.

This innovative training was developed to assist the Gear’d Up project in its work with human service organisations in Adelaide and was designed to gently challenge workers’ attitudes, assumptions and beliefs by exploring the subtle barriers that discourage young gay users of illicit drugs from accessing services.
The South Australian Community Health Research Unit was contracted to provide a summative evaluation of the project. The nature of the evaluation focused on a range of key indicators for each objective through document review and the elicitation of the views and experiences of the project’s principle participants.

SACHRU adopted a methodologically triangulated approach to this evaluation, complementing semi-structured questionnaires for those who attend the drama presentations, with in-depth interviews and mini focus groups.

A main strength of the Gear’d Up Project was its flexibility to adapt and relocate resources toward the training and workshop program that has been highly successful in meeting the objectives set.

The report, “Gear’d Up: An Evaluation of Service Training Using the Dramatic Arts, Action Learning, and Counselling for Young Gay Drug Users in Adelaide” was presented to the project management in September 2002.

Cochrane Review

SACHRU took part in a systematic review for the Consumers & Communication Review Group of the Cochrane Collaboration title “Care Information for Patients Being Discharged from Acute Hospital Settings to Home”. The review was funded by the Consumers & Communication Review Group of the Cochrane Collaboration and was undertaken by Dr Anne Johnson and Jayne Sandford of Health Promotion at Flinders Medical Centre. The systematic review aimed to determine the effectiveness of providing written health information, in addition to oral information, for patients or family members (or significant others) who were discharged from acute hospital settings to home.

SACHRU contributed to the Cochrane Review by undertaking a literature search for relevant studies in this area. A strict search strategy and search method was used to search various databases in order to meet the requirements of the Cochrane Review.

Potential studies that could be used for this review needed to fit a number of essential criteria including:

- Type of Study – randomised controlled trial or controlled clinical trial
- Type of participant – all ages, patient or family member, all patients discharged from an acute hospital setting to home
- Type of Intervention – written information with oral information compared to just oral information
- Type of Outcome Measure – readmission rates, recovery times, knowledge, complication rates, service utilisation and costs, confidence, stress levels, satisfaction with services adherence to recommended care

An extensive range of databases was searched. However, after conducting the systematic review and looking through the possible references, it was found that only one study matched these criteria. This demonstrates the provision of written information to patients discharged from acute hospital settings is an area that could benefit from further research.

Southern Partners Smoking Cessation Project (PATCH)

Smoking continues to be the single most important cause of preventable disease and more than three-quarters of smokers want to quit. SACHRU staff were engaged to conduct part of the evaluation of Southern Partners Smoking Cessation Project known as the PATCH project.

The purpose of the PATCH project was to develop and implement systems of evidence-based strategies by hospital-based health professionals for the purpose of assisting smokers that seek to quit. Funded by the South Australian Department of Human Services, PATCH was a partnership project involving Flinders Medical Centre, Repatriation General Hospital, Noarlunga Health Services and the Southern Division of General Practice. The project focussed upon training and provision of resources to medical and nursing staff in respiratory, antenatal and postnatal clinics. The purpose was to enhance their skills to identify smokers and provide brief smoking cessation program run by ‘Quitline’.

In order to assess patient satisfaction with the smoking intervention, SACHRU staff conducted in-depth interviews with former patients of the three clinics. The evaluation also examined medical and health professional staff satisfaction with the intervention support materials and training. The conclusions reached from this part of the evaluation indicated that the patients appeared to be satisfied with the process of the intervention. However, the doctors, nurses/midwives raised a number of concerns about the project including the nature and timing of the training and the amount of paperwork involved in conducting an intervention. Moreover, while doctors expressed the opinion that

Staff involved:
Janice Duffy,
Cecilia Moretti,
Megan Kyriacou
and Danielle Bament
smoking intervention was an integral part of their work, some nurses felt that it was not really their role.

Some doctors and nurses also noted that certain factors concerned with a person’s smoking history might influence their decision to conduct an intervention. For example, it was noted that elderly terminal patients who have been smoking for a long time are less likely to be targeted for an intervention.

A number of barriers were identified to the implementation of the PATCH intervention. These included personal perceptions such as attitude towards the smoking cessation role and organisational factors such as time and workload. The evaluation recommended that these barriers must be addressed in order to ensure future success and sustainability.
RESEARCH AND EVALUATION TRAINING
AND RESOURCES
Research Training Workshops

SACHRU’s Service Agreement with the Department of Human Services includes a training role specified as:

“To provide training, staff development and support to community and primary health care workers related to research, evaluation and primary health care development”.

We fulfil this role by providing a core program of training seminars, developing ‘tailor made’ workshops in response to field requests and by contributing to one-off talks/seminars and short courses.

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**Healthy Cities Short Course, 2002**

A very successful Healthy Cities short course was held in October 2002. It was attended by 24 people including participants from New Zealand, Kiribati, Malaysia, India, Laos, NSW, ACT and Western Australia. The course included a site visit to Noarlunga Healthy Cities that was a highlight of the course for participants.

**Research Matters’ Newsletter**

Three editions of the ‘Research Matters’ newsletter were produced during 2002-2003, in July and December 2002, and April 2003. The mailing list for the newsletter includes local, national and international groups, organisations and individuals. ‘Research Matters’ provides the opportunity for the Unit to detail new and existing research projects, consultation requests and information on training seminars, conferences and publications. The newsletter is also available in electronic form through the SACHRU web page.

**SACHRU Website**

SACHRU’s website continues to provide information on staff, activities and publications, as well as access to PEW and selected reports and presentations. A “What’s New” section has been added for ease of use for regular visitors to the website.
SACHRU Publications

SACHRU's role in disseminating research and evaluation findings together with our commitment to training and support for people working in the primary health care/community health sector has resulted in the publication of the following resources:

Investing in Community Health – Finding the Evidence for Effectiveness

The Research Publications catalogue continues to be circulated through various conference venues here in South Australia and interstate with continued interest in our training resource materials. The launch of Investing in Community Health – Finding the Evidence for Effectiveness in February was attended by over 200 people.

Attendees at the launch in February
STAFF DEVELOPMENT

Conferences/Seminars attended by SACHRU Staff

International Sociological Association Annual Conference, Brisbane, July 2002
PHAA Annual Conference, Adelaide, September 2002
Cochrane Colloquium, Melbourne, March 2003
Peoples Health Movement Meeting, Geneva, May 2003
GP/PHC Conference, Melbourne, June 2003

Workshops and Training attended by SACHRU Staff

Public Health Monitoring: Local Initiatives, Global Warming, July 2002, Adelaide
Nvivo demonstration, August 2002, Adelaide
Introduction to Endnote, August 2002, Adelaide
Introduction to NUD*IST, October 2002, Flinders University of SA
Templates & Forms, October 2002, Noarlunga Health Services
Health Promoting Health Services, October 2002, Flinders Medical Centre
Introduction to Desktop Publishing, November 2002, Noarlunga Health Services
Writing Articles for Publication, March 2003, Flinders Medical Centre
Intermediate SPSS Workshop, April 2003, Flinders University of SA
Primary Health Care, May 2003, SA Community Health Research Unit
**COMMITTEE MEMBERSHIP**

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PUBLICATIONS AND CONFERENCE PRESENTATIONS

Refereed Papers


van Eyk, H. and Baum, F. (2003) Evaluating health system change – Using focus groups and a developing discussion paper to compile the “voices from the field”, *Qualitative Health Research*, 13,2, February, pp 281-286

Books, Chapters, Published Conference Papers and Reports


Conference Papers and Presentations


**Keynotes, Plenary and Invited Addresses**


COLLABORATION WITH THE DEPARTMENT OF PUBLIC HEALTH

The Unit continues to have a close link with the Faculty of Health Sciences, Flinders University of South Australia, through the Director, who is Professor and Head of the Department of Public Health (DPH), School of Medicine. Several research staff have academic status within the School. The SACHRU and Department of Public Health hold joint staff meetings and a number of research projects are run jointly by the two organisations. In 2002-2003, the two organisations have continued to develop a collaborative training program with SACHRU and DPH staff contributing to the core workshop program and the university-led short courses in public health research and evaluation.
ADMINISTRATIVE ARRANGEMENTS

The South Australian Community Health Research Unit is administered by Flinders Medical Centre (see organisational chart on page 51). Most SACHRU staff are employees of Flinders Medical Centre. SACHRU is incorporated into Flinders Medical Centre’s service agreement with the Department of Human Services.

Flinders Medical Centre is an Equal Opportunity employer. Occupational Health and Safety is administered through Flinders Medical Centre.

2002/03 Budget
SACHRU recorded a core budget allocation of $391,000 for 2002/03 from the Department of Human Services. Flinders Medical Centre provides full financial accounting services to the Unit and financial statements are provided as part of the Flinders Medical Centre reports.