

5TH HEALTH SERVICES RESEARCH AND POLICY CONFERENCE 2007

APHCRI will be a major sponsor of the 5th Health Services and Policy Research Conference, held in Auckland, New Zealand 2-5 December this year.

As part of its sponsorship the Institute will award a \$1000 prize to each of the top five Australian primary health care research papers, as judged by the conference scientific committee. Abstracts have now been received and announcements of the successful papers are expected in October.

For more information about the conference see the website:

<http://chsrp.fmhs.auckland.ac.nz/health/conference2007/invitation.php>

QUALITY IN PRIMARY CARE JOURNAL

APHCRI is now affiliated to the peer-reviewed journal *Quality in Primary Care* (www.radcliffe-oxford.com/qpc).

Affiliation gives APHCRI researchers some benefits, including free subscription to Volume 15 (2007) when ordering Volume 16 (2008). There will be emailed content alerts sent out every two months. If you would like to receive the alerts, please let us know (frith.rayner@anu.edu.au).

In the future there may be opportunities for APHCRI-supported supplements and special issues in the journal.

Professor Glasgow will be on the journal's editorial board.

APHCRI SPREADS THE WORD ON 1.3.25

APHCRI was invited to spend a day with National Institute of Clinical Studies Fellows discussing the 1.3.25 reporting format used in APHCRI's Stream Four and Six programs.

NICS is interested in adopting the format for their work and Professor Glasgow led a Reader Friendly Writing workshop.

The day involved presentations and a practical component testing out the theory and developing a NICS template.

STREAMS UPDATE

Stream Six research teams came to Canberra for the final time this month. The teams presented their findings and early policy options during the one-day workshop.

Yet again the teams have presented high calibre work which was well received by both fellow researchers and those Department of Health and Ageing staff able to attend.

Stream Six teams have submitted their initial reports which will be sent out for review. The final reports, including the 1 and 3 page papers are due 14 November.

The first of the **Stream Seven** travelling scholars departed this month Lydia Hearn and Margaret Miller have left to visit Europe and Julie McDonald will soon travel to Canada.

Other groups will travel in the coming months and report back to APHCRI and the Department of Health and Ageing in April.

We wish them well on their travels and look forward to hearing the outcomes of their collaborations with international groups with interest.

CATCHING UP WITH STREAM FIVE TEAMS

APHCRI Stream Five was commissioned in 2006 to further develop research from Streams One, Three and Four. Researchers were asked to consider what the next steps would be in their program of work and to develop further questions or components of the work.

Here we catch up with three of the five projects undertaken in Stream Five. These projects are due to be completed by the start of 2008.



Professor Jane Gunn

EXTENDING RE-ORDER - CROSS CULTURAL & TASMANIAN COMPONENT

The re-order (Re-organising care for depression and related disorders in the Australian Primary Care setting) cross-cultural component aims to gain a broader understanding of views about depression and its treatment from members of three ethnic communities (Vietnamese, Sudanese and East Timorese) in Victoria and Tasmania. It is designed to complement the main re-order study and enhance the understanding of cultural perspectives in treating depression in primary health care settings. General Practitioners (GPs) who work with refugee communities and ethno-specific community workers were also interviewed about their experiences.

Our study will provide a rich source of qualitative data about the experience of living with depression and health service use from the community participants' perspective and the experience of treating depression from the GPs and allied health workers' view. Preliminary analysis indicates that the concept of 'depression' is mostly not understood and often non-existent in participant's first language.

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The experience of 'depression' is primarily associated with major stressful life events such as traumatic pre-migration experiences related to (among others) war, loss of homeland and resettlement difficulties.

There was a high level of stigma towards any mental illness and a tendency to hide the cause of symptoms from family and friends. GPs described the different presentation of physical symptoms and the role of interpreters in facilitating the clinical interactions, while community workers stressed the need for more depression information to be communicated to community members, and for health professionals to be proactive in probing somatic symptoms.



Dr Lydia Hearn

DEVELOPING A PORTFOLIO OF INTERVENTIONS FOR THE PREVENTION OF OVERWEIGHT AND OBESITY IN YOUNG CHILDREN - LYDIA HEARN

An initial review of overweight and obesity for young children highlighted key barriers to engaging primary health care providers, parents and other child care workers in the promotion of healthy weight among young children (aged two to six years).

It also analysed a number of 'promising' policy options for use in different health jurisdictions, and assessed their implications for practice.

The goal of this Stream Five study is to develop a portfolio of interventions and a selection guide to assist state and area health policy advisers to identify and develop appropriate partnerships with primary health care providers and multi-faceted interventions that optimise the use of scarce resources and overcome existing barriers between primary health care providers, parents and child care workers.

The study focuses on assessing the relevance, feasibility, acceptability and applicability of different approaches under a number of different circumstances.

PROCESS TOOLS FOR EVIDENCE-POLICY TRANSFER IN INDIGENOUS - MAINSTREAM PRIMARY HEALTH CARE PARTNERSHIPS (MAHPET) - JEFF FULLER

Although service partnerships are advocated in primary health care, there is very little research on how partners can critically assess and strengthen them. Two case studies are generating data to answer the following research question:

Does the use of action research incorporating network analysis and role clarification: (a) strengthen Aboriginal -mainstream primary health care partnerships, and (b) promote the evidence about the effectiveness of these partnerships into policy?

The program partnerships are (1) the RAISE Wellbeing Program, Pt Augusta, SA and (2) the Goorie Diabetes Complication and Assessment Clinic, Casino, NSW. Each program involves links between an Aboriginal health service and mainstream private and public health care services operating under a state system of area health governance.

Each partnership has individual networking issues that need to be resolved. In Port Augusta the problem is to improve the processes of team-based care. These processes relate to the movement of clients through the service network, communication strategies and how staff develop confidence with each other in their clinical and cultural skills.

In Casino the problem is to do with diabetic medication concordance, specifically related to client beliefs and issues, medication access and service strategies to deal with these such as client and provider education.

Data is collected on the number and quality of agency links in the exchange of clinical and cultural information, the engagement in team-based care, joint management and planning of services and collaboration on policy development. Also, data is collected to ascertain common or divergent views on the following: team vision, participative safety, support for innovation, task orientation, interaction frequency and work practice.

Baseline network mapping is complete and data are being "work-shopped" at both Local Research Groups to inform each partnership about working on the specified problem. Repeat network mapping will be conducted in nine months to indentify any changes in how work is performed across the partnerships.

MAHPET is due for completion in June 2008.

Please send all information about your events, publications and presentations to the editor for inclusion in future newsletters.

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