



National Collaborating Centre
for Methods and Tools

Centre de collaboration nationale
des méthodes et outils

Newsletter

Summer • 2009 • Issue 5

DialoguePH: Engaging members, reaching potential

If you work in public health, are a decision-maker in policy or program development, have a formal or informal role related to knowledge translation, and would like to be part of a national network, DialoguePH is for you.

In order to ensure that DialoguePH is an effective tool for knowledge translation, the network must reflect the needs of its members. With this in mind, NCCMT knowledge broker Pamela Forsyth surveyed current members to help chart the future development of the network.

The online mixed-method survey was available in both French and English and took about 20-25 minutes to complete. Quantitative and qualitative methods were used to analyze the data. The response rate to the survey was 22% (97/435).

What did we learn about survey respondents?

Survey respondents accurately reflected the overall network membership geographically. While we heard from members across the country, most responses came from the four provinces that have the most members: Ontario, Alberta, Manitoba and Quebec.

Just over half of respondents hold a Master's degree, most (80%) work in a management role. Close to three-quarters are between 40 and 59 years of age. Nine out of ten members are female.

One in three is a nurse. The next most prevalent disciplines are health planner/evaluator (14%) and health promoter (8%).

DialoguePH members told us what they really think

Over two thirds of DialoguePH members also belong to other public health networks; one third belongs to at

least one other knowledge translation network.

DialoguePH members know what they like in a network ... and what they don't like. Overall, members stay involved in well managed and organized networks that provide opportunities to find and share practical, relevant and current information, and to liaise with other public health professionals and experts. Respondents dislike networks that provide irrelevant content, are time-consuming, too academic, or push an obvious agenda.

How can DialoguePH add value to public health?

Respondents chose from a list of ways (based on the NCCMT mandate) in which DialoguePH could add value. Top responses include:

- Create opportunities to link with other public health professionals.
- Provide access to individuals with expertise in evidence-informed decision-making (EIDM).
- Support information sharing.
- Create opportunities for skill development regarding the steps of EIDM.

In addition, a qualitative question allowed members to tell us how DialoguePH could help them use evidence in their practice. Results can be found in the final report.

Topics for discussion forums

The NCCMT website now supports interactive discussion forums. From a list of possible forum topics (again based on the NCCMT mandate to help move evidence into practice through the application of tools for finding, interpreting and integrating evidence into practice) survey respondents chose the topics of greatest interest:

- where to find evidence related to a public health

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Network Leadership Summit

New Fact Sheets on the NCCMT Website

Production of this newsletter has been made possible through a financial contribution from the Public Health Agency of Canada.

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The NCCMT is affiliated with McMaster University.

... DialoguePH survey, cont'd:

- issue "in 5 minutes" (78%)
- how to integrate evidence into policy or program decisions (78%)
- methods and tools to support making evidence-informed decisions (77%)
- how to disseminate information to relevant audiences (68%)
- evaluation (57%)

Value, participation and consent

Survey results show definite support for a network such as DialoguePH. Respondents believe that it could support them in using evidence in their practice. Although many belonged to other networks, respondents indicated that DialoguePH provides them with something they don't get anywhere else. Enthusiasm for the network is high:

- 93% indicated that DialoguePH could help them use evidence in their work.
- 92% believe that DialoguePH will provide them with something to which they do not currently have access.
- 98% said they would participate in interactive features of DialoguePH.
- 91% agreed to share their contact information with other DialoguePH members.

DialoguePH comes to life ...

In response to the survey, we have begun to implement some of the suggestions we heard from respondents. DialoguePH has already linked public health professionals across Canada. For example, we recently brought together an individual in Alberta with Aboriginal experts in Ontario regarding the development and implementation of focus groups with Aboriginal populations

Survey respondents also asked us to provide access to experts and expertise. Among other initiatives, DialoguePH recently launched a discussion forum focused on evidence-informed public health (EIPH) moderated by NCCMT's scientific director, Dr. Donna Ciliska.

Using DialoguePH's network database, we can share current and relevant information. Recently, we told members about

- Donna Ciliska's Fireside Chat, Research Evidence in Public Health Decision-making;
- the Consensus statement on networks from this year's Networking Leadership Summit;

Have you seen this new resource?

Networking in Public Health: Exploring the Value of Networks to the National Collaborating Centres for Public Health (2009)

This paper explores the potential of networks to further the goals of the NCCPH program, in particular, the promotion of evidence-informed decision-making and knowledge management. The paper includes extensive links to Canadian and international networking resources.

Available online at

http://www.nccmt.ca/pubs/NetworkingPaperApr09EN_WEB.pdf

- Paula Robeson's paper on Networking and the NCCs;
- upcoming NCCMT workshops for skill development in EIPH.

Next steps

We are continuing to analyze the survey results and will share the recommendations in our next newsletter. For more information, contact Pamela Forsyth (forsythp@mcmaster.ca).

The network survey has provided a solid foundation for developing DialoguePH into a valuable and relevant network. Thanks to all who participated.

Join us!

Become a member of DialoguePH to participate in the network.

Register with NCCMT to receive electronic updates.

sharing what works in public health

Activities Updates

Health-evidence.ca

Health-evidence.ca began 2009 with additional funding and a broadening suite of services. These include tailored organizational, divisional or team assessments of capacity for evidence-informed decision-making with recommendations for action. We offer customized knowledge brokering services to mentor individuals or teams in their efforts to incorporate the best available evidence in their practice, programs and policy decisions.

Recent and upcoming improvements to health-evidence.ca include additional content, improved interactivity of the site and additional summary statements. We continue to collaborate with the NCCs and other partners to enhance the site and its content, and contribute to an evidence-informed public health system in Canada. Our continued work on research projects further develops our understanding of how best to serve Canada's public health community and to promote and support efforts in evidence-informed decision-making.

For more information about health-evidence.ca programs and services, contact Kara DeCorby at kdecorby@health-evidence.ca.

Effective Public Health Practice Project

In 2008, the Effective Public Health Practice Project was commissioned by the NCC for Aboriginal Health (NCCA) to review the literature of primary studies of community-based non-pharmacological interventions to assist children/families cope with the core symptoms of Fetal Alcohol Spectrum Disorder. A search of the literature determined there were few papers available, and those available were methodologically poor. In consultation with the NCCA, EPHPP determined that the co-morbidity between FASD and ADHD was sufficient to proceed with a review of community-based interventions for the management of ADHD symptoms. The purpose of this review is to identify evidence-based principles that might be used for developing community-based programs for Aboriginal children and youth with ADHD and/or FASD. "A review of the effectiveness of community-based interventions for children with ADHD and their families" was completed in April.

EPHPP is in the process of the title registration and protocol for two Cochrane Public Health Group reviews, 1) What is the impact/effectiveness of pricing policy interventions to increase healthy food choices; 2) Interventions to enhance access for increased consumption of fruits and vegetables among adolescents and adults.

For further information visit www.ephpp.ca or e-mail EPHPP@mcmaster.ca.

Become a Sentinel Reader for Public Health +

If you are currently in professional practice in public health, environmental health, occupational health or related disciplines, or family practice, please join us as a Sentinel Reader.

Receive hot-off-the-press articles matched to your interests at a rate that you can control (e.g., two articles per month). Look over the articles and rate them on two scales:

1. relevance to your clinical practice
2. newsworthiness (e.g., is this "news" or something you already knew?)

We will collate your ratings with those of at least two other readers and use them to alert your colleagues via Public Health+.

We know you'll enjoy the task. It's easy to do and informative. Contact us for more information: NCCMT@mcmaster.ca.



We welcome your feedback.

Send your comments or questions to nccmt@mcmaster.ca.

This newsletter is edited by Jeannie Mackintosh, communications coordinator for the NCCMT.

Network Leadership Summit

January 12-14, 2009

Interest in networking as a tool to improve health outcomes is increasing in the health sector. Whether for the purposes of integrating health care services or as a strategy for knowledge translation, networking enables people from across provincial and international borders to share ideas, experiences and evidence, and to meet the challenges related to improving health outcomes.

The fourth Network Leadership Symposium was hosted by Search Canada and sponsored by a coalition of organizations. Approximately 60 people from a variety of institutions met in Banff, Alberta, to advance their understanding of networks.

Specific issues included:

- how to achieve multi-organizational collaboration;
- how to manage collaborations in a network context;
- how to better understand the dynamics of networks by analyzing network structures, processes, connections and outcomes.

The program was led by four experts in network effectiveness and in the analysis of network structure and function: Brint Milward, Keith Provan, Penny Hawe and Cynthia Webster.

For a complete review of the Summit proceedings visit www.searchca.net/users/folder.asp?FolderID=2917.



Marianne Jacques (left), Network Development Officer for the NCCHPP; Pamela Forsyth (centre), Knowledge Broker for the NCCMT; and Paula Robeson (right), Knowledge Broker for health-evidence.ca, enjoyed the Network Leadership Summit in Banff.

New Fact Sheets available on NCCMT website:

A Model for Evidence-Informed Decision-Making in Public Health

Evidence-informed public health involves integrating the best available research evidence into the decision-making process. Additional factors – community health issues and local context; community and political preferences and actions; and public health resources – create the environment in which that research evidence is interpreted and applied.

Methods: Series (A Summary of Findings)

Synthesis:1 Rapid Reviews: Methods and Implications (2009)

What is lost when stages of the traditional systematic review process are shortened? This fact sheet discusses various methods used to create rapid reviews, outlines the strengths and limitations of rapid reviews, and makes recommendations for their future application.

Synthesis:2 Methods for the Synthesis of Studies Without Control Groups (2009)

Randomized controlled trials provide rigorous results for effectiveness questions, yet may not be the best or even a possible study design for all questions. This resource discusses the implications of considering the best available evidence, including evidence from studies without control groups.



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