

Emerging Health Policy Research Conference 2011

Abstract Submission

Presenters Details

Name of Author(s) – asterisk the presenting author:

Gabriel Moore*, Sally Redman, Mary Haines, Angela Todd

Presenter's institution/organisation, address, email, and telephone:

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Short Biography of presenter (maximum 50 words):

Gabriel Moore is the Manager, Knowledge Transfer Program at The Sax Institute. She has 15 years experience in health services management. Her PhD is funded by the NHMRC Capacity Building Grants in Population Health and Health Services Research: "Outcomes, Services and Policy for the Reproductive and Early Years (OSPREY) Program".

Presentation Details

Presentation Title (up to 10 Words):

Increasing the use of research in policy: A review

Keywords: (up to 5 to assist organisers in streaming papers):

evidence-based policy, research utilisation, decision-making

Research Details (250 word limit)

Introduction/Background:

Policy agencies are implementing strategies to increase use of research in policy decisions. While there is a substantial body of opinion about what strategies might work, little evidence exists about the effectiveness of such strategies.

Research Question:

What works in increasing the use of research in population health policy and programs?

Methodology:

We conducted an extensive search focused on strategies to increase research use in population health policy and programs. We classified 106 papers meeting study criteria into research type (conceptual, descriptive, and intervention). We identified 59 descriptive papers with potential intervention strategies nominated by policy makers. We identified 5 intervention studies testing strategies. We compared potential strategies identified by policy makers to those tested in the intervention studies to identify gaps in the research agenda.

Findings:

Strategies commonly mentioned were: using summaries and syntheses of research, interaction between policy makers and researchers, improving organisational capacity to use research, increasing the relevance of research, and collaborative research. The 5 intervention studies provided some evidence that tailored targeted messages, with access to registries of research, may be effective. Training in the appraisal of research did not increase use of research.

Policy Implications:

Further research is needed to evaluate the impact of strategies designed to increase the use of research in policy. Replication of the small number of existing intervention studies is critical. Future research might focus on strategies frequently identified by policy makers as likely to be of value. Attention should also be paid to developing better methodologies.

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Presenters Details

Name of Author(s) – asterisk the presenting author:

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Short Biography of presenter (maximum 50 words):

Pauline's PhD project is titled 'Evaluating Capacity for Evidence Informed Decision Making in Public Health Policy Environments'. Pauline currently works as the Research Translation Officer for ISCRR. From February 2008 to June 2011 Pauline worked for WorkSafe Victoria's Health and Safety Strategic Programs Division as a Policy and Project Officer.

Presentation Details

Presentation Title (up to 10 Words):

Evidence in public health policy: a TAC policy content analysis.

Keywords: (up to 5 to assist organisers in streaming papers):

Policy, compensation, research evidence, injury,

Research Details (250 word limit)

Introduction/Background: There is growing interest in determining how academic research evidence is used by those working in public health policy. However there is limited research using existing data sources, such as policy documents, to answer questions about why and how such evidence is used. The Transport Accident Commission (TAC) is a Victorian state government authority that provides compensation for the treatment and rehabilitation of Victorians injured in a transport accident. As such, it has a major role in public health policy in the state.

Research Question:

- What types of evidence are referred to in TAC injury and rehabilitation compensation policies?

Methodology: Quantitative content analysis of all current TAC treatment payment policies (N=128).

Findings: Academic research evidence was referenced in 30 of the 128 policies reviewed. In contrast, other sources of evidence were referenced more commonly, including other TAC policy (Median = 6 references per policy); clinical judgment (2.5), and TAC Legislation (1). Policy and legislation external to the TAC and were also referenced.

Policy decision making in the accident compensation environment is complex; with multiple sources of evidence cited including multiple pieces of legislation, internal policy, external policy and clinician judgement. There is limited use of academic research evidence in TAC policies and very few policies (N=6) cited academic standard 'high-quality' evidence of treatment effectiveness to support treatment payment policy positions.

Policy Implications:

This study is one of the first to examine use of evidence in existing public health policy using rigorous quantitative methods. There is substantial potential for accident compensation policy to make greater use of academic research evidence.

N.B. All presenters will be asked to include a final slide in their presentations that summarises the policy recommendations and/or implications that can be drawn from the research presented.

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Abstract Submission

Presenters Details

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Short biography of presenter:

Reece is currently employed as a Research Fellow at the Australian Institute of Health Innovation, University of New South Wales. Prior to this position, he was a Doctoral Scholar at The George Institute for Global Health between 2006 and 2010, during which he completed his PhD through the School of Public Health, University of Sydney.

Presentation Details

Title:

The role of the news media in young driver licensing policy processes

Keywords:

Media, policy, graduated licensing.

Research Details

Introduction/Background:

The overrepresentation of young drivers in road trauma statistics produces significant media interest. However, news reporting of young driver issues is under-researched as a significant factor influencing policy change.

Research Question:

What is the role of the news media in young driver licensing policy processes?

Methodology:

The study was composed of two components. The first was a series of 48 interviews with young driver licensing policy stakeholders in Australia and the United States. The second component involved an analysis of the framing of Australian news media coverage of the policy debates surrounding two provisional driver restrictions between 2004 and 2008.

Findings: Stakeholders proposed that disseminating information to the electorate via the news media was a critical element of the policy process. While the media was seen to sometimes assist advocates of evidence-based policy reform by stimulating and reinvigorating community interest and debate regarding young drivers, stakeholders' also suggested that media reporting may largely ignore research that may be relevant to policy debates if that research is perceived as having limited appeal to audiences. The media analysis confirmed these results, finding that research evidence is only one component of information presented as policy-relevant in the highly emotive young driver licensing policy discourse conducted in Australian news media.

Policy Implications:

The news media represents a primary battleground of young driver licensing policy debates. Policy reform advocates need to appreciate that evidence is not the only currency exchanged in news media debates and should carefully develop effective framing strategies accordingly.

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PRESENTERS DETAILS

Name of Author(s) – asterisk the presenting author:

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Short Biography of presenter (maximum 50 words):

*She coordinates the Ecstasy and Related Drugs Reporting System (EDRS) and Illicit Drugs Reporting System (IDRS) for the ACT at the National Drug and Alcohol Research Centre. Sheena has completed her Masters of Public Health and has previously done research in the field of psycho-oncology and evidence-based decision making.

** Laura Scott joined NDARC in July 2008. She is currently the coordinator of the Ecstasy and Related Drugs Reporting System (EDRS) in NSW. Her research interests include mental health and risky behaviours among regular ecstasy users and trends in the Australian ecstasy and related drug markets. Laura is currently completing a Master of Clinical Neuropsychology. Her masters research focusses on the cognitive impacts of opioid analgesics.

PRESENTATION DETAILS

Presentation Title (up to 10 Words):

How illicit drug monitoring can contribute to drug policy

Keywords: (up to 5 to assist organisers in streaming papers):

Illicit drug, monitoring, sentinel sampling, drug policy

RESEARCH DETAILS (250 WORD LIMIT)

Introduction/Background:

Evidence is but one contributing factor in health policy decisions. It must compete with other factors including economics, public opinion, ethics and values (Friis and Sellers, 2009). In an environment where public opinion and individual values are often influenced by celebrity actions, drug deaths, and media reports, it is critical that evidence based research is available to inform drug policy. The Illicit Drug Reporting System (IDRS) and Ecstasy and Related Drug Reporting System (EDRS) are annual drug monitoring systems that provide data to monitor and identify trends in illicit drug use in Australia.

Research Question:

Why is drug-monitoring continually important for drug policy?

Methodology:

The IDRS and EDRS monitor the use and harms as well as the price, purity and availability of illicit drugs on an annual basis, across each capital city in Australia. The systems comprise of three components which are triangulated: face-to-face interviews with sentinel samples of regular injecting drug users and regular ecstasy users respectively, interviews with key experts and indicator data sources.

Findings:

This paper describes how a national monitoring system of illicit drug use and markets provides policy relevant research, encouraging evidence-informed drug policy. The availability of accurate data across time, the responsiveness of such a system and the comprehensiveness of the available data, make these systems an invaluable resource to drive evidence based policy.

Policy Implications:

In a study by Ritter (2009) the IDRS was named as a primary source of statistical data used by drug policy makers across health and police government portfolios. In a dynamic market, such as the Australian drug market the IDRS and EDRS systems have been critical in identifying trends such as the heroin shortage, increased availability of opioid replacement therapies, the illicit injection of Temazepam gel capsules, injection of opioid medications such as morphine and oxycodone, and the increasing use of emerging psychoactive substances. In some instances the identification of such trends has led to direct policy action (e.g. the withdrawal of Temazepam gel capsules from the market).

N.B. All presenters will be asked to include a final slide in their presentations that summarises the policy recommendations and/or implications that can be drawn from the research presented.