

Cochrane Health Promotion and Public Health Field

March
2005

FIELD NEWSLETTER

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EDITORIAL

It's well past the beginning of the year but we wish you all the best for 2005. It was an extremely traumatic start to the year and many within the public health and health promotion community have been involved in the tsunami response in some way. This HP&PH Field contributed by working with the Cochrane-wide Tsunami Relief Working Group and also providing bursary funding to the South African Cochrane Centre to undertake a review in a core area of need: Pharmacotherapy and Post Stress Disorders. We were also extremely busy in the beginning of the year submitting a response to the Call for Submissions to be a Knowledge Network Hub in the area of Public Health Conditions for the WHO Global Commission on Social Determinants. The process was

extraordinarily rapid by necessity but extremely collaborative, and the submission has gone in with the lead involvement of Haluk Soydan from the Campbell Collaboration, the proposed Cochrane/Campbell Equity entity (under the leadership of Peter Tugwell and Vivian Robinson) and their colleague Don Simpson. There is also an extensive list of enthusiastic organisations and individuals nominated with expertise in global research and knowledge transfer. From our perspective, should the submission be successful, the process from now on in will be as inclusive of those with particular interest in this area as possible. Please contact me if you would like to be involved, should we be successful. I'm extremely pleased to say we have been invited to the launch of the WHO Global Commission on Social Determinants of Health in Santiago, Chile, at the end of March where the topic of guidelines for evidence will be the focus of the meeting. I'll keep members informed of the outcomes of the meeting and our submission. Finally, I'd like to congratulate and farewell Nicki Jackson (at the end of May) who has made a significant contribution to Education and Training for systematic reviews in HP&PH, and in particular the taskforce she led for the development of review guidelines. Jodie Doyle returns from maternity leave having had a beautiful little lad and we thank her replacement Sabrina Gupta for her time with the Field. We sadly farewell Ginny Brunton from the EPPI Centre as Co-Director, but warmly welcome Rebecca Rees into that role.

Liz Waters, Field Co-Director

Update from the Priority Setting Project

There has now been a significant shift within the Collaboration since the introduction of the Priorities Project in 2003. In fact many Cochrane entities have now undertaken some type of priority setting activity to set review topics. At the Cochrane Colloquium this year there was also a plenary dedicated to priority setting.

Six of the priority topics are currently being produced into Cochrane reviews. Four topics that have not made a start yet have been chosen as priorities by the Tsunami Relief Working Group within Cochrane. These topics are:

1. Community-building interventions (designed to build a sense of community, connectedness, cultural revival, social capital) to improve physical, social and mental health
2. Interventions to build capacity among health care professionals to promote health *and/or* Interventions to build organisational capacity to promote health
3. Interventions that employ a combination of environmental, social and educational strategies to promote proper garbage disposal to promote health
4. Interventions to enhance compliance with regulations of waterworks systems which supply potable water

We are very keen to match up reviewers to these topics. Please contact jdoyle@vichealth.vic.gov.au if you are interested.

Journal articles on the priorities work include:

- Doyle J, Waters E, Yach D, McQueen D, De Francisco A, Stewart T, Reddy P, Gulmezoglu AM, Galea G, Portela A. Global priority setting for Cochrane systematic reviews of health promotion and public health research. *J. Epidemiol. Community Health*, Mar 2005; 59: 193-197.

- Waters E, Doyle J, Systematic reviews of public health in developing countries are in train. *BMJ* 2004;328:585, March 6.

- Waters E, Doyle J, Jackson N. Evidence-based public health: improving the relevance

of Cochrane Collaboration systematic reviews to global public health priorities. *J Public Health Med* 2003;25: 263-266.

- Waters E, Doyle J, Brunton G, Howes F, Jackson N. Developing priority Cochrane systematic reviews for public health in developing countries *BMJ.com Rapid Response*, 6 February 2004.

- Waters E., Doyle J., Jackson N., Howes F. Developing Priority Cochrane Reviews for Public Health and Developing Countries. *BMJ* 2004; 328: 310-311 February 6.

We will continue to advocate for the production of the reviews on our list, and will assist all reviewers undertaking these topics and, in particular, try and ensure mechanisms for updating them over time.

Jodie Doyle, Field Coordinator

Guidelines for systematic reviews in health promotion and public health – update

I am very pleased to announce that we had a very successful meeting in Ottawa with the Handbook Advisory Group (HAG, Sally Green, Julian Higgins, Phil Alderson). A decision was made at the meeting that there was a great deal of material within the guidelines that should be included in the core section of the Handbook for all reviewers to use. Information that was pertinent to health promotion and public health reviewers can be included as a separate Appendix within the Handbook.

Therefore, I am currently working on adapting the guidelines which are to be incorporated into the core handbook, to make them useful for all types of reviewers. Following this, they will be submitted to the HAG for their approval.

I would like to acknowledge the help and support of the Field and EPPI-Centre staff, particularly Rebecca Rees and Ginny Brunton.

The Guidelines are currently available on the Field website at <http://www.vichealth.vic.gov.au/cochrane/ac>

[tivities/guidelines.htm](#). We are particularly interested in receiving comments and suggestions on the guidelines.

Nicki Jackson, Outgoing Training and Support Officer

New training materials available!

The Field has been actively involved in running 2-day training workshops, within Australia, on how to conduct systematic reviews of health promotion and public health interventions. A total of 122 people have been trained! This was made possible as a result of Public Health Education and Research Program (PHERP) funding, provided by the Australian Government Department of Health and Ageing. The training materials developed are now freely available to you on our Field website. Please visit at <http://www.vichealth.vic.gov.au/cochrane/training/index.htm>

This site contains:

- 1) *Systematic review handbook* – handbook on how to do systematic reviews
- 2) *Systematic review 2-day course workbook* - the above handbook plus exercises and Powerpoint slides. Each unit needs to be downloaded separately
- 3) *Train the trainer handbook* - the systematic review 2-day course workbook plus additional guidelines for teaching.

Powerpoint slides are also provided on the website.

If you have any questions (or comments) about the materials please contact cochrane@vichealth.vic.gov.au

Nicki Jackson, Outgoing Training and Support Officer

And finally...

After a very fulfilling 2 ½ years with the Field it is time to head back to my homeland of New Zealand to seek further opportunities in health promotion and public health. From February to the end of May 2005 I will be based at the School of Population Health, Auckland University, to continue my Field work. So please know that any questions you may have can still be directed to

njackson@vichealth.vic.gov.au until the end of May. We are currently seeking to employ a new Training and Education Officer to be based in Melbourne. If you wish to see a position description please email cochrane@vichealth.vic.gov.au.

I have enjoyed meeting many of you and wish you good luck with all your future endeavours!

Nicki Jackson, Outgoing Training and Support Officer

Update from the EPPI Centre

The HP&PH Field Register is now being updated quarterly

We have been continuing to develop TRoPHI, the HP&PH Field Trials Register, which now holds over 1,000 trials. In August 2004, we implemented a system of quarterly updates from highly sensitive database searches (prior to this TRoPHI had been sourced mainly through systematic review work). The quarterly searches are to be run of Cochrane's minimum required sources of PubMed, EMBASE and CENTRAL.

Searching for the three month period Aug-Oct 2004 located 3,992 citations which were screened for inclusion in the register. Of these, 228 were deemed to be randomized controlled trials (RCTs) or controlled clinical trials (CCTs) related to HP&PH. All of these are in the process of being keyworded to facilitate topic, intervention and population restricted searches within TRoPHI. We plan to run a pilot on the cost and value of searching ASSIA, Sociological Abstracts and Social Services Abstracts for trials as well, in order to represent those sources likely to hold HP&PH research. Trials are submitted to Cochrane CENTRAL on a quarterly basis. Including this update, a total of 1,401 trials have been submitted to CENTRAL by the HP&PH Field to date.

Where to find HP & PH trials

All HP&PH trials submitted to CENTRAL by the HP&PH field can be found on the Cochrane Library using "sr-healthp" as a

code. If reviewers need to refine the search further, TRoPHI can be searched on the EPPI Centre web site <http://eppi.ioe.ac.uk> using standardised keywords for study type (RCT or CCT), country, population, intervention type, location and provider.

Staff changes at the EPPI-Centre

The sheer amount of work involved in updating the register has meant that staff at the EPPI-Centre have had to reorganise their efforts. As a result, I am now concentrating my time solely on register work, with the help of a new staff member, Chloe Powell. Chloe brings considerable library and information science expertise to the work and I'd like to take this opportunity to welcome her to the Field. Rebecca Rees has now taken on the Field Co-director role within the EPPI-Centre. We look forward to continuing our collaboration with our Australian colleagues at the Field's administrative base in Melbourne.

Methodological developments of interest to Field members

Overviews of several recent methodological projects conducted by EPPI-Centre staff are now available as conference slides. Work was presented at the 12th Cochrane Colloquium in Ottawa, Canada in October 2004

- Screening and the utility of textual analysis software: a retrospective study of RefViz™. (Josephine Kavanagh)
- Use of an advisory group to ensure relevance: reflections on participation of stakeholders in a review of sexual health promotion for men who have sex with men (MSM). (Rebecca Rees)
- A review of tools for assessing the quality of qualitative studies: implications for systematic reviews. (Angela Harden)

Find links to these presentations here: <http://cochrane.mcmaster.ca/ottcolloquium.asp>

2004 Bursary Scheme results

The Field awarded a total of AUD\$14 733.05 to six successful applicants in the 2004 Bursary Scheme. These were:

Simon Royal

Cycle paths and cycle lanes for the prevention of injuries to cyclists

Katherine Kerr

Interventions in the alcohol server setting for preventing injuries

Zbys Fedorowicz

Oral health promotion for oral health

Giorgina Piccoli

Educational programs on organ donation for high school students

Sabrina

Pit

Interventions utilising marketing strategies for promoting healthy eating behaviours in young people

Angela

Taft

Screening interventions to reduce or eliminate violence and promote the physical and psychosocial well-being of women who experience intimate partner violence

First meeting of the HPPH Field Advisory Group

The Field is pleased to announce the members of the Cochrane Health Promotion and Public Health Advisory Group: Helen Thomas (Canada), Peter Tugwell (Canada), Taryn Young (South Africa), Laurie Anderson (USA), David McQueen (USA), Mark Pettigrew (UK), Philip Baker (Australia) and Chandrakant Revankar (India). Potential members from South American countries are currently being sought to join the group.

A number of this group met via its first 'pre-advisory group' teleconference on December 14, 2004. A summary of current Field projects was given and preliminary discussions were held on ways of connecting in with key policy initiatives, and the possibility of converting from a Field to a Review Group entity within Cochrane. The Terms of Reference for the Advisory Group is posted on the Fields website at: www.vichealth.vic.gov.au/cochrane/about/in dex.htm

The Field continues to be supported by time-limited taskforces to carry out particular activities of the Field and *your* input into our

various projects is always sought and welcomed.

Ottawa 2004 Cochrane Colloquium

Presentations from the 2004 Cochrane Colloquium are available at : <http://cochrane.mcmaster.ca/ottcolloquium.asp>

Melbourne 2005 Cochrane Colloquium

The website for the Melbourne Colloquium (22-26 October) is now online at www.colloquium.info.

Abstract submission deadline is **April 18**. As well as information on the scientific and social program, you'll find information on how to submit abstracts, register for the Colloquium online and apply for **Consumer and Developing Country Stipends**, which close **May 30**.

Update on the Field's contact database

The Field's contact database now contains 310 potential contributors to the Field. Since our last newsletter, the Field has welcomed our first representatives from Afghanistan, Argentina, Saudi Arabia, Senegal, Sri Lanka and Uruguay. The Field always welcomes newcomers so please encourage others to contact us if they wish to become involved (see survey on the back page of this newsletter).

Please remember to notify us (cochrane@vichealth.vic.gov.au) if you are changing email or postal addresses.

Thanks!

Countries where those on the Field's contact database are from (accumulative totals)

Country	April 01	July 04	Feb 2005
Australia	20	126	132
United Kingdom	19	52	57
Canada	18	36	42
USA	1	25	25
Denmark	1	2	2
Finland	1	1	1
Japan	1	1	1
Netherlands	1	3	3
New Zealand	1	3	3
Philippines	1	2	2
Nigeria	1	2	2
Northern Ireland	1	1	1
Portugal	1	1	1
Sweden	1	3	3
Switzerland	1	6	6
Germany		2	2
Israel		1	1
Belgium		1	1
Hungary		1	1
Lebanon		1	1
Turkey		1	1
Pakistan		2	2
South Africa		5	6
Russia		1	1
China		1	1
Fiji Islands		1	1
Hong Kong		1	1
Thailand		2	4
Bahrain		1	1
Norway		2	3
India		2	3
Indonesia		1	1
Afghanistan			1
Argentina			3
Saudi Arabia			1
Senegal			1
Sri Lanka			1
Uruguay			1
Total	72	280	310

Snippets from the Cochrane Collaboration

- In response to the health problems faced by the populations in the countries affected by the tsunami of 26 December 2004, The Cochrane Collaboration and Wiley have agreed to make **The Cochrane Library** on Wiley InterScience (www.thecochranelibrary.org) **freely available** in Bangladesh, India, Indonesia, Kenya, the Maldives, Malaysia, Myanmar (Burma), the Seychelles, Somalia, Sri Lanka, Tanzania and Thailand for a six-month period.
- The Cochrane exchange fellowship has been renamed; it is now the Cochrane visiting fellowship. This fellowship provides funds for one successful applicant to travel to and work in another Cochrane entity for a period of up to one month. Deadline for applications is March 16, 2005. If anyone would like more details, visit <http://www.cochrane.org/docs/Fellowshipandscholarships.htm#CCEF>.
- The Cochrane Library is now available on Wiley InterScience and from January 2nd, 2005 Update Software's Internet version will no longer be available (with the exception of the CD-ROM edition). Instead, subscribers will need to access the database through Wiley Interscience <http://www.thecochranelibrary.com>.
- The latest update of The Cochrane Manual (a 213-page document containing the policies and procedures of The Cochrane Collaboration) is now available on the Collaboration website (<http://www.cochrane.org/admin/manual.htm>).
- Exploratory meeting for a South Asian Cochrane Network held in Goa, India from 13-14 December 2004.
- Cochrane adds its endorsement of the CONSORT Statement (www.consort-statement.org), developed to help improve the quality of reporting of randomized controlled trials.
- The minutes of the Steering Group meeting held in Ottawa, Canada, Oct 2004, available on the Collaboration website at <http://www.cochrane.org/ccsg/index.htm>
- A Cochrane "impact" section on the Collaboration's website now includes press releases, a graph showing growth in publication of Cochrane Protocols and Reviews, and "The dissemination of Cochrane evidence: an inventory of resources that use Cochrane reviews" . View at: www.cochrane.org/reviews/impact
- New Field - Cochrane Prehospital and Emergency Health Field. Their web address is www.cochranepehf.org.
- New Convenor needed for the Health Care of Older People Field. The outgoing Convener of this Field is willing to work with a new Convener to transfer the registry that is in place and the other tasks of the Field. Anyone who may be interested in taking over the Field contact callen@cochrane.org
Convening a Cochrane entity involves being able to provide the skills and necessary infrastructure support to deliver the core functions of that entity.

Upcoming Events

5th Annual Campbell Colloquium

February 23-25, 2005

Lisbon, Portugal

www.campbellcollaboration.org

15th National Health Promotion Conference

March 13-16 2005

Canberra, Australia

<http://www.healthpromotion.act.gov.au>

6th IUHPE European Conference on the Effectiveness and Quality of Health Promotion: Evidence for Practice

June 1-4, 2005

Stockholm, Sweden

Public Health Association of New Zealand Conference

July 6-8, 2005

Wellington, New Zealand

www.pha.org.nz

Global Forum for Health Research

September 12-16, 2005

Mumbai, India

Canadian Public Health Association Annual Conference

September 18-21, 2005

Ontario, Canada

International Conference on the Scientific Basis of Health Services

September 18-20, 2005

Montreal, Canada

<http://www.icsbhs.org/>

13th Cochrane Colloquium

October 22-26, 2005

Melbourne, Australia

www.colloquium.info

19th World Conference on Health Promotion and Education

June 1-3, 2007

Vancouver, Canada

New Cochrane reviews and protocols of interest to health promotion and public health from Issue 4 2004 and Issue 1 2005 of *The Cochrane Library*:

REVEIWS

- Alcohol ignition interlock programmes for reducing drink driving recidivism
- Antioxidant supplements for preventing gastrointestinal cancers
- Low glycaemic index diets for coronary heart disease
- Psychosocial and psychological interventions for preventing postpartum depression
- Interventions for promoting physical activity
- Home versus center based physical activity programs in older adults
- Population-based interventions for the prevention of fall-related injuries in older people
- Relapse prevention interventions for smoking cessation

PROTOCOLS

- Advocacy interventions to reduce or eliminate violence and promote the physical and psychosocial well-being of women who experience intimate partner abuse
- Child-resistant containers for preventing childhood poisoning

Cont....

PROTOCOLS continued...

- Home safety education and provision of safety equipment for injury prevention.
- Exercise for improving balance in older people.
- Interventions for drowning prevention in children and young people.
- Wholegrain cereals for coronary heart disease.
- Antenatal psychosocial screening for prevention of antenatal and postnatal anxiety and depression
- Community-based supplementary feeding programmes for promoting the growth of young children in developing countries
- Calcium supplementation for improving bone mineral density in children
- Dietary advice for the prevention of type 2 diabetes mellitus in adults
- Interventions to promote screening for diabetic retinopathy
- Parenting programmes for preventing tobacco, alcohol or drugs abuse in children under 18
- Interventions for tobacco cessation in the dental setting
- Interventions for improving uptake of population-based screening for colorectal cancer using fecal occult blood testing.
- Interventions for prevention of drug use by young people delivered in non-school settings.
- Quit and Win contests for smoking cessation.

Abstracts from *The Cochrane Library*

Issue 1, 2005 of *The Cochrane Library* was released in January. There are now 2249 completed reviews and 1539 protocols (reviews in progress) on the *The Cochrane Library's* Cochrane Database of Systematic Reviews. Below are two abstracts of recent reviews from *The Cochrane Library* that are relevant to health promotion and public health. The abstracts below are taken from Cochrane Collaboration's website at <http://www.cochrane.org/reviews/index.htm>

TITLE: Population-based interventions for the prevention of fall-related injuries in older people

AUTHORS: McClure R, Turner C, Peel N, Spinks A, Eakin E, Hughes K.

REVIEW GROUP: Injuries Review Group

ABSTRACT

Background: Fall-related injuries are a significant cause of morbidity and mortality in the older population. Summary information about counter-measures that successfully address the risk factors for fall-related injuries in research settings has been widely disseminated. However, less available is evidence-based information about successful roll-out of these counter-measures in public health programmes in the wider community. Population-based interventions in the form of multi-strategy, multi-focused programmes are hypothesised to result in a reduction in population-wide injury rates. This review tests this hypothesis with regards to fall-related injuries among older people.

Objectives: To assess the effectiveness of population-based interventions, defined as coordinated, community-wide, multi-strategy initiatives, for reducing fall-related injuries among older people.

Search strategy: The search strategy was based on electronic searches, handsearches of selected journals and snowballing from reference lists of selected publications.

Selection criteria: Studies were independently screened for inclusion by two reviewers. Included studies were those that reported changes in medically treated fall-related injuries among older people following the implementation of a controlled population-based intervention.

Data collection and analysis: Data were independently extracted by two reviewers. Meta-analysis was not appropriate, due to the heterogeneity of the included studies.


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**Main results:** Out of 23 identified studies,

five met the criteria for inclusion. There were no randomised controlled trials. Significant decreases or downward trends in fall-related injuries were reported in all five of the included studies with the relative reduction in fall-related injuries ranging from 6 to 33%.

**Authors' conclusions:** Despite methodological limitations of the evaluation studies reviewed, the consistency of reported reductions in fall-related injuries across all programmes support the preliminary claim that the population-based approach to the prevention of fall-related injury is effective and can form the basis of public health practice. Randomised, multiple community trials of population-based interventions are indicated to increase the level of evidence in support of the population-based approach. Research is also required to elucidate the barriers and facilitators in population-based interventions that influence the extent to which population programmes are effective.

**This review should be cited as:** McClure R, Turner C, Peel N, Spinks A, Eakin E, Hughes K. Population-based interventions for the prevention of fall-related injuries in older people. *The Cochrane Database of Systematic Reviews* 2005, Issue 1. Art. No.: CD004441.pub2. DOI: 10.1002/14651858.CD004441.pub2.

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**TITLE:** Relapse prevention interventions for smoking cessation

**AUTHORS:** Hajek P, Stead LF, West R, Jarvis M.

**REVIEW GROUP:** Tobacco Addiction Group

## ABSTRACT

**Background:** Several treatments can help smokers make a successful quit attempt, but many initially successful quitters relapse over time. There are interventions designed to help prevent relapse.

**Objectives:** To assess whether specific interventions for relapse prevention reduce the proportion of recent quitters who return to smoking.

**Search strategy:** We searched the Cochrane Tobacco Addiction group trials register in September 2004 for studies mentioning relapse prevention or maintenance in title, abstracts or keywords.

**Selection criteria:** Randomized or quasi-randomized controlled trials of relapse prevention interventions with a minimum follow up of six months. We included smokers who quit on their own, or were undergoing enforced abstinence, or who were participating in treatment programmes. We included trials that compared relapse prevention interventions to a no intervention control, or that compared a cessation programme with additional relapse prevention components to a cessation programme alone.

**Data collection and analysis:** Studies were screened and data extracted by one author and checked by a second. Disagreements were resolved by discussion or referral to a third author.

**Main results:** Forty studies met inclusion criteria, but were heterogeneous in terms of populations and interventions. We considered studies that randomized abstainers separately from studies that randomized participants prior to their quit date. We detected no benefit of brief and 'skills-based' relapse prevention interventions for women who had quit smoking due to pregnancy, or for smokers undergoing a period of enforced abstinence. We also failed to detect significant effects in trials in other smokers who had quit on their own or with a formal programme. Amongst trials recruiting smokers and

evaluating the effect of additional relapse prevention components we also found no evidence of benefit in any subgroup. We did not find that providing training in skills thought to be needed for relapse avoidance reduced relapse, but most studies did not use experimental designs best suited to the task, and had limited power to detect expected small differences between interventions.

**Authors' conclusions:** At the moment there is insufficient evidence to support the use of any specific intervention for helping smokers who have successfully quit for a short time to avoid relapse. The verdict is strongest for interventions focusing on identifying and resolving tempting situations, as most studies were concerned with these. There is very little research available regarding other approaches. Until more evidence becomes available it may be more efficient to focus resources on supporting the initial cessation attempt rather than on additional relapse prevention efforts.

**This review should be cited as:** Hajek P, Stead LF, West R, Jarvis M. Relapse prevention interventions for smoking cessation. *The Cochrane Database of Systematic Reviews* 2005, Issue 1. Art. No.: CD003999.pub2. DOI: 10.1002/14651858.CD003999.pub2.



*If you have not already filled out the attached form and would like to be on the Field's contact database, please fill it out now and send via email, fax or post to the Administrator*

*Being on our database allows us to keep you informed of Field activities, funding and training opportunities and allows us to tailor requests to members' areas of expertise and interest.*

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**Training and Support Officer**

TBA

**Cochrane Health Promotion and Public Health Field – Contact database form**

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| Place of Work:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Your role:   |
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| Email address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |              |
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| <p>Have you contributed to the Field, or to the Cochrane Collaboration, in some way in the past?</p> <p>No <input type="checkbox"/> Yes <input type="checkbox"/></p> <p>How?</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> I have prepared a systematic review</li> <li><input type="checkbox"/> I have peer-reviewed a systematic review</li> <li><input type="checkbox"/> I have done some handsearching of health promotion/public health journals</li> <li><input type="checkbox"/> I have been involved in lobbying for funding to support the production of systematic reviews</li> <li><input type="checkbox"/> I have presented at a conference/workshop/seminar on systematic reviews in health</li> <li><input type="checkbox"/> I have presented information related to the Cochrane Collaboration at a conference/workshop/seminar</li> <li><input type="checkbox"/> I have provided comment back to the Field on various matters</li> <li><input type="checkbox"/> Other (please provide detail)</li> </ul>                                                                                                                                                                                                                                                                         |              |
| <p>Would you like to contribute to the Field in some way in the future?</p> <p>No <input type="checkbox"/> Yes <input type="checkbox"/></p> <p>How?</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> I am interested in doing or assisting in a systematic review of a health promotion/public health topic</li> <li><input type="checkbox"/> I would be available to peer-review a systematic review or protocol</li> <li><input type="checkbox"/> I would be available to do some handsearching of health promotion/public health journals</li> <li><input type="checkbox"/> I would be prepared to do a presentation of the Field's aims and objectives at an appropriate meeting, or relevant conference</li> <li><input type="checkbox"/> I would be prepared to present at a conference/workshop/seminar on why and how to prepare systematic reviews in health promotion and public health</li> <li><input type="checkbox"/> I would be prepared to be involved in lobbying for funding to support the production of systematic reviews in health promotion/public health</li> <li><input type="checkbox"/> I would be prepared to provide comment back to the Field on areas of interest to myself or my organisation.</li> <li><input type="checkbox"/> Other (please describe)</li> </ul> |              |
| What is your area of expertise or special interest? (eg. obesity, mental health, injury, environmental health, etc)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |              |
| <p>Would you like to maintain contact with the Field?</p> <p>No <input type="checkbox"/> Yes <input type="checkbox"/></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Send me Field newsletters electronically</li> <li><input type="checkbox"/> Send me Field newsletters via the post</li> <li><input type="checkbox"/> Send request for help as indicated in my response above</li> <li><input type="checkbox"/> Other (please provide detail)</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |              |
| How did you find out about the Cochrane HPPH Field?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |              |

Thank you. Please send completed form to:

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