

### FIELD NEWSLETTER

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### Editorial

### Dear readers,

Allow me to introduce the September issue of the Field's newsletter in Liz Waters' absence. Liz has been extremely busy in the last month, communicating the Field interests at various international meetings, including the XVII IEA World Congress of Epidemiology in Bangkok, where there was a significant focus on social inequalities, equity and developing countries. Many of the outcomes of these meetings will inform future planning work for the Field. It will also feed into our thinking around joint initiatives with the newly registered, Cochrane Health Equity Field. This issue includes an introduction to this new Field and we certainly extend our congratulations to the convenors, Peter Tugwell and Mark Petticrew and to all their Field staff and supporters.

September 2005

After farewelling Nicki Jackson in the last newsletter we are pleased to this time welcome Rebecca Armstrong to the position of Field Research and Training Officer. Rebecca has already proven to be a very resourceful and valuable member for the team, taking on the mammoth task of organising our muchpost-Colloquium evidence anticipated symposium on October 27. Rebecca is also leading on many new Field initiatives, including the production of summaries tables of Cochrane review findings of relevance to health promotion and public health, with the assistance of our part-time research assistant, Jenny Bartlett. Rebecca will also be taking responsibility for distributing and reviewing the Guidelines for Systematic Reviews of HP & PH Interventions, and of course for training and support of reviewers of HP & PH topics. We include our regular update from our colleagues at the EPPI Centre, news of an exciting project to identify systematic review priorities for indigenous populations, plus general news from the Cochrane Collaboration at large, and other initiatives of interest.

Finally, on behalf of the entire HP & PH Field, we look forward to seeing as many Field members as possible at this year's **Cochrane Colloquium in Melbourne, Australia**. We have a very full program lined up and hope to use this opportunity to hear from as many supporters (and critics for that matter!) of the Field as possible on how we should be moving forward to best meet the needs of those producing, those using and those funding Cochrane reviews of health promotion and public health interventions.

*Jodie Doyle,* Field coordinator, for *Liz Waters,* Field Co-Director

### Introducing...

I joined the Cochrane HPPH Field in May stepping into the very large shoes of Nicki Jackson. I bring with me a strong understanding of the evidence-related needs of practitioners and policy makers. Hopefully I can continue to make a valuable contribution in these areas.

My role with the Field will be varied. I will be working with Jodie to provide assistance to reviewers of HPPH topics. In addition I will be identifying training opportunities both within Australia and internationally. I hope to increase our training profile particularly with developing countries. If you can provide suggestions about where we might target training please let me know. I will also continue to raise awareness amongst practitioners, researchers and policy makers of the Cochrane Collaboration and the work of the Field. It's an exciting time to have joined the Field and I really look forward to working with you all and meeting many of you at this year's Colloquium in Melbourne, where I am based.

> Rebecca Armstrong, Field Research and Training Officer Email: rarmstrong@vichealth.vic.gov.au

The Field also welcomes our new part-time Research Assistant, Jenny Bartlett, who will be helping out with a number of projects the Field is working on currently. Jenny is also keen to help with the redevelopment of the Field's website so please feel free to email her (jbartlett@vichealth.vic.gov.au) with any of your suggestions for improvement.

### **Update from the Priority Setting Project**

Further to the last newsletter update, two of the priority topics chosen also as priorities by the Tsunami Relief Working Group within Cochrane have now been allocated to reviewers.

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.

Attempts to secure outside funding for these (and our other priority reviews) have not been fruitful and it is probable that Field bursaries will be directed to some of the priority reviews to ensure their completion.

We have also been seeking members for review advisory groups to ensure that what the review covers is reflective of what end-users wish to know about. If you are interested in being on an advisory group to any of the priority review topics, please let me know (idoyle@yichealth.yic.goy.au).

For a reminder of what the priority topics are, and the background to their development, please go to http://www.vichealth.vic.gov.au/cochrane/acti vities/priorities.htm

Jodie Doyle, Field

### Guidelines for systematic reviews of health promotion and public health interventions-update

Two amendments have been made to the Cochrane Handbook as a result of the work undertaken by Nicki Jackson and The Guidelines Taskforce. The Handbook now recommends the establishment of an advisory committee. This will help to ensure that Cochrane Reviews are of higher quality and are more relevant to endusers. The Handbook also now recommends the inclusion of theoretical underpinnings in the Background section as part of the exploration of why an intervention might work. Additional changes are still to be negotiated. The Cochrane Handbook available online: is http://www.cochrane.org/resources/handbook /handbook.pdf.

The Guidelines for Systematic Reviews of Health Promotion and Public Health Interventions are available on our website: http://www.vichealth.vic.gov.au/cochrane/acti vities/guidelines.htm. Updates will be posted on this page. We continue to ask any person who downloads these guidelines to provide comments (to rarmstrong@vichealth.vic.gov.au) on their usefulness and user-friendliness.

Rebecca Armstrong, Field Research and Training Officer

Update from the EPPI Centre Sharing experiences of 'qualitative' systematic reviewing... was the main purpose of a residential workshop for about 35

participants held 27<sup>th</sup> to 29<sup>th</sup> June by Oxford University's Department of Continuing Education. Included among the participants were myself and Field advisory group member Angela Harden. Experiences from the workshop are to be fed back to the Cochrane Qualitative Methods Group, to help in the development of training for reviewers. The work presented at the workshop might be of interest to reviewers of health promotion and public health research for various reasons, not least because we need to use qualitative data and analysis methods if we are to take appropriate account of people's perspectives, for example, on the need for interventions and/or acceptability of interventions.

It was clear in the workshop that 'qualitative' systematic reviewing meant different things to different people. We heard about reviews that have synthesised qualitative data, alone or in combination with numerical data, and reviews that have called upon qualitative methods for synthesis. These reviews explored people's perspectives and experiences of health or health services and, to differing degrees, explored and developed theory. Sometimes the qualitative reviews' findings had been juxtaposed alongside those from reviews questions about answering intervention effectiveness and sometimes they 'stood alone'.

Areas covered by sessions and issues raised included:

- Searching for qualitative research. Andrew Booth of the University of Sheffield covered the technicalities of searching but also highlighted an ongoing debate that seems of potential relevance to all kinds of reviews: what are the pros and cons of iterative searching? Here searches, instead of being run only at the start of a review, are more continuous and informed to some extent by characteristics of relevant studies as they are found.
- An overview and critique of approaches to synthesis. Mary Dixon-Woods of Leicester University described a continuum of purpose in reviews from interpretative to integrative. The first aims to generate concepts or theory and the second starts with more stable categories and aims to test hypotheses. Often reviews aim to do both. Mary called for reviewers to look more carefully at the theoretical basis of their work and to clarify

their procedures more so that others can see what has been done.

- Systematic reviewing as a way of looking at how researchers construct the world. LaVera Crawley of Stanford University School of Medicine detailed her review of different ways of measuring trust among African American patients. Her synthesis looked for patterns across both experimental and more observational studies. In a separate session, LaVera got participants to work together to identify key questions that could be addressed in further training events.
- Angela and I presented on our reflections on **the role of the review question** in a synthesis of studies of children's views about healthy eating. We concluded that, while we had been directed by our review question at all stages, different aspects of the review question came to the fore at different times.
- Lisa Arai from City University discussed appraising the quality and relevance of research evidence about intervention implementation. She described seeking and describing evidence about the delivery and experience interventions in two areas: community-based injury reduction programmes and interventions to promote the uptake of smoke alarms.
- Kate Flemming talked of her study, which is based at York University, of the role qualitative research plays within trials and systematic reviews of palliative care. Kate asked participants to think through the ways in which qualitative data might provide insights into the social, psychological and organisational implications of health care interventions and their delivery.
- Jennie Popay of the University of Lancaster described a synthesis of ethnographic, focus group and interview-based studies to look at experiences of tuberculosis and tuberculosis treatments. As well as raising several methodological questions, Jennie asked, what can qualitative evidence add to reviews of effectiveness? This ongoing review identifies evidence about stigma, accessibility, cost and disruptions to everyday life that might help us put

decisions about using TB treatments into context.

- Mary Dixon-Woods presented her experiences of two projects. The first, which was based around a review of support for breast-feeding, studied the fit between the conventional systematic review template and the epistemologies and practices of qualitative processes. One finding was that review results can vary depending upon which method is used for qualitative synthesis. The second project was a policy-oriented review of research into access to health care by vulnerable groups. Mary argued that this review's approach, which has been termed 'critical interpretative synthesis', did not aim to be dependable as an inherently reproducible method, but had produced coherent and illuminating theory.
- A presentation by Peter Wimpenny of Robert Gordon University and Liz McInnes of the Royal College of Nursing Research Institute discussed issues that arose in a review of older people's experiences of falls and falls prevention. These included discrepancies between reviewers when **applying inclusion criteria** that related to the nature of qualitative findings, methods and their reporting.

Further detail about the workshop and the training work of the Cochrane Qualitative Methods Group can be obtained from Janet Harris via cpdhealth@conted.ox.ac.uk.

Rebecca Rees

### Field register work

EPPI Centre staff working on the Field Register have been doing some interesting work over the spring and summer. Last Autumn we began to search PubMed, CENTRAL and EMBASE routinely for HP&PH intervention studies to submit to CENTRAL and catalogue for the Field.

We have now prospectively identified 1,782 RCTs and CCTs and 148 studies using other designs. The RCTs and CCTs have been sent to CENTRAL and can be located by searching The Cochrane Library with the term 'SR-HealthP'.

All 1,930 studies identified (RCTs, CCTs and 'other designs'), can be located in the Field's Studies Register, TRoPHI, located on the EPPI Centre website at

### <u>http://eppi.ioe.ac.uk/EPPIWeb/home.aspx?&p</u> <u>age=/hp/databases.htm</u>. (towards bottom of webpage)

Studies can be searched for by selecting combinations of 'keyword' search terms, including:

- What type of study does this report describe? (i.e. 'RCT', 'trial', 'other design'),
- In which country/countries was the study carried out?
- Health focus of the report (e.g. accidents, cardiovascular, obesity, sexual health)
- Characteristics of the study population (e.g. children, general population, older people)
- Type(s) of intervention (e.g. education, environmental modification, legislation).

If you're interested in other kinds of studies, such as reviews or observational research, this webpage can also be used to access those studies and can also direct you to other study registers held by the EPPI-Centre.

In addition, two posters on searching methods work we have been undertaking here at the EPPI Centre for the HP&PH Field have been accepted at the upcoming Cochrane Colloquium in Melbourne. The posters describe the results of our work to improve the way we search for reviews and intervention studies in HP&PH. Please come around and have a look while you are there – we'd love to chat with you! Alternately we'd be pleased to discuss our findings informally via email after the Colloquium.

Ginny Brunton, Chloe Powell, Rebecca Rees

### Melbourne 2005 Cochrane Colloquium

We are excited that this year the Cochrane Colloquium is in the city of the Field's Australian base, from October 22<sup>nd</sup> to the 26th. The Field will be making several presentations and we encourage all that can attend to meet with us over the course of the Colloquium. The official Field meeting will be held on Tuesday 25 Oct at 16.00-17.30.

Other presentations will include:

- Breakfast with the Entities session: 08.00-09.15, Sunday 23 Oct
- A special session on Wed 26 Oct 09.30-11.00, Journey of a public health Cochrane review – overcoming challenges from idea to publication see:

http://www.colloquium.info/?pageID=90&It emID=341

- Handsearching for health promotion and public health trials and systematic reviews. (Poster)
- Guidelines for systematic reviews of health promotion and public health interventions evaluating their use in practice (Poster)
- Systematic Reviews of Health Promotion and Public Health Interventions (Workshop)
- Impact of Cochrane systematic reviews of public health interventions for physical activity (poster)
- Facilitative role of Fields: case study of topic prioritisation and reviewer support for production of global health promotion and public health review priorities (oral)
- Increasing specificity in searches of PubMed for Health Promotion and Public Health studies: a prospective study.

The Field, along with several of our collaborators, are also hosting a post-Colloquium symposium on Oct 27 (see article below). For a full list of Field presentations and times go to:

www.vichealth.vic.gov.au/cochrane/news/200 5Colloquium sessions.doc

Remember, you must log on and reserve a place for all meetings and presentations you wish to attend at the Colloquium.

The website for the Melbourne Colloquium is online at **www.colloquium.info**.

### **Public Health Symposium**

As this year's Colloquium is in Melbourne, we thought it would be a great opportunity to bring together a range of experts with an interest in evidence-informed public health. The symposium will focus on three key themes; transferring evidence into policy and practice, transferring policy and practice into evidence and workforce development and infrastructure support for health promotion and public health practitioners to support these transitions. **Venue:** Victorian Health Promotion Foundation (VicHealth), 1<sup>st</sup> floor, 15-31 Pelham St, Carlton

### Participants include:

- Dr Sandy Oliver, Evidence for Policy and Practice Information and Co-ordinating (EPPI) Centre, Institute of Education, University of London, UK
- Dr Laurie Anderson, Centre for Disease Control and Prevention, USA
- Dr Phillip Davies, Deputy Director of the Government Social Research Unit, UK and founder member of the Campbell Collaboration
- Professor Elizabeth Waters, Chair of Public Health, School of Health and Social Development, Deakin University and Co-Director of Cochrane Health Promotion and Public Health Field, VicHealth Public Health Research Fellow)
- Sir Muir Gray, Director of the National Electronic Library for Health, UK
- Dr David McQueen, Centre for Disease Control and Prevention, USA
- Professor Helen Roberts, City University, UK
- Associate Professor Wendy Rogers, Flinders University, Australia
- Professor Ross Bailie, Menzies School of Health Research, Australia Dr Taryn Young, South African Cochrane Centre, South Africa
- Dr Philip Baker, Queensland Health, Australia
- Professor Vivian Lin, LaTrobe University, Australia
- Esther Coren, Social Care Institute for Excellence, UK

The symposium flyer can be downloaded from www.vichealth.vic.gov.au/cochrane/news/Cutti ng Edge Debates in Evidence-Informed PH.pdf.

**HPPH** Field Advisory Group On April 28 the recently convened Field Advisory Group met via teleconference for its second meeting as a group. Issues discussed included updates from all major Fields projects, feedback from Coordinating Editors of relevant CRGs about ways of collaborative working,

discussion of ways of the Field connecting in with key policy initiatives, and a briefing paper on the future of the bursary program was distributed for consideration.

The next Advisory Group meeting will be held on the last afternoon of the Melbourne Colloquium.

## Funding to support Indigenous Health scoping project

In July the Field, in partnership with Menzies School of Health Research (MSHR), secured funding from the Australian Government Commonwealth Department of Health and Ageing, to scope the existing systematic review literature relevant to the needs of indigenous populations. The one year project will also identify criteria for identifying and prioritising topics for review recommendations. Communication, dissemination and funding strategies will be developed to encourage production of the subsequent prioritised topics on completion of the project. The project team will be lead by Professor Ross Bailie at MSHR, and will involve indigenous health researchers from Canada and New Zealand. as well as Australia. The Field is extremely grateful for this Departmental funding, from its National Institute of Clinical Studies Program in support of Australian-based Cochrane Collaboration activities.

### **Ottawa Statement on Trials Registration**

the Canadian Institutes of Health Research hosted an open meeting on October 4, 2004 in Ottawa, Canada, and invited interested parties to contribute to a plan for trial registration. The assembled group – consisting of interested investigators, consumers, journal editors, policymakers, and industry representatives – discussed a set of guiding principles for the development of trial registers. These principles, refined and agreed to over the subsequent two months by those attending the meeting and others, have been published as the Ottowa Statement, Part 1, and can be viewed at: http://ottawagroup.ohri.ca/statement.html

### Grading of PH evidence – pilot framework

The HDA, in collaboration with the UK National Institute for Clinical Excellence, has produced "Grading evidence and recommendations for public health interventions: developing and piloting a framework". Copies of this useful publication are available to download from the HDA website (www.hda.nhs.uk). As stated in the document,

"This provisional framework provides a practical and transparent method for deriving grades of recommendation for public health interventions, based on a synthesis of all relevant supporting evidence from research. The methodology is being piloted, alongside the current NICE methodology, within the development of the public health/ prevention aspects of the HDA/NICE guidance on overweight and obesity." Also, From 1 April 2005, the functions of the HDA will transfer to the National Institute for Clinical Excellence. The new organisation will be the National Institute for Health and Clinical Excellence (to be known as NICE). It will be the independent organisation responsible for providing national guidance on the promotion of good health and the prevention and treatment of ill health in the UK.

### Lancet Demands Better Support for Systematic Reviews

(excerpt from CCInfo, July 21, 2005, by Mike Clarke) For too long, new trials have been done and then reported outside the context of a systematic review of previous research. This is, at best, bad science and, at worst, harmful - even lethal - to participants in the trial and people treated on the basis of its results.

A recent study by Dean Ferguson highlighted this again.[1] The medical journal, The Lancet, has taken note.[2] From August this journal, which is the target for the manuscripts from many randomized trials, will require authors to include a clear summary of previous research findings, ideally by direct reference to a systematic review.

This, coupled with the use of systematic reviews to design new trials,[3] will help provide the better evidence we all need to make good decisions about health care. Recognizing the importance of systematic reviews, the Lancet editorial also stated 'investigators and organisations who undertake and coordinate reviews and meta-analyses now need the funding and recognition they deserve if public trust in biomedical research is to be maintained and resources used in an effective way'.

1. Fergusson D, Glass K, Hutton B, Shapiro S.

Randomized controlled trials of aprotinin in cardiac surgery: could clinical equipoise have stopped the bleeding? Clinical Trials 2005;2:218-32.

2. Young C, Horton R. Putting clinical trials into context. Lancet 2005;366:107-8. <u>http://www.thelancet.com/journals/lancet/article</u>/PIIS0140673605668468/fulltext

3. Clarke M. Doing new research? Don't forget the old. Nobody should do a trial without reviewing what is known. PLoS Medicine 2004;1:100-2.

# Registration of Cochrane Health Equity Field

We are pleased to announce that the Cochrane Health Equity Field has been officially registered by the Cochrane Collaboration and is pursuing registration with the Campbell Collaboration. The Field's aim is to encourage authors of Campbell and Cochrane reviews to include explicit descriptions of the effect of the interventions not only on the whole population but to describe their effect upon the disadvantaged and/or their ability to to reduce socio-economic inequalities in health and to promote their use to the wider community.

Administration of the Field is under the direction of the two co-convenors, Mark Petticrew and Peter Tugwell, along with an international advisory board of health equity experts: Luis Gabriel Cuervo (Columbia/UK), Betsy Kristjansson (Canada), Ron Labonte (Canada), Rene Loewenson (Zimbabwe), Johan Mackenbach (Netherlands), Jimmy Volmink (South Africa), and Elizabeth Waters (Australia).

We plan to liaise with various Cochrane and Campbell entities to conduct empirical methods research on what equity data is needed in Campbell and Cochrane reviews and how to apply reviews to inform clinical decision-making, as well as equityoriented policy. Two reviews currently in progress will be used as models to help gain a sense of the challenges raised when including distributional issues in systematic reviews: Betsy Kristjansson is leading a review on the effectiveness of school feeding programs for reducing socio-economic inequalities in health and nutrition; and Mark Petticrew is part of a group working on a systematic review of the effect of tobacco control interventions on social inequalities in smoking. The Health Equity Field will focus on both downstream interventions. upstream and 'Downstream' refers to interventions that focus on the individual such as clinical and lifestyle interventions and 'upstream' interventions refers to programs that are implemented at the population or public health level. For the latter 'upstream' interventions we look forward to collaborating with the Health Promotion and Public Health Field to promote equity interests, develop methods, set priorities for equityfocussed reviews, and provide a link with field experts.

We extend a warm invitation to those with an interest in reducing health inequities and an enthusiasm for developing methods to measure disparities in health to contact us at lmaxwell@uottawa.ca

Lara Maxwell,

Administrator, Cochrane Health Equity Field

## Cochrane Column in IJE to highlight public health reviews

From the August 2005 issue onwards, the International Journal of Epidemiology (IJEhttp://www.IEAWeb.org) will be highlighting Cochrane systematic reviews of relevance to public health in the "Cochrane Column". The aim of the Column is to bring Cochrane systematic reviews to a wider audience, and to stimulate debate on relevance, feasibility and acceptability of interventions studied. There will be а focus on the relevance to - or lack of evidence for low and middleincome countries. Authors of the selected review produce a summary and commentaries are commissioned from relevant individuals (clinicians, economists, policy makers). The product is one to two pages in the IJE with the summary of the Cochrane review and comments by experts side by side. View the first Column electronically at http://ije.oxfordjournals.org/cgi/reprint/dvi09 9?ijkey=RQ91YqwUfu7irov&keytype=ref

The IJE encourages communication among those engaged in the research, teaching, and application of epidemiology of both communicable and non-communicable disease, including research into health services and medical care.

If you are interested in contributing to the Cochrane Column contact **Taryn Young** at the South African Cochrane Centre, Medical Research Council, PO Box 19070, Tygerberg 7505, South Africa.

**Taryn Young** is a member of the Cochrane Health Promotion and Public Health Field Advisory Group

### Plain Language Summaries of Cochrane Reviews

The latest issue of *The Cochrane Library* includes Version 4.2.5 of the Cochrane Handbook for Systematic Reviews of Interventions. This Version will soon also be available on the cochrane.org website and one of the major changes to be included is that synopses will be renamed 'Plain Language Summaries'.

The Collaboration's Steering Group has agreed that plain language summaries of Cochrane reviews should be available as stand-alone products on the Collaboration website. Cochrane Centres are encouraged to translate the plain language summaries of Cochrane reviews into their own language and to make these translations accessible.

The Cochrane Consumer Network (http://www.cochrane.org/consumers/homepage. htm) will play a key role in encouraging and offering support in developing plain language summaries for all existing reviews. There should be no release of a new or substantively updated Cochrane review without a plain language summary, as it is an integral part of the review.

### ISI for Cochrane Database of Systematic Reviews

We are delighted to announce that Wiley have received an e-mail from ISI (Institute for Scientific Information) confirming that The Cochrane Database of Systematic Reviews (CDSR) has passed their technical evaluation. Coverage in The Science Citation Index Expanded(tm) (SCIE) and Current Contents/Clinical Medicine (CC/CM) will now go forward.

Details of the start date, impact factor and other important issues will be forthcoming, however, ISI thought we would want to know that the process had been successfully completed. We will communicate any details as soon as we have them. This marks a very exciting time for Cochrane reviews. For those wanting to know more about ISI go to <u>http://www.isinet.com</u> or see the summary article in Cochrane News, August 2003

(www.cochrane.org/newslett/ccnewsbi.htm) for more general information.

Deborah Pentesco-Gilbert Publisher, The Cochrane Library John Wiley & Sons, Ltd e-mail: dpentesc@wiley.co.uk <u>www.thecochranelibrary.com</u>



### Update on the Field's contact database

The Field's contact database now contains 356 potential contributors to the Field. Since our last newsletter, the Field has welcomed our first representatives from Colombia, France, Iran and Spain. 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 (<u>cochrane@vichealth.vic.gov.au</u>) if you are changing email or postal addresses.

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

Country	April 01	Feb 2005	Aug200 5
Australia	20	132	146
United Kingdom	19	57	56
Canada	18	42	46
USA	10	42 25	40 29
Denmark	1	2	3
Finland	1	1	1
Japan	1	1	1
Netherlands	1	3	3
New Zealand	1	3	9
Philippines	1	2	2
Nigeria	1	2	2
Northern Ireland	1	1	2
Portugal	1	1	1
Sweden	1	3	3
Switzerland	1	6	5
Germany	1	2	2
•		1	1
Israel		1	1
Belgium		-	-
Hungary		1	1
Lebanon		1	1
Turkey		1	1
Pakistan		2	2
South Africa		6 1	7 1
Russia China		1	1
Fiji Islands		1	1
Hong Kong		1	1
Thailand		4	4
Bahrain		1	1
Norway		3	3
India		3	3
Indonesia Afghanistan		1 1	1 1
Argentina		3	3
Saudi Arabia		1	1
Senegal		1	1
Sri Lanka		1	2
Uruguay		1	1
Colombia			2
France			1
Iran Spain			1 2
Spann			2
TOTAL	72	310	356



### Snippets from the Cochrane Collaboration

- Applications now open for The Cochrane Collaboration Aubrey Sheiham Public Health and Primary Care Scholarship (see flyer at back of this newsletter). Closing date for applications Closing date for applications: **31 August 2005**
- Version 4.2.5 of the Cochrane Handbook for Systematic Reviews of Interventions released (http://www.cochrane.org/resources/han dbook/index.htm)
- Comments Criticisms New and (Feedback) Site on the Cochrane Library (http://www3.interscience.wiley.com/cgibin/mrwhome/106568753/addviewfeedb ack.html). New "House Rules" are at http://www.cochranefeedback.com/cf/cd a/house rules.pdf. Includes email contact: CochraneFeedback@wiley.co.uk follow if feedback for up is not posted in 10 days.
- Evidence Aid– a special section on the Collaboration's website is now available that highlights evidence relevant to the effects of interventionsrelevant to decision making about health care in the aftermath of the tsunami. The topics have been
  - identified as priorities by people in the region and relate to treatments that might be used or available. Visit: <u>http://www.cochrane.org/docs/tsunamir</u> <u>esponse/index.htm</u>)
- New Co-Chairs appointed to Cochrane Collaboration Steering Group – Mark Davies (Australia) replaces Kathie Clark, and Steff Lewis (Scotland) replaces Jim Neilson.
- The Australasian Cochrane Centre (ACC), along with the South Asian Cochrane Network and the New Zealand Branch of the Australasian Cochrane Centre, announce the opening of the Singapore Branch of the ACC.

- The Cochrane Musculoskeletal Injuries Group has changed its name to the Bone, Joint and Muscle Trauma Group
- Cochrane Inflammatory Bowel Disease (IBD) review group has changed its name in line with its broader scope than interventions for the induction and maintenance of remission in Crohn's disease and ulcerative colitis to Inflammatory Bowel Disease and Functional Bowel Disorders
- April CC Steering Group meeting agreed that, as a principle, there should be no direct funding of Cochrane Centres

(or Branches of Centres) by commercial sources. This includes the funding of core and non-core functions of Cochrane Centres



### Canadian Public Health Association Annual Conference September 18-21, 2005

Ontario, Canada <u>www.cpha.ca</u> (*Field poster presentation*)

International Conference on the Scientific Basis of Health Services September 18-20, 2005 Montreal, Canada www.icsbhs.org/

**Public Health Association of Australasia Annual Conference** September 25-28, 2005 Perth, Australia

**13th Cochrane Colloquium** October 22-26, 2005 Melbourne, Australia <u>www.colloquium.info</u>

## Asia-Pacific Academic Consortium for Public

Health Conference 'Health Security in Emerging Disasters in the Asia Pacific'. November 20-23, 2005. Taipei, Taiwan www.apacph2005.org/main.htm

### Sixth Annual Campbell Collaboration

Colloquium Feb 22-24, 2006 Los Angeles, USA www.campbellcolloquium.org/

### 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 Issues 2 and 3, 2005 of *The Cochrane Library*:

### REVEIWS

- Competitions and incentives for smoking cessation
- Environmental sanitary interventions for preventing active trachoma (bursary recipient)
- Interventions for promoting the initiation of breastfeeding
- Interventions implemented through sporting organisations for increasing participation in sport
- Policy interventions implemented through sporting organisations for promoting healthy behaviour change
- Psychological interventions for overweight or obesity
- Quit and Win contests for smoking cessation
- Red-light cameras for the prevention of road traffic crashes
- School-based prevention for illicit drugs' use
- Universal neonatal hearing screening versus selective screening as part of the management of childhood deafness
- The 'WHO Safe Communities' model for the prevention of injury in whole populations
- Mass media interventions for promoting HIV testing
- Fluoridated milk for preventing dental caries

### PROTOCOLS

- Behavioral interventions for reducing HIV infection in employees in occupational settings
- Bicycle skills training for preventing bicyclerelated injuries in children and young people
- Families and Schools Together (FAST) for improving outcomes of school-aged children and their families
- Interventions for reducing the use of baby walkers
- Interventions in the alcohol server setting for preventing injuries (bursary recipient)
- Interventions to increase influenza vaccination rates of those 60 years and older in the community and in institutions
- Interventions to promote the wearing of hearing protection
- Interventions to reduce harm from continued tobacco use
- Non-legislative interventions for the promotion of cycle helmet wearing by children
- Increased police patrols for preventing alcoholimpaired driving
- Interventions for drug-using offenders in the courts, secure establishments and the community
- Interventions for increasing the proportion of health professionals practising in under-served communities (bursary recipient)
- Interventions for preventing unintended pregnancies among adolescents
- Abstinence-based programs for HIV infection prevention in high-income countries
- Bicycle helmet legislation for the prevention of head injuries
   Electronic mosquito repellents for preventing mosquito bites and malaria infection
- Individual and group-based parenting programmes for the prevention of child abuse and neglect
- Interventions for increasing fruit and vegetable consumption in pre-school children
- Interventions for the prevention of nonmelanoma skin cancers in high-risk groups
- Physical activity and enhanced fitness to improve cognitive function in older people
- Traditional birth attendant training for improving health behaviours and pregnancy outcomes

### Abstracts from *The Cochrane Library*

Issue 3, 2005 of *The Cochrane Library* was released in July. There are now 2435 completed reviews and 1606 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

(Abstracts of Cochrane Reviews are compiled and produced by Update Software Ltd on behalf of the publisher, John Wiley & Sons Ltd.) An up to date list of all Cochrane reviews and protocols of health promotion and public health interventions is kept on the Field's website at http://www.vichealth.vic.gov.au/cochrane/ac tivities/reviews.htm.

**TITLE:** Environmental sanitary interventions for preventing active trachoma

AUTHORS: Rabiu M, Alhassan M, Ejere H.

**REVIEW GROUP:** Cochrane Eyes and Vision Group

### ABSTRACT

### Background

Trachoma is the second or third major cause of blindness. It is responsible for about six million blind people worldwide, mostly in the poor communities of developing countries. One of the major strategies advocated for the control of the disease is the application of various environmental sanitary measures to such communities.

### Objectives

To assess the evidence for the effectiveness of environmental sanitary measures on the prevalence of active trachoma in endemic areas.

### Search strategy

We searched the Cochrane Central Register of Controlled Trials - CENTRAL (which contains the Cochrane Eyes and Vision Group Trials Register) on *The Cochrane Library* (Issue 4, 2004), MEDLINE (1966 to January 2005), EMBASE (1980 to January 2005), LILACS (April 2004), the reference list of trials and the Science Citation Index. We also contacted agencies, experts and researchers in trachoma control.

### Selection criteria

This review included randomised and quasirandomised controlled trials comparing any form of environmental hygiene measures with no measure. These hygienic measures included fly control, provision of water and health education. Participants in the trials were people normally resident in the trachoma endemic areas.

### Data collection and analysis

Two authors independently extracted data and assessed the quality of trials. Study authors were contacted for additional information. Three trials met the inclusion criteria but meta-analysis was not conducted due to heterogeneity of the studies.

### Main results

Two studies that assessed insecticide spray as a fly control measure found that trachoma is reduced by at least 55% to 61% with this measure compared to no intervention. One study found that another fly control measure, latrine provision, reduced trachoma by 29.5% compared to no intervention; this was, however, not statistically significantly different. Another study revealed that health education on personal and household hygiene reduced the incidence of trachoma such that the odds of reducing trachoma in the health education village was about twice that of the no intervention village. However, all the studies have some methodological concerns relating to concealment of allocation and nonconsideration of clustering effect in data analysis.

### Authors' conclusions

There is evidence that insecticide spray as a fly control measure reduces trachoma significantly. Latrine provision as a fly control measure has not demonstrated significant trachoma reduction. Health education may be effective in reducing trachoma. There is a dearth of data to determine the effectiveness of all aspects of environmental sanitation in the control of trachoma.

Citation: Rabiu M, Alhassan M, Ejere H. Environmental sanitary interventions for preventing active trachoma. *The Cochrane* 

 Database of Systematic Reviews 2005, Issue 2. Art.

 No.:
 CD004003.
 DOI:

 10.1002/14651858.CD004003.pub2.
 DOI:

**TITLE:** Interventions for promoting the initiation of breastfeeding

**AUTHORS:** Dyson L, McCormick F, Renfrew MJ.

**REVIEW GROUP:** Cochrane Pregnancy and Childbirth Group

### ABSTRACT

**Background:** Despite the widely documented health benefits of breastfeeding, initiation rates remain relatively low in many high-income countries, particularly among women in lower income groups.

**Objectives:** To evaluate the effectiveness of interventions which aim to encourage women to breastfeed in terms of changes in the number of women who start to breastfeed.

Search strategy: We searched the Cochrane Pregnancy and Childbirth Group trials register (30 May 2004), the Cochrane Central Register of Controlled Trials (The Cochrane Library, Issue 1, 2003) and the following databases from inception to October 2002: MEDLINE, CINAHL, ERIC, Applied Social Sciences, PsychLIT, EMBASE, British Nursing Index, BIDS, EPI-centre. We also searched the following in October 2002 for 'grey literature: 'SIGLE, DHSS Data, and Dissertation Abstracts. We handsearched the Journal of Human Lactation, Health Promotion International and Health Education Quarterly from inception to October 1998. We scanned reference lists of all articles obtained.

Selection criteria: Randomised controlled trials, with or without blinding, of any breastfeeding promotion intervention in any population group except women and infants with a specific health problem.

Data collection and analysis: One review author independently extracted data and assessed trial quality for checking by a second author. We contacted investigators to obtain missing information.

**Main results:** Seven trials involving 1388 women were included. Five trials involving 582 women on low incomes in the USA showed breastfeeding education had a significant effect on increasing initiation rates compared to routine care (relative risk (RR) 1.53, 95% confidence interval (CI) 1.25 to 1.88).

**Authors' conclusions:** Evidence from this review shows that the forms of breastfeeding education evaluated were effective at increasing breastfeeding initiation rates among women on low incomes in the USA.

**Citation:** Dyson L, McCormick F, Renfrew MJ. Interventions for promoting the initiation of breastfeeding. *The Cochrane Database of Systematic Reviews* 2005, Issue 2. Art. No.: CD001688.pub2. DOI: 10.1002/14651858.CD001688.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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Languages read (other than English):						
Have you contributed to the Field, or to the Cochran	ne Collaboration, in some way in the past?					
No Yes						
How?						
□ I have prepared a systematic review						
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I have done some handsearching of health promotion/public health journals						
	ng to support the production of systematic reviews					
□ I have presented at a conference/workshop/seminar on systematic reviews in health						
□ I have presented information related to the Cochrane Collaboration at a						
conference/workshop/seminar						
□ I have provided comment back to the Field	l on various matters					
• Other (please provide detail)						
Would you like to contribute to the Field in some way in the future?						
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meeting, or relevant conference						
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systematic reviews in health promotion and	d public health					
□ I would be prepared to be involved in lobbying for funding to support the production of						
systematic reviews in health promotion/public health						
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my organisation.						
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	1					
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