

**Health Promotion Research Centre**

**Annual Report**

**October, 2005 – September, 2006**



## **Table of Contents**

<b>Introduction</b>	<b>5</b>
<b>Staff Profile</b>	<b>11</b>
<b>Research Activities</b>	
<i><b>Population Health Research</b></i>	
• The World Health Organisation Collaborative Study - Health Behaviour in School-aged Children (HBSC)	<b>25</b>
• Translating the Health Behaviour of School-aged Children (HBSC) Study into Policy and Practice	<b>27</b>
• Child Well-Being Indicators for the State of the Nation's Child Report	<b>29</b>
• Health Poverty Index	<b>30</b>
• Mortality Inequalities in Ireland	<b>31</b>
• Bar Workers Respiratory Health in Ireland Before and After Legislation Banning Smoking in the Workplace	<b>33</b>
• Developing Health Impact Assessment in the Region	<b>35</b>
• Enhancing the Quality of Life of Older People in Poverty with Particular Reference to those Living Alone	<b>36</b>
• Children's Photographs of Well-being: Methodological Developments and Secondary Analysis	<b>38</b>
• The Middle Childhood Study: Health Behaviours in Context among 3rd and 4th Class Children.	<b>40</b>
<i><b>Programme Design and Evaluation</b></i>	
• Implementation and Evaluation of the Winning New Jobs Programme in Ireland	<b>43</b>
• Evaluation of the North West Regional Mental Health Promotion Strategy and Action Plan (2005-2010)	<b>46</b>
• Evaluation of the Youth Led Emotional Well-being Project 'Getting it Together'	<b>48</b>
• Exploring the use of Experiential Learning Workshops and Reflective Practice for Developing Professional Practice among Postgraduate Health Promotion Students	<b>50</b>
• An Evaluation of the Drugs Media Campaign	<b>52</b>
• Evaluation of Specialist Certificate in Health Promotion (Oral Health)	<b>54</b>

• Case Studies for Health Promotion	56
• Indicators of Health for Health Promoting Schools: Child Developed Models	57
• The Implementation of SPHE at Post-Primary School Level: A Case Study Approach	59
<b><i>Health Services Research</i></b>	
• Monitoring Health Equity	63
• Health Services Research	66
• Towards the Development of a Sexual Health Strategy for the HSE Western Area	67
• Perceptions of the Student Counselling Service at NUI, Galway	69
• Mapping Child Health in Family Support Services	71
<b><i>Policy Research</i></b>	
• The European Platform for Mental Health Promotion and Mental Disorder Prevention: Phase 2 of the Implementing Mental Health Promotion Action (IMPHA) Network	75
• Training and Accreditation in Health Promotion in Europe Including Professional Standards and Competencies	77
• Integrating Safer Motherhood	79
• Description and Assessment of Capacity for Development Education in NUI Galway: a Thematic Approach	81
• Marketing of Foodstuffs in Post-Primary Schools in Ireland	83
• Review of Evidence for the National Breastfeeding Strategy	85
<b>Research Grants and Donations</b>	<b>87</b>
<b>Publications and Presentations</b>	<b>93</b>
<b>Appendices</b>	<b>105</b>

## **Introduction**

It gives me great pleasure to introduce the 2005-2006 report for the Health Promotion Research Centre (HPRC) at the National University of Ireland, Galway.

This report sets out a brief overview of the research activity of the Centre for the period from 1<sup>st</sup> October 2005 to 30<sup>th</sup> September 2006. This was a busy year for the Centre, with research being undertaken on 28 commissioned projects, the publication of 76 reports and peer reviewed publications, and 41 presentations at conferences and workshops.

The Centre maintains a strong funding profile from a range of external agencies and was successful in being awarded 28 newly funded innovative projects, amounting to €2,153,924.

The Centre continues to expand its profile as an active contributor to national and international health promotion research. Of particular note are the new large-scale projects that came on stream in 2006. These include the Health Behaviour in School-aged Children (HBSC) study, which is a cross-national research study conducted in collaboration with the WHO Regional Office for Europe. Over 10,000 school children are included in the Irish component of this study in 2006 and a national report on the findings will be published in 2007. We are also pleased to announce that HPRC is one of four Consortium partners who have been awarded the national contract to complete the Survey of Lifestyles, Attitudes and Nutrition (SLÁN-O6) survey on behalf of the Department of Health and Children. This survey monitors the health behaviours and attitudes of a representative sample of 10,000 adults in the Republic of Ireland. Data will be collected in 2006-7 with the first report of results due in Autumn 2007. The HPRC is also the co-ordinating centre for the Development Education and Research Network at NUI, Galway, which is an inter-disciplinary, cross-faculty group established with funding from Development Cooperation Ireland, to promote global development education and research in third level institutes. Other projects conducted at the HPRC over the year include; research on health impact assessment of smoking in the workplace, bar workers' respiratory health before and after the Smoking Ban, work-life balance initiatives, children's understanding of health and well-being, safer motherhood, health poverty index, quality of life for older people and a number of evaluation and policy studies on a broad range of topics including the National Drugs Awareness Campaign, depression prevention programmes for unemployed people, youth-led emotional well-being project, marketing of foodstuff in post-primary schools, monitoring health equity, evidence-based practice in mental health promotion, development of professional practice and training and accreditation in health promotion.

The HPRC continues to develop its strong collaborative links with research groups and statutory and voluntary agencies nationally and internationally. In particular, the Centre has continued its international collaboration through work on specific initiatives with the World Health Organization, the International Union for Health Promotion and Education, and the European Commission. Ireland is participating as one of 12 countries in benchmarking progress on the Bangkok Charter on Health Promotion (WHO, 2005). This provides an exciting opportunity to share our experiences and benchmark progress with other countries. In September 2006, I attended as Irish representative, with senior officials from the Department of Health and Children and the Health Services Executive, a meeting in Oman of a WHO

technical implementation group to progress this benchmarking work over the coming year.

The multidisciplinary research programme of the Centre is supported by an experienced team of project leaders, researchers and administrative staff who bring their skills and expertise to a range of empirical research, policy and review studies in health promotion. Staff of the Centre also contribute to education courses in the field of health promotion and the supervision of both PhD and master's level dissertations being conducted in Health Promotion, Health Services Research and Occupational Health (see departmental website - [www.nuigalway.ie/hpr](http://www.nuigalway.ie/hpr) - for full details on postgraduate courses on offer).

The Centre has a particular commitment to support the development of best practice and policy in promoting health and accomplishes this through its collaboration with regional, national and international agencies. The HPRC plays an active role in providing the research base for the initiation and evaluation of health promotion strategies and staff in the Centre work closely with policy makers and practitioners on the development of evidence-based policy and practice. In addition to this applied focus, theoretical and methodological development in health promotion research has been disseminated through scholarly publications and collaboration with leading research partners in Europe and internationally.

I would like to acknowledge the support of all our research partners and funders and the members of the HPRC Advisory Board, who provided us with strategic advice on the consolidation of the Centre's activities and its future development.

I look forward to working with all our colleagues and partners in the year ahead.

*Margaret M. Barry*  
*Director of the Health Promotion Research Centre*

## **Health Promotion at NUI, Galway**

The mission of the Department of Health Promotion at NUI, Galway is to promote health and well being and to reduce inequities in health by:

- Providing high quality and innovative education and training
- Stimulating, conducting and disseminating exemplary research
- Contributing to the development of healthy public policy and best practice in health promotion
- Working in the University and the wider community in ways that reflect and support the principles and values of health promotion.

Health Promotion is concerned with the promotion of population level health and well-being and is based on the principles of equity, participation and social justice. In keeping with the Ottawa Charter (WHO, 1986) and subsequent WHO directives, the focus of this practice is on enhancing the strengths and competencies of individuals, groups and communities in order to enable people to increase control over, and thereby improve their health.

### **The Health Promotion Research Centre**

The Health Promotion Research Centre is located in the Department of Health Promotion, at the National University of Ireland, Galway. The Centre has an active multidisciplinary research programme in place and undertakes independent, commissioned and consultancy work to inform the development of theory and evidence-based practice and policy. It has substantial experience in the management of large-scale research projects and collaborates with regional, national and international agencies (see Appendix 1 for list of funding agencies) on the development and evaluation of health promotion strategies, including international collaborative studies with the World Health Organisation and the International Union for Health Promotion and Education.

An experienced team of project leaders and researchers have been drawn from a wide range of disciplines, and work within the Centre together with dedicated administrative staff. The Centre operates collaboratively, with well-developed research management protocols, in accordance with recognised best practice.

The Centre has expertise in both qualitative and quantitative approaches and employs experimental, survey, participative and consultative research methods, as appropriate to specific projects. There is a demonstrated commitment to the on-going methodological and theoretical development of health promotion and population health.

## Aims of the Centre

The aim of the Health Promotion Research Centre is to produce high quality research, of national and international significance, that supports the development of best practice and policy in the promotion of health.

- To advance the theoretical and methodological development of health promotion research
- To build capacity in health promotion through the provision of research training and support
- To advise and collaborate with regional, national and international agencies on the initiation, implementation and evaluation of strategies to promote health
- To disseminate research activities to diverse audiences, including practitioners, funders, policymakers, researchers and the general public.

## Structure

The generic management structure for research centres and units recommended by NUI, Galway has been adopted by the Health Promotion Research Centre. This consists of the establishment of an internal Steering Committee and an Advisory Board. The Steering Committee is comprised of a Director of the Centre, a Deputy Director, a team of Project Leaders, an Administrative Director and Secretary.

The Advisory Group consists of representatives from Health Promotion practice, policy and research at national and international level (see Appendix 2 for Advisory Group members).

The Strategic Priorities for the Centre in our Departmental Strategic Plan 2003-2008 have been identified as follows:

- To further strengthen the research ethos of the Department of Health Promotion through stimulating, conducting and disseminating high quality research
- To continue to develop the Health Promotion Research Centre as a Centre for Excellence in Health Promotion research and evaluation
- To improve the organisational and management structures within the research centre to enhance and support research activity
- To promote effective multidisciplinary partnerships and networks with practitioners, policy makers, researchers and relevant organisations at national and international level
- To support the research activity and further development of staff within the research centre
- Promote the Department's research reputation and profile of the research centre at national and international level.

Further details of the Centre's current research projects and reports may be found on our webpage ([www.nuigalway.ie/hpr](http://www.nuigalway.ie/hpr)).



## Research Areas

Within the Centre four research clusters have been formed around key health promotion settings, topics and population groups based on staff expertise, areas of interest and commissioned work.

### *Population Health Research*

This strand of research explores the patterns of health related behaviour, attitudes, beliefs and knowledge among members of the public and sub-groups within the population.

### *Programme Development and Evaluation*

The Centre has been involved in both developing and evaluating a range of health promotion intervention studies carried out in collaboration with practitioners, policymakers and local communities.

### *Health Services Research*

The Centre has conducted a range of studies examining health services provision, with a particular focus on equity of access.

### *Policy Research*

Policy research includes studies which provide evidence for policy-makers to develop and implement public policy which improves the health of the population.

## Dissemination

The Centre hosts a range of meetings, conferences and seminars which aim to advance multi disciplinary collaboration for health and to further the translation of health promotion research into policy and practice. An important aspect of our work is ensuring that our research activity and findings are disseminated through reports, peer review publications and conference presentations. These dissemination activities include the Annual Health Promotion Conference which is organised in conjunction with the Population Health Directorate of the Health Services Executive and the Health Promotion Policy Unit, Department of Health and Children. This conference serves as a national platform for the dissemination and integration of theory, research, policy and practice. Themes addressed include; evidence-based health promotion practice; nutrition; social capital; mental health promotion; health inequalities; re-orienting health services. The theme for 2006 was "*Shaping the future of Health Promotion within the context of Population Health*", which considered the future development and growth of Health Promotion within the new Population Health structure (see Appendix 3 for conference programme).



Speakers at the Annual Health Promotion Conference 2006 *"Shaping the future of Health Promotion within the context of Population Health"*. From left to right: Dr K.C. Tang, WHO, Geneva; Ms. Jenny Griffith, Independent Consultant, UK; Mr. Robbie Breen, DOHC; Prof. Margaret Barry, HPRC, Ireland; Dr. Claude Rocan, PHAC, Canada; Ms. Maria Lordan-Dunphy HSE; Dr. Peadar Kirby, DCU; Mr Brian Neeson, AHP, Ireland.

## *Staff Profile*



## **Director**

**Professor Margaret M. Barry, MA, PhD, APsSI**, is Professor of Health Promotion and Public Health at the Department of Health Promotion, National University of Ireland, Galway; Head of Department; Director of the Health Promotion Research Centre. Professor Barry has published widely in the field of mental health promotion and has managed a number of large-scale national, cross-border, international and EU funded projects. She is an elected member of the Global Board of Trustees of the International Union for Health Promotion and Education (IUHPE), a board member of the Clifford Beers Foundation and temporary adviser to the WHO. Having completed her primary degree and doctoral studies in Psychology at Trinity College, Dublin, Margaret has held previous posts as Lecturer in Psychology at the University of Birmingham, UK; Trinity College, Dublin, and as Deputy Director of the Health Services Research Unit at University College North Wales. Visiting Lecturer in 2002 at the World Health Organisation Collaborating Centre at the Institute of Psychiatry, King's College, London.

### **Research Interests:**

- Mental health promotion
- Evidence-based practice and evaluation research in health promotion
- Public perceptions of mental health and health inequalities
- Community mental health and cross border initiatives
- Quality of life.

## **Deputy Director**

**Dr. Saoirse Nic Gabhainn, BA, MA, PhD, C.Psychol, AFBPsS, C. Sci.** is a Senior Lecturer in Health Promotion and Deputy Director of the Health Promotion Research Centre. She has a PhD in Psychology from the Faculty of Pure Science, University of Nottingham, UK and an MA in Health Promotion by major dissertation from the National University of Ireland, Galway. Her primary teaching areas are in research methods and statistics as well as schools health promotion and mental health and social wellbeing. She is also responsible for research programmes in schools health promotion and among young people, with teaching, training and consultancy duties. She is a member of the Research Development Advisory Group of the Office of the Minister for Children, the Child Health Research Forum, an appointed member of the National Children's Advisory Council, Chair of the Youth Health Programme Advisory Committee and a member of the board of AIDS West.

### **Research Interests:**

- School Health Promotion
- Health and Health Behaviour in Childhood and Adolescence
- Women's Health
- Methodologies for Health Promotion.

## **Project Leaders**

**Dr. Margaret Hodgins, BA, MA, PhD, Reg. Psychology**, is a Lecturer at the Department of Health Promotion, National University of Ireland, Galway and is a Project Leader in the Health Promotion Research Centre. Having completed her primary degree and doctoral studies in Psychology at Trinity College, Dublin, Margaret has held previous posts as the Director of the Social Care Programme at the Department of Health Promotion and as a lecturer in Waterford Institute of Technology.

### **Research Interests:**

- The Health Promoting University, Workplace Health Promotion
- Workplace Bullying
- Quality of Life Studies with marginalised groups
- Healthy Aging
- Health Promotion in Travelling Community.

**Dr. Diarmuid O'Donovan, MD, MSc, MFPHM, DCH, DTM&H**, is Director of Public Health (HSE West), Senior Lecturer in Social & Preventive Medicine at the Department of Health Promotion, National University of Ireland, Galway and a Project Leader in the Health Promotion Research Centre. A graduate of NUI, Galway, Diarmuid trained in General Practice and Public Health Medicine in England. He has worked in Ireland, UK, Zambia and the Gambia where he was a clinical epidemiologist with the UK Medical Research Council.

### **Research Interests:**

- Health inequalities
- Health policy
- Communicable disease control and environmental health
- Sexually transmitted infections and HIV/AIDS
- Substance misuse
- Health and human rights
- International health.

**Dr. Jane Sixsmith, RGN, HV, BSc, MA, PhD**, is a Lecturer in Health Promotion at the Department of Health Promotion NUI, Galway and a contributing member to the Health Promotion Research Centre. She previously completed twelve years professional registered nursing experience including community-based practice, which focused on aspects of community and public health. Subsequent to undertaking an MA in Health Promotion in 1994/5 she worked as a researcher within the Health Promotion Research Centre prior to gaining a teaching post in the Department of Health Promotion in 1999 and lectureship in 2000.

### **Research Interests:**

- Health and the media
- Community health
- Research methods
- Development of outreach education programmes and materials.

## **Academic Staff**

**Dr. Claire Connolly, MB, Bch BAO, FFARCSI, MA**, is a Lecturer in Health Promotion at the Department of Health Promotion, National University of Ireland, Galway. She achieved Final Fellowship in Anaesthetics (First Place – gold medal) in 1975 and Hons MA in Health Promotion in 1996. Previous posts include: Consultant Locum in Anaesthetics, Senior Registrar in Anaesthetics, Lectureship in Anaesthetics, Senior House Officer in Anaesthetics in various hospitals in Ireland and the UK. Community health facilitator with HSE West and freelance health promotion work with Irish College of General Practitioners and Athlone Institute of Technology. She has completed research projects on young peoples attitudes to breastfeeding women's attitudes to and experience of breastfeeding and experience of hospitalisation.

### **Research Interests:**

- Breastfeeding
- Communication skills of Health professionals
- Experience of hospitalisation
- Childhood immunisation.

**Ms. Victoria Hogan, BA, MSc, CMIOSH, RSP**, is a lecturer at the Department of Health Promotion, National University of Ireland, Galway. She previously completed five years of industrial occupational health and safety practice and is a graduate of the Department of Psychology, NUI Galway and completed the MSc Occupational Health and Ergonomics, NUI Galway.

### **Research Interests:**

- Work related Stress
- Work life balance
- Occupational Health Psychology
- Quality of Working Life.

**Ms. Verna McKenna, BA, MA**, is a Lecturer at the Department of Health Promotion, National University of Ireland, Galway. Verna is a graduate of the Department of Psychology, University College Dublin and the Masters in Health Promotion, National University of Ireland Galway. She has worked as a researcher at the Health Promotion Research Centre and as Project Manager for a number of Center for Disease Control and Prevention projects at Boston Public Health Commission in Boston, Massachusetts. In her current role she is coordinating the Understanding Health and Illness stream of the new undergraduate medical curriculum. She has previously coordinated the Health Studies stream of the part-time BA programme.

### **Research Interests:**

- Evidence in health promotion and influences on practice and policy
- Development of implementation guidance for health promotion practice
- Health service access and health inequalities.

**Dr. Michal Molcho, BA, MA, PhD**, was part of the Israeli Health Behaviour in School Aged Children (HBSC) since 1996, and is part of the International HBSC study since 1998. She has degrees in Criminology and Sociology of Health from Bar Ilan University, Israel.

**Research Interests:**

- Adolescents' health
- Social inequalities
- Youth violent behaviour
- Injury prevention.

**Ms. Geraldine Nolan, BSc, MSc, Dip Nut & Dietetics**, is a lecturer in the Departments of Health Promotion and Biochemistry at the National University of Ireland, Galway. She previously worked as a nutritionist in both clinical and public health settings. Geraldine was involved in setting up the National Nutrition Surveillance Centre, which was established in the Department of Health Promotion in 1992. Some of the research projects to which she has contributed include; evaluation of the community nutrition service in the HSE West (previously Western Health Board), exploration of attitudes to breastfeeding, evaluation of nutrition education in primary schools and evaluation of nutrition interventions in various settings. Some of the reports to which she has contributed include annual reports published by the National Nutrition Surveillance Centre and the Report of the Obesity Task Force.

**Research Interests:**

- Effective Nutrition Interventions
- Best Practice for Community Nutrition and Dietetic services in delivery of service or clients with eating disorders
- Nutrition needs of asylum seekers.

**Researchers**

**Ms. Pauline Clerkin, BSc, MA**, holds an MA in Health Promotion from NUI, Galway and a BSc. in Applied Psychology from the University of Ulster, Jordanstown. She has worked as a researcher in both the Health Promotion Research Centre and the Department of General Practice at NUI, Galway. She is also a tutor on the Social Care programmes in Health Promotion.

**Research Interests:**

- Primary and social care
- Health inequalities
- Children and young people's health.



**Ms. Thérèse Costello, RGN, BSc (Nursing), MA**, is a graduate of the National University of Ireland Galway. She has worked as a general nurse in University College Hospital Galway and also in the theatre department of the Mater Misericordiae Hospital, Dublin, where she achieved her qualification in theatre nursing. Since completing the MA in Health Promotion in 2005, she has been working in research with the Health Promotion Research Centre and the Health Service Executive West.

**Research Interests:**

- Population Health
- Workplace Health Promotion

**Ms. Maureen D'Eath, BA, LLB, MA, Master of Health Sciences (Health Services Research)**, has worked in the Department of Health Promotion in various capacities since June 2004. She has been involved in course coordination and several research projects including those concerning quality of life, the smoking ban, and inequality of access to the health services. She also works in the Department of General Practice as a qualitative researcher with the SPHERE project.

**Research Interests:**

- Health inequalities
- Health Needs assessments
- Disability.

**Ms. Marie Galvin, BA, H DIP, MA**, is a graduate of UCD and NUI Galway, and more recently of UL where she completed a Masters in Women's Studies. She has worked as researcher on various projects at the Health Promotion Research Centre in recent years.

**Research Interests:**

- Work/Life Balance
- Equality Issues
- Women's Issues.

**Dr. Noreen Kearns, PhD, DBS, BSocSc**, was seconded from the HSE Dublin North East to the Health Promotion Research Centre, NUI Galway in September 2005 as a Senior Researcher to contribute to joint projects between the Centre and the Department of Public Health, HSE West. Her main areas of work involve policy analysis of health inequality, inequity and poverty indices and the development of Health Impact Assessment in the region. She is also involved in other projects in the wider health and public policy arena. Noreen teaches modules on 'Health and Public Policy' and 'Health Services' on the Masters of Health Science (Health Services Research)/Diploma in Health Services Research Course. Noreen previously worked in the Organisation Development Unit, Health Service Executive, North Eastern Area

from 2002 to 2005. She developed and conducted a large-scale, quantitative study of organisational culture and change in the former North Eastern Health Board. She also contributed to the development of a five year organisational strategic plan 'A Health Strategy for the People of the North East' (2003). Noreen was involved in part-time teaching on a number of social policy modules in NUI, Maynooth from 2003-2004. Previously, she worked in the National Suicide Research Foundation, Cork (2001-2002) and in University College, Cork (1996-2001).

#### **Research Interests:**

- Health Impact Assessment
- Health Inequality, Inequity and Poverty
- Institutional reform and change in the public sector (particularly the educational and health arena)
- Organisational culture
- Health services management.

**Dr. Colette Kelly, BSc, MSc, PhD, RPHNutr**, joined the Health Promotion Research Centre in 2005 to work on Health Behaviour in School-aged Children (HBSC), a World Health Organisation collaborative cross-national study. Colette is a registered Public Health Nutritionist and is deputy editor to the journal *Proceedings of the Nutrition Society*. Colette worked as a nutrition consultant prior to joining the Centre and as a nutrition scientist for the British Nutrition Foundation in the UK. Colette obtained her PhD from the University of Reading and her Masters from the University of Aberdeen, UK. She is also a graduate of NUI, Galway.

#### **Research Interests:**

- Health and health behaviour in children and adolescents
- Public health nutrition
- Early childhood nutrition
- Diet and cardiovascular disease
- Nutrition science communication.

**Dr. Mary Manandhar, BA, MSc, DLSHTM, PhD**, joined NUI Galway in spring 2005 to lead a two-year research project reviewing the social and gender contexts of policies and programming to reduce maternal mortality in Africa, with funding from the Advisory Board for Irish Aid. In 1991, after several years of nutrition and anthropology work in Nepal and Eastern Europe, Mary joined the Department of Epidemiology and Population Health at the London School of Hygiene and Tropical Medicine (LSHTM) as a Research Fellow. Together with teaching duties, she coordinated a research project exploring risk factors for social and nutritional vulnerability among older people in developing countries. Living in Nepal between 1994 and 2000, Mary conducted qualitative research in reproductive and maternal health for CARE Nepal, the Centre for Development and Population Activities (CCEDPA) and the DFID-funded Nepal Safer Motherhood Programme. She also worked as a nutrition consultant for the UNICEF Regional Office for South Asia providing technical support on Iodine deficiency disorders and anaemia to country

partners. Mary moved to Ireland in 2001 to take up a position as a Senior Research Officer in the Department of Public Health of the North Western Health Board, from where she has been seconded to NUI Galway.

**Research Interests:**

- Maternal, sexual and reproductive health
- International Public health nutrition
- Qualitative research to inform behaviour change Interventions
- Social inequalities and health
- Communication and advocacy for rights-based approaches in health.

**Ms. Kathryn Meade, BSc (Nutr Sci), H Dip COFMRD, MA**, is a graduate of the Department of Nutrition, University College Cork (1997). She completed a Higher Diploma in Co-operative Organisation, Food Marketing and Rural Development in the Department of Food Business and Development in U.C.C (1998) and obtained a Masters in Health Promotion, from the National University College Galway (2004). She previously worked in the area of Quality Assurance in the food and retail industry (1998-2003).

**Research Interests:**

- Mental Health Promotion
- Workplace Health Promotion
- Nutrition.

**Ms. Siobhan O'Higgins, BA, MA**, is a graduate of the Department of Social Science, University of Nottingham, Post Graduate Diploma in Criminological Studies, D.I.T., Masters in Health Promotion, National University of Ireland Galway. She has been involved in research and teaching with the Health Promotion Department since 2002. Siobhan is also a facilitator for the 'Mind Body & Soul' programme - delivering 'Flirting, Dating & Relating' workshops in NUIG, 2002.

**Research Interests:**

- Children, Young People and Health
- Sexual Health Promotion
- Mental Health Promotion
- Social Networks and Health Promotion.

**Dr. Lisa Pursell, BSc, PhD**, is a Senior Researcher at the Health Promotion Research Centre, National University of Ireland, Galway. She worked in collaboration with the Centre and the Department of Microbiology, National University of Ireland, Galway in 2001 on the 'Impacts of the social and natural environment on patterns of human health' study developing a database of mortalities in the Republic of Ireland 1901-2000 by ICD category, gender and age. She joined the Centre in 2003 and has worked

on the 'Human Impact Assessment in Small-Scale Rural Communities' study investigating the feasibility of health impact assessments in Ireland. She is also a part-time lecturer for the B.Sc. Programme in Health and Safety Systems, the MA Health Science (Health Services Research) in the Department of Health Promotion and the BSc. Microbiology in the Department of Microbiology. Previously she worked as a researcher in the Department of Microbiology, having completed her PhD on the efficacy of antimicrobial therapies in finfish and as a data manager at the Veterinary Laboratories Agency in the UK working on the epidemiology of scrapie in the national sheep flock in the UK.

**Research Interests:**

- Health Impact Assessments
- Inequalities in Health.

**Dr. Colette Reynolds, BA, MA, PhD**, works as a mental health promotion researcher at the HPRC and has held this position since September 2002. Colette's first degree is in psychology and she then went on to complete an MA in Health Psychology and a PhD in Health Promotion. Her PhD research is based on the evaluation of the Winning New Jobs programme in Ireland. Colette has held previous posts as lecturer in Psychology.

**Research Interests:**

- Evaluation of health promotion initiatives
- Mental health promotion and well-being.

**Dr. Dhammica Rowel, MBBS, MA, MSc, MD(Com Med)**, is a graduate of the Faculty of Medicine, University of Colombo, Sri Lanka. She completed her Master's and Doctorate in Community Medicine at the Postgraduate Institute of Medicine, University of Colombo, Sri Lanka, and the MA in Health Promotion at the NUIG, Galway, Ireland. Dhammica joined the Health Promotion Research Centre as a Researcher, in December, 2006. Previously she worked as a Senior Registrar in Community Medicine at the Research and Evaluation Unit of the Family Health Bureau and at the Health Education Bureau of the Ministry of Health, Sri Lanka.

**Research Interests:**

- Mental Health Promotion
- Postpartum Mental Illnesses
- Adolescent Health.

**Dr. Breda Smyth, MB Bch BAO MPH, MFPHMI**, is a specialist research registrar and lecturer in Public Health Medicine at the Department of Health Promotion and Public Health, National University of Ireland, Galway. A graduate of NUI, Galway, Breda completed the Masters of Public Health Medicine in University College Dublin, and subsequently a post-doctoral fellowship in University of California in Los Angeles in the area of drug abuse research and epidemiology.

**Research Interests:**

- Health Inequalities
- Substance Misuse
- Morbidity and Mortality Studies
- Manpower planning
- Interventional Epidemiology
- Communicable Disease Control and Environmental Health.

**Ms. Akke Vellinga, BSc, MSc**, is a senior researcher at the Health Promotion Research Centre, National University of Ireland, Galway. She graduated from the University of Ghent (BSc) and University of Antwerp (MSc) in Belgium. She obtained a H.Dip. in Education at the University of Antwerp (Belgium) and a Masters in Epidemiology at the Free University Amsterdam (Netherlands). As an epidemiologist she has worked for the Centre for the Evaluation of Vaccination (University of Antwerp), Free University of Brussels, the Institute of Public Health in Brussels and the Department of Social and Preventive Medicine of the University of Antwerp on various topics.

**Research Interests:**

- Epidemiology
- Environmental Epidemiology
- Cohort studies
- Statistical Modelling
- Zoonotic diseases
- Vaccination, vaccine preventable diseases
- Asthma and Allergies.

**Administration****Administrative Director:**

**Ms. Mary Cooke, BA, LLB**,  
Health Promotion Research Centre.

**Research Secretary:**

**Ms. Christina Costello**  
Health Promotion Research Centre.



## ***Population Health Research***





## The World Health Organisation Collaborative Study - Health Behaviour in School-aged Children (HBSC)

**Principal Investigator:** Dr. Saoirse Nic Gabhainn

**Researchers:** Dr. Colette Kelly, Dr. Michal Molcho, Dr. Kieran Walsh, Ms. Siobhan O'Higgins, Ms. Marie Galvin, Ms. Pauline Clerkin, Ms. Geraldine Nolan

**Funded by:** Department of Health and Children

### Background and Research Aims:

Health Behaviour in School-aged Children (HBSC) is a cross-national research study conducted in collaboration with the WHO Regional Office for Europe. The HBSC international survey runs on an academic 4-year cycle and in 2005/6 there were 41 participating countries and regions ([www.hbsc.org](http://www.hbsc.org)). Principal investigators from all countries co-operate in relation to survey content, methodology and timing and an international protocol is developed.



The study aims to gain new insight into, and increase our understanding of young people's health and well-being, health behaviours and their social context. The survey considers the positive aspects of health, as well as risk factors for ill health and disease. HBSC is unique because it takes into account relationships with family and peers and accounts for the school setting and the socio-economic environment in which young people grow up. In addition, the international aspect of HBSC enables the exchange of strategies and practices where certain countries have been more successful in containing particular risk behaviours.

As well as serving a monitoring and a knowledge-generating function, one of the key objectives of HBSC has been to inform policy and practice at national and international level.

### Method:

HBSC is a school-based survey with data collected through self-completion questionnaires administered by teachers in the classroom. The HBSC survey instrument is a standard questionnaire developed by the international research network.

A nationally representative sample of schools (primary & post-primary) from the Republic of Ireland was selected. Data from the 2002 census were employed to provide a picture of the population distribution of children (across health regions). Individual schools were randomly selected and subsequently, class groups within schools were randomly selected for participation.

For both arms of the survey, school principals were first approached by post and when positive responses were received, HBSC questionnaires in Irish or English were

offered, along with blank envelopes to facilitate anonymity, parental consent forms, information sheets for teachers and classroom feedback forms. All returns were facilitated through the provision of FREEPOST envelopes. In order to maximise response rates, postal reminders were sent to schools, followed by telephone calls from research staff at the HPRC, NUI Galway. Data entry was conducted according to the International HBSC protocol.

Ethical approval was granted by the NUI Galway Research Ethics Committee.

### **Progress to Date:**

Overall, 215 schools took part in the HBSC survey, giving a final response rate of 63.1%. This is reflected in a total  $n$  of 10,334.

Data entry is ongoing and data analysis by the team at HPRC will commence shortly. Comparisons with international data will be made in due course. The first national report featuring the main findings from children in the Republic of Ireland will be available in 2007.

### **Key Reports & Publications:**

Ter Vogt, T., Schmidt, H., Nic Gabhainn, S., Fotiou, A. & Volleberg, W. (2006). Economic and cultural correlates of cannabis use among mid-adolescents in 31 countries. *Addiction* 101 (2), 241-251.

Due, P., Holstein, B.E., Lynch, J., Nic Gabhainn, S., Scheidt, P., Currie, C., Overpeck, M., Azmann, A., Danielson, M., Casper de Matos, M., Harel, Y., Pedersen, M., Szabo, M. & Zoborski, A. (2005). Bullying and Symptoms among School-Aged Children: International Comparative Cross Sectional Study in 28 Countries. *European Journal of Public Health*, 15, 128-132.

Pickett, W., Craig, W., Harel, Y., Cunningham, J., Simpson, K., Molcho, M., Mazur, J., Dostaler, S., Overpeck, M.D., Currie, C.E., on behalf of the HBSC Violence and Injuries Writing Group. (2005). Cross-national Study of Fighting and Weapon Carrying as Determinants of Adolescent Injury. *Pediatrics*; 116: e855 - e863.

A full list of publications can be found at [www.nuigalway.ie/hbsc](http://www.nuigalway.ie/hbsc) or [www.hbsc.org](http://www.hbsc.org).

## Translating the Health Behaviour of School-aged Children (HBSC) Study into Policy and Practice

**Principal Investigator:** Dr. Saoirse Nic Gabhainn

**Researchers:** Dr. Michal Molcho, Dr. Kieran Walsh

**Funded by:** Health Research Board

### **Aims and Objectives:**

Health Behaviour in School-aged Children (HBSC) is a cross-national research study conducted in collaboration with WHO Regional Office for Europe. The purpose of the study is to gain new insight into, and increase our understanding of young people's health and well-being, health behaviours and their social context. The research, which takes the form of a school-based survey, is conducted on a four-year periodic basis.

Through a series of policy and methodological sub-studies, the aim of the "Translating the HBSC 2002 into Policy and Practice" project is to investigate patterns and associations of child health behaviours in the 2002 survey and disseminate the resulting findings to both national and international stakeholders. In addition to contributing to scientific knowledge in the area, this project aims to inform future policy and practice in children's health and well-being.

### **Progress to Date:**

Collaborative relationships with national and international partners have facilitated our work addressing the key aims and objective of this project. Research questions and activities that have been addressed include the following:

- Adolescent positive health and well-being
- Cluster randomisation and design effects in the HBSC data set
- Communication and relationships: resources and risks
- Development and distribution of policy briefing factsheets
- Food poverty among Irish children
- Measurement of social and material deprivation
- Prevalence of missing data in self-reported height and weight
- Seasonality in HBSC survey data
- Smoking initiation and cessation among Irish children
- Young people's perspectives on their environment
- Food behaviour: consumption, dieting and obesity.

Aside from the development of policy briefing factsheets, peer reviewed papers have been published and others are currently in progress or under review for each of the topics above and a website has been developed ([www.nuigalway.ie/hbsc](http://www.nuigalway.ie/hbsc)).

### **Results:**

This project has demonstrated that the successful translation of research findings into policy and practice requires a multi-faceted approach with dedicated funding and resources. Policy Briefing Factsheets are available on-line at <http://www.nuigalway.ie/hbsc/factsheets.html>.

### **Key Reports & Publications:**

- Walsh, K. & Nic Gabhainn, S. (2006) Absence of seasonal effects in HBSC data. *National Institutes for Health Sciences Research Bulletin*, 3 (3), 77-79.
- Davin, V. (2006) The family and food: assessing the risk for food poverty. Unpublished MA thesis, Department of Health Promotion, NUI Galway.
- Nic Gabhainn, S., Bourke, H. & Molcho, M. (2005) *Data on Community Involvement and Perceptions from HBSC Ireland 2002*. A short report to the National Children's Office, Department of Health and Children, Dublin.

## Child Well-Being Indicators for the State of the Nation's Child Report

**Principal Investigators:** Dr. Michal Molcho and Dr. Saoirse Nic Gabhainn

**Researchers:** Mr. Trevor Moylan, Mr. Greg Conlon

**Funded by:** The Office of Minister for Children

### **Background:**

Following years of research, the Office of Minister for Children identified list of indicators for child well-being. This project looked at compiling background information and data on 16 indicators that are derived from survey data. The indicators were based on data gathered in the following surveys: the Health Behaviour in School-Aged Children (HBSC) survey, KIDSCREEN, the Programme for International Student Assessment (PISA) survey and the European School Survey Project on Alcohol and Other Drugs (ESPAD) survey.

### **Progress to Date:**

In order to provide a rationale and context for the use of specific indicators, this project commenced by the drawing together both national and international literature on the 16 survey indicators in this first report on the state of the nation's child. In addition, the policy and strategic context as well as, where relevant, the legislative context was considered. Thus short introductory pieces for each of the indicators were prepared.

The second part of this study involved the collation of data from four separate surveys, and thus contact and collaboration was established with the investigators from all four projects within the third level sector (Drs Eeemer Eivers and Mark Morgan, the Educational Research Centre, St. Patrick's College, Drumcondra – both PISA and ESPAD), and the Health Service Executive (Dr. Celia Keenaghan, the Programme of Action for Children – KIDSCREEN). Data from the HBSC Ireland project were available internally within the Health Promotion Research Centre. All Principal Investigators agreed to supply their data for the purposes of the State of the Nation's Child Report. These data were reviewed and presented as requested, alongside the introductory texts previously prepared, to the Office of the Minister for Children to comprise one section of the forthcoming report "The State of the Nation's Children".

### **Key Reports and Publications:**

Molcho, M. & Nic Gabhainn, S. (2006) *State of the Nation's Child: Contribution of national survey data*. Report to the Office of the Minister for Children, Department of Health and Children, Dublin.

## Health Poverty Index

**Principal Investigator:** Dr. Diarmuid O'Donovan

**Researchers:** Dr. Lisa Pursell, Dr. Noreen Kearns

**Funded by:** HSE West / Combat Poverty Agency / Institute of Public Health in Ireland

### **Background and Research Aims:**

This is a joint study between and the Department of Health Promotion, NUI, Galway and Ireland and Northern Ireland's Public Health Observatory (INIsPHO) on monitoring equity in health and developing health poverty index for the Island of Ireland.

The main aims of the research are:

- To conduct a comprehensive literature review on the health inequity, inequalities, and poverty measurements within the Irish policy context
- To develop a conceptual framework for monitoring equity in health and health care in Ireland
- To review the relevance and feasibility of the theoretical basis and practical application of the English Health Poverty Index (HPI) and the Northern Irish Health Inequality Monitoring System (NI HIMS) for the Island of Ireland
- To describe the data requirements for the development of an Irish version of the English HPI and Northern Irish NI HIMS
- To collect as many indicators as possible with regards to health equity measurement in Ireland.

### **Key Reports & Publications:**

Pursell, L., Kearns, N., O'Donovan, D. (2006). *Local inequality indicators for the health and well-being of Ireland: A review of the data issues and policy context for selected data indicator sets. Interim Report.* Health Promotion Research Centre, NUI, Galway and Institute of Public Health in Ireland. November 2006.

## Mortality Inequalities in Ireland

**Principal Investigator:** Dr. Diarmuid O'Donovan

**Researcher:** Dr. Breda Smyth

**Funded By:** HSE West

### **Background:**

Although there has been an overall decline in mortality rates in the developed world in recent years, socio-economic inequalities in health have been increasing. Recent studies in Ireland show considerable gaps between the highest and lowest socio-economic groups for death rates from circulatory diseases, cancers and injuries and poisoning.

However all of the studies undertaken to date represent health inequalities at a national level. Ireland is a country of disparate geographical and economic expanse. It is incomplete to discuss inequalities in our island without evaluating at smaller population level e.g. region or county. Examining mortality data at county level will enable hypothesis development regarding possible issues giving rise to health inequalities and facilitate the development of interventions and policies to address these inequalities.

### **Research Aim:**

To identify mortality inequalities which exist among different social groups in Ireland and examine possible associations with poverty by examining elements of the Health Poverty Index (HPI) currently under development in order to facilitate prevention of further disease, disability and death among occupational groups by informing policy and influencing policymakers.

### **Objectives:**

- To describe the national population in terms of social class categorised by county
- To evaluate mortality rates in terms of Standard Mortality Rates and Standardised Mortality Rate Ratios categorised by social class (SEG), age and male gender (Because SEG categorisation for females is currently vague and unsatisfactory it is commonly agreed that evaluation of female data by SEG is misrepresentative (Barry, Sinclair, Kelly *et. al.*, 2001))
- To identify mortality inequalities which may exist among SEG'S at county level
- To evaluate Standardised Mortality Rate Ratios between the highest and lowest SEG
- To develop hypothesis regarding possible factors giving rise to such inequalities
- To examine how elements of the Health Poverty Index (HPI) currently under development could be used to further investigate inequalities
- To examine possible associations between poverty (using element of the HPI) and SMR's in counties/regions.

## **Method:**

### Mortality Data

Mortality data at county level will be analysed for every county in Ireland for each of the following social groups (CSO, 2002):

SEG 0 – Farmers, SEG 1 – Farmer Labourers, SEG 2 – Higher Professionals, SEG 3 – Lower Professionals, SEG 4 – Employers and Managers, SEG 5 – Salaried Employers, SEG 6 – Non-Manual wage earners, SEG 7 – other Non-Manual wage earners, SEG 8 – Skilled manual workers, SEG 9 – Semi-skilled manual workers, SEG - Unskilled manual workers, SEG & - Unknown.

Raw data will be obtained from the Central Statistics Office. Mortality profiling will include initial examination for all causes of death, followed by further subcategorisation into the five leading causes of mortality in Ireland:

Circulatory Disease, Cancers, Respiratory Disease, Accidents (including Motor Vehicle Accidents) and Injury & Poisoning.

### Premature Mortality

Premature mortality in terms of Year of Life Lost (YLL) will be assessed in terms of (a) different social groups (b) geographical location (c) causes of mortality.

### Mortality versus Poverty

Mortality versus Poverty will also be explored using the Health Poverty Index (under development).

### Inequalities

Inequalities in social determinants of health will be examined to assess contributory factors to mortality and morbidity.

## **Progress to Date:**

Preliminary analysis is almost complete. Results will be presented in 2007.



## Bar Workers Respiratory Health in Ireland Before and After Legislation Banning Smoking in the Workplace

**Principle Investigator:** Dr. Diarmuid O'Donovan

**Researchers:** Dr. Lisa Pursell, Dr. Saoirse Nic Gabhainn, Ms. Maureen D'Eath, Ms. Marie Galvin, Mr. Michael Keogh

**Funders:** HSE West

### **Background:**

This was a multi centre study conducted to assess the impact of the workplace smoking ban on exposure to secondhand smoke, respiratory health, attitudes and perceptions and smoking behaviours of bar workers. The main study was conducted in bar workers from Dublin with parallel studies using elements of the same methodology in Cork city, rural county Galway, and a control sample in N. Ireland (Derry).

### **Methods (Galway Study Centre):**

Public bars in the county boundary of Galway were identified using the Eircom web directory and contacted by letter inviting participation in the study. Letters were followed up by telephone contact to arrange visits to the public bars to complete a questionnaire and take cotinine samples.

#### Attitudes to the Ban, Smoking and Drinking Behaviours

Statements concerning perceptions of the ban and questions of perceived behavioural changes were posed using an interviewer-administered questionnaire. Participants could respond to statements and questions using a Likert scale.

#### Respiratory Health

Symptoms were assessed using a short interviewer-administered standardised respiratory questionnaire.

#### Secondhand Smoke Exposure

Exposure to SHS was assessed in two ways: self-report and salivary cotinine:

Self-report: Exposure was estimated using questions about workplace, spousal/partner and leisure exposures.

Cotinine: Levels were assessed by taking non-stimulated salivary samples collected using a dentist roll. Samples were frozen until processed by ABS Laboratories in London.

Numbers enrolled at baseline and follow-up in each study centre

	<b>Number in baseline survey</b>	<b>Number in follow-up survey</b>	<b>% (n) followed up</b>	
<b>Dublin</b>	91	81	89%	(81/91)
<b>Cork</b>	129	91	71%	(91/129)
<b>Galway</b>	68	48	71%	(48/68)
<b>Northern Ireland</b>	41	29	71%	(29/41)
<b>Total</b>	329	249	76%	(249/329)

## **Results:**

### Self-reported Exposure and Cotinine Study

In bar staff in the Republic who did not themselves smoke, salivary cotinine concentrations dropped by 80% after the smoke-free law (from median 29.0 nmol/l (95% confidence interval 18.2 to 43.2 nmol/l)) to 5.1 nmol/l (2.8 to 13.1 nmol/l) in contrast with a 20% decline in Northern Ireland over the same period (from median 25.3 nmol/l (10.4 to 59.2 nmol/l) to 20.4 nmol/l (13.2 to 33.8 nmol/l)). Changes in self-reported exposure to secondhand smoke were consistent with the changes in cotinine concentrations. Reporting any respiratory symptom declined significantly in the Republic (down 16.7%, - 26.1% to - 7.3%) but not in Northern Ireland (0% difference, - 32.7% to 32.7%). After adjustment for confounding, respiratory symptoms declined significantly more in the Republic than in Northern Ireland and the decline in cotinine concentration was twice as great.

### Attitudes Study

Over half of the participants supported the ban at baseline (59.5%) increasing by 17 percentage points to 77% at follow-up ( $p < 0.001$ ). Among smokers support increase by 27 percentage points from 39% to 67% and among non-smokers by 12 percentage points from 69% to 81%.

## **Key Reports & Publications:**

Pursell, L., Allwright, S., O'Donovan, D., Paul, G., Kelly, A., Mullally, B. J. and D'Eath, M. (Submitted August 2006). Before and after study of bar workers' perceptions of the impact of smoke-free workplace legislation in the Republic of Ireland. *BMC Public Health*. MS ID: 4619576611233561.

Allwright, S., Paul, G., Greiner, B., Mullally, BJ, Pursell, L., Kelly, A., Bonner B., D'Eath, M., McConnell, B., McLaughlin, JP., O'Donovan, D., O'Kane, E. and Perry, IJ. (2005). Legislation for smoke-free workplaces and health of bar workers in Ireland: before and after study. *British Medical Journal*, 331; 1117 (<http://bmj.bmjournals.com/cgi/content/full/331/7525/1117>)

## Developing Health Impact Assessment in the Region

**Principal Investigator:** Dr. Diarmuid O'Donovan

**Researchers:** Dr. Noreen Kearns, Dr. Lisa Pursell

**Funded by:** HSE West

Dr. Noreen Kearns is a member of the Task Group on Health Impact Assessment and Healthy Urban Planning with regards to the Galway Healthy City WHO initiative.

This project involves the development of a research proposal regarding a Health Impact Assessment on transport policy in Galway city and county. The proposal will be submitted to the Environmental Protection Agency's (EPA) Environmental Research, Technological Development and Innovation (ERTDI) programme (2007–2013) under the 'Environment and Health' thematic area.

Project staff are also involved in the organisation of a one-day symposium on Health Impact Assessment in order to explore core aspects from a methodological and decision/policy making perspective.

### **Background:**

Health Impact Assessment is a combination of procedures, methods and tools by which a policy, programme or project may be judged as to its potential effects on the health of a population, and the distribution of those effects within the population (WHO, European Centre for Health Policy, 1999). The broad determinants of health, including biological, psychological, economic, sociological, and environmental factors are taken into account in the conduct of a HIA. HIA is directly linked to public policy analysis and decision making processes. It is underpinned by a health equity focus with regards to particular vulnerable population groups and/or disadvantaged areas.

This project involved an evaluation of the HIA of Traffic and Transport in Ballyfermot, Dublin: The Ballyfermot HIA was commissioned by the Department of Public Health at the former Eastern Regional Health Authority (ERHA). A report entitled 'A Health Impact Assessment of Traffic and Transport in Ballyfermot' was published in December 2004 by the ERHA.

### **Research Aim:**

The aim of the project is to conduct a Process, Impact and Outcome Evaluation of the Ballyfermot HIA. The process evaluation will examine whether the methods and approaches used were appropriate. The impact evaluation will focus on participants' perceptions and expectations of the process, the influence of the HIA on ways of working including: decision-making, communication, and inter-agency collaboration, and the overall learning from conducting a HIA. Finally, based on the objectives and recommendations of the Ballyfermot HIA and key areas of influence on health (Merseyside Guidelines, 2001) an 'outcomes matrix' of perceived change will be developed, based on specific local priorities in the physical and social environment, public policy and transport policy, public services, lifestyle, and data and information issues.

## Enhancing the Quality of Life of Older People in Poverty with Particular Reference to those Living Alone

**Principal Investigator:** Dr. Margaret Hodgins

**Researchers:** Ms. Verna McKenna, Ms. Maureen D'eath

**Funded by:** National Council on Ageing and Older People (June 2006-December 2006)

### **Background:**

Both public health and health promotion research has repeatedly drawn attention to poverty as a determinant of health and well-being. While older people have been identified as a group who are at a higher risk of relative income poverty than the general population (CSO, 2005), there is an increasing awareness of the need to broaden our understanding of 'poverty' as experienced by older people (Layte *et. al.*, 1999). An important challenge is to move beyond a narrow focus on *income* to the broader issues of material and non-material supports and structures that impact on quality of life issues for older people (Layte *et. al.*, 1999; Garavan *et. al.*, 2001; Gabriel and Bowling, 2004; Scharf *et. al.*, 2004). There is currently a dearth of research in the Irish context on the real lived experiences, quality of life and needs of older people who are living in poverty. Studies that impinge on this area (e.g. Layte *et. al.*, 1999, O'Hanlon *et. al.*, 2005, Treacy, Butler, Byrne and Drennan, 2005) do not give positive indications, highlighting the need for further study and to explore this topic in the context of suitable policy responses.

### **Research Aims:**

The aims of this study are to:

- To identify and explore non-monetary factors that affect the quality of life of older people living in poverty
- To analyse the efficacy of existing policy from the perspective of older people
- To build on existing evidence and to inform an evidence-based policy making process.

### **Specific Objectives:**

- To consult with older people, living alone and on state pension, in order to identify what they consider to be non-monetary factors that influence quality of life
- To explore in particular the perceived importance of health, social and community supports and housing condition in achieving positive health and quality of life
- To explore the experience of social exclusion and how it impacts on health and quality of life
- To review existing health, housing, and social welfare policy with regard to provisions for older people
- To make recommendations for policies which will enhance the quality of life of older people in poverty.

**Methods:**

The study will employ qualitative methods, principally through the conduct of 40 interviews with older people. The interview schedule will focus on the lived experiences of the older person in relation to their social, health and community support needs and experiences and their current housing conditions. It will be devised based on a review of relevant literature (in particular the work of Gabriel and Bowling 2004; Layte *et. al.*, 1999; O'Hanlon *et. al.*, 2005), and informed by the model of quality of life offered by Brown et al (1996), incorporating three broad areas of life; being, belonging and becoming, and moderating variables that are either features on the environment or personal skills.

**Progress to Date:**

The interview schedule has been devised, piloted and refined and data collection is now complete. Forty two interviews were conducted, transcribed and data analysis is complete. The sample comprises older people living alone and reliant on state pension, including men and women, both urban and rural dwellers and reflects diversity of ages.

Themes emerging from the data analysis include:

- Adaptation to circumstances, low expectations, acceptance of limited activity and income
- Where there is loneliness, it impacts considerably on life quality
- The importance for life quality of services; day centers, 'Meals on Wheels', home helps
- The importance for life quality of social contact and perceived support.

**Key Reports & Publications:**

The final draft has been submitted to the funding agency and is at present being circulated to external readers. The report is expected in September 2007.

## **Children's Photographs of Well-being: Methodological Developments and Secondary Analysis**

**Principal Investigators:** Dr. Saoirse Nic Gabhainn and Dr. Jane Sixsmith

**Researchers:** Ms. Siobhan O'Higgins, Ms. Colette Fleming, Ms. Pauline Clerkin

**Funded by:** The Office of the Minister for Children & HSE

### **Background and Research Aims:**

The participative methodology developed for the original study of children's understandings of well-being, reported in earlier Annual Reports of the Health Promotion Research Centre, has stimulated considerable interest and debate and thus has been the subject of further validation studies as part of an on-going programme of research in the Centre. In addition, the data originally collected, comprising in excess of 5, 000 photographs (with written explanations of their content) from children has also sparked a number of subsequent secondary analyses.

The rationale for this work stems directly from the principles of health promotion, but also draws on literature from Children's Geographies and the Sociology of Childhood, and is an example of how the scientific rigour can be maintained while conducting standpoint research. Essentially it involves a genuine attempt to return the power within the research process to the participants, in this case, children. Thus children not only provide their own on-going consent and data, but also are fully in control of both the data analysis and data presentation phases.

### **Methodology:**

The first set of validation studies involved mirroring the process undertaken by children with two groups of adults. Both teachers and parents are frequently employed as proxy informants in relation to children's lives and well-being. In this first study, separate groups of primary school teachers and parents of primary school children worked together on the analysis and presentation of the data originally provided by primary school children. The similarities and differences between the two groups of adults are striking and contrast well with the original schema developed by children, illustrating the value of facilitating children to have their own 'voice'.

The second set of validation studies were conducted with the assistance of professional trained researchers and mirrored the procedures earlier adopted with children, parents and adults. In addition, a traditional researcher analysis, based on content analysis has illustrated the extent to which the approach to analysis as well as the participants involved substantially influences the way findings are reported, even when the key findings are broadly similar.

A series of secondary analyses of the original data set has also been underway and is on-going. This has included more indepth, text-based analysis of the way children describe the role of 'pets and animals', 'things to do' and 'places to go' in their wellbeing. Further detailed analysis of the data on food and the family have also been conducted.

The findings from the original study were included in the national set of indicators of child wellbeing, despite not being highly ranked by the adults expert delphi study participants' who primarily determined the content of the indicator set. Thus subsequent work has been conducted on developing and testing questionnaire items to assess sources of well-being that were ranked of high importance by children, such as 'pets and animals'. These new items were included in the HBSC Ireland 2006 questionnaire and it is intended that they will be included in the next state of the nation's children report.

### **Progress to Date:**

These secondary analyses are on-going, a number of papers have been submitted for publication or are in press and further developments of the method, using text rather than photographs as the original raw data can be seen in both the project on child-led development of indicators of success for health promotion in schools and the implementation of SPHE at school level, both reported in this volume.

### **Key Publications and Reports:**

Hanafin, S., Brooks, A-M., Carroll, E., Fitzgerald, E., Nic Gabhainn, S. & Sixsmith, J. (2007) Achieving consensus in developing a national set of child well-being indicators. *Social Indicators Research*, 80 (1), 79-104.

Nic Gabhainn, S. & Sixsmith, J. (2006) Photographing well-being: enabling children's participation in research. *Children & Society*, 20, 249-259.

Nic Gabhainn, S. & Sixsmith, J. (2005) Children's Understandings of Well-being. National Children's Office, Department of Health and Children: Dublin. ([http://www.nco.ie/upload\\_documents/s\\_Understanding\\_of\\_Well\\_Being.pdf](http://www.nco.ie/upload_documents/s_Understanding_of_Well_Being.pdf)).

## **The Middle Childhood Study: Health Behaviours in Context among 3<sup>rd</sup> and 4<sup>th</sup> Class Children.**

**Principal Investigator:** Dr. Saoirse Nic Gabhainn

**Researchers:** Dr. Colette Kelly, Dr. Michal Molcho, Dr. Kieran Walsh, Ms. Siobhan O'Higgins, Ms. Marie Galvin, Ms. Pauline Clerkin, Ms. Geraldine Nolan

**Funded by:** The Office of the Minister for Children

### **Background and Research Aims:**

One of the goals of the National Children's Strategy (Department of Health and Children, 2000) is that children's lives will be better understood. In pursuit of this, and in recognition of the Irish Government obligations under the UN Declaration of Human Rights for Children, the National Children's Office, established following the launch of the strategy, and latterly part of the Office of the Minister for Children, has embarked on a research programme to fulfil this goal. A dearth of information concerning children in middle childhood was reported by Fitzgerald (2003) in her review of data sources and quality on childhood in Ireland, and thus the collection of information on and from this age group has become a priority. During the planning phases for the third round of HBSC Ireland, it was agreed that the study would be expanded to include younger children, specifically those in 3<sup>rd</sup> and 4<sup>th</sup> class of primary school (ages 8-10 years).

### **Methodology:**

The Middle Childhood study mirrors the methods employed by HBSC Ireland, as described above. Thus the sample was obtained via primary schools, which were randomly selected, stratified for geographical region. The sampling unit was the school classroom. A number of pilot tests were conducted to ensure that the questionnaire for students was appropriate to the age group, but all items were based on the HBSC Ireland questionnaire for older children. In total 122 primary schools participated (response rate 73%), comprising a total of 3, 404 students.

### **Progress to Date:**

Following pilot and pretesting, data collection took place in April and May 2006. All data have been coded, inputted and cleaned and data analysis is on-going.

### **Key Publications and Reports:**

The first national report on HBSC Ireland (2006) will include comparable data from the middle childhood study and will be published in 2007.



## *Programme Design and Evaluation*



## Implementation and Evaluation of the Winning New Jobs Programme in Ireland

- Principal Investigator:** Professor Margaret Barry
- Researchers:** Ms. Colette Reynolds, Ms. Róisín Egenton
- Funded by:** The implementation of the WNJ project was funded by the European Union under the Programme for Peace and Reconciliation 2000 – 2004 (Peace 2) and part-financed by the UK and Irish Governments. The evaluation of this initiative was funded by the Health Promotion Unit of the Department of Health and Children, Dublin.

### **Background and Research Aim:**

This project concerns the implementation and preliminary evaluation of the Winning New Jobs Programme in Ireland. Based on the original JOBS Programme (Caplan, Vinokur & Price, 1997; Vinokur, Schul, Vuori & Price, 2000), this initiative targets job loss as one of the most consistent antecedents of depression, and involves the design and evaluation of a preventive intervention. The objective of the programme is to provide job seeking skills to promote re-employment and to combat feelings of anxiety, helplessness and depression among the unemployed. The JOBS Programme, which has produced very impressive results, has been implemented in a number of countries including the United States, China, the Netherlands, Poland and on a national scale in Finland (Vuori & Schul, 2002).

### **Method:**

The implementation of the Winning New Jobs (WNJ) programme in Ireland was piloted on a cross-border basis in collaboration with a range of training, employment and health agencies as part of the Rural Mental Health Project (Barry, 2003; Reynolds, Byrne and Barry, 2004). Part-funding for the training of trainers and roll-out of this programme was been provided by the EU Peace and Reconciliation (Peace 2) Programme and the evaluation was funded by the Health Promotion Unit at the Department of Health and Children.

The WNJ programme consists of five intensive, active and structured half-day workshops, totaling 20 hours of training, delivered by pairs of male and female trainers over a one to two week period. To date 31 trainers, from a diverse range of agencies across the health and training sectors, have been trained to deliver the programme. Some 24 training workshops were delivered in the Donegal and North West region and the Co. Derry/Londonderry district over an 18 month period. Based on the feedback from trainers and participants, the training manual utilised by the trainers has been adapted for the Irish context.

The research evaluation of the programme comprised a quasi-experimental design, with collection of data from workshop participants (the intervention group) and a comparison group of unemployed people from the same area who did not participate in the WNJ programme. In all, data were collected from 210 people in the intervention group, of which 44 were mental health service users, and from 192 people in the comparison group, prior to the training intervention and at 2 weeks, 4

weeks and 12 months post intervention. The average age of study respondents was 34 years, 59.2% were women and the average duration of unemployment was 4.2 years with 64% unemployed for 12 months or longer. In keeping with the original field studies, a wide range of measures was employed with both participants and trainers, using quantitative and qualitative methods. Employing regression analysis, the evaluation examines the programme's effectiveness in terms of its impact on re-employment and mental health related outcomes.

## **Results:**

The findings from the pilot implementation indicate that the programme was implemented successfully and led to improved psychological and reemployment outcomes for the intervention group, lasting up to 12 months post intervention. At 12 months follow-up 48% of the intervention group were employed in comparison to 17% of the comparison group. Significant improvements in job-seeking self-efficacy and inoculation against setbacks were evident for the intervention group. The implementation issues that arose in adapting an international evidence-based programme to the local setting are considered the implications of the evaluation findings for the roll out of the programme on a larger scale discussed.

This evaluation demonstrates the feasibility of replicating the WNJ programme in the Irish context with both long-term unemployed people and mental health service users. Comparisons with the findings of the Finnish study are drawn where appropriate. Currently, a consortium of agencies that were involved in the implementation of the JOBS programme has been formed to seek funding for, and plan the roll out of the programme on a national scale.



*Representatives from the Winning New Jobs Programme: L-R: Michael Scanlon (Employment Support Services), Jukka Vuori (Finland Institute of Occupational Health), Sean Debney (Donegal VEC), Seamus McGinley (Employment Support Services), Dr. Margaret Barry (NUI Galway), Colette Reynolds (NUI Galway), Bernie Quinn (Cookstown Volunteer Centre), John James McBride (WorkLink), Mary Phair (Employment Support Services), Anne Duffy (Antrim New Horizons), Bob Ferguson (Homefirst Community Trust), Stephanie Cmapbell (WEA), Marie Heffrom (Homefirst Community Trust)*

## **Key Reports & Publications:**

Reynolds, C. (2006) *Evaluation of the JOBS programme in Ireland: promoting the health of the unemployed*. Unpublished PhD thesis, NUI, Galway.

Barry, M.M. Reynolds, C., Sheridan, A. and Egenton, R. (2006) Implementation of the Jobs programme in Ireland. *Journal of Public Mental Health*, Vol 5 (4) 10-25 (in press).

Barry, M.M. Reynolds, C. and Egenton, R. (January, 2005) *Preliminary Findings for the "Winning New Jobs" Programme in Ireland*. Centre for Health Promotion Studies, NUI, Galway.

## Evaluation of the North West Regional Mental Health Promotion Strategy and Action Plan (2005-2010)

**Principal Investigator:** Professor Margaret Barry

**Researchers:** Ms. Kathryn Meade, Dr. Dhammica Rowel

**Funded by:** The Health Promotion Department, HSE North West

### **Background:**

This research is concerned with supporting the development and evaluation of an evidence-based strategy for the delivery of mental health promotion in the North West region. The Mental Health Promotion Strategy provides a framework for the promotion of positive mental health in the North West region and includes the development of a five year Action Plan to run from 2005-2010. The Strategy and Action Plan were developed by a Regional Working Group, which included representatives from various health board departments, community and voluntary organisations, and service users. The Working Group was chaired by Professor Margaret Barry and the research contributed to establishing a strong evidence-base to guide the focus and direction of the development of the Strategy and to ensure that the planned interventions were based on best available evidence.

The Mental Health Promotion Strategy outlines a plan of action covering eight priority areas, including five population groups and three key settings:

- Early years (0-4 years)
- School aged children (5-12 years)
- Teenagers (13-18 years)
- Older people
- Mental health service users
- Primary care
- Workplace
- Community.

### **Method & Results:**

A system of monitoring and evaluation was put in place in order to track progress on implementation of the Strategy and to support and inform the development of best practice. A report and presentation of the findings on year 1 progress was produced for the Strategy Implementation Group and a template for tracking progress was prepared for the group.

The research programme has also supported the evaluation of specific initiatives including the following:

- Implementation of the Restorative Practice project in schools in the North West region
- Evaluation of the Spunout Website for young people ([www.spunout.ie](http://www.spunout.ie))
- Evaluation of 'The Guide – The Ultimate School Journal' (3<sup>rd</sup> edition School Journal).

**Key Reports & Publications:**

Meade, K., Rowel, D. and Barry, M.M. (2006) *Evaluation of 'The Guide – The Ultimate School Journal' (3<sup>rd</sup> edition School Journal)*. Health Promotion Department, HSE North West and Centre for Health Promotion Studies, NUI, Galway.

*Mental Health Promotion Strategy & Action Plan 2005-2010*. (2005) North Western Health Board.

## Evaluation of the Youth Led Emotional Well-being Project ‘Getting it Together’

<b>Principal Investigator:</b>	Professor Margaret Barry
<b>Researchers:</b>	Ms. Kathryn Meade, Dr. Dhammica Rowel
<b>Funded by:</b>	CAWT (Co-operation and Working Together) Mental Health Sub-group

### **Background:**

This study concerns the evaluation of a cross border initiative led by the CAWT (Co-operation and Working Together) Mental Health Sub-Group on the promotion of positive mental health among young people aged 16-25 years. Over a six month period, the Getting it Together project worked with a group of 12 young people from both the Republic and Northern Ireland in building their understanding of emotional well-being and developing a youth friendly, needs-led resource. The structure of the Getting it Together project was determined by the participants themselves and the project was run within the existing CAWT youth participation framework. The National Children’s Bureau (NCB) was commissioned to undertake the development of this youth-led initiative. The evaluation study examines the process and impact of the project on the participating young people and more generally, the extent to which the project achieved its aims and objectives.

### **Aims of the Getting it Together Project:**

The Getting it Together project aimed to develop a youth friendly resource to promote emotional well-being which would be designed and delivered by young people for young people. In accordance with the principles of peer-led health promotion programmes, the Getting it Together project set out to achieve the following objectives:

- To work with a representative group of young people, already engaged in youth participation (or like) initiatives, build their understanding of emotional well-being, and to facilitate them to develop a youth friendly, needs led resource, which takes account of existing research evidence
- To identify opportunities for young people to pilot the resource with their peers and support other young people to use or deliver it
- To contribute to the evaluation of the impact of the resource, amend it as needed and print the final resource
- To plan for further dissemination of the resource.

The project set out to create a space within which a group of 12 young people could develop a resource, which promotes emotional well-being in a youth friendly manner, and is suitable for use by young people across the CAWT region. The Getting it Together project was implemented over a six month period in the form of two residential weekends and three training meetings, which were facilitated by the NCB project team. During this period, working in partnership with the young people, a resource was successfully produced. The resource consists of a series of messages on young people’s emotional well-being written by the project participants for three target groups; young people, adults and service providers. Posters and discussion



cards on emotional well-being were also developed for use in group work activities. Eight of the young people were trained as peer educators and went on to pilot the resource successfully with their peers. In this respect one of the main aims of the project was achieved. The resource was successfully developed and piloted with direct input from young people and was designed to be youth friendly.

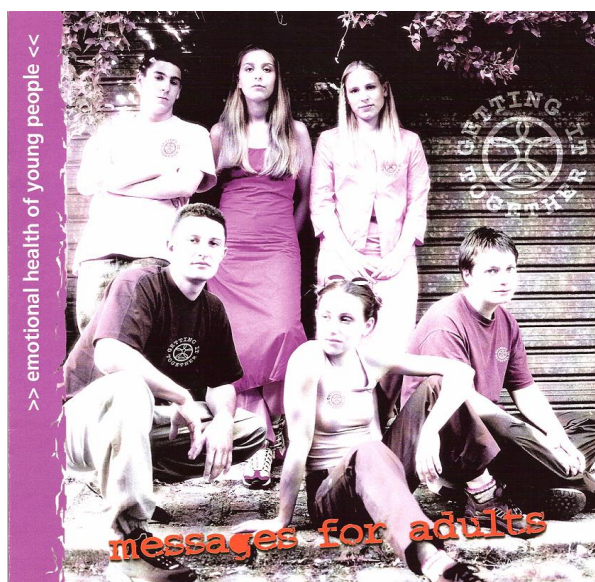
### **Evaluation Methodology of the Getting it Together Project:**

The evaluation set out to determine to what extent this peer-led programme on emotional well-being achieved its aims and objectives. Using a qualitative participatory approach, the evaluation documented the process and impact of developing and implementing the youth-led emotional well-being project. It was agreed that the evaluation would be incorporated as an integral part of the process of programme development. The evaluation of the project was carried out in a series of stages and a range of different methods were used at each stage of the evaluation process. These stages are outlined in Table 1.

Table 1: Evaluation Stages of the Getting it Together Project

Stage	Objective
Stage 1	Establishing pre-intervention perceptions and expectations of the young people
Stage 2	Identifying models of best practice and effective action plans
Stage 3	Documenting the process of programme development and partnership working
Stage 4	Evaluating the impact of the process implementation of the resource
Stage 5	Determining the impact of the project on participating young people and Advisory Group

The evaluation findings are presented in two phases: Phase 1 aimed to evaluate the process and impact of developing the youth-led emotional well-being resource with twelve project participants. This phase of the project was undertaken from February 2006 to August 2006. Phase II was carried out following the development of the resource and sought to evaluate the pilot implementation of the resource by the peer educators with other young people in different settings in the CAWT region. This phase of the project was conducted from September 2006 to November 2006. The findings from Phase 1 were prepared as a report, which were presented to the CAWT Project Advisory Group in September, 2006.



### **Key Reports & Publications:**

Meade, K., Barry, M.M. and Rowel, D (2006) *Evaluation of the Youth Led Emotional Well-being Project 'Getting it Together'*. Unpublished Report, Health Promotion Research Centre, Department of Health Promotion, NUI, Galway.

## Exploring the use of Experiential Learning Workshops and Reflective Practice for Developing Professional Practice among Postgraduate Health Promotion Students

**Principal Investigators:** Dr. Claire Connolly, Ms. Mary Cronin

### **Background and Research Aims:**

Students enter post-graduate health promotion courses from a wide range of disciplines; some have an established sense of professional practice, however many have yet to develop this. The concept of developing a professional practice based on principles such as empowerment and participation is new to many, as is the need to consider their personal and professional values in the context of health as a political issue. Health promotion educators must strive to ensure that post-graduate curricula prepare students for entry to this complex area of work, whilst also providing an excellent academic education.

St Ledger, in a challenging commentary in 2001, questioned whether students of health promotion were in receipt of education which emphasised “instrumental learning and, occasionally, interpretive / communicative learning” but “rarely critical / emancipatory learning”.

While many courses in Britain now dedicate significant time to professional development, publications in this area continue to be relatively rare; in Ireland post-graduate health promotion courses have been changing more slowly. This research process took cognisance of the thinking of these health promotion/public health leaders and attempted to respond through the introduction of Experiential Learning Workshops and Reflective Practice. It presents a research based approach to the design, pilot implementation and evaluation of Experiential Learning Workshops and Reflective Practice as two methods of facilitating professional practice development. The research was undertaken on the Masters/Higher Diploma in Health Promotion, delivered by the Department of Health Promotion at the National University of Ireland, Galway (NUIG).

### **Aims and Objectives:**

The pilot process had two aims:

1. To design, pilot and evaluate new methods for inclusion in a comprehensive, post-graduate professional practice development module.
2. To provide students with a foundation for professional health promotion practice.

As the new methods were piloted in conjunction with the practice placement and the placement presentation the following objectives were identified.

On completion the student will:

- a. Have explored and begun to practise the knowledge, skills and principles necessary for health promotion practice.

- b. Understand the meaning of reflective practice, have gained experience in reflection using both individual and group methods and be prepared to develop strategies for its regular inclusion in her/his practice.
- c. Have gained relevant work experience in the field of health promotion and have presented on the experience to colleagues.

### **Conclusion:**

The research was undertaken with a view to considering the usefulness and appropriateness of using the methods of Experiential Learning Workshops and Reflective Practice in providing a foundation in professional practice based on health promotion principles and critical thinking, among post-graduate health promotion students. The ELWs were well liked by students and assisted their acquisition of practice related skills, knowledge and confidence. While aware of the challenges of RP we are of the belief that RP's advantages outweigh its limitations some of which can be managed through choice of methods. The educational setting provides students with a guided introduction to RP and it can become part of their formation as health promotion practitioners. The study provided evidence that students can be facilitated to adopt the principles of health promotion; however this must be regarded as a process and must be given attention throughout the course. The adoption of principles and the use of RP have the potential to support their sense of commitment and direction in the context of profound local, national and international changes over the course of their career.

As introduced in this study Experiential Learning Workshops and Reflective Practice compliment each other and have the potential to add value to a practice placement. They provide health promotion educators with opportunities to facilitate students to construct a personal commitment to health promotion practice which is focussed on ameliorating health inequalities and promoting more equitable societies. On the basis of this study we recommend their use in the development of professional practice with post-graduate health promotion students.

### **Key Reports & Publications:**

Paper accepted for publication.

## An Evaluation of the Drugs Media Campaign

- Principal Investigators:** Dr. Jane Sixsmith, Dr. Saoirse Nic Gabhainn
- Researchers:** Ms Maureen D'Eath, Ms. Siobhan O'Higgins, Dr. Evelyn Stevens, Ms. Pauline Clerkin, Mr. Michael Keogh
- Funded by:** The National Advisory Committee on Drugs (NACD)

### Background:

The National Drugs Strategy 2001- 2008 (Department of Tourism, Sport and Recreation, 2001) aims to, 'significantly reduce the harm caused to individuals and society by the misuse of drugs' (p.8) through the four 'pillars' of supply reduction, prevention, treatment and research. A key objective cited in relation to prevention is to create a greater awareness of the dangers and prevalence of drug misuse through the specified action (38) of a mass media campaign. A National Awareness Campaign was launched in May 2003 with the aim of highlighting the facts about drug misuse and increasing awareness of current drug problems facing society.

### Research Aim and Objectives:

The aim is to track the process of the National Drugs Awareness Campaign and to evaluate its development and delivery.

Research Objectives were:

- To assess the effectiveness of mass media campaigns in drugs prevention and harm reduction interventions
- To make explicit the development process for the National Drugs Awareness Campaign (2003/5)
- To determine how the aims of the awareness campaign were interpreted and negotiated by the stakeholders
- To assess the usefulness of the resource materials
- To assess the perceived effect on the uptake of drug services
- Identify aspects of the campaign that were most supportive in realizing campaign aims
- Assess the contribution of the audience segmentation techniques to campaign effectiveness
- Link the campaign with ongoing NACD research activities.

### Progress to Date:

Semi structured interviews were conducted with key stakeholders during 2003, 2004 and 2005. In addition documentary data related to campaign development and progress were collected from a range of informants. Both sources of data have been included in Annual Progress Reports and the second draft of the final report has been submitted to the NACD. Full findings are not yet available.

### **Key Reports & Publications:**

D'Eath, M., Sixsmith, J., Stevens, E. & Nic Gabhainn, S. (2005) *The Development Process of the National Drugs Awareness Campaign Phase 3*. Report to the National Advisory Committee on Drugs, Dublin.

Sixsmith, J. & Nic Gabhainn, S. Phase 1: Clerkin, P., Stevens, E. & Keogh, M. Phase 2: Clerkin, P. & Stevens, E. Phase 3: D'Eath, M., Stevens, E. & O'Higgins, S. (2006) *A Review of the Literature on the Effectiveness of Mass Media Campaigns for Drug Prevention and Harm Reduction and A Process Evaluation of the National Drugs Awareness Campaign 2003/5*. Draft 2. Final Report to the National Advisory Committee on Drugs.

## Evaluation of Specialist Certificate in Health Promotion (Oral Health)

**Principal Investigator:** Dr. Margaret Hodgins, Dr. Claire Connolly

**Researcher:** Ms. Therese Costello

**Funded by:** Dental Health Foundation

### **Background:**

The Specialist Certificate in Health Promotion (Oral Health) has been in existence since 1999. It was initiated by the Dental Health Foundation in its response to the Department of Health and Children's 1994 Dental Health Action Plan. It was developed in collaboration with the Department of Health Promotion, National University of Ireland, Galway, and the Society of Chief and Principal Dental Surgeons in Ireland. Funding support was provided by the Health Promotion Unit, Department of Health and Children, to establish the development and inaugural year of the programme. The course is provided by the National University of Ireland, Galway, and the Dental Health Foundation. The 12-month part-time course aims to provide participants with a professional education and training in the principles and practice of oral health promotion.

### **Research Aims:**

The aim of this evaluation was to determine the effectiveness of the Specialist Certificate in Health Promotion (Oral Health) in providing graduates with the professional education and training required for the practice of oral health promotion.

Specific objectives were:

- To explore the opportunities that graduates have availed of in applying different health promotion approaches and strategies across diverse population groups in relation to oral health
- To explore the factors that graduates perceive to influence the practical application of oral health promotion approaches and strategies in graduates' work settings
- To determine graduates' perceptions of the influence of the course on their personal levels of self-confidence to perform oral health promotion practices
- To identify the career pathways taken by graduates of the course.

### **Method:**

A survey methodology was employed for this evaluation involving graduates who have completed the course to date. A structured questionnaire comprising of open and closed questions, was developed and pre-tested with a random sample of 5 graduates from the sample population. The final survey questionnaire contained six short sections which were developed to reflect the objectives of the evaluation. A 57% response rate was achieved.

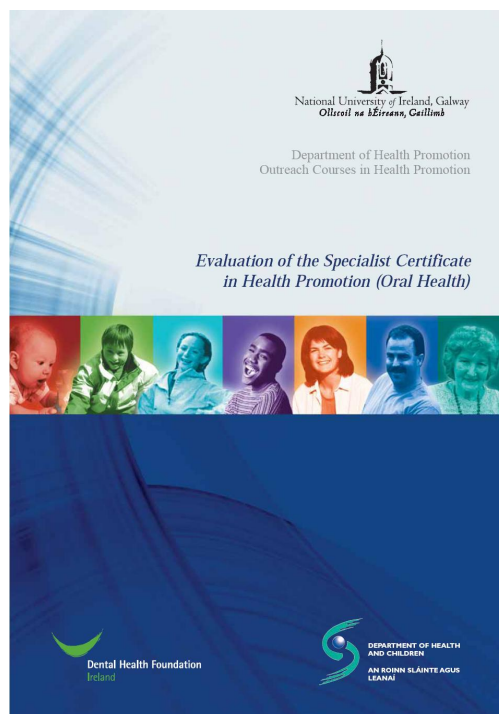
## Results:

Results demonstrate that the course is predominately taken up by women in the 35-54 age group, the majority of whom are Dental Nurses. ‘Public Dental Practices’ and ‘Schools/Education’ are the main areas identified by respondents as the settings where they provide oral health promotion, with children being the most popular population group in receipt of health promotion services from the respondents. The majority of the respondents perceived their oral health promotion practices to have changed toward a more holistic, lifestyle change and client empowering approach as a result of their learning from the course. This was also reflected in comments from respondents in relation to changes in their knowledge, attitudes, behaviours and confidence levels. Respondents also noticed improvements in their clients’ knowledge, attitudes, behaviours and self-efficacy as a result of these changed practices but progress was perceived to be slow moving. Resources, time and support from colleagues were experienced by respondents as being the main determinants of the use of health promotion methods and activities. A lack of these determinants in some workplaces and settings has resulted in an exclusive practice emphasis being placed on the treatment of dental caries and periodontal disease. These findings are consistent with the results of the report ‘Oral Health in Ireland’ (Department of Health and Children, 2003). Additionally respondents indicated that “having a personal interest in the topic” and using the qualification to “enhance employment prospects” were the biggest influencing factors in all of their decisions to undertake the course. The survey reveals that 19% of respondents have subsequently been promoted since qualification.

Overall, there were positive and encouraging comments made in relation to the effect that the course has had on graduates oral health promotion knowledge and practices. From the findings of this evaluation, it is suggested that the determinants of oral health promotion within individual workplaces, settings and population groups are looked at and addressed where deficits are identified. As an improvement for the course, respondents have suggested that a practical element be introduced demonstrating the theoretical application of health promotion to the field of oral health.

## Key Reports & Publications:

Final Report forthcoming.



## Case Studies for Health Promotion

**Principal Investigator:** Dr. Margaret Hodgins, Dr. Claire Connolly

**Researcher:** Ms. Therese Costello

**Funded by:** Centre for Excellence in Learning and Teaching (CELT), NUI, Galway

### **Background:**

The M.A./Higher Diploma in Health Promotion place a strong emphasis on the application of health promotion theory to practice. Case studies will enhance student's understanding of real practice issues and difficulties and will prime them to take a considered and a problem solving approach to their professional practice. It is intended that the case study material will compliment the problem-based learning approach currently taken on one of the modules of the programme. The integration of problem-based learning and the development of case studies are part of the Department of Health Promotion's Strategic Plan to provide multi-disciplinary education and training that is flexible, accessible and relevant.

### **Research Aim and Objectives:**

The aim of the project was to develop ten dedicated case studies for use on the M.A./Higher Diploma Health Promotion.

The objectives of the project were to:

- Meet with lecturers and tutors to assess their interest and use of case study materials and identify further topics for development
- Source health promotion case studies in literature and examples from practitioners, and assess their applicability
- Write case studies where no appropriate case studies exist.

### **Methods:**

A meeting was conducted with teaching staff from the Department of Health Promotion and feedback was received in relation to modules and their case studies which were currently being used. It was recommended that the updating of some case studies in use was necessary, in addition to the need for the development of case studies in relation to other modules. Suggestions for content, literature material and case studies were provided by some teaching staff to aid in the development of the pack of case studies. To obtain examples of real practice issues and difficulties, informal meetings were arranged with Health Promotion practitioners of HSE West. Ideas suggested by staff were adapted, to maintain anonymity of individuals, and developed into case studies.

### **Results:**

At the end of the project, the number of case studies sourced, adapted or developed, and available for teaching staff has exceeded the 'ten dedicated case studies' initially set out in the aim. Learning objectives and notes for use are available to teaching staff in relation to each case study.



## Indicators of Health for Health Promoting Schools: Child Developed Models

**Principal Investigators:** Dr. Saoirse Nic Gabhainn and Dr. Jane Sixsmith

**Researchers:** Ms. Siobhan O'Higgins, Ms. Ellen-Nora Delaney, Ms. Miriam Moore

### **Background and Research Aims:**

A series of workshops, the first held in 1998, looking at the fundamental difficulties inherent to evaluating the promotion of health in schools have been hosted by the World Health Organisation (WHO). At the 'Fourth workshop on practice of evaluation of the Health Promotion School (HPS) - concepts, indicators and evidence' the focus was on issues relating to the setting of indicators. Representatives from 33 countries participated in workshops discussing indicators and one of the conclusions was that a set of and framework for basic common indicators is required (Rasmussen, 2005). Teams of researchers were encouraged to work on the development and measurement indicators at the individual, school, regional, national or international level. The need for student participation when developing indicators was identified by some of the representatives present. This project is based on the Irish and Scottish team's contribution to that process.

### **Methodology:**

This research took place in three secondary schools, single sex boys, single sex girls and co-educational. All students involved were in transition year (age 16-17 years). The first stage involved gathering textual data based on individual students responses to two questions "*What is it about school that affects your health?*" and "*If you moved to a new school, what would it need to have to be a healthy place?*" Both questions were placed on the black or white board in classrooms. Students wrote their responses on cards, using a separate card for each answer or new idea. Stage two involved data categorisation with students from a second class group, divided into two sub-groups. Each of the sub-groups was given half of the cards generated at stage 1, and was invited to play the 'snap' game to develop categories. The third stage involved data presentation by the third class group, also divided into two sub-groups. The students were given the question, response cards and category titles developed during the two previous stages. The students were invited to consider how the categories could be arranged or organised into a pattern, on double A1 posters. They were not explicitly asked to order them in any way or place them in a hierarchy. Students read the stapled bundles to aid their understanding of the category titles. When the groups were satisfied with their category arrangement, they affixed the category title cards onto the posters with tape, some sub-groups also wrote their own comments on the posters, or linked the category titles with arrows.

### **Progress to Date:**

All data were collected and analysed during the Spring term of 2006, and both the feasibility of the process and the findings were reported back to the 5th evaluation workshop in Switzerland in June 2006. A report on proceedings is in press.

### **Key Publications and Reports:**

O'Higgins, S., Delaney, E-N., Moore, M., Inchley, Sixsmith J. & Nic Gabhainn, S. (2006) Development of a method for student's participation: An example from the Republic of Ireland. *Report to the ENHPS, WHO European Office, Copenhagen.*

Moore, M. (2006) *Developing child-led indicators of Health Promoting Schools.* Unpublished MA thesis, Department of Health Promotion, NUI Galway

Delaney, E. (2006) *Developing child-led indicators of Health Promoting Schools.* Unpublished MA thesis, Department of Health Promotion, NUI Galway.

## The Implementation of SPHE at Post-Primary School Level: A Case Study Approach

**Principal Investigators:** Dr. Saoirse Nic Gabhainn and Professor Margaret Barry

**Researchers:** Ms. Siobhan O’Higgins, Ms. Marie Galvin, Ms. Catriona Kennedy

**Funded by:** National SPHE Partnership Committee

### **Background and Research Aims:**

In April 2000 the Department of Education and Science approved the Junior Cycle Social, Personal and Health Education (SPHE) syllabus (M22/00). SPHE was designed to match with and facilitate the educational principles that underpin the Junior Cycle (JC) and all post-primary schools were advised by circular (M11/03) that SPHE must form part of the core curriculum of Junior Cycle by September 2003. In September 2000 the SPHE support service (post-primary) was put in place. The support service takes the form of a partnership between the Departments of Education and Science and Health and Children and the Regional Health Boards (now HSE).

Research conducted so far on SPHE has been provided by members of the SPHE support services (both Health Promotion Officers and Regional Development Officers), teachers in receipt of SPHE training, SPHE teachers in school, non-SPHE teachers and Principals. Two of the key stakeholders in the SPHE process have not been involved: students and parents. Given the approaches inherent in the recent policy documents on both parents (Investing in Parenthood: the Supporting Parents Strategy, Best Health for Children, 2002) and children (National Children’s Strategy, Department of Health and Children, 2000), it is timely that these two sets of voices are given the opportunity to contribute their opinions. It is timely to explore the perspectives of parents and students as separate groups of stakeholders. However, of central relevance, in the context of the school as a setting for working, learning and living, is that all educational stakeholders, involved in each individual school, have the opportunity to participate in the production of a holistic picture of their school.

### **Methodology:**

Twelve schools were considered as separate units in order to examine the relationship between the various factors that might have an effect on SPHE within schools. Each were randomly selected using a modified Latin Squares design which included consideration of the school size, gender of students, whether the school had been designated disadvantaged and whether it was in an urban or rural area. The case study approach employed in this study used mixed methodologies, including interviews, questionnaires and participatory methods of data collection. These methods elicited a rich variety of opinions from students, teachers, parents and SPHE Support Services staff on their perceptions of SPHE at present and their aspirations for its future. The focus for exploration concentrated on five main themes:

1. Teacher and parent perceptions of the quality of SPHE provision as well as student, teacher and parent perceptions of the value of SPHE provision

2. Perceived contribution of SPHE to the educational experience, health attitudes and behaviours of students from the student, teacher and parent perspectives
3. Stakeholders' perceptions of how SPHE is supported in their school, through inclusion in planning processes and the structures, policies and roles that promote SPHE implementation in the school; perceptions of teachers of their own competence and confidence in teaching SPHE; the extent to which SPHE complements the work of other school personnel
4. Parental expectations of SPHE for Junior Cycle students and perceptions of schools' consultation with parents, teachers and students in relation to SPHE as well as how schools create links with community, Support Services and outside agencies to support SPHE
5. Perceptions of how SPHE can be built on in Transition Year and Senior Cycle.

**Progress to Date:**

All schools were successfully recruited and data collection took place during the school year 2005/6. Data analysis and integration have also been completed and recommendations drawn up. The draft report is under consideration by the SPHE management committee.

**Key Publications and Reports:**

Publication of the SPHE Implementation report is expected during 2007.

*Health Services Research*



## Monitoring Health Equity

**Principal Investigator:** Dr. Diarmuid O'Donovan

**Researchers:** Dr. Lisa Pursell, Dr. Noreen Kearns

**Funded by:** HSE West

### **Background and Research Aims:**

The aim of this study is to develop policy oriented systems for the monitoring of equity in health and its determinants. This study will explore, develop and refine research methodologies to examine the following issues:

- The development of a conceptual framework for monitoring equity in health and healthcare in Ireland
- The requirements for health equity audit in the west of Ireland.

### **Objectives:**

- To explore the essential components for monitoring equity in health and healthcare in Ireland, and for piloting health equity audit in the West of Ireland
- To review existing and proposed indicators and measures in terms of their content, data requirements and ability to meet current demands for monitoring equity in health (including its broader determinants) and healthcare (including barriers to accessing healthcare services)
- To identify and evaluate existing surveys, studies and administrative data in relation to their comprehensiveness, comparability with other sources, disaggregation, coverage, timeliness, accessibility, etc.
- To identify current limitations and gaps in indicators of health equity and to examine how these could be met
- To pilot a framework for health equity monitoring in the West of Ireland in specific social groups that can meet future policy needs at regional level arising from new social and equality policy developments
- To determine appropriate routes for feedback of information derived from this process to the public and to the policy makers.

### **Methods:**

The project is linked with the Health Poverty Index Working Group convened by the Institute of Public Health in Ireland (see below).

- Literature review
- Review of indicator sets used in monitoring health equity in other countries to assess applicability in Ireland
- Review of policy relevant to these indicators.

## **Results:**

### Monitoring Systems

An extensive literature search has been undertaken to review the approaches, conceptual and theoretical basis of systems for monitoring and measuring health equity in other countries.

### Indicator Sets

A number of indicator sets have been examined in order to evaluate the availability of measures for health equity indicators in the Republic of Ireland. These include the

- Health equity indicator set used by the Belfast Investing for Health, Healthy Cities and EHSSB 'Tools for Action'
- Northern Ireland Health and Social Care Inequalities Monitoring System (NI H&SCMS)
- English Health Poverty Index (eHPI)

These indicator sets are being evaluated with respect to a range of criteria including accessibility, validity, timeliness, measurability, and relevance to current issues in the community and to policy context in Ireland.

### Datasets and Data Sources

Social determinants of health and health equity indicators used in monitoring systems in other countries have been compared, and a database is being maintained to link different indicators used. Links within this database are based on:

- Information concerning datasets in Ireland (i.e. disaggregation information) is linked to the dataset source or creators and routes of contact
- Information concerning indicator sets and component measures is linked to datasets and sources in terms of the numerators and denominators of each measure.

### Policy Context Review

The aim of the policy context review was to explore the relevance of the theoretical basis of the indicator sets to Ireland. For this purpose, desk research was undertaken, examining documentary evidence in the relevant literature, reports and web sites with respect to each of the component measures of indicator sets.

Common criteria for each measure were considered in terms of their Irish policy context. For each component measure this involved:

1. Reviewing of relevant current Irish strategies
2. An outline of specific relevant policy targets
3. A detailed description of the relevant policy context.

### **Exploring Appropriate Feedback Mechanisms:**

Consultations have been undertaken with INIsPHO at the Institute of Public Health in Ireland concerning routes of access to information and potential feedback mechanisms at a National level for health equity monitoring tools. A manual setting out information regarding the accessibility of data for indicators of eHPI and the NI H&SCMS within the RoI is currently being compiled in collaboration with the Institute of Public Health in Ireland.



Involvement of community groups in the process of indicator selection and effective feed back of health equity information has been explored through contacts with the local Community Forum.

**Database:**

Inventory of indicators and datasets for monitoring health equity in Ireland

**Key Reports & Publications:**

Pursell, L., Kearns, N., O'Donovan, D. (2006) *Local inequality indicators for the health and well-being of Ireland: A review of the data issues and policy context for selected data indicator sets. Interim Report.* Health Promotion Research Centre, NUI, Galway and Institute of Public Health in Ireland. November 2006.

Pursell, L. (2006) Developing health equity monitoring and health impact assessment at the local level *Annual Conference of the Directors of the Community Development Boards.* Athenry, Galway Feb 2006.

Pursell L, Kearns, N, O'Donovan, D. (2006) *Local Equity Indicators. A preliminary indicator set for the development of an Irish Health Poverty Index (iHPI)*, Institute of Public Health in Ireland, Dublin. August 2006.

## Health Services Research

**Principal Investigator:** Dr. Diarmuid O'Donovan

**Researcher:** Ms. Akke Vellinga

**Funded by:** HSE West

### **Activities:**

#### Hospital In Patient Enquiry

Modelling hospital admissions in Ireland to investigate effects of the smoking ban: analysis of data on admissions for respiratory conditions, otitis media and myocardial infarctions over time. Several time series methods are being explored.

Consultants and procedures. The uses and limitations of routinely collected data are investigated to explore the possibilities to use Hospital In Patient Enquiry (HIPE) for quality surveillance.

#### Road Deaths:

Analysis of fatal crash data collected from the Garda police files to investigate the influence of alcohol on fatal road crashes.

### **Key Reports & Publications:**

Bedford, D., McKeown, N., Vellinga, A., Howell, F. (2006) *Alcohol in Fatal Road Crashes in Ireland in 2003*. Report for the HSE, October 2006

## **Towards the Development of a Sexual Health Strategy for the HSE Western Area**

**Principal Investigators:** Dr. Saoirse Nic Gabhainn and Dr. Jane Sixsmith

**Researchers:** Ms. Siobhan O'Higgins and Ms. Eimear Cotter

**Funded by:** Department of Public Health, HSE Western Region

### **Background and Research Aims:**

The HSE Western Area has identified the need to promote safer sexual health. While, there are gaps in the HSE knowledge of the sexual health status of the regional population it has been highlighted that there are areas of unmet healthcare need in the region. In order to document and prioritise the needs and to develop appropriate responses an empirical study employing the Delphi technique was undertaken to contribute to the development of a regional sexual health strategy. The development of regional sexual health strategies is identified in national health policy documents (Department of Health and Children, 2000). This study investigated sexual health service providers and representative's views and opinions on what is important and relevant to include in such a sexual health strategy in order to plan for comprehensive, accessible and confidential services to improve and promote sexual health that is relevant to service users and providers statutory, voluntary, and non-statutory within the region.

### **Methodology:**

The Delphi process is a multistage process whereby each stage builds on the results of the previous stage and a series of repeated questionnaires or rounds is used to both gather and provide information about a particular subject. The objective is to both measure and achieve consensus on the opinion of a group. The application of the Delphi technique in this study comprised three separate stages. The first consisted of semi-structured interviews with a purposive sample of 17 participants involved in the promotion of sexual health who identified goals, objectives and actions which could potentially be included in a sexual health policy. The potential areas of inclusion were formulated into tables. The second stage involved the distribution of the tables to 58 participants, identified through snowball sampling from stage one, who ranked the importance of the items. Analysis of the data determined both the importance and the degree of consensus achieved through calculation using a median rank. Consensus was determined using a formula for the semi-interquartile range  $(Q3-Q1)/2$ . In stage three these results were returned to participants who were asked to re-rank the items.

### **Conclusion:**

The process successfully identified the perceived areas that are relevant to include in a sexual health strategy for the HSE Western Area. The goals that emerged from the interview stage of this Delphi study concur with the goals set out in various national policies outside of Ireland and in regional Irish strategies and cover services provision, accessibility, responsiveness, information provision, sexual health education and training.

### **Progress to Date:**

A second draft of the final report has been submitted and a paper based on the study is in preparation.

**Key Publications and Reports:**

Cotter, E., O'Higgins, S., Nic Gabhainn, S. & Sixsmith, J. (2006) *A sexual health policy for the west: developing consensus on goals, objectives and actions*. Report to the Public Health Department, HSE Western Area, Galway

O'Higgins, S., Nic Gabhainn, S. & Sixsmith, J. (2005) *Perspectives on the provision of sexual health services to sex workers*. Report to the Good Shepherd Sisters, Galway.

## Perceptions of the Student Counselling Service at NUI, Galway

**Principal Investigators:** Dr. Saoirse Nic Gabhainn, Dr. Bea Gavin (Counselling Service, NUI, Galway), Dr. Vivienne Batt (Women's Studies Centre, NUI, Galway)

**Researchers:** Ms. Maureen D'Eath, Ms. Marie Galvin

**Funded by:** HEA Strategic Initiatives Fund

### Background and Research Aims:

It is accepted within the field of university counselling, that counselling services need to go beyond providing therapeutic services for a relatively small group of students to playing a more proactive and developmental role (HUCCS, 2002a). Counselling is part of a whole range of initiatives and services that exist to enhance the attractiveness of a university to potential students and to support and retain those already attending. The Student Counselling Service in NUI, Galway is part of the Student Services team. It offers a free service to students and defines its role as *"to assist students of all abilities who have a serious difficulty in their life at University and in doing so reduce the risk of student drop-out"* (Student Services, 2005). The types of service activities that are provided comprise: short term individual support for distressed students, longer term support for students generally at risk of dropping out, or of self-harm or self-destructive behaviour, initial assessment appointments and emergency appointments, and long term or short term group work.

One of the recommendations of quality review process of Student Services (2004) suggested the setting up of facilitated informal 'issue groups' involving staff and students to identify reasons for the latter's expressed lack of confidence in the Counselling Service. In response, Student Services question this perception but agreed that, if there was such deterioration in confidence, this should be addressed. In recent years, various research projects have looked at the Counselling Service in the context of other Student Services but the diverse aims, methodology and sampling of the studies makes comparison of findings problematic.

### Methodology:

This study comprises three parts; an analysis of the most up-to-date data on service users, a cross sectional survey of students and a series of interviews with University staff. The qualitative aspect of the study involved the gathering of the views and perspectives of 16 members of the management, academic and administrative sections of the University, as nominated by the steering committee. The interview schedule focussed on perceptions of the role and operation of the Counselling Service in NUI, Galway, experience of referring students to the service, suggestions for the future of the service and barriers to the implementation of developments. The interviewees were also asked how the University staff viewed the Counselling Service and what initiatives might make the service more effective.

Students were surveyed by means of a self-administered questionnaire that was designed to provide the following information:

- The relative level of awareness of Student Services
- Sources of information used
- Perceived sources of help for a range of problems
- Perceptions about the usefulness of counselling in general
- Awareness of the types of counselling available
- Perceptions about the extent to which fellow students are well informed about and their opinion of the Counselling Service in NUI, Galway
- Barriers to using the Counselling Service in NUI, Galway
- Suggestions for improvements to the service.

### **Progress to Date:**

All data have been collected, inputted, coded and analysed. In total 16 members of staff were interviewed. Quantitative data were collected by questionnaire from a total of 1,412 students, across all faculties, and including first, final year and post-graduate students. Findings were analysed under the headings: profile of respondents, awareness of Student Services, sources of information, sources of help and perceptions of the student Counselling Service at NUI Galway.

A full and summary report have been completed, and recommendations stemming from this project have been developed in conjunction with the project advisory committee and staff of the NUI Galway Counselling Service.

### **Key Publications and Reports:**

Nic Gabhainn, S., D'Eath, M., Batt, V. & Galvin, M. (2006) *Perceptions of the NUI Galway Counselling Service*. Report to the NUI Galway Counselling Services / NUI Galway Vice-President for Student Services.

Nic Gabhainn, S., Batt, V. & Gavin, B (2006) Supporting third level students: Diversity requires flexibility Poster presented to the *Annual Conference of the Psychological Society of Ireland, Galway*, November 2006.

## Mapping Child Health in Family Support Services

**Principal Investigators:** Dr. Saoirse Nic Gabhainn and Dr. Pat Dolan (Child and Family Research and Policy Unit, NUI Galway)

**Researcher:** Ms. Siobhan O’Higgins

**Funded by:** Department of Public Health, HSE Western Region

### **Background and Research Aims:**

Underpinning the National Children’s Strategy, the overarching policy statement for children in Ireland, is a commitment to a ‘whole child’ perspective. This perspective: *Allows those working with or supporting children to focus on their particular interest and responsibility, while, at the same time, recognising the multidimensional aspect of children’s lives (Department of Health and Children, 2000, p.24).*

The implication of this position for policy makers and service providers is quite profound in that it challenges them to think more deeply about needs of children and adolescents and their role in meeting needs in an integrated and complementary way.

This study arises in the context of awareness of the potential of Family Support services in the former Western Health Board area to be key sites for the engagement of children and parents on wider health issues. It is partly informed by the approach developed in education for health promoting schools. Thus, the potential of community based Family Support projects to become ‘health promoting projects’ is an underpinning concern of the research. The aim of this research was to map the extent to which child health needs are known and met by Family Support Services in the HSE West Region.

### **Methodology:**

Two main approaches were taken to the research: secondary research involving brief reviews of relevant policy and research literature in order to contextualise the study; and primary research, which included two sequential data collection methods; interviews followed by self-completion questionnaires. For the interviews, a sample of managers of Family Support Services within the three regions of the HSE Western Area (Galway, Mayo and Roscommon) was constructed. Four service providers were randomly selected for interview. For the questionnaires, all the Family Support service managers listed on the HSE held databases for the western region were included in the sample frame, forty-one in total. A response rate of 80% was achieved for the questionnaire component.

### **Progress to Date:**

All data have been collected, inputted and analysed and the draft report of the findings has been written-up in conjunction with the Dr Pat Dolan and Dr John Canavan of the Child and Family Support Research and Policy Unit, NUI Galway. The report includes a contextual review of policy, practice and relevant research, and presents the data collected by participant profile; Health needs as a formal component of service

provision; Health needs being met within services; Unmet health needs, and Towards meeting unmet health needs. Recommendations for the future are also provided.

**Key Publications and Reports:**

O'Higgins, S. Nic Gabhainn, S., Dolan, P. & Canavan, J. (2006) Mapping Child Health in Family Support Services. Report to the Department of Public Health, HSE West.



## *Policy Research*



**The European Platform for Mental Health Promotion and Mental Disorder Prevention: Phase 2 of the Implementing Mental Health Promotion Action (IMPHA) Network**

**Principal Investigator  
in Ireland:**

Professor Margaret Barry

**Funded by:**

European Commission

**Background:**

The European Platform for Mental Health Promotion and Mental Disorder Prevention aims to develop a comprehensive strategy to tackle prevention and promotion in mental health, developing an integrated approach to information, intervention, training, policy, advocacy and implementation, combining the support for policy priority- setting with the dissemination of tools and evidence-based knowledge. With the financial support of the European Commission and of the Ministry of Health of Catalonia (Spain) the “European Platform for Mental Health Promotion and Mental Disorder Prevention” (IMHPA) has partners across 29 European countries and the participation of different European networks and non-governmental organizations (NGOs). The Platform builds on the previous work of the Implementing Mental Health Promotion Action (IMHPA) network ([www.imhpa.net](http://www.imhpa.net)).

**Progress to Date:**

Work to date has focused on the profiling of the infrastructure for mental health promotion and prevention across the European member states. During the WHO Ministerial Conference it was recognized that, along with treatment and rehabilitation, promotion of mental health and the prevention of mental disorders are a priority for Europe and its Member States. While information on health care systems has been assessed across European countries, information on available prevention and promotion activities in mental health is mostly lacking at the European level. To develop mental health, and infrastructures that support implementation, it is important to have available baseline information on existing initiatives and policies at the country level. Such an overview aims to facilitate priority identification and agenda setting.

Report on Country Profiles

The report on the Country Stories provides a first description of the resources, policies, and programmes available for mental health promotion and mental disorder prevention in EU Member States; it describes the workforce involved in implementation across countries; provides an account of available monitoring, evaluation and reporting systems for mental health; and outlines challenges, opportunities and advances in mental health promotion and mental disorder prevention. The process of assessing the situation across the European Union Member States was undertaken by collecting information on policies, programmes, workforces and infrastructures within each country using a structured questionnaire. Country level investigators convened a country coalition of key stakeholders in the area in order to complete this exercise. The European Commission encouraged this initiative, expressed its wish to publish the compilation of country stories, and indicated that the report could be used during the consultation process of its Green Paper on Mental

Health. This report builds on the previous work of the IMHPA network, its recent publication “Mental Health Promotion and Mental Disorder Prevention: A policy for Europe”; the information collected through the IMHPA questionnaire ([www.imhpa.net/infrastructures-database](http://www.imhpa.net/infrastructures-database)); and, in particular, on the work developed by the country partners and the country coalitions involved in the European Platform. The report presents a first overview of the situation of mental health promotion and mental disorder prevention, describing the available policies and identifying areas for future development across countries. The country stories are not intended to be a completely exhaustive exercise, but rather the start of a process that hopefully will be updated and extended.

For more detailed information, the reader is referred to all the country stories in the report and to the infrastructures database ([www.imhpa.net/infrastructures-database](http://www.imhpa.net/infrastructures-database)).

#### Training Network on Prevention and Promotion in Mental Health

IMHPA, in collaboration with MINDFUL, organised a training course for mental health promotion and mental disorder prevention programme development and implementation in Barcelona in April, 2006. This was attended by 29 participants from across the different European countries.

#### Mental Health Impact Assessment (MHIA)

An exploratory meeting with Health Impact Assessment experts was organized and took place in June for the MHIA work package lead by Dr. Maria Joao Heitor dos Santos. The meeting aimed to identify available tools for HIA and/or MHIA in order to develop this work package further. The meeting was very productive and followed by a great deal of activity and knowledge exchange. Maria will be contacting the MHIA taskforce and IMHPA with more details on progress and the next steps planned to further continue the work started. Maria will also be presenting at the EU Presidency Conference in Kuopio this coming September, “Health in all Policies”, about the centrality of MHIA and the links to different ongoing linked initiatives, including Imhpa.

The economic model for mental health promotion and prevention of mental disorders work package, which is currently underway, is led by David McDaid, in collaboration with the MHEEN Network (Mental Health Economics Network).

Contact Imhpa at [Imhpa@gencat.net](mailto:Imhpa@gencat.net)

#### **Key Reports & Publications:**

*Mental Health Promotion and Mental Disorder Prevention across European Member States: A Collection of Country Stories.* (2005) European Communities. (<http://www.imhpa.net>).

## **Training and Accreditation in Health Promotion in Europe Including Professional Standards and Competencies**

- Principal Investigator:** Professor Margaret Barry
- Researchers:** Dr. Arantxa Santa-Maria Morales, Mr. Simon Comer
- Funded by:** International Union for Health Promotion & Education (IUHPE)

### **Background:**

To support the ongoing work of the IUHPE EURO Sub-Committee on Training & Accreditation in Health Promotion, which is being chaired by Professor Margaret Barry, two studies are being undertaken at NUI, Galway:

1. A Delphi study on identifying core competencies in Health Promotion from a European perspective
2. A scoping study on training and accreditation in health promotion across the European region.

### **Progress to Date:**

Building on existing international and European literature, a review has been undertaken of the frameworks and core competencies that have been identified to date. Using the Delphi technique, an expert panel was convened to arrive at a consensus concerning the core competencies that should underpin the development of Health Promotion in Europe and provide a framework for competency standards. A researcher met with and briefed members of the IUHPE-EURO Sub-Committee on the details of the study. Members of the Committee agreed to participate as expert panel members in Round 1 of this project. Rounds 2 and 3 of the study will seek to develop a consensus on the list of core competences among a larger group of expert members drawn from across the European region.

A scoping study on training and accreditation in health promotion across the European region was completed in 2005/6 in order to provide information on the following matters:

1. The level of provision of specialist training in health promotion across the European region
2. The extent of ongoing work at national/regional level across countries on professional competencies and/or professional standards
3. The extent and nature of accreditation and licensing/ registration systems in operation across countries
4. The existence of professional pathways in health promotion within countries.

An e-mail survey of experts in health promotion from across the policy, practice and academic sectors in each country of the European region was conducted by Dr. Arantxa Santa-Maria Morales. Data on country contacts in each of these areas was extracted from the HP-Source database and supplemented where needed to compile the list of potential respondents. The data from the questionnaires were collected and collated and a report on the findings from the study was prepared and presented to the IUHPE/EURO Committee at its regional meeting in Budapest in October, 2006.

A proposal to establish an IUHPE/EURO pan-European Accreditation System in Health Promotion was also prepared and presented to the Committee.

**Key Reports & Publications:**

Morales, A. S-M. and Barry. M.M. (2006) *Scoping study on accreditation and professional standards in health promotion*. Report prepared on behalf of the IUHPE/EURO Sub-Committee on Training and Accreditation in Europe including Professional Standards and Competencies.

## Integrating Safer Motherhood

- Principal Investigator:** Dr. Diarmuid O'Donovan
- Researchers:** Dr. Mary Manandhar; Dr. Margaret Maimbolwa (from the University of Zambia)
- Funded By:** Advisory Board for Irish Aid ([www.abia.gov.ie](http://www.abia.gov.ie))

### Background and Research Aims:

This operational research project aims to review and analyse if, and how, safe motherhood policies and programmes in several Least Developed Countries supported by Irish Aid take into account the socio-cultural and gender contexts of health care seeking behaviours to prevent maternal deaths. The extent to which these efforts are linked to other priority health issues that impact on maternal survival (particularly HIV/AIDS, Mother-to-Child Transmission of HIV, malaria, tuberculosis, family planning) will also be explored.

### Method:

Beginning in March 2005, there are five components to the project:

- Comprehensive document review and analysis
- Research into central, regional and community perspectives (Zambia, Ethiopia)
- Inter-sectoral dialogue and exchange
- Dissemination workshops
- Publications, and communication and advocacy materials.

### Progress to Date:

#### 1. Document review

Work on collecting and collating published material and policy and programming documents from around the world has continued throughout the period.

#### 2. Research:

##### *Zambia*

A Memorandum of Understanding was signed with the Department for Post-Basic Nursing, School of Medicine, University of Zambia (UNZA), in October 2005, with Dr. Margaret Maimbolwa named as Principal Investigator. Ethical approval was obtained from UNZA and NUI Galway and the project was endorsed by the Zambian Central Board of Health/Ministry of Health under the title "AIMS Zambia" (Aiming for Maternal Survival). An agreement was reached with the Ministry of Health to conduct the regional and community research in Northern Province. An AIMS Zambia team, comprising a Coordinator, Supervisor, and Communications/Advocacy Officer, was recruited in Kasama, Northern Province. The Participatory Ethnographic Evaluation and Research (PEER) qualitative tool was selected as the most practical methodological instrument ([www.peer-method.com](http://www.peer-method.com)). This method combines data collection techniques on sensitive issues with simultaneous empowerment of community researchers to act as agents of social change processes that can potentially

enhance health outcomes. In May 2006, Ben Rolfe from Options Consultancy Services, UK, facilitated PEER training in Kasama. AIMS Zambia team members were joined by 14 semi-literate women, aged 17-45 years, from Bemba and Bisa tribes living in the remote rural area of Mumbi Mukulu who were trained as community-based researchers. Qualitative interview themes and Bemba-conceptualised prompts were developed. Data collection took place during June-August 2006: 126 community PEER interviews and 17 Provincial Key Informant Interviews were successfully completed. Transcription and translation from Bemba to English is underway, prior to the beginning of data analysis.

### *Ethiopia*

From the start of the project to early summer 2006, we faced considerable challenges in efforts to establish a research partnership here. Ongoing political instability in the country disrupted several visits to Addis Ababa by the Lead Researcher. There were resultant difficulties in identifying the partner institution and finalising the MoU, and other factors also emerged outside the project's control. The site was eventually cancelled by the ABIA in June 2006. It was decided to concentrate efforts entirely on Zambia and not look for an alternative country site because the planned synchronicity of implementation in two sites will no longer be feasible.

### 3. Inter-sectoral dialogue and exchange:

In Zambia, 4 inter-sectoral Interest Group meetings have been held at Provincial and Central levels. Participants come from the biomedical health system, the indigenous health system (traditional healers), civil society organisations, other government departments, professional health service provider associations, and academia. These meetings are intended to engage debate on the socio-cultural and gender contexts of maternal survival. This is increasingly acknowledged as a gap and a constraint for appropriate programming for improved maternal survival. Three Advisory Group meetings of the Associate Partners have also been held (Options Alliance, South Africa; Options Consultancy Ltd UK; K. Mona Moore, Washington DC, USA; Women's Health Council, Ireland; Dr. Anne Byrne, Sociology and Politics Dept, NUI Galway, Ireland).

### **Results:**

Data analysis is underway. Findings are not yet available.

Dissemination events are planned for Africa and Ireland in 2007. A project website is under development ([www.nuigalway.ie/safemotherhood/](http://www.nuigalway.ie/safemotherhood/)).

### **Key Reports & Publications:**

Planning for the dissemination events, publications and communication and advocacy materials is underway. Progress Reports were submitted to ABIA (June 2005, January 2006, September 2006).

Key reference for the PEER methodology: Price N and Hawkins K, 2002. "Researching sexual and reproductive behaviour: a peer ethnographic approach". *Social Science and Medicine*: 55: 1325-1336.

*The considerable support of personnel in the Irish Aid offices in Lusaka and Kasama, and the Provincial Health Office (Ministry of Health) in Kasama is gratefully acknowledged.*



## Description and Assessment of Capacity for Development Education in NUI Galway: a Thematic Approach

**Principal Investigators:** Dr. Diarmuid O'Donovan, Dr. Su Ming Khoo  
(Department of Political Science and Sociology)

**Researcher:** Ms. Nicola Williams

**Funder:** Irish Aid

### **Background:**

Development Education (DE) is central to realising and promoting human development. The Development Education and Research Network (DERN) is an interdisciplinary, cross-faculty group in NUI Galway set up to promote development education and enhance networking between researchers interested in development issues. There is substantial technical, intellectual, advocacy and policy capacity within NUI Galway.

An audit of existing DE activities and capacity in the University and in the region was considered to be the first step in developing a comprehensive programme oriented towards transforming ideas, attitudes, skill and actions in ways that are relevant to developing country priorities. Themes were based on the Millennium Development Goals, the Copenhagen Consensus and DE curricula:

- Poverty
- Malnutrition and hunger
- Education
- Gender equality
- Health including communicable diseases
- Environment and sustainable development
- Global partnership for development (includes trade, finance and debt)
- Good governance
- Conflict and arms proliferation
- Migration
- Racism.

### **Research Objectives:**

- To identify, describe, review and map current DE relevant activities and capacity in NUIG and other third level institutions in the West of Ireland
- To make the resulting thematic database of DE activities and capacity visible and accessible to those individuals and agencies that wish to provide or enhance DE related activities within and outside the university
- To enhance DE related activities across NUI Galway by:
  - linking diverse initiatives across Faculties, Departments and Research Centres using a thematic approach
  - identifying and promoting links with partners in the formal and non-formal education sectors and other civil society groups with an interest in DE in the West of Ireland

- enabling and promoting networking between DE initiatives in West of Ireland and wider established DE and development studies initiatives nationally and internationally
- working with current NUI Galway initiatives under the Community Knowledge Initiative (CKI) umbrella to foster knowledge partnerships, knowledge sharing, work placements, and innovative learning and volunteering partnerships.

### **Methods:**

The NUI Galway Development Education and Research Network met regularly and contributed to the White Paper on International Development. A contract researcher was employed who identified people in NUI Galway with an interest in development issues. Semi structured interviews were conducted and an online questionnaire was emailed to all staff and students.

### **Progress to Date:**

A database of DE activities was compiled, and a multi-annual programme proposal entitled ‘Mainstreaming development education at Third Level – a capacity building programme through civic engagement and professional education’ was submitted to Irish Aid. This application was successful and the Research Associate started work in November 2006.

### **Key Reports & Publications:**

A website has been designed ([www.nuigalway.ie/dern](http://www.nuigalway.ie/dern)) where reports will be available soon.

## Marketing of Foodstuffs in Post-Primary Schools in Ireland

**Principal Investigators:** Dr. Colette Kelly, Dr. Saoirse Nic Gabhainn

**Researchers:** Ms. Marie Galvin, Ms. Pauline Clerkin

**Funded by:** Irish Heart Foundation

### Background and Research Aims:

Obesity in children is an emerging public health problem, particularly in the Western World. Currently it is suggested that more than 300,000 children are overweight or obese in Ireland and that rates are probably rising at a rate of 10,000 per year (Department of Health & Children, 2005).

Environmental changes that have occurred over the last few years, such as a more sedentary lifestyle and the ready availability of energy dense foods, are the most likely underlying factors in the increasing prevalence of obesity. One of the obesity-promoting environmental factors that is of considerable interest is the marketing of foods to children. Television advertising, which is predominantly for foods high in salt, sugar and fat, has been shown to influence food choice, purchasing behaviour and consumption (Hastings, 2003). Food marketing can also occur through other media such as magazines, radio, cinema, mobile phones and outdoor advertising. The effects of such media advertising on food choice and diet have not been systematically reviewed to date. As well as numerous media, there are also a range of settings through which children are exposed to food marketing. The school environment is one such avenue and there is evidence of in-school marketing in a number of countries including Finland, Germany, the UK and Ireland (Matthews *et. al.*, 2005).

The presence of commercial companies in schools in Ireland and the potential subsequent effects were recognised by the National Taskforce on Obesity when it recommended that a clear code of practice should be developed in relation to the provision and content of vending machines in post primary schools. Moreover, a national, regularly reviewed code of practice in relation to industry sponsorship and funding of activities in schools and local communities was also recommended (Department of Health and Children, 2005).

However, data on the extent of food marketing in post primary schools in Ireland has not been published. Moreover, the different types of marketing employed, including sponsorship, branding, token collection and other promotional strategies are not clear. Thus, the aim of this project was to identify the level and type of marketing of foodstuffs in post primary schools in the Republic of Ireland.

### Method:

A 40 item self-completion questionnaire was designed in consultation with the Irish Heart Foundation and was piloted. Post primary schools were recruited via a letter to Principals and follow-up phone calls where necessary. Questionnaires were completed anonymously and were returned in prepaid envelopes for data entry and analysis at the HPRC, NUI, Galway.

**Progress to Date:**

A total of 331 questionnaires were returned of the 741 that were distributed, yielding a response rate of 44.7%. All 26 counties were represented in the returned questionnaires. The response rate from the various types of post-primary schools (secondary, vocational, community and comprehensive) was representative of the proportion of such schools in the country.

Data entry and both quantitative and qualitative analyses are complete and a report has been submitted to the Irish Heart Foundation. The results will be disseminated in due course and the report will be launched early 2007.

**Key Reports & Publications:**

Kelly C, Clerkin P, Galvin M & Nic Gabhainn S (2006). *Marketing of Foodstuffs in Post-Primary Schools in Ireland*. Submitted to the Irish Heart Foundation.

Mulvihill M, Kelly C, Nic Gabhainn S, Morrissey J, Kelly Y & Clerkin P (2006). *An Investigation of the Extent of Commercial Sponsorship in Post-Primary Schools in the Republic of Ireland*. Accepted as oral presentation for the 19<sup>th</sup> IUHPE World Conference on Health Promotion and Health Education, Vancouver, June 2007.

## Review of Evidence for the National Breastfeeding Strategy

**Principal Investigators:** Dr. Saoirse Nic Gabhainn and Dr. Vivienne Batt (Women's Studies Centre, NUI, Galway)

**Funded by:** National Breastfeeding Committee, Department of Health and Children

### **Background and Research Aims:**

Between 1981 and 1991 the national incidence of breastfeeding on leaving hospital in Ireland remained static at around 32%. Several initiatives from international organisations and the recognition that the percentage of mother's breastfeeding was low by international standards led the Department of Health in 1992 to establish a national committee to promote breastfeeding with the brief to develop a national breastfeeding policy. This 1994 policy detailed a series of recommendations and targets aimed at improving breastfeeding rates in Ireland (Department of Health and Children, 1994).

In 2002 the Minister for Health and Children appointed the national committee on breastfeeding. Under its terms of reference the national committee undertook to review the 1994 national breastfeeding policy, and to produce a new strategy document. The review was published in the committee's interim report (Department of Health and Children, 2003) and is informed by the broad range of expert opinions represented on the committee together with public submissions and consultations with relevant bodies. The review provided information on the impact of the 1994 targets and recommendations and put forward proposals for future action as the starting point for the next stage in the committee's work, that of developing a new breastfeeding strategy. As part of the development of the new strategy, the HPRC and the Women's Studies Centre, NUI Galway were commissioned to review the evidence in relation to breastfeeding.

### **Methodology:**

The work on this project comprised collecting, reviewing and summarising the literature on breastfeeding, and liaising with the national committee on breastfeeding in relation to the evidence to be included in the new national strategy. The literature reviewed included both grey literature, primarily from within Ireland, and published material from a range of sources; journal articles and books, international policy and strategy documents as well as agreements for action.

### **Progress to Date:**

The literature was first summarised according to the importance of breastfeeding for mothers and infants in relation to health and well-being, including development, and in relation to the economic and environmental impact of breastfeeding.

The strategy is organised around the areas for action of the Ottawa Charter (WHO, 1986), and the evidence for best practice for the protection, promotion and support of breastfeeding was organised around 5 goals.

- Legislation and public policies promote, support and protect breastfeeding

- Irish society recognises and facilitates breastfeeding as the optimal method of feeding infants and young children
- Communities support and promote breastfeeding in order to make it the normal and preferred choice for all families
- All families have the knowledge, skills and support to make and carry out informed infant feeding decisions, particularly those least likely to breastfeed
- The health sector takes responsibility for developing and implementing evidence based breastfeeding policies and best practices.

The evidence for particular approaches and actions under these goals was summarised as part of this project. The national breastfeeding strategy was agreed and published at the end of 2005.

A secondary task was the collation of the contact details and locations of breastfeeding support groups across the country, which went on line in early 2006.

### **Key Publications and Reports:**

Kelly, C.N.M., Nic Gabhainn, S., Batt, V. & Fallon, M. (2006) From science to policy: experience of the Breastfeeding in Ireland Strategic Action Plan. Paper presented to the *Nutrition Society Winter Meeting: Nutrition in early life - new horizons in a new century*, Cambridge, December 2006.

National Committee on Breastfeeding (2005) *Breastfeeding in Ireland: A five year strategic action plan*. Dublin: Government of Ireland Stationary Office.

## *Research Grants & Donations*





## Research Grants and Donations

<b>Principal Investigator</b>	<b>Value</b>	<b>Donor</b>	<b>Purpose</b>
<b>M. Barry</b>	€15,363	European Union (Programme for Peace and Reconciliation 2000 – 2004 (Peace 2))	Implementation of The Winning New Jobs Programme in Ireland
	€28,060	Health Promotion Unit of the Department of Health and Children, Dublin.	Evaluation of The Winning New Jobs Programme in Ireland
	€107,233	The Health Promotion Department, HSE North West	Evaluation of the North West Regional Mental Health Promotion Strategy and Action Plan (2005-2010)
	€17,959	CAWT (Co-operation and Working Together) Mental Health Sub-Group	Evaluation of the Youth Led Emotional Well-being Project 'Getting it Together'
	€6,000	European Commission	The European Platform for Mental Health Promotion and Mental Disorder Prevention: Phase 2 of the Implementing Mental Health Promotion Action (IMPHA) Network
	€4,800	International Union for Health Promotion & Education (IUHPE)	Training and Accreditation in Health Promotion in Europe including Professional Standards & Competencies
<b>M. Hodgins</b>	€15,000 <i>with C. Connolly</i>	Dental Health Foundation	Evaluation of Specialist Certificate in Health Promotion (Oral Health)
	€5,000 <i>with C. Connolly</i>	Centre for Excellence in Teaching and Learning (CELT)	Case Studies for Health Promotion
	€42,837	National Council on Ageing and Older People (NCAOP)	Enhancing the Quality of Life of Older People in Poverty with Particular Reference to those Living Alone

<b>S. Nic Gabhainn</b>	€631,000 <i>With M. Barry</i>	Department of Health and Children	Health Behaviour in School-aged Children (HBSC)
	€40,000	Office of the Minister for Children	Middle Childhood Study
	€109,691	Health Research Board	Translating the Health Behaviour of School-aged Children (HBSC) study into Policy and Practice
	€13,776 <i>With M. Molcho</i>	The Office of Minister for Children	Child Well-Being Indicators for the State of the Nation's Child Report
	€13,707 <i>with C. Kelly</i>	Irish Heart Foundation	Marketing of Foodstuffs in Post-Primary Schools in Ireland
	€11,000 <i>With J. Sixsmith</i>	Office of the Minister for Children	Photographing Wellbeing (secondary analyses)
	€104,000 <i>With M. Barry</i>	National SPHE Partnership Committee	Evaluating the Social, Personal & Health Education (SPHE) programme in schools
	€30,000 <i>With J. Sixsmith</i>	Department of Public Health, HSE Western Region	Developing consensus on a policy response to sexual health issues
	€10,000	Department of Public Health, HSE Western Region	Mapping Child Health among Family Support Services
	€15,000 <i>with V. Batt</i>	HEA Strategic Initiatives Fund	Perceptions of the Student Counselling Service
	€5,500 <i>with V. Batt</i>	National Breastfeeding Committee, Department of Health and Children	Review of the National Breastfeeding Strategy
	<i>with J. Sixsmith</i>		Indicators of Health for Health Promoting Schools: Child Developed Models

<b>D. O'Donovan</b>	€18,009	HSE West / Combat Poverty Agency / Institute of Public Health in Ireland	Health Poverty Index
	€90,000	HSE West	Mortality inequalities in Ireland
	€6,000	HSE West	Bar Workers Respiratory Health in Ireland Before and After a Legislative Ban on Workplace Smoking
	€75,000	HSE West	Developing Health Impact Assessment in the Region
	€250,000 <i>with M. Barry</i>	HSE West	Health Services Research
	€311,989	Advisory Board for Irish Aid	Integrating Safer Motherhood
	€35,000 <i>with S. Ming Khoo</i>	Irish Aid	Description and Assessment of Capacity for Development Education in NUI Galway: a Thematic Approach
	€70,000	HSE West	Monitoring Health Equity
<b>Jane Sixsmith</b>	€72,000 <i>with S. Nic Gabhainn</i>	The National Advisory Committee on Drugs	An Evaluation of the Drugs Media Campaign
<b>Claire Connolly</b>	<i>with M. Cronin</i>	No funder	Exploring the use of Experiential Learning Workshops and Reflective Practice for Developing Professional Practice among Postgraduate Health Promotion Students



## *Publications and Presentations*



## **Publications 2006**

Barry, M.M. (2006) The country profile of Ireland pp 87-98 in E., Jané-Llopis and P. Anderson, (Eds.) *Mental Health Promotion and Mental Disorder Prevention across European Member States: A Collection of Country Stories*. Second edition. Luxembourg: European Communities. (<http://www.imhpa.net>).

Barry, M.M. and Jenkins, R. (2006) *Implementing Mental Health Promotion*. Churchill Livingstone, Elsevier: Oxford (in press).

Barry, M.M. and McQueen, D.V. (2006) The nature of evidence and its use in mental health promotion. Chapter 9 in H., Herrman, S., Saxena, & R. Moodie, (Eds) *Promoting Mental Health: Concepts, Emerging Evidence, Practice*. World Health Organization, Department of Mental Health and Substance Abuse in collaboration with the Victorian Health Promotion Foundation and the University of Melbourne (p.108-111).

Barry, M.M. Reynolds, C., Sheridan, A. and Egerton, R. (2006) Implementation of the Jobs programme in Ireland. *Journal of Public Mental Health*, Vol 5 (4), 10-25 (in press).

Bedford, D. McKeown, N., Vellinga, A., Howell, F. (2006) *Alcohol in Fatal Road Crashes in Ireland in 2003*. Report for the HSE, October 2006.

Clerkin, P., Walsh, K. & Nic Gabhainn, S. (2006) *Dieting among Irish schoolchildren*. HBSC Ireland Research Factsheet No. 6. <http://www.nuigalway.ie/hbsc/factsheets.html>

Clerkin, P., Walsh, K. & Nic Gabhainn, S. (2006) *Exercise among Irish schoolchildren*. HBSC Ireland Research Factsheet No. 17. <http://www.nuigalway.ie/hbsc/factsheets.html>

Clerkin, P., Walsh, K. & Nic Gabhainn, S. (2006) *Health perceptions among Irish schoolchildren*. HBSC Ireland Research Factsheet No. 14. <http://www.nuigalway.ie/hbsc/factsheets.html>

Clerkin, P., Walsh, K. & Nic Gabhainn, S. (2006) *Oral hygiene among Irish schoolchildren*. HBSC Ireland Research Factsheet No. 7. <http://www.nuigalway.ie/hbsc/factsheets.html>

Clerkin, P., Walsh, K. & Nic Gabhainn, S. (2006) *School perceptions among Irish schoolchildren*. HBSC Ireland Research Factsheet No. 15. <http://www.nuigalway.ie/hbsc/factsheets.html>

Corrigan, M., Cupples, M.E., Smith, S.M., Byrne, M., Leathem, C., Clerkin, P., Murphy, A.W. (2006) The contribution of qualitative research in designing a complex intervention for secondary prevention of coronary heart disease in two different systems. *BMC Health Services Research*;6:90.

Cotter, E., O'Higgins, S., Nic Gabhainn, S. & Sixsmith, J. (2006) *A sexual health policy for the west: developing consensus on goals, objectives and actions*. Report to the Department of Public Health, HSE West.

Godeau, E., Vignes, C., ter Vogt, T., Nic Gabhainn, S. & Navarro, F. (2006) Consommation de cannabis par les élèves de 15 ans - Données issues de l'enquête internationale HBSC/OMS dans 32 pays occidentaux. *Alcoologie et Addictologie*, 28 (2), 135-142.

Hodgins, M., Millar, M. and Barry, M.M. (2006) "...it's all the same no matter how much fruit or vegetables or fresh air we get" Traveller women's perceptions of illness causation and health inequalities". *Social Science and Medicine*, 62 (8), 1978-1990.

Hogan, M. & Hogan, V. (2006). When I'm older, it will be so great. Review of Malcolm L. Johnson, in association with Vern L. Bengtson, Peter G. Coleman, and Thomas B.L. Kirkwood. "The Cambridge Handbook of Age and Aging". *PsychCRITIQUES – Contemporary Psychology: APA Review of Books*.

Hogan, V., Cannon, R. & Nic Gabhainn, S. (2006). Construction apprentices' attitudes to workplace drug testing in Ireland. *Policy and Practice in Health and Safety*, 4(2), 43-57.

Kelly, C., Clerkin, P., Galvin, M. & Nic Gabhainn, S. (2006). *Marketing of Foodstuffs in Post-Primary Schools in Ireland*. Submitted to the Irish Heart Foundation.

Kelly, C., Nic Gabhainn, S., Molcho, M. & Walsh, K. (2006) Health Behaviour in school-aged children (HBSC): A World Health Organisation collaborative cross-national study. *National Institute of Health Sciences Research Bulletin*, 3(3), 75-76.

Kelly, C., Nic Gabhainn, S., Molcho, M. & Walsh, K. (2006) Health Behaviour in school-aged children (HBSC): A World Health Organisation collaborative cross-national study. *National Institutes for Health Sciences Research Bulletin*, 3 (3), 75-76.

Kelly, C.N.M., Molcho, M., Kelleher, C. & Nic Gabhainn, S. (2006). Self-reported weight and height: response rates from Irish schoolchildren. *Proceedings of the Nutrition Society*, Vol 65, 39A.

Kelly, C.N.M., Nic Gabhainn, S., Walsh, K. & Kelleher, C. (2006). Time effects in food frequency consumption and eating behaviour among Irish schoolchildren. *Proceedings of the Nutrition Society*, Vol 65, 121A.

Kokkevi, A., Nic Gabhainn, S. & Spyropoulou, M. (2006) Early Initiation of Cannabis Use: A Cross-national European Perspective. *Journal of Adolescent Health*, 39(5), 712-719.

Laufer A., Harel Y., Molcho M. (2006). Daring, substance youth, and involvement in violence among school children: Exploring a path model. *Journal of school violence*, 5(3):71-88.

Laufer. A., Harel. Y. & Molcho, M. (2006). Daring, substance youth, and involvement in violence among school children: Exploring a path model. *Journal of school violence*, 5(3):71-88.

Mac Farlane, A., Murphy, AW., Clerkin, P. (2006) Telemedicine Services in the Republic of Ireland: An evolving policy context. *Health Policy* 76 245-258.

Manandhar, M., Share, M., Friel, S., Walsh, O. and Hardy, F. (2006) Food, nutrition, and poverty among asylum seekers in North West Ireland", (Health Service



Executive-NW and Health Promotion Research Centre, NUI Galway). The Combat Poverty Agency in Working Paper Research Series. Dublin, Ireland

Meade, K., Barry, M.M. and Rowel, D. (2006) *Evaluation of the Youth Led Emotional Well-being Project 'Getting it Together'*. Unpublished Report, Health Promotion Research Centre, Department of Health Promotion, NUI, Galway.

Meade, K., Rowel, D. and Barry, M.M. (2006) *Evaluation of 'The Guide – The Ultimate School Journal' (3<sup>rd</sup> edition School Journal)*. Health Promotion Department, HSE North West and Centre for Health Promotion Studies, NUI, Galway.

Molcho M. Harel Y., Lache D.O. (2006). "Alcohol and drug use among Israeli adolescents". In: Kandel, Merrick and Sher (Eds.) *Adolescence and Alcohol*, Pp. 71-84.

Molcho M., Harel Y., Pickett W. Schiedt P.C., Mazur J., Overpeck M.D. (2006). The epidemiology of non fatal injuries among 11, 13 and 15 year old youth in 11 Countries: Findings from the 1998 WHO-HBSC cross national survey. *Injury Control and Safety Promotion* 13(4):205-211.

Molcho, M. & Nic Gabhainn, S. (2006) *State of the nation's child: the contribution of survey data*. Report to the Office of the Minister for Children, Department of Health and Children, Dublin.

Molcho, M., Harel, Y., Pickett, W., Schiedt, P.C., Mazur J. & Overpeck, M.D. (2006). The epidemiology of non fatal injuries among 11, 13 and 15 year old youth in 11 Countries: Findings from the 1998 WHO-HBSC cross national survey. *Injury Control and Safety Promotion* 13(4):205-211.

Molcho, M., Walsh, K. & Nic Gabhainn, S. (2006) *Food poverty among Irish schoolchildren*. HBSC Ireland Research Factsheet No. 13.  
<http://www.nuigalway.ie/hbsc/factsheets.html>

Morales, A.S-M. and Barry. M.M. (2006) *Scoping study on accreditation and professional standards in health promotion*. Report prepared on behalf of the IUHPE/EURO Sub-Committee on Training and Accreditation in Europe including Professional Standards and Competencies. Health Promotion Research Centre NUI, Galway.

Mulvihill, M., Kelly, C., Nic Gabhainn, S., Morrissey, J., Kelly, Y. & Clerkin, P. (2006). An Investigation of the Extent of Commercial Sponsorship in Post-Primary Schools in the Republic of Ireland. Accepted as oral presentation for the 19<sup>th</sup> IUHPE World Conference on Health Promotion and Health Education, Vancouver, June 2007.

Murphy, K., O'Shea, E., Sheil, A., Hodgins, M. and Cooney, A. (2006) *Improving Quality of Life for Older People in Long Stay Settings*. National Council for Ageing and Older People.

Nic Gabhainn, S. & Sixsmith, J. (2006) Photographing well-being: enabling children's participation in research. *Children & Society*, 20, 249-259.

Nic Gabhainn, S., D'Eath, M., Batt, V. and Galvin, M. (2006) *Perceptions of the NUI Galway Counselling Service*. Report to the NUI Galway Counselling Service and the Vice-President for Student Services.

O'Connell, T., Coggins, M., Hogan, V. & O'Byrne, M. (2006). Safety evaluation of a flexible engineering control system. *Pharmaceutical Engineering*, 26(2), 8-20.

O'Higgins, S., Delaney, E., Moore, M., Inchley, J. and Nic Gabhainn, S. (2006) *Development of a method for student's participation: An example from the Republic of Ireland*. Report to the European Network of Health Promoting Schools, WHO (European Office), Copenhagen.

Pursell, L., Allwright, S., O'Donovan, D., Paul, G., Kelly, A., Mullally, B.J. and D'Eath, M. (Submitted August 2006). Before and after study of bar workers' perceptions of the impact of smoke-free workplace legislation in the Republic of Ireland. *BMC Public Health*. MS ID: 4619576611233561.

Pursell, L., Kearns, N., O'Donovan, D. (2006). *Local inequality indicators for the health and well-being of Ireland: A review of the data issues and policy context for selected data indicator sets. Interim Report*. Health Promotion Research Centre, NUI, Galway and Institute of Public Health in Ireland. November 2006.

Reynolds, C. (2006) *Evaluation of the JOBS programme in Ireland: promoting the health of the unemployed*. Unpublished PhD thesis, NUI, Galway.

Sixsmith, J. & Nic Gabhainn, S. Phase 1: Clerkin, P., Stevens, E. & Keogh, M. Phase 2: Clerkin, P. & Stevens, E. Phase 3: D'Eath, M., Stevens, E. & O'Higgins, S. (2006) *A Review of the Literature on the Effectiveness of Mass Media Campaigns for Drug Prevention and Harm Reduction and A Process Evaluation of the National Drugs Awareness Campaign 2003/5*. Draft 2. Final Report to the National Advisory Committee on Drugs.

Smyth, B., Wright, P. & Howell, F. (2006) National Public health Medicine Manpower Study. Report for Faculty of Public Health Medicine of Ireland, 2006.

Walsh, K. & Nic Gabhainn, S. (2006) Absence of seasonal effects in Irish HBSC data. *National Institute of Health Sciences Research Bulletin*, 3(3), 77-79.

Walsh, K. & Nic Gabhainn, S. (2006) Absence of seasonal effects in HBSC data. *National Institutes for Health Sciences Research Bulletin*, 3 (3), 77-79.

Walsh, K. & Nic Gabhainn, S. (2006) *Drunkenness among Irish schoolchildren*. HBSC Ireland Research Factsheet No. 5. <http://www.nuigalway.ie/hbsc/factsheets.html>

Walsh, K., Clerkin, P. & Nic Gabhainn, S. (2006) *Bullying among Irish schoolchildren*. HBSC Ireland Research Factsheet No. 8. <http://www.nuigalway.ie/hbsc/factsheets.html>

Walsh, K., Clerkin, P. & Nic Gabhainn, S. (2006) *Bullying others among Irish schoolchildren*. HBSC Ireland Research Factsheet No. 9. <http://www.nuigalway.ie/hbsc/factsheets.html>

Walsh, K., Clerkin, P. & Nic Gabhainn, S. (2006) *Cannabis use among Irish schoolchildren*. HBSC Ireland Research Factsheet No. 10. <http://www.nuigalway.ie/hbsc/factsheets.html>

Walsh, K., Clerkin, P. & Nic Gabhainn, S. (2006) *Emotional well-being among Irish schoolchildren*. HBSC Ireland Research Factsheet No. 16.  
<http://www.nuigalway.ie/hbsc/factsheets.html>

Walsh, K., Clerkin, P. & Nic Gabhainn, S. (2006) *Relationship with fathers among Irish schoolchildren*. HBSC Ireland Research Factsheet No. 11.  
<http://www.nuigalway.ie/hbsc/factsheets.html>

Walsh, K., Clerkin, P. & Nic Gabhainn, S. (2006) *Relationship with mothers among Irish schoolchildren*. HBSC Ireland Research Factsheet No. 12.  
<http://www.nuigalway.ie/hbsc/factsheets.html>

Walsh, K. & Nic Gabhainn, S. (2006) *Drunkenness among Irish schoolchildren*. HBSC Ireland Research Factsheet No. 5. <http://www.nuigalway.ie/hbsc/factsheets.html>

Zissi, A. & Barry, M.M. (2006) Well-being and life satisfaction as components of quality of life in mental disorders. In H. Katschnig, H. Freeman and N. Sartorius (Eds.) *Quality of Life in Mental Disorders*. (2nd edition) New York, Wiley (pp 33-44).

### **Publications 2005**

Allwright, S., Paul, G., Greiner, B., Mullally, B.J., Pursell, L., Kelly, A., Bonner B., D'Eath, M., McConnell, B., McLaughlin, J.P., O'Donovan, D., O'Kane, E. and Perry, IJ. (2005). Legislation for smoke-free workplaces and health of bar workers in Ireland: before and after study. *British Medical Journal*, 331; 1117 (<http://bmj.bmjournals.com/cgi/content/full/331/7525/1117>).

Barry, M.M., Reynolds, C. & Egerton, R. (January, 2005) *Preliminary Findings for the "Winning New Jobs" Programme in Ireland*. Centre for Health Promotion Studies, NUI, Galway.

Byrne, M., Barry, M., Nic Gabhainn, S. & Newell, J. (2005) The development and evaluation of a mental health promotion programme for post-primary schools in Ireland. In S. Clift & B.B. Jensen (Eds) *The Health Promoting School: International Advances in Theory, Evaluation and Practice*. Copenhagen: Danish University of Education Press.

Cotter, E., O'Higgins, S., Nic Gabhainn, S. & Sixsmith, J. (2005) *A sexual health policy for the west: developing consensus on goals, objectives and actions*. Report to the Public Health Department, HSE Western Area.

D'Eath, M., McCormack, B., Blitz, N., Fay, B., Kelly, A., McCarthy, A., Magliocco, G., Morris, K., Swinburne, J., Tierney, E & Walls, M. (2005). *Guidelines for Researchers when interviewing People with an Intellectual Disability* National Federation of Voluntary Bodies, Oranmore. Galway.

D'Eath, M. (2005) *Community Health Needs Assessment*. Report presented to the Department of Primary care, HSE West.

D'Eath, M., Sixsmith, J., Cannon, R. & Kelly, L. (2005) *The Experiences of People with Disabilities in Accessing Health Services in Ireland: Do inequalities exist?* Disabilities Research Series 2. National Disability Authority, Dublin.

D'Eath, M., Sixsmith, J., Stevens, E. & Nic Gabhainn, S. (2005) *The Development Process of the National Drugs Awareness Campaign Phase 3*. Report to the National Advisory Committee on Drugs, Dublin.

Hodgins, M., Galvin, M. and Hogan, V. (2005) *Work Life Balance in NUI Galway*. Centre for Health Promotion Studies, NUI, Galway.

Klein, K., Thompson, D., Scheidt, P., Overpeck, M., Gross, L., Nic Gabhainn, S., Schlep, L., Harel, Y., Pedersen, J.M., Boyce, W., Godeau, E. & Aszmann, A. (2005). Multinational comparison of bicycle helmet use among young adolescents. *Journal of Injury Prevention*, 11, 288-293.

Molcho, M. & Nic Gabhainn, S. (2005) *Classmate relationships among Irish schoolchildren*. HBSC Ireland Research Factsheet No.4. <http://www.nuigalway.ie/hbsc/factsheets.html>

Molcho, M. & Nic Gabhainn, S. (2005) *Family structure among Irish schoolchildren*. HBSC Ireland Research Factsheet No.2. <http://www.nuigalway.ie/hbsc/factsheets.html>

Molcho, M. & Nic Gabhainn, S. (2005) *Injuries among Irish schoolchildren*. HBSC Ireland Research Factsheet No.3. <http://www.nuigalway.ie/hbsc/factsheets.html>

Molcho, M. & Nic Gabhainn, S. (2005) *Smoking among Irish schoolchildren*. HBSC Ireland Research Factsheet No.1. <http://www.nuigalway.ie/hbsc/factsheets.html>

Nic Gabhainn, S. & Batt, V.J. (2005) Evidence. In National Committee on Breastfeeding (Eds) *Breastfeeding in Ireland: A five year strategic action plan*. Dublin: Government of Ireland Stationary Office.

Nic Gabhainn, S., Bourke, H. & Molcho, M. (2005) *Data on Community Involvement and Perceptions from HBSC Ireland 2002*. A short report to the National Children's Office, Department of Health and Children, Dublin.

O'Higgins, S., Nic Gabhainn, S. & Sixsmith, J. (2005) *Perspectives on the provision of sexual health services to sex workers*. Report to the Good Shepherd Sisters, Galway.

Pickett W., Craig W., Harel Y., Cunningham J., Simpson K., Molcho M., Mazur J., Dostaler S. and Currie C.E. (2005). Cross-national study of fighting and weapon carrying as determinants of adolescent injury. *Paediatrics* 116(6):855-863.

Sixsmith, J., D'Eath, M., Clerkin, P., Nic Gabhainn, S., O'Higgins, S. & Stevens, E. (2005) *The Process Evaluation of the National Drugs Awareness Campaigns: Draft Final Report 2004- 2005*. Report to the National Advisory Committee on Drugs, Dublin.

Smyth, B., Hser, Y-I. & Hoffmann, V. (2005) Years of Potential Life Lost Among Narcotic Addicts in California, *Journal of Addictive Diseases*.

## **Presentations 2006**

Barry, M.M. (2006) Generic Principles of Effective Mental Health Promotion. Fourth World Conference on the Promotion of Mental Health and Prevention of Mental and Behavioural Disorders Oslo: 12 October, 2006.

Barry, M.M. (2006) Implementation and Evaluation of the Winning New Jobs Programme in Ireland. Symposium presentation with Price, R.H, Vuori, J. and Blonk, R.W.B. on Implementing the JOBS Programme in Finland, Ireland and the Netherlands. *Work, Stress and Health 2006: Making a Difference in the Workplace*, Miami Florida: 2-4<sup>th</sup> March, 2006.

Barry, M.M. (2006) International Perspectives on Training and Accreditation in Health Promotion. *Shaping the Future of Public Health: Promoting Health in the NHS*. Staffordshire University: 31<sup>st</sup> October, 2006.

Barry, M.M. (2006) Mental Health Promotion in Schools: Evidence of Effectiveness *Advisory Board meeting of the National Office for Suicide Prevention*. Ennis, Co Clare: 28<sup>th</sup> September 2006.

Barry, M.M. and Morales, A, S-M. (2006) European Perspectives on Training and Accreditation in Health Promotion. Health Promotion Summer Conference, NUI, Galway : 6<sup>th</sup> June, 2006.

Barry, M.M., Meade, K., and Rowel, D. (2006) Evaluation of the Youth Led Emotional Well-being Project ‘Getting it Together’: Key Findings. *CAWT Mental Health Sub-Group Meeting*. Omagh: 13<sup>th</sup> September, 2006.

Barry, M.M., Murphy, C. and Mullen, B (2006) Health Promotion in Ireland: Benchmarking National Level Progress. *WHO Technical Meeting for Development of Benchmarks on the Implementation of the Bangkok Charter for Health Promotion*. Muscat, Oman: 18-20th September, 2006.

Coggins, M., Hogan, V. & Malynn, J (2006) Exposure assessment to airborne Dust, Ammonia, Carbon Dioxide, Carbon Monoxide and noise levels on Irish commercial pig farms. *Agricultural Research Forum 2006*. Tullamore, March 2006.

Coggins, M., Hogan, V. & Malynn, J (2006). Exposure assessment to airborne Dust, Ammonia, Carbon Dioxide, Carbon Monoxide and noise levels on Irish commercial pig farms. *Agricultural Research Forum 2006*. Tullamore, March 2006.

Costello, T., Hodgins, M. and Connolly, C. (2006) “Health Needs Assessment of Nurses Working in an Acute Hospital Setting”, *Presented School of Nursing and Midwifery 7th Annual Inter-disciplinary Research Conference*, Trinity College Dublin, November 10th 2006.

Currie, C., Molcho M. (2006). The HBSC Family Affluence Scale: Its history, uses and future. Paper presented at the Annual Scientific Meeting of the WHO-HBSC study, Budapest, June 2006.

Hodgins, M. (2006) "Awareness and perceptions of staff of the Anti-Bullying policy in a public sector organization - Challenges and Opportunities". *Bullying in the Workplace Conference*, Trinity College Dublin, June 2006.

Hodgins, M., Connolly, C. (2006) "Specialist certificates in health promotion-Strengthening health promotion practice". *Health Promotion Research Centre*, NUI, Galway, June 2006.

Hodgins, M., Galvin, M. and Hogan, V. (2006) "Work Life Balance in NUI Galway: "They're doing it, but it's not as useful as it could be". Presented to *Equality Sub-Committee* NUI, Galway, 2006.

Hogan, V. (2006) The health effects of noise and vibration in the workplace. *Noise and Vibration in the Workplace Conference*. Galway, March 2006.

Hogan, V. (2006). The health effects of noise and vibration in the workplace. *Noise and Vibration in the Workplace Conference*. Galway, March 2006.

Kearns, N. (2006). Health Impact Assessment (HIA) and Monitoring Equity in Health: Exploring the Health Poverty Index (HPI) as an Evidence Base. Health Promotion Research Centre (HPRC) *Research Day, Department of Health Promotion, NUI, Galway*, April 27<sup>th</sup>, 2006.

Kearns, N. (2006). Monitoring Inequality in Health: Exploring the Health Poverty Index (HPI) as an Evidence Base for Policy and Decision-Making. Irish Behavioural Science *Research lecture series, 3<sup>rd</sup> year Medical Programme, NUI, Galway*, November 13<sup>th</sup>, 2006.

Kelly, C., Molcho, M., Nic Gabhainn, S. & Kelleher, C. (2006) Self-reported weight and height: response rates from Irish schoolchildren Paper presented at *Nutrition Society Annual Meeting: Nutrition and Health in Children and Adolescents*, Cork, June 2006.

Kelly, C., Molcho, M., Nic Gabhainn, S. & Kelleher, C. (2006) Exploring missing height and weight data for the Irish HBSC survey: a pilot study. Paper presented at the *Annual Scientific Meeting of the WHO-HBSC study*, Budapest, June 2006.

Kelly, C., Nic Gabhainn, S. , Walsh, K. & Kelleher, C. (2006) Time effects in food frequency consumption and eating behaviour among Irish schoolchildren Paper presented at the *UK Nutrition Society Summer Meeting: Interactions between Genetics, Diet, Health and Disease*, Aberdeen, July 2006.

McKenna, V. & Barry, M (2006). Building capacity in health promotion in Ireland: past progress and future challenges. *Health Promotion Summer Conference*, NUI, Galway, June 2006.

Molcho M. Harel Y., Pickett W. Schiedt P.C., Mazur J. Overpeck M.D. (2006). The epidemiology of non fatal injuries among 11, 13 and 15 year old youth in 11 Countries: Findings from the 1998 WHO-HBSC cross national survey. The 1st European Conference on Injury Control and Safety Promotion. Invited presentation. Vienna, June 2006.

Molcho, M., Nic Gabhainn, S. & Kelleher, C. (2006) Sources of social support as predictors of positive health among Irish adolescents: findings from the 2002 HBSC

study. Paper presented at the *Annual Conference of the Sociological Association of Ireland*, Sligo, May 2006.

Nic Gabhainn, S. (2006) Social support and social capital as predictors of youth health: does where you live matter? Paper presented to the *Early Influences, Social Capital and Health meeting*, Dublin, July 2006.

Nic Gabhainn, S. (2006) The contribution of the academic sector to the future of health promotion. Paper presented to *Delivering Health Promotion*, Dublin, February 2006.

Nic Gabhainn, S., Walsh, K. & Kelleher, C. (2006) The importance of timing of data collection: Examples of seasonal effects in Irish HBSC data. Paper presented at the *Annual Scientific Meeting of the WHO-HBSC study*, Budapest, June 2006.

O'Higgins, S. (2006) Student Identified Indicators for Health Promoting Schools: Exploration of participative methodology with young people. Presented to *The European Network of Health Promoting Schools(WHO)*, Signswil, Switzerland, June 2006.

Pursell, L. (2006) Data availability and indicator measures in Ireland. *Institute of Public Health in Ireland* Dublin Jan. 2006.

Pursell, L. (2006) Developing health equity monitoring and health impact assessment at the local level *Annual Conference of the Directors of the Community Development Boards*. Athenry, Galway Feb 2006.

Pursell, L., D'Eath, M., O'Donovan, D., Allwright, S., Paul, G., Mullally, B.J. and Greiner, B. (2006). Perceptions of the Impact of the Smoking Ban Among Bar Workers in the Republic of Ireland. *13th World Conference on Tobacco OR Health*. Washington DC. July 2006.

Pursell, L., Kearns, N., O'Donovan, D. (2006) Local Equity Indicators. A preliminary indicator set for the development of an Irish Health Poverty Index (iHPI), *Institute of Public Health in Ireland*, Dublin. August 2006.

Spillane, V. & Nic Gabhainn, S. (2006) An exploration of social support among pregnant women. Paper presented at the *7<sup>th</sup> Annual Interdisciplinary Conference, School of Nursing and Midwifery, TCD*, May 2006.

## **Presentations 2005**

Kelleher, C.C., Shiely, F., Sweeney, M.R., Lavin, T., Craven, F. Nic Gabhainn, S., Collins, C., Murphy, G., O'Hara, P., Staines, A. & Daly, L. (2005) Feasibility study on the inclusion of blood and tissue data as a component of the national longitudinal study of children in Ireland. Paper presented at the *Faculty of Public Health Medicine Winter Scientific Meeting*, December, 2005.

Molcho, M. & Nic Gabhainn, S. (2005) Predictors of positive health among Irish adolescents: Findings from the 2002 HBSC Study. Poster presented at the *European Health Psychology Conference*, Galway, September 2005 (See also *Psychology and Health*, 20 (Supplement 1), 176).

Molcho, M., Nic Gabhainn, S., Friel, S. & Kelleher, C. (2005) Food poverty among Irish Children. Paper presented at the *13<sup>th</sup> Congress of European Union for School and University Health and Medicine*, Dubrovnik, October 2005.

O'Connell, T., Coggins, M., Hogan, V. & Byrne, M (2005) Safety evaluation of a flexible engineering control system developed for the removal of contaminated filter cartridges used in the Chemical and Pharmaceutical Industries. *British Occupational Hygiene Society Conference*, 2005. Manchester, April 2005.

O'Connell, T., Coggins, M., Hogan, V. & Byrne, M (2005). Safety evaluation of a flexible engineering control system developed for the removal of contaminated filter cartridges used in the Chemical and Pharmaceutical Industries. *British Occupational Hygiene Society Conference*, 2005. Manchester, April 2005.

O'Higgins, S., Nic Gabhainn, S., Sixsmith, J., Delaney, E., Moore, M. & Inchely, J. (2006) Ireland: the role of students in the development of indicators of health promoting schools. Paper presented to *WHO 5<sup>th</sup> Workshop on the Evaluation of the European Network of Health Promoting Schools*, Sigriswil, Switzerland, June 2006.

Pursell, L. (2005) Perceptions of the Impact of the Smoking Ban among Bar Workers in the Republic of Ireland. *Faculty of Public Health Medicine Winter Scientific Meeting*, Dublin. Dec 2005.

Pursell, L., Galvin, M., D'Eath, M., Keogh, M., Nic Gabhainn, S. & O'Donovan, D. (2005) Attitudes of bar owners and workers in rural Galway before and after the smoking ban. *Symposium for the anniversary of smoke-free workplaces*. Research Institute for a Tobacco Free Society, Office of Tobacco Control, Dublin, March 2005.



## *Appendices*



**List of Funding Organisations**

Research conducted by the Health Promotion Research Centre this year was funded by a range of external agencies, including:

- The European Union/European Commission
- International Union for Health Promotion and Education (IUHPE)
- The Programme for Peace and Reconciliation (Peace 2)
- The Department of Health and Children
- The Health Research Board
- The Office of the Minister for Children
- Institute of Public Health
- Dental Health Foundation
- Advisory Board for Irish Aid
- National Advisory Committee on Drugs
- Health Promotion Policy Unit
- National Council on Ageing and Older People
- Health Service Executive West
- Health Service Executive North West
- Combat Poverty Agency
- Irish Heart Foundation
- Co-operation and Working Together (CAWT) Mental Health Sub-group

## Appendix 2

### Advisory Board Members, April 2007

#### Advisory Board Members Health Promotion Research Centre

1. Dr Desmond O'Byrne, (retired) Department of Chronic Diseases and Health Promotion (NMH/CHP) WHO Headquarters Geneva
2. Professor Candace Currie, International Coordinator of Health Behaviour in School-Aged Children: WHO Collaborative Cross-National Study
3. Mr. Brian Mullen, Principal Officer, Health Promotion Policy Unit, Department of Health and Children
4. Ms. Catherine Murphy, Assistant National Director Population Health, Health Services Executive
5. Professor Gerry Loftus, Dean of the Faculty of Medicine and Health Sciences, National University of Ireland, Galway
6. Professor Kevin Barry, Dean of Arts Faculty, National University of Ireland, Galway
7. Dr. Maura Hiney, Research Office , National University of Ireland, Galway
8. Professor Margaret Barry, Director, Health Promotion Research Centre
9. Dr. Saoirse Nic Gabhainn, Deputy Director, Health Promotion Research Centre
10. Dr. Diarmuid O'Donovan, Project Leader, Health Promotion Research Centre and Public Health Department, HSE Western Area
11. Dr. Margaret Hodgins, Project Leader, Health Promotion Research Centre
12. Dr. Jane Sixsmith, Project Leader, Health Promotion Research Centre
13. Dr. Michal Molcho, Project Leader, Health Promotion Research Centre.

Conference 2006 Programme

**Shaping the Future of Health Promotion within the Context of  
Shaping the Future of Health Promotion within Population  
Health  
Programme**

Thursday 8<sup>th</sup> June, 2006

Venue: Lecture Theatre, Aras Moyola Building, NUI, Galway

- 10.30am      **Welcome and Opening Address**
- Professor Margaret Barry, Department of Health Promotion, NUI Galway
- 11.00 am      **Plenary Session: ‘The Relationship between Health Promotion and Population Health’**
- Dr. Claude Rocan, Director General, Centre for Health Promotion, Public Health Agency of Canada, Government of Canada
- Ms. Maria Lordon-Dunphy, Acting National Assistant Director, Population Health-Health Promotion, National Population Health Directorate
- Chair: **Mr. Brian Mullen**, Principal Officer, Health Promotion Policy Unit, Department of Health and Children
- 12.15 pm      **Plenary Session: 'Globalisation, power shifts and human well-being: Reflections from the Irish experience'**
- Dr Peadar Kirby, Centre for International Studies, Dublin City University
- 1.00pm      Lunch & Poster Viewing
- 2.00pm      **Plenary Session: ‘The distinctive contribution of the AHPI to shaping the future of health promotion’**
- (AHP, I)      Mr. Brian Neeson, Chair of the Association for Health Promotion, Ireland
- Chair: **Dr. Margaret Hodgins**, Department of Health Promotion, NUI Galway
- 2.30pm      Round Table Discussions
- 3.30pm      Coffee / Tea available in the foyer
- 4.00pm      **Plenary Symposium: ‘Implications of the WHO 2005 Bangkok Charter’**
- Implementation of the Bangkok Charter on Health Promotion in a Globalized World: Experience and challenges of selected high income countries in Europe".**

Dr Tang Kwok-Cho, World Health Organisation, Geneva

**The Global commons: globalisation and health**

Ms Anne Marie Crosse, HSE West

Partnering with the private sector

Ms. Jacky Jones, HSE West

Chair: **Professor Margaret Barry**, Department of Health Promotion, NUI Galway

5.30pm Close

**Thursday 8<sup>th</sup> June, 2006**

**Venue: Great Southern Hotel, Eyre Square, Galway**

7.00pm Welcome Reception hosted by the Association for Health Promotion, Ireland.

7.30pm Conference Dinner

**Friday 9<sup>th</sup> June, 2006**

**Venue: Lecture Theatre, Aras Moyola Building, NUI, Galway**

9.30am **Plenary Symposium: 'Training & Accreditation in Health Promotion'**

**Recognition and support for the specialised health promotion workforce in England**

Ms. Jenny Griffiths, Independent Consultant, UK

**Issues relating to the continuous professional development needs and expectations of health promotion staff**

Ms. Siobhan McGrory and Ms. Helen Newman, Independent Consultants, Ireland

**European Perspectives on Training and Accreditation in Health Promotion**

Professor Margaret Barry, Department of Health Promotion, NUI, Galway.  
Dr. Arantxa Santa-Maria Morales, Health Promotion Service, Public Health Institute, Regional Department of Health, Madrid

Chair: **Ms. Maria Lordon-Dunphy**, Acting National Assistant Director, Population Health-Health Promotion, National Population Health Directorate

11.00am **Coffee**

11.30am Oral Presentations: Parallel Sessions

**Venue: Large Lecture Theatre MY001, Aras Moyola**

**Session 1:** **Dr. Nazih Eldin**, Head of Health Promotion, HSE Dublin/North East

**Venue: Seminar Room MY127, Aras Moyola**

**Session 2:** **Ms. Maureen Mulvihill**, Health Promotion Manager, Irish Heart Foundation

1.00pm      **Feedback from Round Table Discussions**  
**Closing remarks**

Professor Margaret Barry, Department of Health Promotion, NUI Galway

1.30pm      **Lunch**

### **Oral and Poster Communications Information**

The aim of the Oral Communication sessions is to provide a forum for people to present current research and projects in a conference setting. It is intended that the sessions be used for the exchange of information and exploration between the presenters and participants.

The parallel sessions will take place on Day 2, Friday 8<sup>th</sup> June from 11.30 a.m. until 1.00 p.m.

#### **Oral Presentations**

##### **Session One**

**Venue:** *Lecture Theatre, Aras Moyola*

**Chair:** **Dr. Nazih Eldin**

- 11.30      “The development of a population health approach in the reformed health services-the population health card game”  
Ms. Jacky Jones, Dr. David Evans, HSE Western Area
- 11.45      “Developing a training resource to promote a community development approach to health”  
Ms. Geraldine Hanna, Ms. Mary Kennedy, HSE West
- 12.00      “Adaptation of a screener tool for use in determining disadvantage in rural areas”  
Ms. Cara Cunningham, HSE Dublin Mid Leinster
- 12.15      “Specialist certificates in health promotion- Strengthening health promotion practice “  
Dr. Margaret Hodgins and Dr. Claire Connolly, Health Promotion Research Centre, NUI ,Galway
- 12.30      “A health impact assessment of the southill food co-operative”  
Ms. Geraldine Hanna and Ms. Mary Kennedy, HSE West
- 12.45      “Building Capacity in Health Promotion in Ireland: Past Progress and Future Challenges”  
Ms Verna McKenna and Professor Margaret Barry, Health Promotion Research Centre, NUI, Galway

##### **Session Two**

**Venue:** *Seminar Room MY127, Aras Moyola*

**Chair:** **Ms. Maureen Mulvihill**

- 11.30      “Market research with smokers to address Population Health”  
Ms. Miriam Gunning, HSE Dublin North East
- 11.45      “The 2004 Irish smoking ban is there a knock on effect on smoking in the Home?”  
Mr. Colm Byrne and Dr. David Evans, HSE West

- 12.00 “Barworkers’ perceptions of the impacts of smoke-free legislation in the Republic of Ireland from the all-Ireland bar study”  
Dr. Lisa Pursell, Health Promotion Research Centre, NUI, Galway
- 12.15 “Health promotion in Irish post primary schools: the shared responsibility of the health and education sectors  
Ms. Elizabeth M. Kirby, Mary Immaculate College and UL/HSE West
- 12.30 “Dependancy awareness in a workplace setting—an evaluation”  
Ms. Bridget McDaid, Dr. Nazih Eldin, Ms. Susan Kennedy<sup>1</sup> and Ms. Karen Casson<sup>2</sup>, 1. Health Promotion Dept, HSE Dublin North East. 2. University of Ulster
- 12.45 “National initiatives for public health promotion and disease prevention targeting American youth”  
Dr. Cristy Jefson, University of Wisconsin-Whitewater, U.S.A.

### **Poster Presentations**

#### **“Workplace health promotion in Louth local authorities”**

Ms. Bridget McDaid & Dr. Nazih Eldin, Health Promotion Department, HSE Dublin-North East, & Ms. Caroline Cullen Workplace Partnership Committee, Louth Local Authorities

#### **“Implementation of workplace health innovation network programme in the North East”**

Ms. Bridget McDaid & Dr. Nazih Eldin, Health Promotion Department, HSE Dublin-North East, & Mr. Ryan Williams Business in the Community, Northern Ireland

#### **“Health promotion training & development programme HSE Dublin Mid-Leinster ”**

Ms. Marion Regan, Ms. Pauline O Reilly, & Ms. Dymphna McGettigan, HSE Dublin Mid-Leinster

#### **“An evaluation of the specialist certificate in health promotion (oral health)”**

Dr. Margaret Hodgins, Dr Claire Connolly & Ms. Therese Costello, Health Promotion Research Centre, National University of Ireland, Galway

#### **“Evaluation of the pilot MindOut programme in youthreach & senior traveller training centres (2005)”**

Ms. Jo O’Keeffe & Ms. Anne Sheridan, HSE West and Professor Margaret Barry & Kathryn Meade, Health Promotion Research Centre

#### **“Postpartum depression: A hidden dilemma in a developing country”**

Dr. Dhammica S Rowel, Pushpa L. Jayawardena, Neil Fernando, National University of Ireland, Galway, Faculty of Medicine, University of Kelaniya, Sri Lanka, Mental Hospital, Angoda, Sri Lanka