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Health Policy Research Unit
Progress Report
2000-2005

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Health Policy Research Unit Progress Report

Welcome...

I hope you find this Report of interest. It is a testimony to the efforts of all concerned with the Unit since its creation. Thanks to all colleagues and in particular to Sally Ruane and Katherine Hooper for compiling this report.

If you have any enquiries about the Unit, please contact Katherine Hooper on hpru@dmu.ac.uk or (0116) 257 7988. Our website, **dmu.ac.uk/hpru**, gives further details of our activities.

Professor Rob Baggott
Director, Health Policy Research Unit
T: +44 (0)116 257 7789
F: +44 (0)116 207 8446
E: rbaggott@dmu.ac.uk

Note from the Editor...

I am delighted that we are able to present this Report which covers the period from the launch of the Unit during the course of 2000 until late 2005. I am grateful to all my colleagues in the Unit for their contributions and particularly indebted to Katherine Hooper for her usual impressive efficiency.

If you have any comments or queries regarding this Report, please get in touch.

Dr Sally Ruane
Deputy Director, Health Policy Research Unit
T: +44 (0)116 207 8732
F: +44 (0)116 207 8446
E: sruane@dmu.ac.uk

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Director's introduction

Much has happened since the Health Policy Research Unit was launched at De Montfort University in 2000. The Unit began life as a joint venture between the then Faculty of Health and Community Studies and the Faculty of Business and Law.

Thanks to the support of the respective Deans, Professor Mike Saks (now Pro Vice-Chancellor at the University of Lincoln) and Professor David Wilson, we were able to formalise arrangements between staff in the two faculties.

I was appointed as Director of the Unit, with Professor Judith Allsop as Co-Director. We were fortunate to have excellent administrative support, in the initial phase from Tracey Dodman, and subsequently from Katherine Hooper, the current Unit Administrator. Judith Allsop has now moved on to the University of Lincoln, though remains an honorary member, and Dr Sally Ruane has been appointed Deputy Director. Meanwhile, research fellow Dr Kathryn Jones has been attached to the Unit's 'core team'. Although there have been several arrivals and departures in the membership of the Unit, research interests remain broadly in line with our original priorities: public health and inequalities, health professions, health policy and management reform, and public and patient involvement.

Over the past six years, the HPRU and its members have undertaken a wide range of research activities. We felt that this tremendous effort should be celebrated and this Report gives an account of this activity. On any measure, the Unit has achieved considerable success. Our members have been active in disseminating their findings with over 175 academic outputs (reports, books, chapters and publications) since 2000. In addition, they have generated £2million in research income during this period. As our members are drawn from a range of disciplines, the HPRU has also contributed to improved RAE performance across several units of assessment, including the '5' rating achieved in the Politics and International Relations Unit in 2001. But even in this age of performance indicators, it is the improvement in research culture that has been particularly gratifying. We now have an excellent body of researchers from a variety of disciplines and subject areas who are willing to cooperate and collaborate on health policy and related research.

We felt that this tremendous effort should be celebrated and this Report gives an account of this activity.

We also have good links with researchers across the University (through our regular electronic newsletter) and work alongside other research units in the University.

I must add at this point that the HPRU is grateful for the continuing support of Professor Gillian Grant, Dean of Health and Life Sciences, and Professor David Wilson, Dean of Business and Law. It should also be noted that in addition to the enrichment of the research environment, the Unit helps to underpin teaching with high quality research across both faculties.

Establishing the HPRU has been a team effort. It has been hard but rewarding work. The next few years won't be easy, given the competition for research income and for publications as we head toward the next round of research assessment. But the HPRU remains well-equipped for the task. I would like to take this opportunity to thank all colleagues involved with the success of the HPRU for their support and efforts.

Rob Baggott

Overview

What is the Health Policy Research Unit?

The Health Policy Research Unit consists of academic staff with substantial research interests in the field of health policy. The Unit aims to promote high quality research by:

- Bringing together researchers with a variety of interests, skills and expertise
- Collaborating with other organisations involved in health policy research
- Facilitating the development and submission of research proposals
- Promoting the effective dissemination of research findings.

What do we do?

Collectively the Unit has a wide range of interests which focus on four main areas:

- Public health – including the social and economic context of health, health and ethnicity, health promotion, health and risk
- The health professions – including professional regulation, alternative and complementary therapies
- Public participation in health and health care – including lay involvement in the health service, complaints in healthcare settings
- Health service reform – including reorganisation, restructuring and the management of change in the NHS and Public Private Partnerships.

What we can do for you

- Undertake commissioned research – staff within the Unit may be commissioned to undertake research on behalf of your organisation
- Undertake collaborative research – the Health Policy Research Unit is willing to form partnerships to undertake high quality research in collaboration with you or your organisation
- Provide consultancy support for research – we can provide advice on any aspect of your research such as: research proposals, appropriate methodologies, analysis of data or dissemination of findings

Katherine Hooper and Dr Kathryn Jones in the HPRU office

- Provide MPhil/PhD opportunities – we can provide supervision should you or any member of your organisation wish to study for a higher degree by dissertation (part-time or full-time). Please contact the Unit Administrator in the first instance.

If you are interested in any of these services or would like to find out more about the HPRU, please contact the Unit Administrator:

T: +44 (0)116 257 7988
F: +44 (0)116 207 8446
E: hpru@dmu.ac.uk

HPRU core team and current members' details

Core team


Professor Rob Baggott


Dr Sally Ruane


Dr Kathryn Jones


Katherine Hooper

Professor Rob Baggott, BA (Hons), PhD, Director, Health Policy Research Unit and Professor of Public Policy: Department of Public Policy

Rob's research interests include patient and user involvement; public health policy; alcohol policy; health service reform and regulatory politics. He is currently a member of the research advisory panel for the Parkinson's Disease Society and a member of the advisory council for the Institute of Alcohol Studies.

Contact details:
E: rbaggott@dmu.ac.uk
T: +44 (0)116 257 7789

Dr Sally Ruane, BA (Hons), MA, PhD, Deputy Director, Health Policy Research Unit: School of Applied Social Sciences

Sally's research interests include public/private boundaries and the private finance initiative in health care; health service reform; think-tank proposals for development of UK health care and the EU and health policy. She has provided evidence to the Health Select Committee, and has acted as guest editor for *Health Matters*. Sally is currently course leader for the ESRC recognised MRes (Applied Health Studies).

Contact details:
E: sruane@dmu.ac.uk
T: +44 (0)116 207 8732

Dr Kathryn Jones, BA (Hons), PhD, Senior Research Fellow, Health Policy Research Unit: Department of Public Policy

Kathryn's research interests are user involvement and patient groups; public participation and professional regulation. She is a member of the Political Studies Association. Kathryn is a trained information scientist and has specialist skills in systematic reviewing.

Contact details:
E: kljones@dmu.ac.uk
T: +44 (0)116 207 8749

Katherine Hooper, BSc (Hons), Research Administrator, Health Policy Research Unit

Katherine is the research administrator for the HPRU. Her duties include administration and research support for members and staff associated with the Unit, disseminating information within the health research network of the University, internal networking and liaising with external researchers, health organisations and funding bodies. She compiles and edits the HPRU electronic newsletter.

Contact details:
E: khooper@dmu.ac.uk
T: +44 (0)116 257 7988

Current members


Professor Judith Allsop


Professor Denis Anthony


Dr Merrill Clarke


Dr Lorraine Culley


Professor Martyn Denscombe

Professor Judith Allsop, BSc Econ, MSc Econ, PhD, Honorary Member, Health Policy Research Unit and Research Professor: University of Lincoln

Judith is the former Co-Director of the Health Policy Research Unit. Judith's research interests include the health professions; the health care consumer; and UK and comparative health policy. She was appointed by the Healthcare Commission in 2005 to serve as a lay member on the NHS complaints panels, following on from her work as a chair of an independent complaints review panel in London. From 2003/04, Judith was a visiting research fellow in the Department of Law at Birkbeck College, University of London. She was a visiting professor in the Department of Public Health at La Trobe University, Melbourne for a period in 2002.

Contact details:
E: jallsop@lincoln.ac.uk
T: +44 (0)208 749 3264

Professor Denis Anthony, BA (Hons), MSc, PhD, RMN, SRN, RN(Canada), Professor of Nursing: School of Nursing and Midwifery

Denis's research activity is centred around tissue viability, especially risk assessment of pressure ulcers. He was the founding editor of *Nursing Standard Online*, is on the editorial board of *Clinical Effectiveness in Nursing* and is a reviewer for several other nursing journals. Denis is the Head of Postgraduate Research Studies for the Faculty of Health and Life Sciences.

Contact details:
E: danthony@dmu.ac.uk
T: +44 (0)116 201 3909

Dr Merrill Clarke, BSc Econ, MPhil, PhD, Head of Department: Department of Public Policy

Merrill's research interests include child welfare and co-ordination/working together, particularly with reference to child welfare. He is a member of the Higher Education Academy (formerly Institute of Learning and Teaching).

Contact details:
E: mclarke@dmu.ac.uk
T: +44 (0)116 257 7209

Dr Lorraine Culley, BA (Hons), MA, PhD, Reader in Health Studies: School of Applied Social Sciences and Associate Director of the Mary Seacole Research Centre: School of Nursing and Midwifery.

Lorraine's areas of research are ethnicity, health and health care; gender and health and equal opportunities. She is an advisor to the Higher Education Academy project on Practice-Based Learning for Healthcare Professionals and has been appointed to the National Patient Safety Agency Expert Prioritisation Panel. Lorraine is the Knowledgeshare Editor of the journal *Diversity in Health and Social Care*.

Contact details:
E: lac@dmu.ac.uk
T: +44 (0)116 257 7753

Professor Martyn Denscombe, BSc (Hons), DipEd, PhD, Professor of Social Research: Department of Public Policy

Martyn's research interests include risk-taking behaviour; perceptions of risk; health-related behaviour of young people; identity formation and theories of the self and research methodology. He is on the editorial board of *Health, Risk and Society, Health Education Journal* and *Health Education Research*. Martyn was an elected national committee member of the Institute of Health Promotion and Education from 1998-2002.

Contact details:
E: mdenscombe@dmu.ac.uk
T: +44 (0)116 207 8785


Dr Nicky Drucquer


Dr Simon Dyson


Dr Sue Dyson (nee McCartney)


Professor Louise Fitzgerald

Dr Nicky Drucquer, BSc (Hons), MSc, PhD, Senior Lecturer: School of Applied Social Sciences

Nicky's research centres on the implementation and evaluation of public health policies and programmes. She is currently secretary to the pharmacy special interest group of the UK Public Health Association.

Contact details:
E: drucquer@dmu.ac.uk
T: +44 (0)116 207 8786

Dr Simon Dyson, BSc (Hons), MPhil, PhD, Reader in Applied Social Sciences: School of Allied Health Sciences

Simon's area of research is the social aspects of Sickle Cell and Thalassaemia. He is a member of the University Hospitals of Leicester Sickle Cell/Thalassaemia Advisory Committee and has been invited to speak at a number of Sickle Cell/Thalassaemia workshops and events around the country. Simon has also prepared written health education materials on thalassaemia for the North of England Bone Marrow and Thalassaemia Association and has provided written evidence to the UK Parliament's Defence Select Committee.

Contact details:
E: sdyson@dmu.ac.uk
T: +44 (0)116 257 7751

Dr Sue Dyson (nee McCartney), RN, RNT, BSc (Hons), MSc, Ed.D, Principal Lecturer in Adult Nursing: School of Nursing and Midwifery

Sue's research centres around ethnicity and transcultural nursing care. She has authored the adult module of the Transcultural Health Care Practice website for the Royal College of Nursing which benefited from a Department of Health peer review process. In 2005 Sue was appointed Head of Nursing and Midwifery Research with responsibility for developing and leading the research strategy for the School.

Contact details:
E: smccartney@dmu.ac.uk
T: +44 (0)116 201 3881

Dr Julie Fish, BA (Hons), MA, PGCE, PhD, Senior Lecturer in Social Work and Research Fellow: School of Applied Social Sciences

Julie's research interests include lesbian health and research among lesbian, gay, bisexual and transgender (LGBT) communities. She won the 'Theory' prize for her work on the UK national survey: Lesbians and Health Care Survey presented at the British Psychological Society Centenary Conference in 2001. Julie's chapter in the book *Women's Health: Contemporary International Perspectives* came highly commended in the public health category of the BMA Medical Book Competition 2001.

Contact details:
E: jfish@dmu.ac.uk
T: +44 (0)116 257 7750

Professor Louise Fitzgerald, BA (Econ) Hons; PhD; Chartered Member of the Institute of Personnel and Development (MCIPD), Professor of Organisation Development: Department of Human Resource Management.

Louise's research interests include the effective management of organisational change in complex organisations, such as health care; the diffusion of innovations into use; the spread and sustainability of new, improved practices within and between organisations and the movement of tasks across professional boundaries. She was a member of the Commissioning Group for the SDO National R&D Programme (until 2002). She is currently a member of the International Theme Committee of the Academy of Management and Chaired the Carolyn Dexter Prize for the Best International Paper in 2002 and 2003. Louise leads the Organisational Change and Development research group in the Department of HRM, Leicester Business School, Faculty of Business and Law.

Contact details:
E: lfhum@dmu.ac.uk
T: +44 (0)116 257 7911


Dr Rod Griffin


Nicky Hudson


Professor Mark Johnson


Dr Jacqueline Low


Martin Williams

Dr Rod Griffin, BA (Hons), MA, Dip.HE, PhD, RMN, RGN, Cert. Clinical Studies, Honorary Member, Health Policy Research Unit

Rod's areas of research are the history of mental health services; mental health policy; the mental health act 1983 and public health. He is an associate manager for appeals under the terms of the Mental Health Act (1983) at Northamptonshire Community Healthcare NHS Trust.

Contact details:
E: rodgriffin@hotmail.com

Nicky Hudson, BA (Hons), MA, Research Fellow: School of Applied Social Sciences

Nicky's research interests include infertility and involuntary childlessness amongst British South Asian communities; gender and health; new reproductive technologies and research methodologies. She is a member of the BSA Human Reproduction Study Group and of the Assisted Conception and Infertility Research Group.

Contact details:
E: nhudson@dmu.ac.uk
T: +44 (0)116 207 8766

Professor Mark Johnson, BA (Hons), MA, PhD, Director of Mary Seacole Research Centre and Professor of Diversity in Health and Social Care: School of Nursing and Midwifery

Mark's research interests include multi-agency health and welfare service delivery sensitive to ethnic and cultural diversity and barriers to access. He was the founding co-editor of the *Diversity in Health and Social Care* quarterly journal and was the guest co-editor for the special edition of *Health and Social Care in the Community* in 2004. He continues to co-direct the UK Centre for Evidence in Ethnicity Health and Diversity which is a joint DMU/Warwick University Medical School activity and has recently been commissioned to develop the Specialist Library for Ethnicity and Health in the NHS National Library for Health (Connecting for Health). He is a member of the WHO-HPH Task-Force on Migrant-Friendly Hospitals.

Contact details:
E: mrdj@dmu.ac.uk
T: +44 (0)116 201 3906

Dr Jacqueline Low, BA (Hons), MA, PhD, Honorary Member, Health Policy Research Unit and Associate Professor: Department of Sociology, University of New Brunswick, Canada

Jacqueline's areas of research are alternative and complementary therapies/users of alternative and complementary therapies; chronic illness and disability; qualitative research methods and the sociology of health, health care and illness. She is a peer reviewer of research grants for the Parkinson's Disease Society (UK) and an adjudicator for the North Atlantic Graduate Scholarship Award (North America).

Contact details:
E: jlow@unb.ca
Address: University of New Brunswick, PO Box 4400, Fredericton, New Brunswick, Canada, E3B 5A3

Martin Williams, BSc (Hons), MSc, PGDip, Director of the Leicester Unit of Trent Research and Development Support Unit/Primary Care Lead: School of Applied Social Sciences

Martin's research interests include health services research; research capacity building in health care organisations and medical statistics. He is a member of the Capacity Building Sub-Group of the National Research and Development Steering Group.

Contact details:
E: martinwilliams@dmu.ac.uk
T: +44 (0)116 257 7839

Research projects

During the period under review the HPRU core team and members have directed or worked on projects worth approximately £2 million*. The core team and members have been awarded substantial sums for research by the Department of Health, various National Health Service bodies and the Economic and Social Research Council.

In addition to this, a significant amount of research has been funded by local bodies, such as PCTs and the Leicestershire Partnership NHS Trust. Research grants have also been secured from charitable bodies such as the Joseph Rowntree Foundation, the Thomas Pocklington Trust and Macmillan Cancer Relief.

Extended descriptions of some of these projects can be found at the end of this section of the Report. Where the project reports are available electronically, they are listed below. Publications and conference presentations arising from these funded projects can be found later in this Report.

*Recent awards totalling £598,533 for projects commencing after 2005 are not included here, although further details can be found on our website.

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Current projects (by end date)

Title: Perceptions of Social Issues (PSI)
Outline: The research aims to understand substance misuse among young people as an instance of voluntary risk-taking behaviour, and to consider the implications of this for the practice of health promotion and theory relating to risk perception. It forms part of an on-going enquiry into the health-related behaviour of young people. Attitudes to smoking and drinking have been of particular interest in the previous phases of the research and they continue to be included in the current investigation. In addition, reflecting matters of national concern at the start of the 21st century, the PSI research includes a focus on attitudes to healthy eating, political participation and community involvement among young people.
Funder: Leicester Business School Research Fund
Amount funded: Undisclosed
Date: September 2003-August 2007
Staff involved: Professor Martyn Denscombe

Title: Minority Ethnic Populations
Outline: The development and evaluation of alternative methods of data collection in minority populations with Type 2 diabetes.
Funder: Diabetes UK
Amount funded: £2,785
Date: February 2005-December 2006
Staff involved: Professor Mark Johnson (with the Open University)

Title: Ethnic Minority Students' Achievement of Programme Outcomes
Outline: An investigation into the experiences of minority ethnic student nurses in relation to the successful achievement of programme outcomes on undergraduate nursing courses.
Funder: Workforce Development Confederation (WDC)
Amount funded: £6,000
Date: September 2005-August 2006
Staff involved: Dr Sue Dyson, Dr Peter Norrie (De Montfort University), Dr Lorraine Culley, Nicky Genders (De Montfort University)

Title: **Systematic Review of Racial Inequalities in Health**
Outline: The review seeks to draw together the existing evidence relating to ethnic and racial inequality in health in England and Wales, and examines the quality and nature of the evidence, together with the explanations for such inequalities, and lessons from 'good practice' that may be helpful in tackling those inequalities.
Funder: Home Office
Amount funded: £59,925
Date: January 2004-August 2006
Staff involved: Professor Mark Johnson (with the Centre for Evidence in Ethnicity, Health and Diversity (CEEHD), University of Warwick)
Outcomes: Report: *'Racial' and Ethnic Inequalities in Health: A Critical Review of the Evidence*
www2.warwick.ac.uk/fac/med/clinsci/research/ethnicityhealth/research/homher_draft.pdf

Title: **Public Perceptions of Gamete Donation in British South Asian Communities (GAMDON)**
Outline: There are few studies examining the engagement of minority ethnic communities with scientific research and public debates about science in the UK. This research explores the ways in which new reproductive technologies in general, and gamete donation in particular, are perceived in South Asian communities in Britain. This is a significant issue given the current shortage of donor gametes from these communities and the consequent delays in treatment for South Asian couples. The research aims to examine the public understandings of gamete donation amongst British South Asian communities and to explore issues regarding the willingness of South Asian women and men to consider donating or receiving gametes through altruistic or other means. The project seeks to produce a strategy for enhancing 'culturally appropriate' engagement of South Asian communities with debates around new reproductive technologies in policy, clinical practice and research.
Funder: ESRC 'Science in Society' Programme
Amount funded: £45,000
Date: April 2005-March 2006
Staff involved: Project Director: Dr Lorraine Culley Research Team: Nicky Hudson, Professor Mark Johnson, Dr Frances Rapport (University of Wales, Swansea), Dr Adi Bharadwaj (University of Edinburgh)

Title: **Specialist Library in Ethnicity and Health**
Outline: Establishing and hosting a specialist electronic library in ethnicity and health. Part of the Specialist Library's role is to map future research needs for government and other bodies.
Funder: NHS Information Agency/National Electronic Library for Health
Amount funded: £96,588
Date: April 2004-March 2006
Staff involved: Professor Mark Johnson (with CEEHD, University of Warwick)

Title: **A Partnership for Prevention? Alcohol Misuse, The Drinks Industry and Self-Regulation**
Outline: The research aims to examine the views of those within the drinks industry on its current role in prevention, partnership and self-regulation and how this has changed in recent years and how it might evolve in the future; examine the perspectives of other stakeholders (including medical, police, social worker and probation organisations, civic organisations, voluntary organisations, local authority bodies) on the industry's role in relation to the alcohol strategy; examine the perspectives of national government bodies (government departments and agencies) on the role of the industry in relation to the national strategy; and place the role of the industry in tackling alcohol-related problems in a recent historical and international context.
Funder: Joseph Rowntree Foundation
Amount funded: £15,000
Date: January 2005-January 2006
Staff involved: Professor Rob Baggott

Title: **Multi-Skilled Healthcare Assistant Support**
Outline: This project explores the utility of an on-line course in assisting health care assistants in the first year of a Diploma in nursing. The project is ongoing.
Funder: Charnwood and NW Leicestershire PCT
Amount funded: £23,160
Date: January 2003-ongoing
Staff involved: Professor Denis Anthony

Past projects (by end date)

2005

Title: **Managing Change and Role Enactment in the Professionalised Organisation**
Outline: In a period of further substantial change for the health service, the study focused on issues critical to the NHS. It aimed to analyse the roles and relationships of clinical managers, in relation to their clinical colleagues and to general managers, during periods of change.
Funder: Service Delivery and Organisation (SDO), Research and Development Programme of the Department of Health
Amount funded: £259,000
Date: September 2002-September 2005
Staff involved: Project Director: Professor Louise Fitzgerald. Project Team: Professor Ewan Ferlie, Royal Holloway College, University of London; Cerian Lilley, De Montfort University; Rachael Addicott, Holloway College
See 'extended project descriptions' for a more detailed account.

Title: **Quality Assurance in Medical Regulation in an International Context**
Outline: Based on case studies of six countries, the project aimed to identify the different forms of health system (in terms of funding and service delivery); establish the range of variation in the key stakeholders in medical regulation and their role and function; examine in more detail developments in the forms and processes of medical regulation in specific countries where there have been recent innovations in governance, audit and monitoring; and assess the extent of independence and reporting mechanisms of health regulators in these countries: the systems for ensuring that doctors keep up-to-date; how poor performance is identified and what action is taken, and by whom to deal with those whose competence is questioned. The objective was to provide succinct memoranda for the Chief Medical Officer's Advisory Group on the above issues on a country by country basis. The case studies covered New South Wales, Australia; Ontario, Canada; New Zealand; the Netherlands; Finland and New York State, USA.
Funder: Department of Health, for the Chief Medical Officer's Advisory Group
Amount funded: Undisclosed
Date: April 2005-September 2005
Staff involved: Professor Judith Allsop and Dr Kathryn Jones

Title: **Family Service Unit: Evaluation of Rapid Response Project**
Outline: The Rapid Response Project is intended for families in, or approaching, crisis due to emotional, behavioural or relationship difficulties. The research was undertaken in order to evaluate the services provided and to ensure they were responsive to service user needs. The report was presented to the organisation's funding bodies to secure its continuation.
Funder: Family Service Unit, Leicester
Amount funded: £1,000
Date: 2005
Staff involved: Dr Julie Fish

Title: **An Assessment of the Impact of the Government's Smoke-Free Proposals on Licensed Premises in Leicester**
Outline: The aim of the research was to assess the likely impact, in terms of promoting smoke-free establishments in Leicester, of the Choosing Health proposal for a partial ban on smoking in licensed premises. The specific objectives of the research were to: establish a base line of the number, type and location of licensed premises in Leicester and whether they currently serve food; establish the views of managers or proprietors on smoking restrictions on licensed premises and, where there is a choice, whether they would support their own premises being smoke free; and compare the results of the above with indicators of deprivation.
Funder: Part funded by Action on Smoking and Health
Amount funded: £1,000
Date: June 2005-September 2005
Staff involved: Professor Rob Baggott; Katherine Hooper; Dr Kathryn Jones; Janine Milligan, Public Health Specialist (Information), Leicestershire, Northamptonshire and Rutland Strategic Health Authority; Rod Moore, Assistant Director of Public Health, Eastern Leicester PCT and Leicester City West PCT, Directorate of Public Health.
Outcomes: Report: *An Assessment of the Impact of*

the Government's Smoke-Free Proposals on Licensed Premises in Leicester: phleicester.org.uk/Documents/FINAL%20REPORT%202%20SEP%2005.pdf. The report was used to feed into the Department of Health's response to the consultation on the smoke-free elements of the Health Improvement and Protection Bill.

Title: **Indico Trust Literature Search**
Outline: This research was commissioned by a UK national charity, The Indico Trust, to map lesbian, gay, bisexual and transgender (LGBT) research conducted in the UK since 1990. The literature search included studies published in academic journals and 'grey' unpublished research in a range of social policy areas including: self and society; health; health and social care needs assessments; education; legal developments; victims of crime and community safety; local government; housing; family; homophobic bullying in schools; multiple identities (e.g. 'race', transgender, disability, age, youth); domestic violence. In addition, a search was made of LGBT websites relevant to these policy areas; a brief description was provided alongside the web-link.
Funder: Indico Trust
Amount funded: £5,000
Date: December 2003-2005
(**Additional work:** May 2005)
Staff involved: Dr Julie Fish

2004

Title: **Europe's Migrants and Human Tissue Donation – ESF Exploratory Workshop (EUMIDON)**
Outline: Three day international conference on ethnicity and migration and meeting the need for human tissue donation, in Birmingham, September 2004.
Funder: The European Science Foundation (ESF)
Amount funded: £10,095 (€14,000)
Date: January-December 2004
Staff involved: Professor Mark Johnson, Dr Lorraine Culley and Nicky Hudson
Outcomes: Literature Review: *Human Tissue and Blood or Organ Donation, Transplantation and Minority Ethnic Communities:* dmu.ac.uk/Images/seawor6%20Organ%20and%20Tissue%20Donation_tcm2-27687.doc
The workshop report can be found at: esf.org/generic/1925/03017Report.pdf

Title: **Mental Health Needs Assessment: HMP Ashwell, HMP Gartree, HMYOI Glen Parva, HMP Leicester, HMP Stocken**
Outline: The study answered questions relating to mental health needs questions with a variety of methods: interviews with prisoners and prison health care staff, survey of prisoners and health care staff and review of pharmacy records. These were compared and contrasted with previous work, in particular ONS surveys. Prisoners reported high levels of mental health problems, but these were comparable with figures both from earlier studies, and from current mental health needs analyses from other prisoners. Returns from pharmacy indicated high levels of anxiety and depression were being treated, and lower but significant levels of psychosis. The levels of psychosis identified by health care staff were lower than those identified by prisoners. The largest single mental health problem reported was anxiety and depression. Recommendations included areas that need further scrutiny. Learning disability, ethnicity and personality disorder should, in any future service, be addressed.
Funder: Eastern Leicester, Melton Rutland and Harborough and South Leicestershire Primary Care Trusts
Amount funded: £19,500
Date: April 2003-October 2004
Staff involved: Professor Denis Anthony with Dr Gary Collins, De Montfort University

Title: **Our Vision Too: Improving the Access of Ethnic Minority Visually Impaired People to Appropriate Services; Building a Supported Community Referral System**
Outline: The aim of the project was to examine and develop the means of ensuring that services are more effectively delivered to people from black and minority ethnic communities with visual impairment.
Funder: The Thomas Pocklington Trust and The Housing Corporation
Amount funded: £92,361 (TPT) and £5,000 (HC)
Date: September 2002-October 2004
Staff involved: Professor Mark Johnson

Outcomes: Research Report: *Our Vision Too: Improving the Access of Ethnic Minority Visually Impaired People to Appropriate Services; Building a Supported Community Referral System:* pocklington-trust.org.uk/shared_asp_files/uploadedfiles/91F3EA16-63DF-40CC-90B9-53294C04D13C_RF8 _our_vision_too_approved.pdf

Title: **Parents'/Carers' Perceptions of the Process of Negotiated, Multi-disciplinary Healthcare with Specialist Children's Community Services**
Outline: The aims of this study were to ascertain parental/carer perspectives of negotiated multi-disciplinary working in specialist community children's health care and to identify aspects of the process of negotiated care which parents/carers suggest would improve outcomes for their child. The study included a questionnaire survey of all parents/carers receiving the multi-disciplinary process of care, together with in-depth, semi-structured interviews with a sample of eight parents/carers. The questionnaire data suggested that for those aspects of the multi-disciplinary process of care examined, parents and carers displayed a high level of satisfaction overall. A high degree of satisfaction with professional care delivery was also apparent. Most parents/carers felt that the process was working well and had made a difference to their child's care. The principles of the multi-disciplinary process of care received significant support from both questionnaire respondents and interviewees.
Funder: Leicestershire Partnership NHS Trust
Amount funded: £10,000
Date: September 2003-June 2004
Staff involved: Dr Lorraine Culley

Title: **Cultural Sensitivity in the Design of Health Service Built Environments**
Outline: The project aimed to establish what a culturally sensitive health care setting was and find out how space was used.
Funder: NHS Estates
Amount funded: £24,955
Date: February-May 2004
Staff involved: Professor Mark Johnson with PRASADA and Faculty of Art and Design, De Montfort University

Title: **Design of Modular Acute Bedspace**
Outline: This study used a multiple methods approach to optimise hospital ward design. A survey of estates departments across the UK gave a baseline of ward designs in use. A survey of acute hospital patients showed aspects of ward design that were problematic. Focus groups of patients and clinicians explored various designs, including one created by the research team. Architects and manufacturers of products were involved in a forum to identify possible solutions. Finally a "fly through" of a new design aimed to address all stated needs, and reduce infection was created.
Funder: NHS Estates
Amount funded: £118,722
Date: 2004
Staff involved: Professor Denis Anthony with Professor Ian McLaren, Faculty of Art and Design, De Montfort University

Title: **Systematic Review: Communication in Health Care for Minority Ethnic Groups**
Outline: The aim of the study was to identify and review the available research evidence on 'ethnicity and communication' in areas relevant to ensuring effective provision of mainstream services (e.g. via interpreter, advocacy and translation services); provision of services targeted on communication (e.g. speech and language therapy, counselling, psychotherapy); consensual/ participatory activities (e.g. consent to interventions), and; procedures for managing and planning for linguistic diversity.
Funder: Department of Health
Amount funded: £40,079
Date: 2004
Staff involved: Professor Mark Johnson (with CEEHD, University of Warwick)
Outcomes: Final Report: *An Overview of the Research Evidence on Ethnicity and Communication in Healthcare:* www2.warwick.ac.uk/fac/med/clinsci/research/ethnicityhealth/research/communicationsreview.pdf

Title: **Lesbian, Gay and Bisexual Health and Social Care Strategy Group (led by Leicester West PCT)**
Outline: The group was convened by the Chair of Leicester West PCT and worked to produce a health and social care needs assessment to present to Leicester Health Partnerships. It includes: access to health care; children and younger people; parenthood;

older people; vulnerable adults; eating disorders; screening; substance misuse; mental health; community safety. A workshop was convened with invited professionals from health and social care.
Funder: Leicester West PCT
Amount funded: Undisclosed
Date: 2004
Staff involved: Dr Julie Fish

Title: The Impact of Overcrowding on Health and Education: A Review of the Evidence and Literature
Outline: The aim was to identify the known impacts of overcrowded housing on people's health and education. To achieve this aim, the review identified and critically assessed the research evidence. The report produced by the project team presents the findings in relation to physical health, mental health, childhood growth, development and education, and other impacts including personal safety and accidents. The approach to the review of evidence focused on the objective and measurable impacts of overcrowding from primary research studies. The approach comprised three elements: searching a range of databases to identify articles for initial review. A variety of search terms were used, reflecting the diverse nature of the terminology on overcrowding; agreeing and implementing selection criteria to identify relevant studies. For example, setting parameters on the choice of countries – only research undertaken in OECD countries and written in English was used; and extraction and analysis of information from the study for use in assessing the findings and quality of the primary research.
Funder: Office of the Deputy Prime Minister
Amount funded: £12,690
Date: December 2003-March 2004
Staff involved: Project Director: Dr Tim Brown, Director, Centre for Comparative Housing Research Project Team: Professor Rob Baggott; Ros Hunt, Centre for Comparative Housing Research; Dr Kathryn Jones
Outcomes: Report: ODPM (2004) *The Impact of Overcrowding on Health & Education: A Review of Evidence and Literature* (London, ODPM) [ISBN 1-851127-11-9]. Available at: odpm.gov.uk/stellent/groups/odpm_housing/documents/page/odpm_house_028620.pdf

Title: Ethnic Health: Evidence Based Policy and Practice Network Centre
Outline: The UK Centre for Evidence in Ethnicity, Health and Diversity (CEEHD) was established in 2001 as part of the ESRC research network for evidence-based policy and practice. The Centre is located in the Warwick Medical School and The Mary Seacole Research Centre at De Montfort University, Leicester. CEEHD supports interdisciplinary, collaborative research in the field of ethnicity and health, working with NHS Trusts, community groups and other academic centres. It aims to ensure that research evidence is able to contribute more fully to the development of effective and efficient policies and practices in the important area of ethnicity and health.
Funder: ESRC
Amount funded: £180,000
Date: March 2001-February 2004
Staff involved: Professor Mark Johnson (with University of Warwick)
Outcomes: The Centre's work can be viewed at: users.wbs.warwick.ac.uk/group/ceehd

Title: Regulation of the Health Professions: A Scoping Exercise
Outline: The Council for the Regulation of Healthcare Professionals (CRHP) asked for a background paper to provide information about the nine councils under the jurisdiction of the CRHP. The project consisted of gathering information on their organisational characteristics, such as their legislative base, registrants, financial arrangements, governance arrangements and accountability and involvement of the public; and on the various functions of professional regulatory bodies, namely: arrangements for standards of practice, current and proposed arrangements for ensuring fitness to practice, registration processes and the role of the regulatory body in education.
Funder: Council for the Regulation of Healthcare Professionals (CRHP) now CHRE (Council for Healthcare Regulatory Excellence)
Amount funded: £20,000
Date: September 2003-February 2004
Staff involved: Project Director: Professor Judith Allsop. Project Team: Dr Kathryn Jones; Professor Liz Meerabeau, University of Greenwich; Professor Linda Mulcahy, Birkbeck College; Professor David Price, De Montfort Law School
Outcomes: *Regulation of the Health Professions:*

A Scoping Exercise carried out on behalf of CRHP Final Report: chre.org.uk/Website/publications/reports/Regulation%20Scoping%20Report%2020%20May%202004.doc?bcsi_scan_5CBBA20D813A2009=0&bcsi_scan_filename=Regulation%20Scoping%20Report%2020%20May%202004.doc
See 'extended project descriptions' for a more detailed account.

2003

Title: **Education of Professionals for Sickle Cell/Thalassaemia**
Outline: The aim of the project was to conduct a scoping exercise of the continuing professional education needs of health professionals with regard to antenatal screening for sickle cell and thalassaemia.
Funder: NHS National Screening Committee
Amount funded: £20,000
Date: 2003
Staff involved: Dr Simon Dyson (with University of Sheffield)

Title: **ASFERT Project: Informing Policy and Practice: A Study of the Provision of Infertility Services to South Asian Communities**
Outline: Infertility and its treatment have been the subject of significant medical and social research, but there is limited research-based knowledge of the specific needs of Britain's minority communities on which to base policy decisions. The aims of the project were to examine the social meanings of involuntary childlessness amongst South Asian communities and to explore the impact of ethnic, cultural and religious issues on access to infertility services; examine the experience of South Asian couples who have been medically diagnosed as sub-fertile or infertile; and make recommendations for the development of policy and practice to service commissioners and providers.
Funder: NHS Executive, Trent, Policy and Practice R&D Programme
Amount funded: £100,000
Date: January 2002-December 2003
Staff involved: Project Director: Dr Lorraine Culley Project Team: Dr Frances Rapport, Research Consultant, University of Wales Swansea; Dr Savita Katbamna, Research Fellow, University of Leicester; Professor Mark Johnson; Nicky Hudson
See 'extended project descriptions' for a more detailed account

Title: **EQUANS Study: Development of an Appropriate 'Ethnic' Question in Relation to Antenatal Screening for Sickle Cell Disease – Quantitative Study**
Outline: The project aimed to evaluate two candidate ethnicity screening questions in antenatal screening programmes in low, mixed and high sickle cell prevalence areas, and to identify the time taken in administration of the questions.
Funder: NHS Screening Committee
Amount funded: £133,000
Date: January 2001-November 2003
Staff involved: Project Director: Dr Simon Dyson. Project Team: Dr Lorraine Culley; Dr Sue Dyson; Dr Scott Yates, Youth Affairs Unit, De Montfort University; Colleagues from the Centre for Health Services Research at the University of Kent at Canterbury; the Royal College of Midwives; the University of Leicester Hospital Trust; the Leicestershire and Rutland NHS Trust; the Birmingham City Hospital NHS Trust; Heart of Birmingham Primary Care Trust; Kings College London NHS Trust; Lambeth Primary Care Trust; and the Royal Devon and Exeter NHS Trust.
See 'extended project descriptions' for a more detailed account

Title: **EQUANS Study: Development of an Appropriate 'Ethnic' Question in Relation to Antenatal Screening for Sickle Cell Disease – Qualitative Study**
Outline: The project aimed to investigate the understanding that health professionals and clients have of ethnicity, and to explore the acceptability of asking about ethnicity for the purposes of determining at-risk status for sickle cell disease in the antenatal setting; and to provide guidance of the most effective way of integrating a question on ethnicity into routine antenatal practice.
Funder: NHS Screening Committee
Amount funded: £45,000
Date: January 2001-November 2003
Staff involved: Project Director: Dr Simon Dyson. Project Team: Dr Lorraine Culley; Dr Sue Dyson; Colleagues from the Women's Informed Childbirth and Health Group, University of Sheffield; the Royal College of Midwives; the University of Leicester Hospital Trust; the Leicestershire and Rutland NHS Trust; the Birmingham City Hospital NHS Trust; Heart of Birmingham Primary Care Trust; Kings College London NHS Trust; Lambeth Primary Care Trust; and the Royal Devon and Exeter NHS Trust
See 'extended project descriptions' for a more detailed account

Title: **Review of the Occupational Health and Safety of Britain's Ethnic Minorities**
Outline: To provide an expert evidence-based review and assessment of whether certain ethnic minority groups in Britain are disproportionately affected by work-related health and safety, outcomes, issues or activities.
Funder: Health and Safety Executive
Amount funded: £1,950
Date: May-October 2003
Staff involved: Professor Mark Johnson (with University of Warwick)
Outcomes: Research Report: *Review of the Occupational Health and Safety of Britain's Ethnic Minorities:* hse.gov.uk/research/rrpdf/rr221.pdf

Title: **Having a Say: Promoting the Participation of People who have Communication Impairments in Health Care Decision-making**
Outline: The aim of this study was to promote the inclusion of people with communication impairments in health care decision-making. The specific aims were to identify in detail the barriers and facilitators to inclusion of people with communication impairments in health care decision-making; to develop draft guidelines which enable the inclusion of people who have communication impairments in decisions regarding their health care; to cross check the applicability of these guidelines for people with a wider range of communication impairments; to explore the viability of addressing the issues faced in common by people with a wide variety of communication impairments; and to provide the basis for a set of revised guidelines which would aim to promote the inclusion of people who have communication impairments in decisions regarding their health care. The project worked with a group of service users with a range of communication disabilities.
Funder: Department of Health "Health in Partnership" Initiative
Amount funded: £129,030
Date: 2003
Staff involved: Professor Sally Byng, City University in collaboration with Professor Louise Fitzgerald

Title: **Alcohol Services and the Needs of Black and Minority Ethnic Groups**
Outline: The project explored alcohol issues among South Asian and African-Caribbean communities. The aim was to improve education, research and service development.
Funder: Alcohol Education Research Council
Amount funded: £7,000
Date: February-October 2003
Staff involved: Professor Mark Johnson (with University of Derby, Rugby House London, Drug and Alcohol Services London)
Outcomes: Research Report: *Alcohol Services and the Needs of Black and Minority Ethnic Groups:* aerc.org.uk/documents/pdf/insights/insight_29%20 (ebook).pdf

Title: **Sexuality Matters**
Outline: The research was conducted in Leicester and used survey and focus groups. Over 400 lesbian, gay, bisexual and transgender people took part in the study which investigated health and social care needs. Julie Fish was a member of the steering group for this project.
Funder: Neighbourhood Renewal
Amount funded: £57,000
Date: 2003
Staff involved: Dr Julie Fish

Title: **Ethnicity Issues in NHS Information Databases**
Outline: A project to produce a scoping paper and deliver a workshop on the implications of ethnicity issues for the National Electronic Library for Health (NeLH).
Funder: National Electronic Library for Health
Amount funded: £4,000
Date: April-June 2003
Staff involved: Professor Mark Johnson
Outcomes: *Ethnicity, Evidence and Diversity in Health and Social Care: Implications for the NeLH* national workshop in London, October 2003.

Title: **Ethnicity and Uptake in Colorectal Cancer Screening Pilot**
Outline: This study focused on potential issues for ethnic populations associated with the introduction of screening for colorectal cancer using faecal occult blood testing.
Funder: NHS Screening Programme
Amount funded: £15,986
Date: July 2001-June 2003
Staff involved: Professor Mark Johnson
Outcomes: Final Report: *Ethnicity: UK Colorectal Cancer Screening Pilot:* www2.warwick.ac.uk/fac/med/clinsci/research/ethnicityhealth/research/colorectal_cancer.pdf

2002

Title: **Russian Physicians: Their Attitudes and Strategies for Adaptation to Change**
Outline: The objectives of the project were: to establish the social base of recruitment to the medical profession in three regions of Russia and choice of speciality by gender and parental background in terms of occupation and locality so as to make comparisons between them; to investigate the core ethical values of medical doctors in three regions of Russia in terms of professional ethics in the context of an expanding commercial sector and diminishing state funding; to identify coping strategies used in adaptation and speciality; to investigate professional group membership and activities by gender and speciality; to establish attitudes to career and career opportunities in the new Russia; to determine the career changes of participants (if any) over the past four years in the context of socio-demographic data, such as gender, age, family responsibilities and speciality; to investigate the attitudes of young people towards medicine as a profession; and on the basis of a literature review, to compare and contrast the attitudes towards career and profession of Finnish and British doctors respectively in the context of the health care system.
Funder: EU INTAS (International Association for the promotion of co-operation with scientists from the New Independent States of the former Soviet Union)
Amount funded: £6,150 (€8,850)
Date: December 1999-December 2002
Staff involved: Professor Mike Saks and Professor Judith Allsop, De Montfort University, (with partners in Finland and Russia)

Title: **The Implementation of PALS Pathfinders in a West Midlands NHS Trust**
Outline: The research aimed to assess the benefits and limitations of PALS, based on the first four months experience; identify how the successes of PALS could be maintained and further developed, and identify early problems which may need to be addressed; to establish practical guidelines for other Trusts concerning the implementation, operation, and development of PALS; and identify the elements of an evaluation tool for a subsequent and more wide-ranging assessment of PALS.
Funder: NHS Trust
Amount funded: Undisclosed
Date: December 2002
Staff involved: Professor Rob Baggott and Professor David Buchanan, De Montfort University

Title: **Addressing Ethnic Diversity in Health Care Outcome Measurement**
Outline: The objective of the review was to explore whether any of the more routinely used health outcome measures, which tend to have development roots either in the US or the UK, can be routinely used and have comparable meaning or suitability among UK black and minority ethnic groups (following translation or cultural adaptation). The review explored whether factors such as illiteracy and educational attainment are barriers to acceptability or effectiveness of such measures. The review also highlighted the extent to which these measures have been accepted overseas in the country of origin of UK migrant populations (largely East and South Asia) and whether they can be used in their present state (culturally adapted) or used as building blocks to develop UK versions more suitable for UK-resident minority ethnic groups.
Funder: NHS Health Technology Assessment Programme
Amount funded: £84,242
Date: October 2001-March 2002
Staff involved: Professor Mark Johnson (with University of Warwick)
Outcomes: Final Report: *Addressing Ethnic Diversity in Health Outcome Measurement: A Systematic and Critical Review of the Literature:* www2.warwick.ac.uk/fac/med/clinsci/research/ethnicityhealth/research/ethtom_final_draft.pdf

Title: **Adverse Events, Complaints and Clinical Negligence Claims: What do we know?**
Outline: The project involved a review of UK and international research literature on adverse events, complaints and clinical negligence. It identified lessons to be learnt and reviewed the characteristics of existing and potential systems that are most likely to lead to credible new procedures.
Funder: Department of Health (CMO advisory group on complaints and clinical negligence)
Amount funded: £50,000
Date: January 2001-January 2002
Staff involved: Professor Judith Allsop and Dr Linda Mulcahy, University of London
Outcomes: Final Report: *Adverse Events, Complaints and Clinical Negligence Claims: What do we know?:* dmu.ac.uk/faculties/hls/research/healthpolicyresearch/hpruresearchadverse.jsp?ComponentID=17028&SourcePageID=15145#1

2001

Title: **Review of Faith/Spirituality and Health**
Outline: A critical review of health and faith.
Funder: Health Action Zone, Leicester
Amount funded: £10,000
Date: February-October 2001
Staff involved: Professor Mark Johnson

Title: **Health Consumer Groups and the Policy Process**
Outline: The project sought to explore the ways in which health consumer groups currently interface with their members and supporters, central government, Parliament and the media. It examined how such groups mobilise resources in pursuit of their aims and objectives.
Funder: Economic and Social Research Council
Amount funded: £95,000
Date: February 1999-July 2001
Staff involved: Project Director: Professor Rob Baggott; Project Co-Director: Professor Judith Allsop; Research Fellow: Dr Kathryn Jones
Outcomes: Research Monograph – *Speaking for Patients and Carers: Health Consumer Groups and the Policy Process* published by Palgrave in 2005.
See 'extended project descriptions' for a more detailed account

Title: **Lay Perspectives on the Efficacy of Alternative and Complementary Therapies: The Experiences of People Living with Parkinson's Disease**
Outline: This report presents the findings of qualitative research conducted with people living with Parkinson's disease who use alternative and/or complementary therapies. It provides information about the therapies these people use, those they found effective in managing the symptoms of Parkinson's disease and those which they did not find useful; how they evaluate the effectiveness of the therapies they use; their expectations of, explanations for, and validations of efficacy; how they access these approaches to health care, including the barriers to access they face; and their views on the integration of these therapies within the National Health Service.
Funder: Parkinson's Disease Society and De Montfort University
Amount funded: £5,950
Date: June 2000-July 2001
Staff involved: Dr Jacqueline Low
Outcomes: Final Report: *Lay Perspectives on the Efficacy of Alternative and Complementary Therapies: The Experiences of People Living with Parkinson's Disease:* Available from hpru@dmu.ac.uk

Title: **Review of Health and Care Needs for Asylum Seekers in Dispersal**
Outline: The study investigated the accessibility and quality of healthcare provision for asylum seekers in dispersal areas; examined the impact of dispersal on the health of asylum seekers and identified existing and emerging good practice. The research methods used for this study included, a review of published and 'grey' unpublished literature; an examination of evidence available through electronic networks and interviews with healthcare providers and others. Fieldwork was conducted in four main locations: Coventry, Birmingham and Leicester - all dispersal areas with asylum seekers arriving through the National Asylum Support Service (NASS). Bedford was not a formal dispersal area but had received 'informal' dispersals from London boroughs.
Funder: Home Office (IND/NASS)
Amount funded: £5,000 plus additional £3,000 for overview report
Date: 2001
Staff involved: Professor Mark Johnson
Outcomes: Final Report: *Asylum Seekers in Dispersal – Healthcare Issues:* homeoffice.gov.uk/rds/pdfs2/rdsolr1303.pdf

Title: **Clinical Guidelines On-line Course**
Outline: The aim was to build an on-line course on clinical guidelines. Previous work by the author showed these were not easily obtainable by clinical staff, and yet there was a perceived need to be able to access them. The course taught clinicians how to locate national and other guidelines, for example the National Electronic Library for Health (NeLH) guidelines area. However the course did not succeed in attracting students and those who registered failed to complete it. The conclusion is that on-line courses alone are insufficient to engage practitioners, and a blended teaching method is probably more effective.
Funder: Foundation in Nursing Studies
Amount funded: £7,500
Date: January-June 2001
Staff involved: Professor Denis Anthony

Title: **Secondary Review of Evidence of Ethnic Question and Antenatal Screening for Sickle Cell/Thalassaemia**
Outline: The aim of the project was to review secondary evidence and conduct a survey of current antenatal screening practice for sickle cell and thalassaemia
Funder: NHS Screening Committee
Amount funded: £15,000
Date: January-March 2001
Staff involved: Dr Simon Dyson (with University of Kent and Thames Valley University)
Outcomes: Report: *Secondary Review of Existing Information in Relation to the Ethnic Question:* -phm.umds.ac.uk/haemscreening/dowloads/Ethnic%20origin%20question/SECONDARY%20REVIEW%20OF%20THE%20ETHNIC%20QUESTION_final%20report.pdf

Title: **Care Services and Minority Ethnic Groups**
Outline: The aim of this project was to explore ways of ensuring that provision of palliative care services in Birmingham meets the needs of members of the black and minority ethnic communities locally. The study resulted in a selection of key actions which lead to an overall development of palliative care services for members of black and minority ethnic groups living with cancer in the City of Birmingham and nearby areas. It was recommended that these actions should be implemented as resources and opportunities permit.
Funder: Birmingham Specialist Community Health Trust & Macmillan Cancer Relief
Amount funded: £7,450
Date: September 2000-March 2001
Staff involved: Professor Mark Johnson (in collaboration with the Ashram Group, Birmingham)

Title: **Antenatal Screening for Sickle Cell/Thalassaemia**
Outline: The aim of the research was to produce an information report on antenatal screening for sickle cell and thalassaemia for midwives.
Funder: MIDIRS
Amount funded: £1,500
Date: 2001
Staff involved: Dr Simon Dyson (with Professor Mavis Kirkham, University of Sheffield)

Title: **The Changing Role of the Midwife in Relation to the Obstetrician and the GP**
Outline: This was a comparative project between four sites, two in the West Midlands and two sites in London. The project focused on changing professional role boundaries and the processes by which such changes are negotiated and agreed.
Funder: London NHSE R & D Directorate
Amount funded: £138,500 (grant remain was split between City and Warwick Universities)
Date: February 1999-April 2001
Staff involved: Professor Louise Fitzgerald

2000

Title: **Review of Health Support Workers**
Outline: The main aim of the project was to assess the case for the regulation of health support workers. It involved a scoping study of the range of support workers and their roles, functions and responsibilities in different sectors of the health service. Recommendations were made to the Department of Health.
Funder: Department of Health
Amount funded: Undisclosed
Date: October 1999-October 2000
Staff involved: Project Director: Professor Mike Saks, Health Policy Research Unit
Outcomes: Final Report: *Review of Health Support Workers:* dmu.ac.uk/faculties/hls/research/healthpolicyresearch/hpruresearchhealthsupport.jsp

Extended project descriptions

Managing Change and Role Enactment in the Professionalised Organisation

The public policy changes sweeping the health sector have brought the role of professional and clinical managers into focus. I was awarded funding of £259,000, over three years from the Service Delivery and Organisation (SDO) Programme at the Department of Health to examine the roles of clinical and general managers in managing clinical service improvements. A team of researchers from DMU, including myself, Dave Buchanan and Cerian Lilley worked with a team from Royal Holloway College consisting of Prof. Ewan Ferlie and Rachael Addicott to complete the study. The results of the project provide insights into how management roles and relationships can be effectively configured in complex health settings to facilitate change.

Against the background of extensive changes, the lead question of the study was:

How do clinical directors and service managers from non-clinical backgrounds interpret and enact their roles and use them to implement service change?

Using a comparative case study approach, this project analysed 11 sites across the acute and primary care sectors of health care. It focused on three care groups, namely cancer care, maternity care and diabetes care. The work was completed at the end of 2005 and a Final Report was submitted, which is to be available on the SDO website (at sdo.lshtm.ac.uk). A selection of the overall themes which emerged across the 11 case studies are set out below:

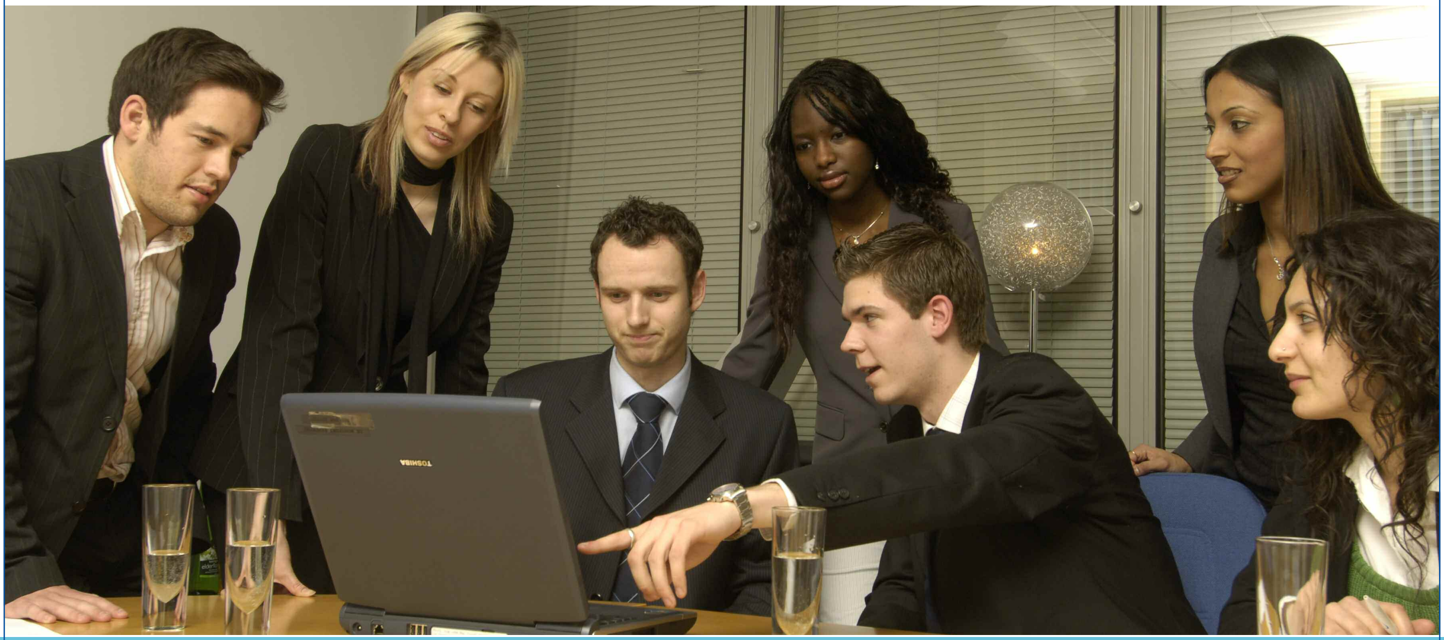
- Variation between acute and primary care sites in their capacity to enact clinical service change. Specifically, the base in primary care seemed narrow and fragile
- The influence of local organisational context was important. As part of our analysis, we introduced an empirically based typology summarising the evidence of differential change capability across the cases. Specifically, we saw configurations of characteristics emerging across the cases which shaped rates of progress. We identified a number of specific positive and negative forces
- We noted that some sites were distracted onto other competing agendas and that this negatively affected clinical service improvement
- Formal frameworks and service standards do not by themselves guarantee change but much depends on how they are enacted in the sites
- We observed an increase in hybrid clinical managerial roles, but noted that they could be problematic and require senior management and Human Resource management attention to ensure they fulfil their potential
- We comment on the roles of change agents observed in the sites. In the acute sector, clinical managers were evident as leads, but in the primary care sites, general manager leads were more evident. There was some evidence of poor GP engagement
- There was also evidence of portfolio roles, where there was a need for role clarity but not rigidity
- The prior nature and quality of relationships in the sites was important, where in general the relations between clinicians and general managers could be seen as good, if slightly distant; intra clinical relations were more problematic. The poor levels of direct contact between clinical and managerial blocks was concerning

> We found evidence of dispersed leadership patterns for change in a number of the sites rather than individualistic leadership. This pattern might include committed duos or trios of change leaders supported by a wider network of pro change forces.

- There was a growth of network based approaches to service change management, of both mandated and organic subtypes which represent distinctive forms. The important role of Network Strategy Boards was evident
- We commented on the poor level of HR and Education and Training support at present for the development of these change roles and argue that new programmes are needed
- Finally, we argued that while the substance of change may appear simple, its enactment is complex. There are simple targets for sites to meet but a complex substance. This needs to be recognised in terms of credible timescales.

As part of the project, the team participated in workshops and also national conferences to discuss the implications of these findings for further action with a wider audience. In particular, we linked to key policy groups and to advocacy groups working in these areas of care. The Final Report contains ideas and suggestions to policy makers and managers for using these data to improve the health care service. The process of further dissemination within health care continues and a set of Briefing papers are planned. Alongside this dissemination to service providers and service users, the team continues to develop the conceptual and theoretical ideas for publication and presentation at academic conferences.

Louise Fitzgerald



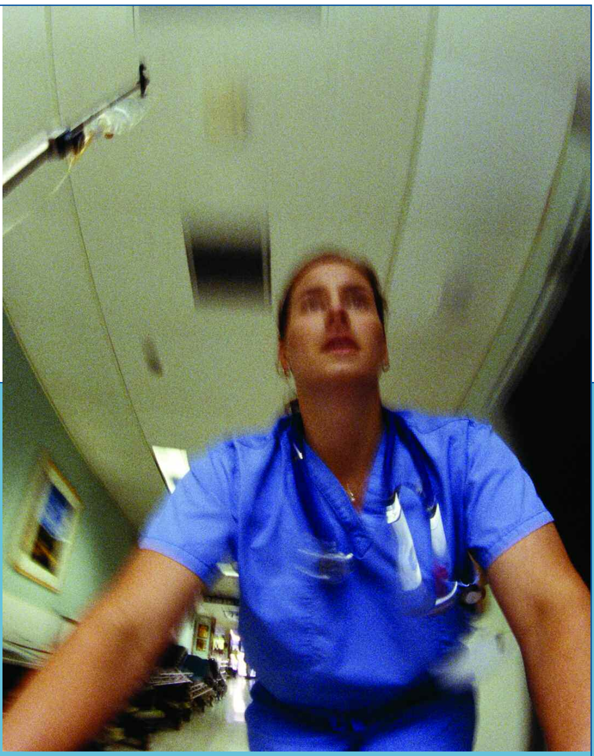
Regulation of the Health Professions: A Scoping Exercise

The Council for Healthcare Regulatory Excellence (then called the Council for the Regulation of Healthcare Professionals) was established in 2003 to provide oversight of the health professions regulated by nine statutory councils: the General Chiropractic Council, the General Dental Council, the General Medical Council, the General Optical Council, the General Osteopathic Council, the Health Professions Council, the Nursing and Midwifery Council, the Pharmaceutical Society of Northern Ireland, and the Royal Pharmaceutical Society of Great Britain. Shortly after its establishment, the CHRE commissioned me to carry out a study of the way in which these councils carried out their statutory duties.

All these councils were formed by statues that enable their governing council to undertake a similar range of functions: keep a register of those deemed qualified to practise their profession; maintain an oversight of professional education; maintain standards of practice by issuing guidance and investigate and take action in relation to complaints about the conduct of a professional. With respect to this latter function, councils have a range of powers with the ultimate sanction of removing a professional from the register.

The aims of the study were to report on the differences between councils, to identify areas of good practice that could be shared more widely and to identify areas where further work was needed to increase consistency in practice.

The method was to draw up a matrix for data collection. Data were obtained from websites and other published sources, entered into the matrix and checked with each council. Chapters of the report were written by the authors and these were checked again for accuracy with the council concerned.
The full report is available on the CHRE and HPRU website and will be updated on the former from time to time:
chre.org.uk/Website/publications/reports/Regulation%20Scoping%20Report%2020%20May%202004.doc
dmu.ac.uk/faculties/hls/research/healthpolicyresearch/hpruresearchCRHP.jsp



The main findings

In the introduction, the authors argue that the complexity of the regulatory task is increasing. There is a new emphasis on protecting patients and on professionals keeping up-to-date with advances in knowledge and practice. A number of councils regulate more than one group of health workers, for example the Health Professions Council is responsible for regulating 13 separate professions. The division of tasks in healthcare is changing with some health professionals taking on new roles. Recruitment from international markets has increased. In regulatory practice, public accessibility, transparency, accountability and increased partnership with other health care stakeholders including the public is expected.

Governance arrangements

The study found that there are major differences in the statutory basis of councils, due mainly to historical factors. This affects the scope of a council's regulatory powers, jurisdiction and governance arrangements. For example, some councils both regulate and promote the interests of their profession. Change has been inhibited by the intricacies of the parliamentary process, resources and managerial capacity. Resources are based mainly on registration fees and councils differ widely in the numbers of professionals registered; their priorities and the extent to which their ways of working have changed to meet new demands. The report argued that there should be greater consistency between councils that could be achieved through the annual review process. CHRE could also identify the barriers that councils currently face in up-dating their governance processes and promote good practice.

Although all councils are now smaller and all but one has lay members, the proportion of lay members varied between 13 percent and 48 percent. Most councils had lay members on their various committees

but again, the numbers varied and in some cases, rules for substitution tended to preference professional members. The report recommends that the recruitment and role of lay members could be clarified and standardised. Good practice in consulting with the wider health consumer constituency could be developed by CHRE and reviewed.

Registration

In the UK, registration gives a protection of title (and in the case of dentistry, protection of function). The complexity of the registration task varies between councils. The largest register, the Nursing and Midwifery Council, has over 645,000 registrants and the smallest, the Pharmaceutical Society of Northern Ireland, less than 2,000. Some professions recruit in an international market while others do not. Practice in obtaining health and character references, proof of identity and clearance from the Criminal Records Bureau differ as do recording initial and specialist qualifications and any limitations on practice. It was argued there could be greater standardisation in these areas and registers could be made more accessible to the public.

Education

The responsibility for oversight of professional education varies with each council. Relationships with other educational stakeholders differ according to the particular profession and across countries within the UK. Some professions are benchmarked by the Quality Assurance Agency in terms of skills and competencies, others are not. These differences are inevitable given variations in length of training and the public/private sector mix. However, all the health professions combine academic study and clinical practice. CHRE could undertake a study of how students are prepared for professional practice to develop knowledge and practice across the professions.

Maintaining standards

Councils maintain the standards through issuing codes of practice and guidelines, however the quantity and quality of guidance differs with wide variations in the terminology used and the accessibility and dissemination of information to both professionals and the public. Greater consistency should be encouraged and good practice shared.

While all councils encourage continuing professional development, only a minority check on whether it takes place and is relevant to practise. Only one council, the General Medicine Council, is currently considering the regular assessment of continuing competence. CHRE could assist councils in identifying and sharing good practice.

Fitness to practise

Complaints from the public, employers and others may trigger fitness to practise proceedings. The accessibility of information on how to complain varies between councils and so does the amount of assistance given to complainants.

For all councils, internal procedures for dealing with practitioners who may be unfit to practise tend to be opaque. Terminology and procedures differ in relation to, for example, the level of proof required to establish unacceptable practice; the sanctions available to councils and the degree of compliance with the Human Rights Act. Similar misdemeanours may be treated with varying degrees of severity by different councils. CHRE could provide guidance on these matters.

Conclusion

In conclusion, the CHRE should play a key role in developing good practice and identifying barriers to change. They can encourage partnership between councils and give guidance on priorities.

Judith Allsop

> CHRE should play a key role in developing good practice and identifying barriers to change

EQUANS Study

A research project on asking the Ethnic Question and Antenatal Screening for Sickle Cell/Thalassaemia [EQUANS for short] has been taking place over the past three years. The research, led by myself, tried to assess what format an ethnicity question should take, as part of the antenatal screening service offered to mothers when they 'book-in' their pregnancy with their midwife. Over 5,000 women in four contrasting areas of the country (Birmingham, Leicestershire, King's College, London, and Devon/Exeter) took part in the study.

EQUANS Study: The current state of midwifery

One of the major findings of the study has been the extremely pressured state of the midwifery profession, a principal reason we think behind the low level of recruitment to the study. These pressures have been reported to the NHS Screening Committee as likely to detract from any attempt to provide women with optimal screening choices in pregnancy, with a recommendation for a national minimum allowance of time for the first booking-in interview for pregnancy. Other recommendations made include suggestions to move the focus of screening away from the antenatal period and towards pre-conceptual screening.

A worrying finding was the number of midwives who sincerely believed they could "intuitively" assess who required screening or which clients "needed" to be asked the ethnicity question. Genes associated with sickle cell or thalassaemia are inherited separately from genes associated with skin colour, as the number of white children with sickle cell and thalassaemia demonstrates. This suggests the need for further education of health professionals, and a recommendation has been made to produce an open learning package on ethnicity; the myth of distinct biological 'races'; the reality of racism, and the complex link between ethnicity and sickle cell/thalassaemia.

EQUANS main findings: Time

The overall time taken to explain about sickle cell/thalassaemia and the reasons for asking an ethnicity screening question; to ask the question; and to obtain an answer from the client took around two minutes in Birmingham and Devon/Exeter but around five minutes in Kings College and in Leicestershire. We think this is because in Devon and Exeter, the midwives felt neither confident nor knowledgeable to introduce the topic of sickle cell/thalassaemia and the time taken merely reflects the asking of the question but with little explanation about sickle cell. In Birmingham the midwives had 20 minute slots allocated for the entire booking-in interview, whereas in all other areas the average time allowed for the booking-in interview was around one hour. This perhaps explains why Birmingham had the lowest recruitment rate to the study and why the time taken for those who were asked the question was so short. The time requirement recommended to the NHS Screening Committee is to use the five minutes recorded as the average at Kings and Leicestershire.

EQUANS Findings: The Questions

One of the main issues the NHS Screening Committee was interested in was how many real carriers would be missed if we worked with either Ethnicity Question A (a question based on categories of the type used in the 2001 National Census) or Ethnicity Question B (one based on Yes/No to having ancestors outside UK/Eire and space to write in countries if the answer was Yes). If one ignores the data not collected (three-quarters of all women were never asked the ethnicity question at all because they were never invited into the study!) then Question B missed around 10% of carriers and Question A around 5%. However, there are two other stages at which the ethnicity questions may fall down. One is by clients refusing to provide an answer at all, clients misinterpreting the question, or clients providing an ambiguous answer that makes it impossible to assign them to risk or non-risk status. The other stage concerns the reliability (repeatability) of the questions. Both ethnicity questions in the study incurred some errors both in terms of misinterpretations/ambiguities and in terms of some clients providing a contradictory answer when asked the same ethnicity question on a subsequent occasion.

EQUANS Findings: Moving from Selective to Universal Screening

One area (Leicestershire) was funded to move from screening only those identified as possibly at-risk of being carriers for sickle cell by virtue of their answer to an ethnicity question (selective screening) to offering all women a laboratory test for sickle cell (universal antenatal screening) for the period of the study. Unfortunately, only 43% of women booking in during the period of EQUANS appeared to be offered a laboratory test for sickle cell/thalassaemia. This suggests there are some challenges in getting busy health staff to carry out changes to screening policies effectively. However, even with this low level of coverage, an extra 32% of carriers were identified compared to the level before the study began. Possible explanations for this are that very recent migrations may include those from a number of African countries with high rates of sickle cell, and that a universal programme helps improve the coverage of Mediterranean, Arab and mixed heritage groups who should be being offered a screen anyway in a selective programme. One mother of Caribbean descent was screened in the universal programme and found to be a carrier, and was understandably angry that she had not been offered screening in either of her first two pregnancies when she should have been offered screening under the selective programme previously in place.

EQUANS: Selective Screening in a Low Prevalence Area

During the study, the area with relatively few groups at risk of sickle cell (Devon and Exeter) continued to operate a selective policy antenatal screening for sickle cell/thalassaemia. The number of haemoglobinopathy tests requested of the laboratory from 10 (in the period before the study) to 21 (during the study). The number of carriers increased from 3 to 6 over the same period. Furthermore, the number of at-risk clients identified during the EQUANS study was 143, but only 21 tests were requested by community midwives. Some of this difference may be because clients declined to be screened, but the large discrepancy suggests that most women identified as at risk by their answer to an ethnicity question were not offered a haemoglobinopathy test. The recommendation made to the committee on the basis of these findings were that: (1) the capture of ethnicity data needs to be accompanied by an instruction to offer a screen for the risk groups, since the midwives did not seem to know the full range of ethnic groups potentially affected by sickle cell and (2) that commissioners of service in low prevalence areas should be made aware that their apparent low level of "need" may be a by-product of not actually looking fully for the level of need in the first instance.

Simon Dyson

ASFERT Project

Introduction

The project was the first major study of ethnicity and infertility services in the UK and was carried out between January 2002 and December 2003 with Gujarati Hindu, Punjabi Sikh, Bangladeshi Muslim and Pakistani Muslim communities in three English cities. It was funded by the NHS Executive Trent Region. It aimed to examine the social meanings of involuntary childlessness amongst South Asian communities and to explore the ethnic, cultural and religious context of access to infertility services; to examine the experiences of South Asian couples who have been medically diagnosed as sub-fertile or infertile; and to make recommendations for the development of policy and practice to service commissioners and providers.

The research was carried out in two phases. Phase One consisted of 14 focus groups with South Asian participants (n=93) and individual interviews with key informants (n=21). Phase Two included interviews with South Asian individuals experiencing fertility problems (n=50) and interviews with health professionals providing infertility services (n=23).

Key findings

In South Asian communities, children are highly desired; parenthood is culturally mandatory and childlessness socially unacceptable. Infertility is a highly stigmatised condition with significant social consequences, especially for women. There is little knowledge of causes of infertility and of ways in which people can be assisted to have a child, although infertility is regarded as a problem amenable to medical help. Most infertility treatments including IVF are socially and culturally acceptable. The needs and concerns of ‘infertile’ people of South Asian origin are not dramatically different from those of ‘white’ service users. However, differences of language, culture and religion are often important. NHS funding for IVF is limited. The socio-economic profile of the Bangladeshi and Pakistani communities in particular, places them at a disadvantage in accessing non-NHS funded treatment. Some dissatisfaction with primary care was evident. People experiencing problems with fertility were generally satisfied with secondary care services, but some needs were less than fully met. These included: information needs, language and communication needs and emotional support needs.

Recommendations

The Department of Health should ensure the full implementation of the NICE Clinical Guideline on infertility treatment at the earliest opportunity to ensure fair and equal access to NHS infertility treatment for all couples regardless of where they live. All relevant authorities should ensure that suitable and sensitive ethnic monitoring is in place and that regular analysis of data occurs. The HFEA should ensure that ethnicity data is available for all monitored treatments. The HFEA and other interested agencies should consider engaging with key opinion formers and other partners in minority ethnic communities to increase understanding of infertility and infertility treatment and to reassure people about confidentiality in the NHS. Clinics should ensure that all patients receive appropriate written information about infertility and treatment at various stages of the treatment process. Clinics should consider providing patients with written individualised treatment plans. Information about infertility and treatment should be made available in languages other than English. The needs of patients who do not read in their preferred language should also be addressed and material should be available in audio and video format.

There is a clear need for improved interpretation services in most NHS trusts. It may be practical for clinics and preferable for patients to use telephone-based interpretation (such as Language Line) on some occasions. Clinics should consider making the use of an official interpretation service a mandatory component of at least some consultations where one partner does not speak English, to enable share decision-making, implement patient-centred care and ensure informed consent.

Steps need to be taken to increase awareness of support counselling and the confidential nature of this service. Efforts should be made to ensure that counselling is culturally sensitive. Infertility support groups should consider ways in which they might appeal more directly to users from minority ethnic communities, including producing publicity with material and imagery that is 'inclusive'. Health professionals should be provided with educational opportunities to explore ethnic diversity and the influence of ethnicity on health and healthcare.

Lorraine Culley

> There is a clear need for improved interpretation services in most NHS trusts.

Health Consumer Groups and the Policy Process

Introduction and methods

In recent years, a key component of Government health policy has been to incorporate the views of patients, users and carers into health care decision making. The extent to which health consumer groups – voluntary sector organisations that promote and/or represent the interests of patients, users and carers – make their voice heard at national level was the focus of a three year ESRC funded study between 1999-2001.

The research sought to explore the internal relationships within groups; their aims and focus; how they interacted with central government, Parliament, the media, professional associations and the pharmaceutical sector and the effect of alliances and coalitions within the sector. The focus of study was on groups serving five condition areas – arthritis, cancer, heart and circulatory disease, maternity and childbirth, and mental health; those concerned with a particular population group such as children, the elderly or all patients; and on the alliance organisations established by the groups themselves. The aim was to assess whether different strategies and modes of interaction were related to group characteristics.

> In relation to influencing policy, health consumer groups have become more active; 75% of questionnaire respondents had been in contact with central Government regarding policy issues.

A postal questionnaire was undertaken in Autumn 1999, achieving a 66% response rate (n=123). Interviews with the senior officers from a sample of groups (n=39) and representatives from the health professions, civil service, research charities, the pharmaceutical industry, in addition to MPs and Ministers (n=31) were undertaken between March and December 2000.

Results

The results showed that despite diversity in the origins, purpose and size (membership, income and staffing) of the groups, there were nevertheless many common values and ways of working in the sector. A major aim for all was the provision of information for members and the wider public. Many groups also provided a variety of support services for patients, service users and carers. The groups sought to develop interactive relationships with members and clients, not only to provide better quality information and support services, but to be able to capture the experience of illness, care and treatment. These relationships enabled groups to hold a particular type of expertise rooted in actual experience, which strengthened their claim to legitimacy among other participants in the policy process, including government, the professions, the media and other commercial interests.

In relation to influencing policy, health consumer groups have become more active. 75% of questionnaire respondents had been in contact with central Government regarding policy issues in the previous three years, with nearly two thirds claiming opportunities for involvement had increased in that time. This was due to a number of inter-related factors. First, groups themselves had become more concerned with not only providing support but also in influencing policy. Many groups had developed active relationships with politicians, civil servants and the media. Second, successive governments had encouraged the opportunities for participation, for example in the development of service standards for particular conditions and the NHS Plan. Third, the political capacity of groups had been strengthened through the development of both informal and formal alliances between groups.

However, developing this policy role posed organisational challenges for the sector. More than half the groups surveyed had fewer than 1,000 members and an income of £100,000 or less. Contributing to a key policy document or a national service framework could drain a group's scarce resources. There were inequalities between groups. Some faced particular shortages of resources, skills and political contacts compared to others. Again, the vital role of alliance organisations, whether supporting groups or representing their interests, was stressed by respondents.

Differences between condition areas were also identified. Inter-organisational links were particularly strong within the mental health and maternity and childbirth sectors. Mental health and cancer groups had stronger links with Parliament. Interestingly, there was a shared belief among health consumer groups and other participants that influence varied according to condition area – that groups in some sectors, for example, arthritis, did not have the same impact because they were not a government priority. However, no evidence was found to suggest there was a link between condition area and self-reported influence.

Conclusions

In conclusion, the research findings indicate that Government, when drawing up health policies, increasingly consults health consumer groups. Professionals and the pharmaceutical companies have also formed links with them in order to draw on the experience of the health care user and carer. Both the expertise of groups and their links with a particular constituency are recognised. There was evidence that some groups have had an impact on policy and legislation. More generally, they have brought a new perspective to the policy process and have placed on the agenda issues such as the capacity for self-management; the particular needs of carers, and the support required for people to enjoy maximum quality of life. Health consumer groups are making a contribution to the health policy process and, given further support, their contribution could become a permanent and institutionalised feature of a health service in which professionals have hitherto been dominant.

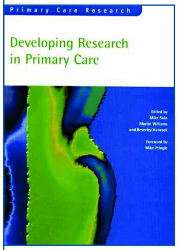
Kathryn Jones

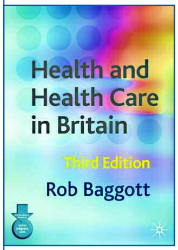
The research findings indicate that Government, when drawing up health policies, increasingly consults health consumer groups.

Publications by HPRU core team and members

This section of the Report lists the main publications during the period under review of core team and Unit members. Publications are listed by publication type, author and date of publication. Forthcoming publications are included under a separate heading at the end of this section. Letters and shorter pieces for magazines have not been included.

Books





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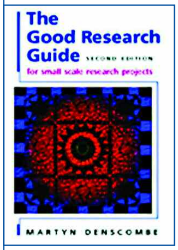

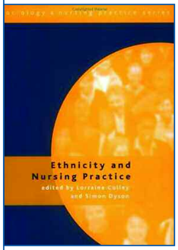

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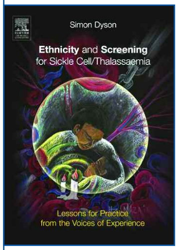

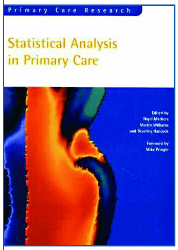

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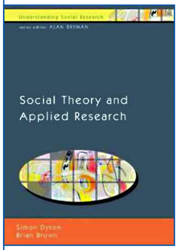

Understanding Social Research
series editor: ALAN BRYMAN
Social Theory and Applied Research
Simon Dyson
Brian Brown

Ground Rules for
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a 10 point guide for social researchers
MARTYN DENSCOMBE

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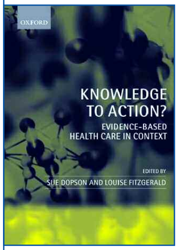

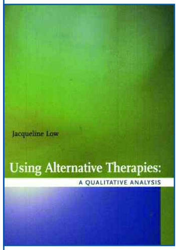

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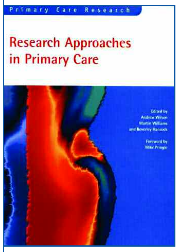

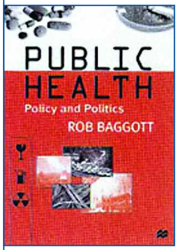

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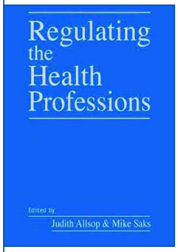

Regulating
the
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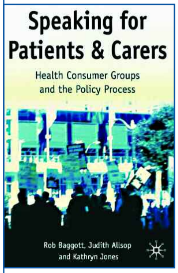

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Conferences

Dissemination of research findings forms a central challenge for members of the Health Policy Research Unit and a wide variety of mechanisms are used, in addition to written pieces for international and national journals and magazines.

Since 2000, members have given plenary and keynote addresses, presented papers, run workshops or prepared poster presentations at around 170 local, national and international conference and seminar venues. These include some 50 in overseas locations, including in France, Spain, Holland, Belgium, Iceland, Italy, Greece, Portugal, Switzerland, Sweden, the USA, Canada, Australia and China. HPRU members have sought to share research findings and discuss methodological issues arising from research at events organised by university departments, Government departments, charities and academic and professional bodies. Conferences and seminars have included those which attract primarily academic participants, such as the Russian Academy of Sciences and the European Sociological Association; those which draw principally health professionals and managers, such as the International Nursing Computer and Technology Conference and UK Department of Health events; and those which bring together professionals, academics, health care users and community activists, such as the Public Health Association and British Heart Foundation workshops.

Professor Rob Baggott, Dr Kathryn Jones and Professor Judith Allsop at the ESF Exploratory Workshop, Vienna, Austria

2005

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Mark Johnson:
Our Vision Too: Identifying and Meeting Needs of Ethnic Minority People with Visual Impairments (Poster), VISION 2005, London, April 2005.

Methodological Issues and Barriers in 'Ethnic Health' Research, Workshop, Launch Conference, Leicester Centre for Ethnicity and Health Research, Loughborough, March 2005.

Inequality and Incompetence: The Case for Training, Ethnicity Training Network Conference, University of Leeds, 24 March 2005.

Improving the Access of Ethnic Minority Visually Impaired People to Appropriate Services, BME & Sight Loss Day, Henshaws Society for Blind People, Manchester, 18 February 2005: hsbp.co.uk/Templates/Internal.asp?NodeID= 91001

Jacqueline Low:
Alternative and Complementary Health Care in Urban New Brunswick: Preliminary Findings from On-Going Research, 2nd Annual IN-CAM Symposium – CAM Research in Canada: Sharing Successes and Challenges at the University of Toronto, St Michael 's College, University of Toronto, Toronto, Canada, 12-13 November 2005.

Facilitation and Domination: Third Party Presence in Qualitative Interviews with People Living with Parkinson's Disease, Joint Symbolic Interaction and Ethnographic Research and North Central Sociological Association Conferences in Pittsburgh, PA, 7-10 April 2005.

Sally Ruane:
Resisting Bolkestein: Knowledge is Not Power. The EU Draft Directive on Service in the Internal Market, Annual CAOS Conference, University of Leicester, May 2005.

The European Union, Health and the Democratic Deficit, Annual Conference of the Social Policy Association, Bath Spa University, June 2005 (with Byrne, D.).

2004

Judith Allsop:
The Regulation of Health Professions: A New Partnership Between the State, Professions and Citizens?, European Sociological Association Symposium: 'Professions, Social Inclusion and Citizenship', University of Lincoln, 15-17 April 2004 (with Jones, K.).

Professional Knowledge and Professional Governance: Forms, Powers and Conflicts, Knowledge, Work and Society, ISA, Sociology of Professional Group, University of Versailles, 2004 (with Jones, K.).

Rob Baggott:
Public Health and the NHS, Symposium on 20 Years of Reform in the NHS, Durham University, January 2004.

Lorraine Culley:
Attitudes to Gamete Donation in British South Asian Communities, 2nd International Conference on Egg Donation, Valencia, Spain, February 2004 (with Hudson, N. and Rapport, F.).

Social Constructions of Infertility and Gamete Donation Among British South Asians, European Workshop on Migration and Organ Donation, sponsored by the European Science Foundation, Birmingham,10-12 September 2004.

Constructing Infertility: Involuntary Childlessness and South Asian Communities in the UK, The Second Interdisciplinary Conference on Communication, Medicine and Ethics (COMET), Linköping, Sweden, June 2004 (with Hudson, N. and Rapport, F.).

Martyn Denscombe:
Web Surveys and School-Based Research: The Ethics of On-Line Data Collection in Schools, 'New Research for New Media': Innovative Research Methodologies conference, Universitat i Virgili, Tarragona, Catalonia, Spain, October 2004.

Simon Dyson:
Ethnicity and Antenatal Screening for Sickle Cell/Thalassaemia, Sickle Cell and Thalassaemia Association of Counsellors Annual General Meeting, London, 9 July 2004.

'Race-Thinking': Health Professionals' Conceptions of 'Race' and Ethnicity, Royal College of Midwives Conference British Library, London, 6 December 2004.

Sue Dyson (nee McCartney):
Life History and Zimbabwean Nursing Students, Migrant-Friendly Hospitals Project – Hospitals in a Culturally Diverse Europe Conference, Amsterdam, 9-11 December 2004.

Global Boarders, British Educational Leadership, Management and Administration Society (BELMAS) Conference, Oxford University, 8-10 July 2004.

Lousie Fitzgerald:
Managing Change: Roles and Responsibilities in a Professionalized Organisation, O.B. in Health Care Conference, Banff, Canada, April 2004 (with Ferlie, E., Buchanan, D., Baeza, J., Lilley, C., Addicott, R., Brooks, N. and Rashid, A.).

Pulling Together? Relationships between Professionals and Managers in Implementing the NHS Plan, 3rd SDO Annual Conference, London, April 2004 (with Ferlie, E., Buchanan, D., Baeza, J., Lilley, C., Addicott, R., Brooks, N. and Rashid, A).

Nicky Hudson:
'If Women don't have Children then they don't have Life': Involuntary Childlessness and South Asian Communities in the UK, Durham University Medical Anthropology Research Group, Durham, December 2004 (with Culley, L.A).

Exploring Social Constructions of Infertility amongst British South Asian Communities, Assisted Reproduction and Infertility Research Network Meeting, Aston University, March 2004 (with Culley, L.A).

Mark Johnson:
Designing Physical Environments for a Migrant-Friendly Health Service: Results from a Study on the Design of Health Service Buildings, Final Conference of the European Project Migrant-Friendly Hospitals, Amsterdam, December 2004 (with Jones, K. Hardy, A. Biggerstaff. D. and Birksted, J.), published on website: mfh-eu.net/conf/results/proceedings/ mfh_ paper6_ MarkJohnson.ppt.

Ethnic Inequalities, Keynote paper: Ethnic Minority Participation in Clinical Trials, Nuffield Institute for Health, Leeds University, 1 November 2004.

Indicators on Health and Migration, First Symposium in Health and Migration, Fundacion Paulino Torras Domenech and International Organisation for Migration, Barcelona, Spain, 25-26 October 2004.

Human Tissue and Blood or Organ Donation, Transplantation and Minority Ethnic Communities: A Literature Review, European Science Foundation International Exploratory Workshop 'EUMIDON' (Europe's Migrants and Human Tissue Donation), August 2004 (with N. Hudson), full report of the workshop at esf.org/generic/1925/03017 Report.pdf.

Integration of Refugees and New Migrants: Health (Contribution to a review of the evidence on good practice and "what works" in relation to the integration of new migrants and refugees in the UK) Home Office National 'Integration' Conference, London Docklands, 29 June 2004.

Assuring the Quality of Evidence for Migrant/Minority Health Care, Workshop: First European Conference on Migrant Health, Erasmus University, Rotterdam, 23-25 June 2004.

Components of Ethnicity and Effects on Health Access, British Heart Foundation Workshop on Ethnic Strategy, London, 23 April 2004.

Working with Refugees to Improve the Evidence Base, London Mental Health Research & Development Virtual Institute (LonMHR&D) Workshop, King's Fund, 3 March 2004.

Jacqueline Low:
A Reformulation of Chrisman and Kleinman's Model of the Health Care System: Accounting for Lay Use of Alternative and Complementary Therapies, 1st Annual IN-CAM Symposium: Increasing CAM Research Capacity and Networking in Canada, University of Toronto, St. Michael's College, University of Toronto, 4-5 December 2004.

Lay Acquiescence to Medical Dominance in Assessing the Efficacy of Alternative and Complementary Therapies: Reflections on the Active Citizenship Thesis, European Sociological Association Symposium: Professions, Social Inclusion and Citizenship, University of Lincoln, 15-17 April 2004.

Sally Ruane:
Health Policy Prescriptions at the Beginning of the Twenty First Century, Annual Conference of the Social Policy Association, Nottingham, July 2004.

'Submission to the Commissioner for Health and Consumer Protection in response to Enabling Good Health for All: A Reflection Process for a New Health Strategy', unpublished paper submitted in response to a consultation initiated by the European Union Commisioner for Health and Social Protection, October 2004.

2003

Rob Baggott:
The Future of Health Services, Audit Commission Seminar, Warwick, 1 April 2003.

Progress on PALS, Conference at Queen Elizabeth Hospital, Birmingham, 21 March 2003.

Lorraine Culley:
Researcher Identity: A Study of Ethnicity and Infertility in British South Asian Communities, The International Conference on Advances in Qualitative Methods, Banff, Canada, 3 May 2003 (with Rapport, F. and Hudson, N.).

Recruitment and Reciprocity: Focus Group Method in Health Research with Minority Ethnic Communities, Peer reviewed poster presentation, Conversatione, University of Wales, Swansea, December 2003 (with Rapport, F. and Hudson, N.).

Simon Dyson:
Negotiating Ethnic/Family Origins: Perspectives of Haemoglobinopathy Nurse Counsellors, British Sociological Association Medical Sociology Conference University of York, September 2003 (with Culley, L.A.).

The Ethnic Question and Screening for Sickle Cell/Thalassaemia, NHS Regional Antenatal Screening Co-ordinators, University of Leicester, 13 January 2003.

The Ethnic Question and Screening for Sickle Cell/Thalassaemia, NHS Screening Committee (Antenatal Screening Sub-Committee) Department of Health, London, 20 January 2003.

The Ethnic Question and Screening for Sickle Cell/Thalassaemia, NHS Regional Antenatal Screening Co-ordinators Department of Health, London, 27 January 2003.

The Ethnic Question and Screening for Sickle Cell/Thalassaemia, NHS Trent and South Yorkshire Antenatal Screening Co-ordinators, Doncaster Royal Infirmary, 28 January 2003.

Ethnicity and Antenatal Screening for Sickle Cell/Thalassaemia, UK National Forum on Haemoglobin Disorders 16th Meeting, Hammersmith Hospital, 8 May 2003.

Ethnicity and Antenatal Screening for Sickle Cell/Thalassaemia, NHS Health, Scotland, Queen Mother Hospital, Yorkhill NHS Trust, Glasgow, 28 July 2003 (with Dyson, S.E.).

Ethnicity and Antenatal Screening for Sickle Cell/Thalassaemia, Ethnicity, Genetics and Medicine London IDEAS Genetic Information Park Imperial College, London, 26 September 2003.

Sue Dyson (nee McCartney):
Introducing Diversity into the Nursing Curriculum: Issues for Nurse Education, Nurse Education Tomorrow Conference, University of Durham, 3 September 2003.

Screening Selectively by Ethnicity for Haemoglobin Disorders: The Current State of Community Midwifery, British Sociological Association Medical Sociology Conference, University of York, September 2003 (with Cochran, F., Kennefick, A., Kirkham, M., Morris, P., Squire, P., Sutton, F. and Dyson, S.M.).

Julie Fish:
Lesbians and Health Care: National Survey of Lesbians' Health Behaviour and Experiences, East Midlands Public Health Conference, 2003.

Lousie Fitzgerald:
Inter-Organisational Collaboration – Turning Rhetoric into Reality, EGOS Conference, Copenhagen, July 2003 (with Law, J., Gasgoigne, M., Lindsay, M., Peacey, N. and Soloff, N.).

Nicky Hudson:
Exploring Social Constructions of Infertility amongst British South Asian Communities, BSA Human Reproduction Study Group 4th Annual Conference, University College Northampton, December 2003 (with Culley, L.A.).

Informing Policy and Practice: A Study of Infertility Services to South Asian Communities, Women's Informed Childbearing and Health Research Group Seminar, School of Nursing and Midwifery, Sheffield University, January 2003 (with Culley, L.A.).

Mark Johnson:
Diversity in Health & Social Care – An Agenda for the ESRC?, Plenary paper, ESRC Workshop "Ethnicity, Division and Cohesion – New Challenges in a Changing World", London, December 2003.

A Local Centre for National Expertise in Ethnic Diversity and Health, First Leicester Conference on Ethnicity & Health, Leicester, December 2003.

Ethnicity, Evidence and Diversity in Health & Social Care: Implications for the NeLH Keynote paper, Workshop for the National Electronic Library for Health, London, October 2003.

From Migrant to Minority: A Future for the Following Generations?, Medical Association of Nigerian Specialists & Generalists, Annual Conference, Manchester, October 2003.

Role of the Community Pharmacist in Health Care Needs for Members of the South Asian Minority Ethnic Population: General Practitioner Perspectives, (Poster) British Pharmaceutical Society Annual Conference 2003: published as Poster in International Journal of Pharmacy Practice 11, Supp: R95 (with Lakhani, N., Cannaby A-M. and Farooqi, A.).

Developing Research Relations with Black and Minority Ethnic Communities, Centre for Social Justice Annual Conference: 'Engaging with Local Communities', Coventry, April 2003.

Longitudinal Studies of Refugees and Asylum Seekers: Research to Inform Issues of Social Care Policy & Service Delivery, Department of Health Workshop, London, April 2003.

Research Governance in a Multi-Cultural Society, Foundation of Nursing Studies/ Transcultural Nursing & Health Care Conference: 'Health Culture & Delivering Care', Commonwealth Institute, London, March 2003.

Kathryn Jones:
Strength in Numbers: Alliances of UK Health Consumer Groups in the National Policy Process, European Group on Public Administration Workshop on Voluntary Action in Europe, Lisbon, 4-5 September 2003.

Safety in Numbers: Alliances of Health Consumer Groups as a Means of Influencing Policy, Political Studies Association Annual Conference, Leicester, 15-17 April 2003.

Jacqueline Low:
Reconceptualizing the Health Care System: Accounting for how Lay People Access Alternative Therapies, 2nd Annual Social Sciences in Health Colloquium, University of New Brunswick, Fredericton, New Brunswick, Canada, 3 October 2003.

Managing Safety and Risk: The Experiences of People with Parkinson's Disease who use Alternative and Complementary Therapies, Canadian Sociology and Anthropology Association 2003 Annual Meeting, Congress of the Humanities and Social Sciences, Dalhousie University, Halifax, Nova Scotia, Canada, 28 May-4 June 2003.

Methodological and Analytic Issues in Interviewing People Experiencing Communication Difficulties, 20th Qualitative Analysis Conference: Traditions and Transitions, Carleton University, Ottawa, Ontario, 22-24 May 2003.

2002

Judith Allsop:
The Anglo-American and Russian Sociology of Professions: Comparisons and Perspectives, Comparative Section: Methodology in the Sociology of Professional Groups: XVth ISA Congress of Sociology, Brisbane, Australia, 12 July 2002 (with Mansurov, V.; Luksha, O. and Saks, M.).

Professional Associations and their Engagement with Health Consumer Groups in the UK, Sociology of Professional Groups: Health Professions and the Public: XVth ISA Congress of Sociology, Brisbane, Australia, 7-13 July 2002 (with Jones, K. and Baggott, R.).

Rob Baggott:
Patient Power, Conference on Patient Information, Communication and Participation, Harrogate, 4 July 2002.

Participation and Representation in Health Policy, Conference 'Hopes and Fears': An International Conference on the Future for Health, Cambridge, 4-6 September 2002.

Lorraine Culley:
Equal Opportunities in the British NHS: Recruitment to Nursing from Minority Ethnic Communities in the UK, International conference on Health Management and Health Economics, Athens Institute for Education and Research, Athens, Greece, 30 May 2002.

Infertility and Ethnicity in South Asian Communities: Issues Surrounding Researcher Identity, Peer Reviewed Poster Presentation at Conversazione Health and Social Care Exhibition, Swansea Clinical School, University of Wales Swansea, 12 December 2002 (with Rapport F., Hudson N., Katbamna S. and Johnson M.R.D.).

Simon Dyson:
Sociology and Sickle Cell Anaemia, Sickle Cell Disease Association of America: 30th Anniversary Conference, Washington DC, USA, 17-21 September 2002.

Ethnicity and Antenatal Screening for Sickle Cell/Thalassaemia, UK National Forum on Haemoglobin Disorders 15th Meeting, Royal Wolverhampton Hospital, 14 November 2002.

Sue Dyson (nee McCartney):
Life Stories as a Way of Interpreting the Experience of African Students Studying Nursing in the UK, Narrative, Memory and Health Research Group Conference, University of Huddersfield, 20 April 2002.

Life History and African Nursing Students, Nurse Education Tomorrow Conference, University of Durham, 4-5 September 2002.

Dr Simon Dyson presenting at the 33rd Annual Convention of the Sickle Cell Disease Association of America in September 2005

Julie Fish:
Lesbians and Breast Screening, British Sociological Association, Annual Conference, March 2002.

Lousie Fitzgerald:
The Role of Clinical Managers, FLOS, Copenhagen, Denmark, May 2002.

The Issues and Dilemmas in Comparative Case Study Methods, University of Aalborg, Denmark, May 2002.

Innovation in Health Care - The Role of the Professions, 3rd International Conference on O.B. in Health Care, Said Business School, Oxford, March 2002 (with Ferlie, E.).

Context Matters: Influences on the Models and Modes of Service Delivery, IRSPM Conference, Edinburgh, April 2002 (with Sandall, J., Harvey, J. and Kelly, B.).

Networks for Research and Research on Networks in Health Care, Symposium to the Research Methods and Health Care Management Divisions, Academy of Management Conference, 2002 (with Dopson, S., Ferlie, E., Locock, L. and Gabbay, J.).

Nicky Hudson:
Infertility and British South Asian Communities: Reflections on Focus Group Research, British Sociological Association Human Reproduction Study Group, 3rd Annual Conference, University College Northampton, 28 November 2002 (with Culley, L.A. and Rapport, F.).

Ethnicity and Infertility: Conceptual, Methodological and Ethical Issues in an Applied Health Research Project, BSA Medical Sociology Group 3rd Annual Conference, University of York, September 2002 (with Culley, L.A., Johnson, M.R.D., Katbamna, S. and Maggs-Rapport, F.).

Mark Johnson:
Researching (with) Minority Communities: Problems and Possibilities, Workshop, Coventry University 'Race and Disability' Conference, November 2002.

Integrating Research Involving Minority Groups into NHS Culture, two workshops, Directorate of Health & Social Care London Conference, "Research Governance, Management and Integration in Health" London, November 2002.

Delivering Diversity in Practice: Research Findings in Health Inequality, Royal College of Nurses East Midlands, Regional Research Meeting, October 2002.

Valuing and Validating Community-Based Evidence in Ethnic Health, Keynote address, Transcultural Research Group in Health and Social Care Annual Conference "Culture Health & Diversity", Sheffield, September 2002.

Research Findings in Health Inequality, Plenary Address, Afiya Trust Conference "Good Practice for People Working with Black Carers", Leicester, September 2002.

Minimizing Risk in Bilingual Medical Communication (Poster Presentation), European Association for Communication in Healthcare (EACH) International Conference on Communication in Healthcare (ICCH), University of Warwick, September 2002 (with Cambridge, J.).

Training for Multi-cultural Clinical Teams, European Association for Communication in Healthcare (EACH) International Conference on Communication in Healthcare (ICCH), University of Warwick, September 2002 (with Cambridge, J., Lamont, G., Skinner, A. and Smith, A.).

Language and Communication, Transcultural Research Group in Health and Social Care, University of Sheffield/Trent Focus, June 2002.

Meeting the Needs of Asylum Seekers and Refugees in a Dispersal System, Plenary Session (Health Education & Governance), Global Refugees: The Sociology of Exile, Displacement and Belonging, Staffordshire University, April 2002.

Involvement of Black and Minority Ethnic Service Users in Health Research, The Patients Forum (Annual Conference) Plenary Address, London, February 2002. (published in Conference Report, March 2002: 8-9; thepatientsforum.org.uk).

Jacqueline Low:
Lay Assessments of Efficacy: How People Living with Parkinson's Disease Evaluate the Effectiveness of Alternative and Complementary Therapies, 1st Annual Social Sciences in Health Colloquium, University of New Brunswick, Fredericton, New Brunswick, Canada, 4 October 2002.

Avoiding the Other: A Technique of Stigma Management Amongst People who use Alternative Therapies, 19th Qualitative Analysis Conference: Studying Social Life Qualitatively, McMaster University, Hamilton, Ontario, Canada, 23-25 May 2002.

Sally Ruane:
The Threat of a Bad Example, Health Policy Study Day of the Social Policy Association, City University, London, March 2002.

The General Agreement on Trade in Services: Implications for Health and Education, Annual Conference of the Green Party, Scarborough, March 2002.

The Private Finance Initiative and Public-Private Partnerships: Implications and Resistance, Public meeting called by the Trade Council, Town Hall, Leicester, May Day 2002.

Private Sector Involvement in the NHS, ATTAC Conference on the General Agreement on Trade in Services, LSE, London, 2002.

2001

Judith Allsop:
Subjectivity and Rationality in Discourses about Medical Regulation UK, ISA Research Committee on Work and Occupations, Conference on Professions in Comparative Perspective: The Social Scientific Reliability of Professions at the turn of the 2nd Millenium, Foundazione Angelo Collocci, Jesi, Italy, 2001.

Health Consumer Groups as Stakeholders in Health Care, Presentation to the Patients Forum Annual Conference, London, February 2001 (with Baggott, R. and Jones, K.).

Health Consumer Groups and the National Policy Process, 5th Conference of the European Sociology Association, Helsinki, 28 August-1 September 2001 (with Baggott, R. and Jones, K.).

The Attitudes of Russian Doctors to Work and Profession in the Context of Change, 5th Conference of the European Sociology Association, Helsinki, 28 August-1 September 2001 (with Kauppinen, K., Mansurov, V. and Saks, M.).

Health Consumer Groups as Stakeholders in Health Care, British Sociological Association, Medical Sociology Conference, University of York, 21-23 September 2001 (with Jones, K. and Baggott, R.).

Denis Anthony:
Preparing Faculty for Teaching Globally. Nursing: A New Era for Action, ICN 22nd quadrennial conference, Copenhagen, 10-15 June 2001 (with Koeckeritz, J. and Pearson, G.).

An Online Course for Chronic Wound Management. Living/working, A wireless world: Nineteenth Annual International Nursing Computer and Technology Conference, Rutgers University, Denver, 2001.

Clinical Guidelines: Using Informatics to Improve Nursing Care Informatics 2001, 11th Annual Summer Institute in Nursing Informatics, University of Maryland, Baltimore, 2001 (with Brooks, N.).

Rob Baggott:
Participation and Representation in Health Policy, Conference on Patient Information, Communication and Participation, Barbican Centre, London, 19 December, 2001.

Lorraine Culley:
Responding to Ethnic Diversity: A Critique of Essentialism in Nursing Theory and Practice, International Conference, University of Toronto, Canada, May 2001.

Simon Dyson:
Racism and Professionalism: The Case of Caribbean Nurses in the UK British Sociological Association, Medical Sociology Conference, University of York, 21-23 September 2001 (with Culley, L.A.).

Julie Fish:
Lesbians' Experiences of Cervical Screening: Preliminary Results from a UK Survey of Lesbian Health, Medical Sociology Group Conference, British Sociological Association, University of York, 21-23 September 2001.

Lousie Fitzgerald:
Does Evidence Flow across Professional Boundaries in Primary Care?, RCGP Research Symposium 'Broadening Agendas; Widening Participation in Research into Health Inequalities', London, June 2001 (with Ferlie, E. and Hawkins, C.).

The Diffusion of Innovation in Health Care: The Impact of Professionals, American Academy of Management Conference, Washington DC, August 2001 (with Ferlie, E., Wood, M. and Hawkins, C.).

The Diffusion of Innovation in the UK: Comparative Contexts; Comparative Professions and Credible Science, Symposium paper to the American Academy of Management Conference, Washington DC, August 2001 (with Ferlie, E., Locock, L., Dopson, S. and Gabbay, J.).

Mark Johnson:
Ethnicity and Identity Issues in Alcohol Use, Alcohol Concern/Aquarius workshop to launch report: 'Drinking in Second and Subsequent Generation British and Asian Communities in the English Midlands', Birmingham, December 2001.

The Integration of Muslim Minorities into Health and Social Services: European Conclusions from UK Experiences, (Keynote) – EuroFor Annual Conference, Immigration and refugee protection policies in Europe, Brussels, December 2001.

Outcome Measures, NHS National Co-ordinating Centre for Methodological Research workshop, Addressing Ethnic Diversity in Health and Social Care Research, Birmingham, December 2001.

Ethnic Minorities and Visual Impairment, Royal National Institute for the Blind, London, September 2001.

Improving Access to Health Services, Health Development Agency/West Midlands Liaison Committee on Ethnicity: 'Hearts & Minds' Conference, Walsall, September 2001.

Providing a Quality Language Support Service in the Health Sector, Workshop, First National Conference, Institute of Linguists/ National Register of Public Service Interpreters, Warwick University, September 2001.

Priorities for Research in Black and Minority Ethnic Issues: Health, Joseph Rowntree Foundation, York, July 2001.

Ethnic Minorities and Palliative Care, LOROS Hospice Seminar: Living with Cancer – Does Ethnicity make a Difference?, Leicester, July 2001.

Ethnic Diversity: Crucial for Social Policy, Cheltenham & Gloucester CHE, Faculty of Education & Social Sciences Social Policy Research Seminar, May 2001.

Jacqueline Low:
Lay Perspectives on the Efficacy of Alternative and Complementary Therapies: Preliminary Analysis from On-Going Research, 18th Qualitative Analysis Conference, Doing Ethnographies and Ethnographic Doings, McMaster University, Hamilton, Ontario, Canada, 17-19 May 2001.

Sally Ruane:
The General Agreement on Trade in Services, New Labour and the Implications for Health Policy, Social Policy Association annual conference, Belfast, July 2001.

Strategies and Tactics in Anti-Privatisation Campaigning, Workshop, Keeping the Private Out of the Public, Leicester, November 2001.

2000

Judith Allsop:
A Social Scientific Approach to the Study of Professions, Russian Academy of Sciences, Moscow, March 2000.

Health Consumer Groups and the Policy Process, Medical Sociology Conference, University of York, September 2000 (with Baggott, R. and Jones, K.).

Challenges to Professional Identity: The Case of the British Medical Profession, First International Conference of the Research Network 'Sociology of Professions' of the European Sociological Association, Jesi, Italy, 4-6 May 2000.

Denis Anthony:
Are Nurses Excluded from the Web? Keynote address, British Computer Society: Harrogate, 2000.

Lorraine Culley:
Equity and Healthcare: *Minority Ethnic Groups in the UK*, XVth International Conference on the Social Sciences and Medicine, Eindhoven, Netherlands, 16-20 October 2000.

Simon Dyson:
Sickle Cell/Thalassaemia: Minority Issues?, British Sociological Association Medical Sociology Group and the European Society of Health and Medical Sociology Association Joint Conference, University of York, 14-17 September 2000.

Sickle Cell/Thalassaemia Screening and Ethnic Minorities, King's College, London Department of Public Health Medicine Research Seminar, 10 March 2000.

Sue Dyson (nee McCartney):
Evaluating Ethics Education: Problems with Methodology, Nurse Education Tomorrow Conference, University of Durham, 4 September 2000.

Lousie Fitzgerald:
The End of the Third Sector, Invited discussant to the ESRC Seminar Series on 'The New Public Management: Researching the NPM', Imperial College, London, June 2000.

Professions in Change, Reality, Time and Power, Symposium at the American Academy of Management Conference, Toronto, August 2000 (with Ferlie, E.).

Actors and Interaction in the Diffusion of Innovations: Innovation and Change in Health Care, British Academy of Management Conference, Edinburgh, September 2000 (with Ferlie, E.).

Mark Johnson:
Regulation of Care Assistants, Royal College of Nursing Vocational Qualifications Forum: Competence, Curricula and Care Standards, London, October 2000.

OT Assistants and Health Care Assistants: The National Picture, Trent Regional Group of Occupational Therapists Annual Meeting: (Keynote speaker) Sleaford, October 2000.

Migrant Minorities and the Production of Welfare: The Case of Jewish Community Services , Social Policy Association Conference, Roehampton, April 2000 (with Harry Cowen, Cheltenham).

Working with (Minority Ethnic) Health Service Users, Leicester & Rutland Research Network, Leicester, March 2000.

Household Formation, Mixed Heritages and Ethnic Diversity, ESRC 'Gendering "Race" and Ethnic Relations Research' Seminar; Queen Elizabeth House, Oxford, March 2000.

Housing and Health: Interdisciplinary Problems, Inter-Disciplinary Solutions, Department of Geography Research Seminar, Sheffield University, March 2000.

Learning from – or with – Ethnic Minority Consumers and Organisations, NHSE 'Consumers in Research' Group and Help for Health Trust Conference ('Research: Who's Learning'), Kensington, January 2000.

Ethnic Minorities, Inner Cities and Primary Care, Institute of British Geographers – Royal Geographical Society Annual conference, Brighton, January 2000.

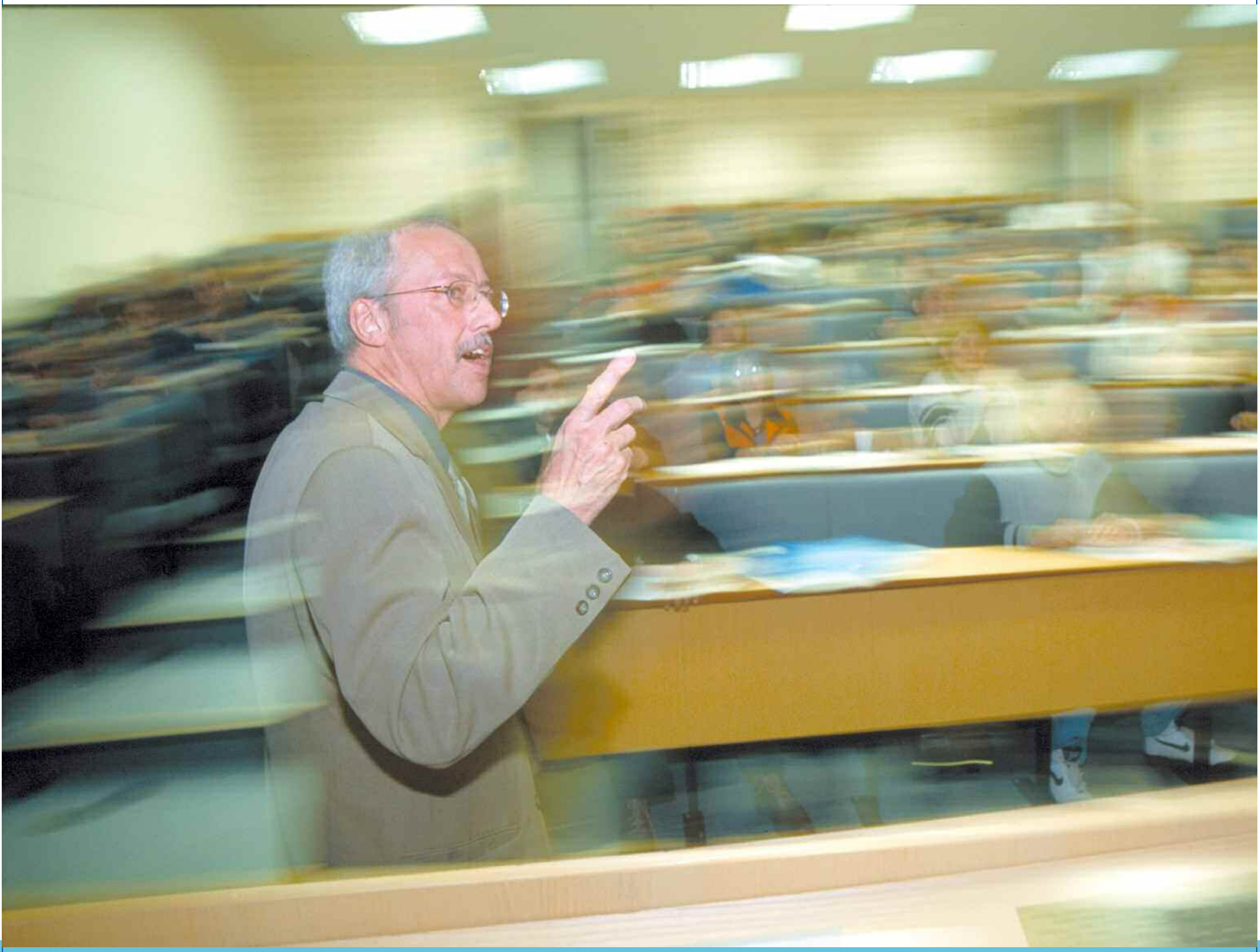
Kathryn Jones:
Health Consumer Groups in the National Policy Process, British Sociological Association Medical Sociology Group and the European Society of Health and Medical Sociology Association Joint Conference, University of York, 14-17 September 2000.

Jacqueline Low:
Managing Stigma via Retrospective Reinterpretation: An Analysis of Individuals' Accounts of why they use Alternative Therapies, British Sociological Association Medical Sociology Group and the European Society of Health and Medical Sociology Association Joint Conference, University of York, 14-17 September 2000.

Sally Ruane:
"They'll want their Pound of Flesh, won't they?" Partnership and Risk in the Private Finance Initiative, ESRC Seminar series on Partnership, University of York, April 2000.

Doing PFI in the NHS, Annual Conference of Socialist Economists, University of London, July 2000.

Public-Private Partnerships, joint submissions in response to the consultation launched by the Institute of Public Policy Research, 2000 (with Byrne, D.).



Doctoral students

Since 2000, HPRU members have supervised 15 PhD students and one MPhil student to successful completion and are currently supervising a further 21 students. During this period, four members of the Unit have successfully completed their own PhDs. Topics are varied, drawing upon the expertise of members especially in the fields of ethnic minority health and health care; professional practices and strategies in health care; patient experiences; and lay conceptions and social meanings. Full details of author and title are listed below for completed work. Working titles only are listed for current PhD students.

Judith Allsop:
Completed: Olga Mamonova *The Self-Identity of Medical Practitioners in Russia in Transition*, MPhil.
Start: 2000, Completion: 2004 (PT)

Completed: Olesya Yurchenko *A Sociological Analysis of Professionalisation of Orthodox and Alternative Medicine in Russia*, PhD.
Start: 2000, Completion: 2004 (PT)

Denis Anthony:
Conflict Management Styles Used By Nurse Managers in Jordan.
Start: 2003 (PT)

Chemometrics Applied to Automated Lubricant Databases.
Start: 2002 (FT)

An Investigation into Patients' Lived Experience of Having more than One Admission to Psychiatric Hospitals.
Start: 2001 (PT)

Quality of Life for the Schizophrenic Patient Living in the Community in Greece.
Start: 2000 (PT)

Utilising Nutrient Balance Techniques in Treating Excess Weight and Obesity.
Start: 2003 (PT)

Yoga Practice in 21st Century Britain: Its Effects on the Life Narratives of Practitioners.
Start: 2002 (PT)

The Use of Information Technology Within Extended and Supplementary Prescribing Course for Nurses: A Case Study.
Start: 2003 (PT)

Is There a Difference between Nurses and Doctors Strategies for Resolving Ethical Dilemmas in Clinical Practice?
Start: 2003 (PT)

The Impact of Risk Assessment on Wound Care Practices.
Start: 2004 (PT)

Exploration of How Information Access by Patients on the Internet Affects Power Relationships with Health Care Professionals.
Start: 2000 (PT)

Completed: Kip Jones *Narratives of Identity and the Informal Care Role*, PhD.
Start: 1998, Completion: 2001 (FT)

Completed: Asma Imam *Testing the Relationship between Staff Satisfaction and Patient Satisfaction in the Palestinian Health Care Services as a Way of Exploring the Management Culture*, PhD.
Start: 1998, Completion: 2002 (PT)

Completed: Norman Mcclelland *A Study of the Degree of Alignment between Mental Health Practitioners' Understanding of Patients, Resident in Secure Mental Health Hospital Settings, Who Have Been Abused in Childhood and/or Adolescence*, PhD.
Start: 1998, Completion: 2002 (PT)

Completed: Peter Norrie *What do Critical Care Nurses Require from a Clinical Information System: Is it Possible for a System to Meet These Needs?*, PhD.
Start: 1998, Completion: 2003 (PT)

Completed: Sumaya Sayej *Evaluating the Effectiveness of the Health Educator Intervention on Health Beliefs and Attitudes of Female Palestinian Adolescents: Applying the Solomon Four-Group Design*, PhD.
Start: 1998, Completion: 2003

Completed: Najah Manasra *The Effect of Remaining Unmarried on Self-Perception and Mental Health Status: A Study of Palestinian Single Women,* PhD.
Start: 2000, Completion: 2003 (PT)

Front left-right: Olga Mamonova and Olesya Yurchenko
Back left-right: Professor Judith Allsop (first supervisor);
Professor Mike Saks (second supervisor)
Professor Merrijoy Kelner (external examiner for Olesya).

Lorraine Culley:
An Exploratory Study Examining South Asian Communities' Perceptions of New Reproductive Technologies.
Start: 2000 (PT)

The Development of Birth Control Nursing in the Marie Stopes Mothers Clinic 1921-1939.
Start: 1999 (PT)

Martyn Denscombe / Rob Baggott:
Completed: Nicky Drucquer *The Implementation of Good Practice in School Based Drug Education: A Stakeholder Evaluation*, PhD.
Start: 1999, Completion: 2005 (PT)

Simon Dyson:
The Social Meanings of a Child with Sickle Cell Disease. The Reaction of and the Social-Psychological Impact on Fathers.
Start: 2003 (FT)

The Social Meanings and Implications of the Beta-Thalassaemia Trait among South Asian Women in Britain.
Start: 2003 (FT)

Completed: Scott Yates *Power and Subjectivity: A Foucaldian Discourse Analysis of Experiences of Power in Learning Difficulties Community Care Homes*, PhD.
Start: 1997, Completion: 2002 (FT)

Completed: Rod Griffin *Concepts of Community in Mental Health 1935-1965: A Modified Grounded Theory Approach used with Oral History and Other Sources*, PhD.
Start: 1998, Completion: 2005 (PT)

Sue Dyson (nee McCartney):
Malignant Pleural Mesothelioma (MPM) Investigations, Diagnosis and Treatment: Patient Perception of the Effects on their Quality of Life.
Start: 2004 (PT)

Mark Johnson:
The Cultural and Spiritual Birth Practices of Ethnic Minority Women in England.
Start: 2002 (FT)

Variations in Attitudes, Beliefs and Levels of Understanding of Risk Factors of Coronary Heart Disease among Various South Asian Groups.
Start: 2003 (FT)

Cultural Reflection: Learning Core Caring Skills in Nursing as a Precursor to Development of the Evidence Base for Practice.
Start: 1998 (PT)

To Investigate the Role of the Community Pharmacist as a Health Advisor to Members of the South Asian Minority Ethnic Population in Leicester.
Start: 2002 (PT)

Children and Kinship Care: Relationships, Experiences and Outcomes.
Start: 2002 (PT)

Completed: Tina Harris *Midwifery Practice in the Third Stage of Labour* PhD.
Start: 1999, Completion: 2005 (PT)

Completed: Vina Mayor *The Career Journeys of Leading African, African-Caribbean and Asian Nurses in England*, PhD.
Start: 1999, Completion: 2002 (FT)

Completed: Judy Rollins *A Comparison of Stress and Coping for Children with Cancer in the United Kingdom and the United States*, PhD.
Start: 1998, Completion: 2003 (PT)

Completed: Aloysius Siriwardena *The Impact of Educational Interventions on Influenza and Pneumococcal Vaccination Rates in Primary Care*, PhD.
Start: 2000, Completion: 2003 (PT)

Completed: John Fowler *The Use of Experiential Learning within Nurse Education*, PhD.
Start: 2004, Completion: 2006 (PT)

Sally Ruane:
An Exploration of the Postcaring Experiences of Former Carers.
Start: 1998 (PT)

HPRU members who have completed doctoral studies

Fish, J. (2002) Ph.D Social Sciences *Lesbians and Health Care: A National Survey of Lesbians' Health Behaviour and Experiences*, Loughborough University (PT)

Dyson, S.E. (2004) Ed.D Education *The Life History Experiences of Zimbabwean Students Studying Pre-Registration Nursing in a UK University*, University of Leicester (PT)

Drucquer, N. (2005) *The Implementation of Good Practice in School Based Drug Education: A Stakeholder Evaluation*, De Montfort University (PT)

Griffin, R. (2005) *Concepts of Community in Mental Health 1935-1965: A Modified Grounded Theory Approach used with Oral History and Other Sources*, De Montfort University (PT)

Notes

For further information about the Unit…

Contact:

Health Policy Research Unit,
De Montfort University,
Bosworth House,
The Gateway,
Leicester LE1 9BH

T: +44 (0)116 257 7988
F: +44 (0)116 207 8446
E: hpru@dmu.ac.uk

dmu.ac.uk/hpru