HRMAS Newsletter 44
19 March 2001

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HRMAS NEWS UPDATE: March 2001
This issue includes the first in our series of summaries of published research by NZ health researchers.

HRMAS WORKSHOP PROGRAMME 2001
We are planning our programme for the forthcoming year. Researchers who are interested in requesting workshops are welcome to contact the Director to discuss possible topics and dates. (email to dr.thomas@auckland.ac.nz) Events scheduled to date are listed below.

AUCKLAND:

QUALITATIVE RESEARCH METHODS WORKSHOP
Tuesday 10 April, Auckland School of Medicine.

Will include; qualitative interviews, focus groups, phenomenology, grounded theory, discourse analysis and inductive approaches. No charge for the workshop.

Registration to hrmas@auckland.ac.nz
Enquiries to dr.thomas@auckland.ac.nz

DUNEDIN:

SEMINAR: Using qualitative data in evidence-based medicine. by David Thomas
Tuesday 24 April 10 - 12.00 noon

Department of Social & Preventive Medicine, Adams 031 University of Otago

HEALTH SERVICES & POLICY RESEARCH CONFERENCE
2nd New Zealand - Australia Health Services & Policy Research Conference
**2-4 December 2001, Wellington**

For the first time, New Zealand is hosting an international conference devoted to research and policy on health services. World-wide, changes in the health sector are the focus of intense interest from health workers, researchers and policy-makers. This conference is a chance to take stock: how well have restructuring and other developments in different countries served their people's health? One of the major themes of the conference is expected to be health inequalities, but papers are likely to cover a range of issues, including research methods.

The inaugural Australia - New Zealand Health Services Research conference was held in Sydney in 1999, and since then both this conference and a new professional association have been planned. The Health Services Research Association of Australia and New Zealand (HSRAANZ) aims to encourage health services research in order to promote improved health services delivery, and health. The Association will be formally launched at the conference.

Papers are now being called for; abstracts are due by 30 June. For more information, to submit abstracts, and to register for the conference, see the conference website: [http://www.vuw.ac.nz/hsrc/conf/](http://www.vuw.ac.nz/hsrc/conf/)

Or contact:
Christine Parnell
Conference Manager
Health Services & Policy Research Conference
P O Box 600, Wellington
NEW ZEALAND
Tel 64-4-463 6565 Fax 64-4-463 6568
Email: christine.parnell@vuw.ac.nz

**VACANCY: RESEARCH ANALYST, MANUKAU CITY COUNCIL**

Closing date: 12.00 Noon, 27 March 2001

To provide researched information, relating to organisation and City outcomes and community aspirations, that contributes to the development of strategic level policy, organisational performance and City direction. Responsible for design and management of research and measurement activities. Needs a Masters level of expertise in a social science/humanities field and proven experience in research methodologies and practice (quantitative & qualitative) along with well-honed analytical skills.

Obtain an information pack for Vacancy Number 1687 by emailing jobs@manukau.govt.nz or phoning 09 262 8907.

The information pack gives specific details relating to this position and how to apply. For further information about Manukau City Council see [http://www.manukau.govt.nz/](http://www.manukau.govt.nz/).
BOOK REVIEW
Reviewed by Anne Opie, Research Consultant, Wellington. Email: anne.opie@paradise.net.nz.

This book provides access to some papers presented at the International Evaluation Conference held in Vancouver in 1995. The purpose of the conference to was reflect on both the past and future of evaluation as a method and theory.

Although the majority of the papers are US in origin, there are quite a number of contributions from other countries (eg Sweden, UK, Canada, China and Denmark). The book is a substantial one (519 pages) and it is divided into a number of themes: 'Evaluation-Yesterday and Today', 'Auditing and Evaluation'; 'Performance Measurement and Evaluation'; 'International Evaluation'; 'New topics for Evaluation' (such as human rights, immigration policies, the World Bank, nuclear power and environmental changes); 'A Sampler of the Current Methodological Toolkit'; and 'An Enduring Argument about the Purpose of Evaluation' (focussing on evaluation as advocacy and, more traditionally evaluation as focussed on issues of truth and objectivity).

These themes emphasise the range of sites (local, national and global) where evaluations are conducted. Given its objectives, and given that disciplines and methods do not change overnight, it seemed useful to read at least some chapters of a book seeking to provide an extensive recent account of evaluation as method and theory.

Eleanor Chelimsky's first chapter reviews in straightforward fashion the objectives of evaluation, noting how different purposes require different questions to be asked. She suggests that, overall, there are three different perspectives on evaluation: the accountability perspective, the developmental perspective, and a knowledge perspective. Each of these perspectives asks different questions, and places the evaluator and those being evaluated in different relationships to each other. The last part of her article locates the debate about evaluation methods in something of a binary relationship to each other. On the one hand, there is the empowering evaluator - what David Fetterman has called the "critical friend"; on the other, there is the more distant stance adopted by those who associate evaluation with the pursuit of an objective truth.

The remainder of my reading focussed more on the methodological sampler section. This section usefully sets out a range of approaches (empowerment, single case evaluations, cluster evaluation, quantitative modes of evaluation, and so on), although the quality of the discussion varied. Compare, for example, Sanders' more sober discussion of the issues associated with cluster evaluation with Fetterman's rather evangelical human growth approach to empowerment evaluation in a context where the notion of differential power and the problematics of establishing and modifying group norms were not reviewed. Other papers in other sections also varied.
considerably in the detail and complexity of argument presented—compare for example, the detailed account given of the complex issues of obtaining and recording instances of human rights violations with the brief account of the World Bank's changing approach to gender in its programmes.

In light of the qualitative differences between the chapters, the main value of this text is that it gives a sense of the range of work being carried out under the rubric "evaluation." What was most disappointing is the absence of focussed critique of power and associated representations of reality in a mode of work where differential power relations are endemic.

NZ HEALTH RESEARCH PUBLICATIONS: Part 1
Over the next issues of the Newsletter we will be including summaries of published NZ health research. Email details of your research to Anne Opie at anne.opie@paradise.net.nz if you wish to have details included.


Abstract
The medical profession in many industrialised nations has increasingly been subjected to accountability measures, most notably through the development of quality assurance programmes for practitioners. In New Zealand this development has been enshrined in law under the Medical Practitioners Act 1995. This paper looks at some of the concerns raised by these developments, particularly focusing on the ways this might affect practitioners using alternative therapies. From an examination of the debates around accountability in medical practice, and interviews with practitioners who use alternative therapy, three models of medical practice are proposed. These models suggest that medical practices reflect worldviews that pivot around the way relationships between the medical profession, the practitioner, the patient and the patient's condition are perceived.


Abstract
This paper examines the arguments presented at the Royal Commission of Inquiry into Chiropractic, which took place in New Zealand in 1978. Drawing on the work of Potter, it suggests that the protagonists in the debate, the medical profession and its allies on one side and the chiropractic profession on the other, developed rhetorical strategies to counter competing versions of the world. An unusual feature of this debate was that it took place before "impartial" judges. The paper demonstrates the delicate process of negotiation performed by chiropractic groups when confronting medicine in an open forum. The paper concludes that in order to resolve the competing rhetorics, the Commissioners sought for a compromise, which at once embedded chiropractic within the public health service in New Zealand and "de-radicalised" its claims.

Abstract
Acupuncture gained considerable attention in anglophone countries in the 1970s. As part of that popularity many medical practitioners became interested in the therapy and learnt acupuncture techniques. A number of studies have indicated that medical practitioners were able to take up the practice of acupuncture without threatening the cultural authority of medicine so long as they limited the scope of its practice and redefined acupuncture concepts in western biomedical terms. These analyses tend to present the medical profession as monolithic, and emphasize a dichotomous relationship between biomedicine and alternative therapies such as acupuncture. This study examines the ways in which acupuncture has been represented in different medical fora, suggesting that in order to understand the relationships between biomedicine and alternative medicine we need to be more aware of the changing nature of these representations and their dependency upon the context of the representation. Rather than emphasizing a duality between orthodox medicine and alternative medicine, it is argued here that there are pluralities of medical and healing worldviews.


Abstract
This report is a qualitative investigation of safety (or risk) knowledge in practice. Interviews were conducted with householders, in their house, about their fire safety practices, and then a fire fighter crew visited the house and made a safety assessment, communicating this in situ with the householder and researcher. This was tape recorded and became the data for the study. Analysis of this data shows that safety knowledge is complexly socially organised. Implications of the study may be more generally applicable to other areas involving risk and the communication of expert knowledges.


Abstract
Using empirical material from the recent ministerial inquiry into workplace injuries and fatalities at Tranz Rail, this paper considers the inquiry's question of whether 'any culture or cultures within Tranz Rail may be relevant to the operation of a safe and healthy place of work'. Application of discourse analysis suggests that the culture question is indeed important, but not quite in the areas suggested by some of the contributors to the Tranz Rail inquiry. The paper foregrounds 'textually mediated social organisation' as a key feature of contemporary social worlds, including the workplace.

Abstract
Qualitative research gets close to experiences of pain, illness, and disease, with the consequence that qualitative researchers often find themselves asked "troublesome questions." That is, lay people ask for practical, helpful answers to their everyday illness concerns. This is not surprising, but of interest is the fact that academics also ask each other such troublesome questions, as part of academic discourse. This article suggests that when academics ask such questions they may sometimes be after "practical" information, but they may also be using the questioning as an attack on the supposed excessive relativism of social constructionism. Three key analytical moves are outlined that offer a useful deconstruction of troublesome health questions, showing that they are another useful topic of constructionist inquiry. To lessen abstraction, these moves are brought to bear on a case study of a possible connection between pesticide use and birth defects, thus showing how social science and epidemiology can be connected, troubled and extended in the process.

About the HRMAS ELECTRONIC NEWSLETTER:
An occasional newsletter sent by the Health Research Methods Advisory Service (HRMAS) to a New Zealand-wide subscriber group (over 500 on the distribution list).

The HRMAS mission statement is:
"To contribute to the development of health research capacity in New Zealand."

The purpose of the newsletter is to provide research information and resources for health researchers. The newsletter focuses mainly on the following areas:
- evaluation research
- survey research
- community consultation and collaboration (particularly with Maori and Pacific Island communities)
- policy research
- managing research
- writing proposals for health research funding
- qualitative research methods
- economic evaluation in health

Send comments and news to dr.thomas@auckland.ac.nz.

See our webpage (and previous HRMAS newsletters) at: http://www.health.auckland.ac.nz/hrmas/.

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To LEAVE the electronic newsletter list, send the message LEAVE HRMAS NEWSLETTER [your-email-address] to dr.thomas@auckland.ac.nz.
To join the list, send the message JOIN HRMAS NEWSLETTER to dr.thomas@auckland.ac.nz.