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We are pleased to present the 2008 annual report of the Health Promotion Research Centre (HPRC) at the National University of Ireland, Galway. This report provides a summary of our research activity over the last year, gives a brief description of our current research projects, and lists our dissemination activities, including publications and conference presentations. Over the last year, the Centre continued its focus on the generation and application of quality research that supports best practice and policy in promoting health. In the course of 2008 the HPRC was successful in attracting external funding from a range of national and international agencies. Working in collaboration with our research partners research findings were disseminated through peer review journals, commissioned reports, conferences and through national and local media. The HPRC hosted 10 visiting scholars and students in 2008 from diverse countries including France, Spain, Norway, USA and Australia. We saw our PhD student numbers in Health Promotion double and staff of the Centre actively contributed to international and national committees and scientific meetings.

The impact of our work at an international level may be seen through a number of collaborative projects with international researchers and agencies including the World Health Organization, the International Union for Health Promotion and Education (IUHPE) and the European Commission. At a national level HPRC staff have contributed to the publication of a series of reports from two major national health surveys commissioned by the Department of Health and Children – the Health Behaviour in School-aged Children (HBSC) and the Survey of Lifestyles, Attitudes and Nutrition (SLÁN, 2007). The SLÁN survey for the first time included questions on the mental health and social wellbeing status of Irish adults and this work was lead by the HPRC team. The HBSC research was extended, with support from the Office of the Minister for Children and Youth Affairs, to cover health and wellbeing in middle childhood. Secondary analyses studies also included the investigation of food poverty and a focus on bullying among school children with disabilities. These national studies will provide an important evidence base for policy planning and practice in health promotion over the coming years.

A number of health promotion development and evaluation studies were also undertaken focusing on specific interventions including: European Commission funded collaborative studies on health promotion in the workplace, and healthy eating and physical activity in schools. National studies included an analysis of work-life balance in the Irish university sector; health and safety in schools funded by the
Health & Safety Authority. Evaluation studies on the development of internet-based health promotion materials in third level settings, and mental health promotion programmes for young people in both schools and out-of-school settings were undertaken on behalf of the HSE. These studies, which were conducted in collaboration with a range of agencies and practitioners, will contribute to the knowledge and evidence base for best practice in health promotion. Health Services Research studies encompassed a focus on infant feeding; an analysis of risk communication on contamination of the public water supply conducted on behalf of the Health Services Executive; and a study of chlamydia screening commissioned by the national Health Protection Surveillance Centre.

Policy focused studies included the further development of international projects including the Development Education Research Network (DERN) project funded by Irish Aid and the Community Knowledge Initiative at NUI, Galway; and a capacity building project connecting health research in Africa and Ireland supported by Irish Aid and the Higher Education Authority. The WHO project on benchmarking progress on the Bangkok Charter for Health Promotion continues with the development of technical papers to support this worldwide initiative; and a new initiative on developing core competencies and accreditation for health promotion at global and European levels has been established in collaboration with the IUHPE. Policy focused studies at the European level include research on Best Practices in Promoting Mental Health for Socially Marginalised people in Europe (PROMO) funded by the European Commission. At a national level the Office of the Minister for Children and Youth Affairs commissioned work on developing a data strategy for children in Ireland, and conducting a review of research ethics on children’s research. A study on substance use in new communities in the West of Ireland was also undertaken on behalf of the Western Region Drugs Task Force.

In June 2008 we hosted a major international meeting, the Galway Consensus Conference, on competencies and accreditation in health promotion and health education. Co-sponsored by IUHPE, the Society for Public Health Education (SOPHE) and the Centers for Disease Control (CDC) in Atlanta, this meeting brought together international leaders in global health promotion to develop a shared vision of the core competencies, professional standards and quality assurance mechanisms necessary for developing workforce capacity building across countries and continents. The Galway Consensus Statement was produced, which together with the proceedings of the meeting, is being published in special issues of the journals Global Health Promotion and Health Education and Behavior in 2009.
Our annual Health Promotion conference, organised in collaboration with the Department of Health & Children and the Population Health Directorate of the Health Services Executive, continues to provide an important national platform each year for policymakers, practitioners and researchers in health promotion. Last year’s event linked up with the international meeting on health promotion competencies and standards, providing an important opportunity for sharing international and national perspectives.

We acknowledge the dedication and hard work of all the HPRC Project Leaders, researchers and administrative staff, without whom the scope and scale of our research work would not be possible. We are grateful to our funders and research partners, and to members of the HPRC Advisory Board, for their support and fruitful collaboration over the last year. We look forward to building on our work to date and strengthening our collaboration with all our partners in the years ahead.

_Professor Margaret M. Barry_
_Director of the Health Promotion Research Centre_
ii. Introduction

a. Health Promotion at NUI, Galway

The Discipline of Health Promotion in NUI, Galway hosts the Health Promotion Research Centre. The foundation chair in Health Promotion and the dedicated academic unit were both established in 1990 with support from the Department of Health as part of a revised national structure for health promotion in Ireland. The academic discipline was set up to provide training, education and research in health promotion in support of national developments.

Currently the Discipline is one of the largest and most successful in Europe, with thirteen academic staff and three administrators. We welcome students from Ireland and abroad to our taught programmes and as doctoral students. The flagship programme of the Discipline is the Higher Diploma / Masters in Health Promotion which is offered full time in Galway and part-time in both Dublin and Galway. We also offer a Higher Diploma / Masters in Health Services Research and partner with the School of Law and the Disciplines of Physics and Industrial Engineering to offer the MSc in Occupational Health and Safety and Ergonomics, BSc in Health and Safety Systems and the Higher Diploma in Occupational Health and Safety and Hygiene. In addition we offer the Certificate, Diploma and BA Degree in Social Care.

The Discipline also contributes substantially to the undergraduate medical programme in the areas of Understanding Health and Illness in Society and the teaching of Health Promotion and Public Health. Health Promotion is also relevant to a range of other programmes across the University and the discipline offers service teaching on Masters programmes in Family Support, Social Work and Health Psychology, Primary Care and the BA Connect programme in Childhood Studies. Further details are available at www.nuigalway.ie/hpr.
b. The Health Promotion Research Centre

The aim of the HPRC is to build health promotion capacity through the generation and application of health promotion research into practice and policy. As the only dedicated health promotion research centre in Ireland, the HPRC has played an important role over the past 18 years in providing the research and knowledge base for the development of national policy, programme planning, implementation and evaluation. The HPRC has worked in close collaboration with policymakers, practitioners and international partners in documenting the changing population health needs and developing and evaluating health promotion policies and strategies in line with best international practice. The strategic role of the Centre in supporting national capacity building and informing best practice and policy places the Centre in a unique position.

In addition to this applied focus, theoretical and methodological developments in health promotion research are disseminated through scholarly publications and in collaboration with leading research partners in Europe and globally. The Centre works in partnership with both knowledge producers and knowledge users in the international health promotion community. HPRC has an active multidisciplinary research programme of work and is supported by an experienced team of 31 staff, including 13 core academic, 3 administrative staff and 15 contract researchers. HPRC staff have expertise in both quantitative and qualitative research and employ experimental, survey, participative, review and evaluation research methods as appropriate to specific projects.

The Centre has dedicated administrative staff as well as a clear management structure comprising its Director, Project Leaders, Internal Steering Committee and Advisory Board comprised of national and international experts in the field. Staff of the Centre also contribute to educational programmes in Health Promotion and the supervision of Doctoral and Masters research dissertations.
## iii. Profiles

### a. Academic Staff

<table>
<thead>
<tr>
<th>Staff Member</th>
<th>Title &amp; Qualifications</th>
<th>Research Expertise</th>
</tr>
</thead>
</table>
| **Dr Margaret M. Barry**   | Director & Project Leader               | • Mental health promotion  
• Evidence-based practice  
• Evaluation research in health promotion. |
| Professor of Health Promotion & Public Health & Head of Discipline | MA, PhD, APsSI                         |                                                                                     |
| **Dr Saoirse Nic Gabhainn**| Acting Director & Project Leader         | • Health & health behaviour in childhood & adolescence  
• Methodologies for health promotion research  
• School health education & promotion.      |
| Senior Lecturer in Health Promotion | BA, MA, PhD, C.Psychol, AFBPsS, C. Sci. |                                                                                     |
| **Dr Diarmuid O'Donovan**  | Project Leader                          | • Health inequalities & health policy  
• Communicable disease control & environmental health  
• STIs & HIV/AIDS  
• Health & human rights.       |
| Senior Lecturer in Social & Preventive Medicine (part-time) | MD, MSc, MFPHM, DCH, DTM&H |                                                                                     |
| **Dr Margaret Hodgins**    | Project Leader                          | • The health promoting university  
• Workplace health promotion  
• Healthy ageing.               |
| Lecturer in Health Promotion | BA, MA, PhD, Reg. Psychology             |                                                                                     |
| **Dr Jane Sixsmith**       | Project Leader                          | • Health & the media  
• Qualitative methodologies for health  
• Health services research.      |
| Lecturer in Health Promotion | RGN, HV, BSc, MA, PhD                  |                                                                                     |
| **Dr Michal Molcho**       | Project Leader                          | • Adolescent health  
• Social inequalities  
• Youth violent behaviour  
• Injury prevention.            |
<p>| Lecturer in Health Promotion | BA, MA, PhD                            |                                                                                     |</p>
<table>
<thead>
<tr>
<th>Staff Member</th>
<th>Title &amp; Qualifications</th>
<th>Research Expertise</th>
</tr>
</thead>
</table>
| Dr Lisa Pursell      | Lecturer in Health Promotion, Researcher BSc, PhD | • Health impact assessment process & methodology  
• Evaluation of impact assessments  
• Development of indicators for measuring health inequalities. |
| Ms Geraldine Nolan   | Lecturer in Health Promotion (part-time), Project Leader BSc, MSc, Dip (Nut & Dietetics) | • Effective nutrition interventions  
• Best practice for eating disorder services  
• Nutrition needs of asylum seekers. |
| Dr Claire Connolly   | Lecturer in Health Promotion, Researcher MB, Bch BAO, FFARCSI, MA | • Breastfeeding  
• Childhood immunisation  
• Communication skills of health professionals  
• Experience of hospitalisation. |
| Ms Victoria Hogan    | Lecturer in Health Promotion (Occupational Health), Researcher BA, MSc, CMIOSH, RSP | • Occupational stress  
• Work life integration  
• Occupational health psychology  
• Quality of working life. |
| Ms Verna McKenna     | Lecturer in Health Promotion, Researcher BA, MA | • Evidence based policy & practice  
• Implementation guidance for health promotion  
• Health service access & health inequalities. |
| Dr Martin Power      | University Fellow, University Fellow BA, PhD | • Risk & blood  
• Epistemic communities  
• Social policy  
• Adult education. |
### b. Administrative Staff

<table>
<thead>
<tr>
<th>Staff Member</th>
<th>Title &amp; Qualifications</th>
<th>Research Expertise</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr Vivienne Batt</td>
<td>Research Administrator</td>
<td>• Women’s counselling provision</td>
</tr>
<tr>
<td></td>
<td>BA, PhD</td>
<td>• Infant feeding practices &amp; policies.</td>
</tr>
<tr>
<td>Ms Christina Costello</td>
<td>Research Secretary</td>
<td></td>
</tr>
<tr>
<td>Ms Lorraine Walker</td>
<td>Research Assistant</td>
<td></td>
</tr>
</tbody>
</table>

### c. Research Staff

<table>
<thead>
<tr>
<th>Staff Member</th>
<th>Title &amp; Qualifications</th>
<th>Research Expertise</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ms Barbara Battel-Kirk</td>
<td>Researcher</td>
<td>• Competencies &amp; professional standards</td>
</tr>
<tr>
<td></td>
<td>BSc, MSc</td>
<td>• Evaluation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Community development &amp; health.</td>
</tr>
<tr>
<td>Mr Graham Brennan</td>
<td>Researcher</td>
<td>• Measurement of &amp; motivation for physical activity in the community.</td>
</tr>
<tr>
<td></td>
<td>BSc, MA</td>
<td></td>
</tr>
<tr>
<td>Mr Reamonn Canavan</td>
<td>Researcher</td>
<td>• Mental health promotion</td>
</tr>
<tr>
<td></td>
<td>BSc, MA, P Grad Dip</td>
<td>• Workplace health promotion</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Mental health &amp; social marginalisation.</td>
</tr>
<tr>
<td>Ms Aleisha Clarke</td>
<td>Researcher</td>
<td>• Child &amp; adolescent mental health</td>
</tr>
<tr>
<td></td>
<td>BEd, MEd</td>
<td>• Schools mental health promotion</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Suicide prevention.</td>
</tr>
<tr>
<td>Ms Pauline Clerkin</td>
<td>Researcher</td>
<td>• Primary &amp; social care</td>
</tr>
<tr>
<td></td>
<td>BSc, MA</td>
<td>• Health inequalities</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Children &amp; young people’s health.</td>
</tr>
<tr>
<td>Ms Aingeal de Róiste</td>
<td>Researcher</td>
<td>• Sexual health promotion</td>
</tr>
<tr>
<td></td>
<td>BEd, MA</td>
<td>• Young people’s health</td>
</tr>
<tr>
<td>Ms Maureen D’Eath</td>
<td>Researcher</td>
<td>• Health inequalities</td>
</tr>
<tr>
<td></td>
<td>BA, LLB, MA</td>
<td>• Health needs assessments</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Disability.</td>
</tr>
<tr>
<td>Staff Member</td>
<td>Title &amp; Qualifications</td>
<td>Research Expertise</td>
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<tr>
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<tr>
<td>Ms Priscilla Doyle</td>
<td>Researcher BA, MA</td>
<td>• Young people &amp; health&lt;br&gt;• Nutrition, obesity &amp; physical activity&lt;br&gt;• Media &amp; health.</td>
</tr>
<tr>
<td>Ms Cliona Fitzpatrick</td>
<td>Researcher BSc, MA</td>
<td>• Food poverty &amp; nutrition&lt;br&gt;• Young people's health.</td>
</tr>
<tr>
<td>Ms Marie Galvin</td>
<td>Researcher BA, HDip (Ed), MA</td>
<td>• Social, personal &amp; health education&lt;br&gt;• Work life balance&lt;br&gt;• Equality issues.</td>
</tr>
<tr>
<td>Ms Aoife Gavin</td>
<td>Researcher BA, MA</td>
<td>• Adolescent health&lt;br&gt;• Risk behaviours&lt;br&gt;• Substance use among adolescents.</td>
</tr>
<tr>
<td>Dr Colette Kelly</td>
<td>Senior Researcher BSc, MSc, PhD, RPHNutr</td>
<td>• Health &amp; health behaviour in childhood &amp; adolescence&lt;br&gt;• Pre-school nutrition &amp; health&lt;br&gt;• Nutrition &amp; young people.</td>
</tr>
<tr>
<td>Ms Siobhán O'Higgins</td>
<td>PhD Student &amp; Researcher BA, MA</td>
<td>• Children, young people &amp; health&lt;br&gt;• Sexual &amp; mental health promotion&lt;br&gt;• Social networks.</td>
</tr>
<tr>
<td>Ms Clionadh O'Keeffe</td>
<td>Researcher</td>
<td>• Gender development &amp; governance&lt;br&gt;• The right to health.</td>
</tr>
<tr>
<td>Dr Carlos Felipe Revollo Fernandez</td>
<td>Senior Researcher MSc, MA, PhD</td>
<td>• Politics &amp; governance&lt;br&gt;• Environment &amp; sustainability&lt;br&gt;• Globalisation.</td>
</tr>
<tr>
<td>Mr Eric Van Lente</td>
<td>Researcher BE, MA</td>
<td>• School-based health promotion/social &amp; emotional learning&lt;br&gt;• Mental health promotion &amp; theory.</td>
</tr>
<tr>
<td>Ms Deirdre Vaughan</td>
<td>Researcher RGN, MA</td>
<td>• HIV/AIDS &amp; sexual health promotion&lt;br&gt;• Global health, conflict &amp; development.</td>
</tr>
<tr>
<td>Name of PhD student</td>
<td>Name of Supervisor</td>
<td>Proposed Title</td>
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<tr>
<td>Mr Brendan Dineen</td>
<td>Dr Diarmuid O’Donovan</td>
<td>Identification of prevalence, causes &amp; the need for eye care services.</td>
</tr>
<tr>
<td>Ms Aleisha Clarke</td>
<td>Professor Margaret Barry</td>
<td>An evaluation of Zippy’s Friends, an emotional literacy programme for children in primary school.</td>
</tr>
<tr>
<td>Dr Khalifa Elmusharaf</td>
<td>Dr Diarmuid O’Donovan</td>
<td>Strengthening health system in Africa to improve reproductive health during and post conflict.</td>
</tr>
<tr>
<td>Mr Declan Flanagan</td>
<td>Dr Michal Molcho</td>
<td>Fun &amp; games &amp; health; a mixed methods study measuring the impact of government health initiatives &amp; recommendations in the North West of Ireland.</td>
</tr>
<tr>
<td>Ms Aoife Gavin</td>
<td>Dr Saoirse Nic Gabhainn</td>
<td>Understanding the lives of children with disability/chronic illness.</td>
</tr>
<tr>
<td>Ms Susan Grant</td>
<td>Dr Diarmuid O’Donovan</td>
<td>Determining the future service needs for cardiovascular patients in the West of Ireland, using cardiovascular epidemiological modelling tools.</td>
</tr>
<tr>
<td>Ms Victoria Hogan</td>
<td>Dr Margaret Hodgins</td>
<td>An analysis of work life balance &amp; occupational stressors within the Irish university system.</td>
</tr>
<tr>
<td>Ms Jacky Jones</td>
<td>Professor Margaret Barry</td>
<td>Health promotion partnerships: An analysis of the factors that contribute to successful partnership functioning.</td>
</tr>
<tr>
<td>Ms Patricia McSharry</td>
<td>Dr Margaret Hodgins</td>
<td>The effects of a physical activity intervention programme on a group of undergraduate students’ short &amp; long term knowledge &amp; behaviours with regard to physical activity.</td>
</tr>
<tr>
<td>Ms Teresa Meaney</td>
<td>Dr Saoirse Nic Gabhainn</td>
<td>An exploration of Irish mothers experience of persisting with breastfeeding: a phenomenological study.</td>
</tr>
<tr>
<td>Name of PhD student</td>
<td>Name of Supervisor</td>
<td>Proposed Title</td>
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<tr>
<td>Ms Mary O’Hara</td>
<td>Dr Margaret Hodgins</td>
<td>Quality of life issues: Juvenile idiopathic arthritis &amp; young people in Ireland</td>
</tr>
<tr>
<td>Ms Siobhán O'Higgins</td>
<td>Dr Saoirse Nic Gabhainn</td>
<td>Why do young people wear condoms? an exploration of positive sexual health behaviours using participative methodologies to create a workable resource for schools.</td>
</tr>
<tr>
<td>Ms Claire O'Shaughnessy</td>
<td>Dr Jane Sixsmith</td>
<td>Understanding early intervention services in Ireland.</td>
</tr>
<tr>
<td>Ms Lisa Shanahan</td>
<td>Professor Margaret Barry</td>
<td>The implementation and evaluation of Mental Health Aid in an Irish context.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of MD student</th>
<th>Name of Supervisor</th>
<th>Proposed Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr Breda Smyth</td>
<td>Dr Diarmuid O’Donovan</td>
<td>Mortality inequalities in Ireland</td>
</tr>
</tbody>
</table>

### e. Research Contribution to Community

Staff contribute to both national and international health promotion research through management, committee and editorial board membership, as listed below:

**International**

- International Union for Health Promotion and Education (IUHPE) (Global Vice President for Capacity Building, Education and Training, 2007-2010)
- IUHPE/EURO Sub-Committee on Training and Accreditation in Health Promotion (Chair)
- Clifford Beers International Centre for Mental Health Promotion (Board Member)
- National Mental Health Promotion Think Tank, (November, 2008) Mental Health Commission of Canada (External Expert Advisor)
- Research Advisory Group: HEMIL, Health Promotion Research Centre, Bergen University, Norway (External Member)
- Scientific Council for the Ludwig Boltzman Institute for Health Promotion Research, Vienna (External Member)
- European Platform for Mental Health Promotion and Mental Disorder Prevention projected funded by EC/DG Sanco (Consortium Member)
- International Union for Health Promotion and Education 2004-2010 (Elected Board Member)
- Conference Programme Committees: Fifth World Conference on the Promotion of Mental Health and the Prevention of Mental and Behavioural Disorders, Melbourne, September, 2008 (Member)
- Global Scientific Committee for the 20th IUHPE World Conference on Health Promotion 'Health Equity and Sustainable Development', Geneva, 2010 (Member)
International Co-ordinating Committee of the WHO-HBSC network (Member)
International Steering Group for the WHO Collaborating Centre for Mental Health Promotion, Prevention and Policy at STAKES, Finland (Member)
L'Association pour le développement d’HBSC, France (Member)
NHS Scotland Mental Health Improvement – Independent Review Panel (Member)
The Scientific Development Group of the International WHO-HBSC network (Member)

National/Regional

Advisory group to the National Youth Health Programme (Chair)
Association for Health Promotion Ireland, 2008-2010 (Chair)
Adolescent Health and Development Strategy Group (Member)
Advisory Board of the National Office for Suicide Prevention, Ireland (Member)
Assessment panel for specialisms in SPHE for the Teachers Council (Member)
Board of Management of Aids West (Member)
Child Health Research Forum (Member)
Expert Advisory Committee of the Tallaght Child Development Initiative (Member)
Medical Committee of the Irish Cancer Society (Member)
National Children’s Research Advisory Board (Member)
National Working Group on Workplace Health Promotion (Member)
Research Advisory Committee for SLÁN 2007 (Member)
Research and Evaluation sub-committee of the Western Region Drugs Taskforce (Member)
Scholarship awarding committee of the Office of the Minister for Children and Youth Affairs (Member)
Scientific and Policy Advisory Committee of the National Longitudinal Study of Children (Member).

Editorial Boards

Proceedings of the Nutrition Society (Deputy Editor)
Global Health Promotion (Member)
International Journal of Mental Health Promotion (Member)
Journal of Mental Health Promotion (Member)
Journal of Public Mental Health (Member)
Advances in School Mental Health Promotion (Member)
Promotion and Education (Member).
f. Visiting Scholars and Students

The HPRC welcomes visiting scholars and students of health promotion and cognate disciplines. During 2008 we hosted the following visitors:

- Marianne Sentenac, Inserm, Universite Paul Sabbatier, Toulouse, France
- Dr Emmanuelle Godeau, Inserm, Toulouse, France
- Dr Joanne Costello, Associate Professor, Rhode Island College, USA
- Dr Elizabeth Maes, Fort Collins Family Medicine Residency Program, USA
- Dr Hans Einar Hem, Associate Professor, Faculty of Social Science, Centre for Research on Health Promotion in Settings, Vestfold University College, Norway
- Carmen Amescua, Departamento de Medicina Preventiva y Salud Publica, Facultad de Medicine, Universidad de Granada, Spain
- Jennie Parham, Director, Auseinet, Australia
- Dr John B. Bartholomew, Associate Professor, University of Texas at Austin, USA
- Maud Barstad, Nurse Tutor, Finnmark University, Norway
- Dr Therese Miller, Assistant Professor, Department of Physical Education, Westminster Collage, Fullton, MO, USA.

*Delegates at the Galway International Consensus Meeting, NUI, Galway, June 2008.*
iv. Research Activities

Research Areas

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

a. POPULATION HEALTH RESEARCH

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

b. PROGRAMME DEVELOPMENT AND EVALUATION

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

c. HEALTH SERVICES RESEARCH

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

d. POLICY RESEARCH

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

- HEALTH BEHAVIOUR IN SCHOOL-AGED CHILDREN (HBSC): A WORLD HEALTH ORGANISATION COLLABORATIVE CROSS-NATIONAL STUDY

- TRANSLATING THE HEALTH BEHAVIOUR IN SCHOOL-AGED CHILDREN (HBSC IRELAND) STUDY INTO POLICY AND PRACTICE

- SURVEY OF LIFESTYLES, ATTITUDES AND NUTRITION 2007 (SLÁN 07)

- ULYSSES – BULLYING AMONG SCHOOLCHILDREN WITH DISABILITIES

- HEALTH AND WELL-BEING IN MIDDLE CHILDHOOD

- PARTICIPATORY RESEARCH PROCESSES (PRP)

- INVESTIGATING FOOD POVERTY AMONG SCHOOLCHILDREN IN IRELAND

- GALWAY HEALTHY CITY - MAPPING GALWAY’S HEALTH PROFILE

- AN ANALYSIS OF WORK-LIFE BALANCE, EMPLOYEE STRESS AND HEALTH IN THE IRISH UNIVERSITY SECTOR
HEALTH BEHAVIOUR IN SCHOOL-AGED CHILDREN (HBSC): A WORLD HEALTH ORGANISATION COLLABORATIVE CROSS-NATIONAL STUDY

Principal Investigator: Dr Saoirse Nic Gabhainn
Researchers: Dr Colette Kelly, Dr Michal Molcho, Ms Aoife Gavin, Ms Siobhán O'Higgins, Ms Pauline Clerkin and Mr Graham Brennan

Funders: Health Promotion Policy Unit and Office of the Minister for Children and Youth Affairs, Department of Health and Children

Background
Health Behaviour in School-aged Children (HBSC) is a cross-national research study conducted in collaboration with the WHO Regional Office for Europe. The HBSC international survey runs on an academic 4 year cycle and there are currently 43 participating countries and regions (www.hbsc.org). Cross-nationally, HBSC collects information on the key indicators of health, health attitudes and health behaviours, as well as the contexts of health for young people.

Research Aims
The overall study aims are to gain new insight into, and increase our understanding of young people’s health and wellbeing, health behaviours and their social context.

Methods
HBSC is a school-based survey with data collected through self-completion questionnaires administered by teachers in the classroom. The HBSC survey instrument is a standard questionnaire developed by the international research network. A nationally representative sample of primary and post-primary schools from the Republic of Ireland was employed. Individual schools, and subsequently class groups within schools, were randomly selected for participation.

Results
An international report on ‘Inequalities in Young People’s Health’ was launched in June 2008. This report presented the key findings on patterns of health among young people in 41 countries and regions across Europe and North America. The status of young people’s health, health-related behaviour and the social contexts of young people’s health were presented from the 2005/06 survey. The second Irish national report on ‘Inequalities in Health among school-aged children in Ireland’ was launched in October 2008. This report presented findings on the self-reported health status and health behaviours of specific groups of children living in Ireland: students from the Travelling community, students from immigrant families, students with a disability and chronic illness and students that are part of the Department of Education and Science’s School Support Programme.

Dissemination

TRANSLATING THE HEALTH BEHAVIOUR IN SCHOOL-AGED CHILDREN (HBSC IRELAND) STUDY INTO POLICY AND PRACTICE

Principal Investigator: Dr Saoirse Nic Gabhainn
Researchers: Dr Colette Kelly, Dr Michal Molcho, Ms Aoife Gavin, Mr Graham Brennan, Ms Pauline Clerk, Ms Cliona Fitzpatrick and Ms Larri Walker
Funders: Health Research Board and Health Promotion Policy Unit, Department of Health and Children

Background
Health Behaviour in School-aged Children (HBSC) is a cross-national research study conducted in collaboration with the WHO Regional Office for Europe. One of the aims of the HBSC study is to inform and influence children's policy and practice at national and international levels on issues relating to youth health.

Research Aims
Through a series of policy and methodological studies, the aim of this project is to investigate patterns and associations of child health behaviours from the 2006 survey and disseminate the findings to both national and international stakeholders. In addition to contributing to scientific knowledge, this project aims to inform future policy and practice in children's health and wellbeing.

Results
Collaborative relationships with national and international partners have facilitated our work addressing the key aims and objectives of this project. Research questions and themes that have been addressed and disseminated via factsheets and short reports are varied and include the following: child well-being, physical activity, patterns and frequency of substance use including alcohol, tobacco, cannabis and volatile substances, food consumption and dietary behaviour, oral hygiene, injuries, classmate relationships and bullying. Moreover, health behaviours and outcomes have been explored for specific groups of children in Ireland, including those with a disability and chronic illness and those from immigrant families; presentations, both national and international have facilitated the dissemination of these findings. This project has also contributed to the 2008 State of the Nation's Children report that was launched in December 2008, and to the WHO-HBSC forum on Social Cohesion for Mental Well-being in adolescence. A full variable report presenting all data collected as part of the HBSC Ireland 2006 study is also now available to interested stakeholders. Other reports in progress include a comparison of adolescent health related behaviour across Great Britain and Ireland. This project has demonstrated that the successful translation of research findings into policy and practice requires a multifaceted approach with dedicated funding and resources.

Dissemination


A full list of publications from translating the HBSC into policy and practice can be found at http://www.nuigalway.ie/hbsc/publications_reports.html
Background and Research Aims
SLÁN 07 monitors the health behaviours and attitudes of a representative sample of 10,000 adults in the Republic of Ireland. It is a joint study between four consortium partners who were awarded a national contract to complete the Survey of Lifestyles, Attitudes and Nutrition (SLÁN 07, formerly SLÁN 06) on behalf of the Department of Health and Children. The four partners are: The Royal College of Surgeons in Ireland (RCSI), The Economic and Social Research Institute (ESRI), University College Cork (UCC) and the National University of Ireland, Galway (NUIG). This survey is the third in a series of national health surveys which also includes SLÁN98 and SLÁN02.

Methods
SLÁN 07 involved face-to-face interviews with 10,364 adults (62% response rate) aged 18 years or over interviewed at home addresses in addition to two studies on subsets of this sample: a study on body size in 967 younger adults (aged 18-44 years) and a study involving physical examination and blood and urine sampling in 1,250 adults aged 45 years and over.

Progress to Date
Results of these studies are being published in a number of reports, including the main SLÁN 2007 report published in 2008 and several sub-reports which examine the following issues in greater detail:

- Nutrition, health behaviour and physical examination findings [2008].
- Patterns of social and mental health and community participation [2009].
- Comparisons of health behaviour and related profiles between population surveys in the Republic and Northern Ireland [forthcoming].
- Policy implications of the major health behaviour profiles [forthcoming].

The research team at the HPRC are specifically responsible for the mental health, social well-being and injuries sections of the SLÁN 2007 report, and also contribute to the report’s overall content and design. The HPRC is also responsible for the mental health and social well-being detailed sub-report, published in 2009.


Dissemination

Background
In line with policies advocating inclusive education in many Western countries, children with disabilities or chronic conditions have become increasingly integrated into mainstream schools over the last three decades. Inclusive education encourages the acceptance of disabled children by their peers, and can bring about social benefits for all pupils. However, negative peer attitudes are commonly considered to be a major barrier to full social inclusion of students with disabilities in schools. Because the introduction of mainstream education is sometimes made without preparation - at individual, class and school level - one concern is that this results in students with disabilities being overexposed to peer pressure, potentially leading to increased rates of bullying. Bullying could therefore be considered as a factor that places increased stress on children with disabilities in mainstream education, putting at risk the benefits of being in a school with others.

Research Aims
The research aims were to:

i. Develop collaborative links and a joint programme of research in the area of bullying and disability with teams of researchers in Toulouse, France.

ii. Investigate a) the associations between bullying and disability, b) the associations between characteristics of the child and bullying among those with disabilities and c) any differential impact of bullying on children with disabilities in relation to health and social outcomes.

iii. Compare the pattern and strength of those associations between France and Ireland, in light of the differences in the policy around schooling of children with disabilities in these two countries. This includes the investigation of educational and social contexts for children with disabilities in both countries.

Methods
The data employed for these analyses were drawn from the HBSC Ireland and HBSC France studies. It has also drawn on expertise within the French research team in the area of disability and that within the Irish team on bullying.

Progress to Date
Four study visits have taken place and each involved a presentation or workshop on specific related issues. Considerable attention has been paid to ensuring comparable French and Irish datasets. Two journal articles are in draft, and a number of other dissemination activities have taken place, including teacher training, short reports, and guidance for children. Agreement in relation to future bilateral research protocols has been achieved.

Dissemination

Background
One of three national goals of the National Children’s Strategy is to achieve a better understanding of children’s lives. Relative to other children, less attention has been paid to the middle childhood years in terms of research and policy worldwide. Yet middle childhood is an important link in the continuum between early childhood and adolescence. The advantages or disadvantages that children acquire in their early years can be maintained, increased or reversed by experiences in their middle childhood years. Thus it is important to fill the gap in knowledge so as to achieve a more coherent understanding of children’s development; what influences it and subsequent outcomes.

Research Aims
This study aims to collect nationally representative data on the health and well-being of children in 3rd and 4th class in Irish schools and to employ the collected data to contribute to the scientific literature and to inform policy and practice for this age group.

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

Progress to Date
All data have been collected and inputted. Analyses of the data set have been included in a range of publications, including the Irish national HBSC reports, short reports and factsheets and most recently in the 2008 State of the Nation’s Children report. A full variable report presenting all data collected and a contextual chapter on existing research on the middle childhood years has been submitted to the OMCYA. A validation study has also been conducted.

Dissemination

PARTICIPATORY RESEARCH PROCESSES (PRP)

**Principal Investigators:** Dr Jane Sixsmith and Dr Saoirse Nic Gabhainn  
**Researchers:** Ms Aingeal de Róiste and Ms Siobhán O'Higgins  
**Funder:** Office of the Minister for Children and Youth Affairs

**Background**
Increasingly professional practice, service provision and policy developments for health are collaborative processes in which participation is sought from interested parties. Simultaneously, health promotion research continues to develop with the integration and application of the tenets of health promotion applied throughout the research process. In this way the active meaningful participation of people is sought and, at the very least, is not disempowering for them or for the researchers involved. Within the Health Promotion Research Centre in NUI, Galway we have been working on the development of research protocols that are designed to facilitate such engagement.

**Research Aims**
To explore and develop participation throughout the research process.

**Methods**
The developed Participatory Research Processes (PRP) includes a three-stage approach to data generation, collation and analysis, with groups of participants. Thus it is not a requirement to build up a long-term relationship with participants, but we have found it important to inject a sense of fun into the proceedings. In different applications of this approach the data generated have been both visual and written; with no particular advantage apparent to the more complex approaches. The approach explicitly concerns power within the research cycle. A second concern stems from consideration of the research environment as a setting for health promotion and the requirement for research to be both empowering and health promoting in the widest sense.

**Progress to Date**
We have explored some of these ideas through application in a number of studies, which are at various stages; completed, in train and planned. Current projects include working with youth groups to develop a model of adolescent friendly primary care services; with post-primary schoolchildren to develop curricular materials for HBSC and comparison of the outputs of data analyses conducted by children and professional researchers.

**Dissemination**


Background
Health inequalities in children and adults are well documented, but until the last decade or so inequalities in adolescents’ health received little attention, with some research pointing to relative equality at that phase in life. The lack of association between socio-economic status (SES) and health in adolescents could be due to the difficulty of measuring SES in young people and the lack of appropriate self-report measures of SES, or indeed, for poverty. This has led to the development of proxy measures for SES, affluence and poverty in various youth surveys, including the Health Behaviour in School-Aged Children (HBSC) study. One of these measures focused on experiencing food poverty or hunger. The HBSC 2002 and 2006 data suggest that food poverty was relatively frequent in children in Europe and North America with little or no social class gradient. This raises the question about the meaning of food poverty for children, the aetiology of food poverty and the associations between food poverty and family characteristics and between food poverty and other health outcomes.

Research Aims
This research programme aims to further the understanding of the nature of food poverty among children in Ireland and among other countries in the European Region and in North America. This includes the continued exploration of Irish data on this issue, the development of a questionnaire that investigates aspects of family culture around food and eating and investigation of Canadian measures of food poverty. This research programme also includes the development of cross-national analyses of existing data sets. The programme findings will be used to contribute to the scientific literature in this area, advocate on behalf of children in Ireland and used to inform the development of the HBSC questionnaire for the 2010 survey.

Methods
The programme currently involves the re-analysis of existing data and an additional new study. The new study involves a self-completion questionnaire from a representative sample of County Galway post-primary schoolchildren in 1st and 2nd year. The questionnaire includes two different sets of measures for food poverty together with an extensive questionnaire on family culture around food and eating.

Progress to Date
To date, data collection and analysis are complete. An internal report has been written and a paper is in progress. Secondary data analysis is in progress with two international papers in preparation.

Dissemination

Background
In 2006 Galway City joined the WHO Healthy Cities Project. One of the initial steps to be taken when joining the project is to conduct a survey, profiling the health of the city’s residents. The survey was one of the methods used to collect base line information for the Healthy Cities project.

Research Aims
The aim of the project is to map the health profile of Galway City residents. The study focuses on perceptions of services in the local area, participation in local activities, general health and well being, and health behaviours.

Methods
The study surveyed a representative sample of 587 adults residing in Galway City between October-December 2007. Data were collected using a self administered questionnaire. The sample was drawn from the GeoDirectory list of addresses that was provided by the city council. The study questionnaire was developed by the HSE Galway City Research Group and was piloted by the research team. Data were collected using a drop-off and pick-up method. The study accommodated literacy and language difficulties by offering a face-to-face interview as requested.

Progress to Date
Data collection and data analysis have been completed and a report was submitted to funders. The data is being used to inform key stakeholders and policy makers in Galway City. A number of fact sheets based on the data that were collected are being produced by HSE West.

Dissemination
A full descriptive analysis of all variables (qualitative and quantitative) was provided to the funder.

AN ANALYSIS OF WORK-LIFE BALANCE, EMPLOYEE STRESS AND HEALTH IN THE IRISH UNIVERSITY SECTOR

Principal Investigator: Ms Victoria Hogan
Funder: NUI, Galway Millennium Fund

Background
Increased levels of work intensity and increased working hours have been identified as potential occupational stressors, and The European Parliament has called for studies into the effects of working long hours on the family and on individual health. This study concentrates on the issues of stress, workload, and work-life balance in the Irish academic sector. The activities of employees in the Irish university sector are critical for the maintenance of growth and competitiveness in the new knowledge-based economy, and if Irish workers are to compete on the global stage, we need to better understand how to maximise worker health, satisfaction and productivity.

Research Aims:
Specific objectives include:

i. Determine levels of self-reported stress, health and productivity in the university sector
ii. Determine the impact of work intensity and number of working hours on levels of stress, health and productivity.
iii. Determine the effects of job involvement and work overload on work-life balance in practice.
iv. Determine the significance of worker-environment fit in mediating the relationship work schedule and levels of stress, health and productivity.

Methods
A quantitative multivariate survey methodology has been used to measure key independent and dependent variables in a cross-sectional sample of academic staff working in Irish universities. This consists of a purpose designed electronic questionnaire sent to academics in three Irish universities.

Progress to Date
To date, the survey instrument has been designed and piloted. Three universities have agreed to participate in the project. Data collection via the electronic questionnaire began in December 2008 and is currently ongoing.
b. Programme Design and Evaluation

- HEALTHY EATING AND PHYSICAL ACTIVITY IN SCHOOLS
- HEALTHY TOGETHER
- EVALUATION OF THE ‘MINDOUT’ PROGRAMME
- EVALUATION OF ‘ZIPPY’S FRIENDS’, AN EMOTIONAL WELL-BEING PROGRAMME FOR CHILDREN IN PRIMARY SCHOOLS
- SCOPING RESEARCH FOR THE DEVELOPMENT OF INTERNET-BASED HEALTH PROMOTION MATERIALS
- EVALUATION OF THE ‘CHOOSE SAFETY’ HEALTH PROMOTION PROGRAMME
HEALTHY EATING AND PHYSICAL ACTIVITY IN SCHOOLS

Principal Investigator: Dr Saoirse Nic Gabhainn with international collaborators
Researchers: Dr Colette Kelly and Ms Priscilla Doyle
Funder: European Commission

Background
The dramatic increase in body weight affecting all age groups has been defined by the World Health Organisation as a global epidemic with immense consequences for public health. Identifying children and adolescents as key target groups for overweight prevention and intervention is of critical importance. The prevalence of childhood overweight has, since the 1980’s, increased disturbingly, and in many countries and regions doubled or even tripled. It is generally agreed that an integrated approach is necessary because of the multi-causal character of the obesity epidemic. Schools reach a majority of all children and can contribute to the protection and promotion of children’s health by promoting healthy eating and physical activity and by encouraging participation and providing skills training in these areas. The health promoting school approach is about building an environment that promotes health and health enhancing behaviour in schools and the community. The most successful outcomes for health promoting schools arise from programmes developed through collaboration between the health and education sectors. The Healthy Eating and Physical Activity (HEPS) project is coordinated by NIGZ in the Netherlands and is linked with the Schools for Health in Europe Project (formerly the European Network of Health Promoting Schools).

Research Aims
To develop, implement and evaluate effective policy and sustainable practices on healthy eating and physical activity in schools in all member states in Europe using a whole school approach.

Methods
This is a piece of co-ordinated action research which will include the development of a comprehensive set of principles on promoting healthy eating and physical activity in schools based on the health promoting school approach; an inventory tool for available school programmes on promoting healthy eating and physical activity in the member states, including a set of quality criteria; an advocacy tool for a national school policy on healthy eating and physical activity based on the health promoting school approach, including structural collaboration between the ministries of health and education, NGO’s, the private sector and parents; a tool for teacher education and training on promoting healthy eating and physical activity and associated mental health issues affecting obesity; a monitoring tool, including indicators, for implementation of the HEPS schoolkit on the school level, the regional level and the national level; and practical implementation guidelines for schools and school-supporting organisations of the schoolkit on healthy eating and physical activity.

Progress to Date
The international group has been working on the development of principles, the HEPS guidelines and the HEPS advocacy tool.

Dissemination
Project newsletters can be downloaded from: http://www.schoolsforhealth.eu/
Background
The context for this project is the workplace health and safety needs of Small and Medium Enterprises (SMEs), and in particular the specific challenges of working with SMEs highlighted in the Luxembourg Declaration (1997). It is apparent that SMEs employ more than 66% of Europe's working population, yet have higher rates of occupational injuries. There is a need to train personnel who work in and with SMEs in health improvement. Three countries are involved in this collaborative project: Ireland, Italy and Iceland.

Research Aims
The overall aim of the project is to create an e-learning course in order to promote workplace health in small and medium sized enterprises (SMEs) in rural communities. The e-learning course participants learn about risk assessment, and the planning, implementation and evaluation of a Workplace Health Promotion (WHP) programme. The programme is intended for those employed in SMEs with a responsibility for health and safety; managers, union representatives, and personnel officers, whom, ideally, have been educated to primary degree level.

Methods
The principal methods included: (i) a needs assessment in each country, (ii) course/material development, (iii) evaluation of the pilot programme.

Results
A training needs assessment was conducted in Ireland, Iceland and Italy, revealing a need for and interest in new training material and courses focusing on how to initiate and run a successful WHP programme in SMEs. The findings from the needs analysis were used to inform the development of the e-learning course.

The course was structured into seven 'blocks', with students expected to complete a block each week. Material consisted of lectures presented as slides with audio track, specific short learning exercises assigned to each lecture and submitted to the tutor (one per country), class-based discussion forums, and one 'major' assignment submitted to tutors at the completion of the course. The course was delivered through April and May 2008, and completed by 26 students (65% of those commencing). Reasons for withdrawal were principally language (course delivered in English) and workload greater than anticipated.

An evaluation of the e-learning pilot programme included focus groups and questionnaires for students and semi-structured interviews with tutors. Almost all (95%) students found the course relevant for SMEs and relevant to their learning needs (90%). However many (81%) did find it difficult and that it took more time than indicated (67%). Learning material quality was rated positively. Three quarters of students rated their learning as excellent or good.

Dissemination
Two evaluation reports were completed.

Background
This project evaluated the pilot delivery of the MindOut mental health promotion programme in selected Youthreach centres in the HSE West region. The Youthreach MindOut programme provides an opportunity for early school leavers to promote their own mental health and acquire skills in dealing with stress, emotions, relationships and being a support to others. The programme also aims to raise awareness of the range of sources of help available within the local community.

Research Aims
The research aims of this study were:

i. To examine the feasibility of implementing a mental health promotion programme in Youthreach centres.

ii. To measure the effectiveness of the programme in improving trainees’ knowledge and awareness of mental health issues and their coping skills.

iii. To assess the attitudes of the tutors and trainees towards the programme.

iv. To examine the programme’s process of delivery and the perceived gains.

Methods
Eight Youthreach centres from the Galway, Mayo and Roscommon region were involved in this study which employed a quasi-experimental design. The evaluation consisted of six distinct components and employed a combination of qualitative and quantitative measures. A series of structured questionnaires and participatory workshops were used to assess the impact of the programme on the trainees. In addition, the process of implementation was analysed using weekly tutor questionnaires, an ethos questionnaire and focus group review sessions.

Results
The programme was well received by both trainees and tutors. In terms of programme effects, the intervention group were significantly more likely than the control group at post-intervention to report feeling positive about themselves and showed significant improvements in their use of positive coping strategies as measured by the Brief Cope scale (Carver et al., 1989). The majority of trainees in the intervention group stated that as a result of doing the programme they had a better understanding of mental health and found it easier to cope with difficult situations.

The results from the Ethos questionnaire, which was designed to elicit information about the ethos of the centres and the promotion of positive mental health in the centres, indicated the need for a more holistic approach to mental health in Youthreach centres. The results also indicated the need for mental health training for tutors in Youthreach centres.

From the tutors’ perspective, the benefits of the programme included (i) awareness raising about mental health issues and how to cope with difficult situations (ii) an improved tutor-trainee relationship and (iii) the development of trust and respect between trainees.

Dissemination
Background

Zippy’s Friends is a universal school-based programme for children in first and second class. It has been developed specifically to help all young children with different abilities and backgrounds, to expand their range of effective coping skills. The underlying hypothesis in developing Zippy’s Friends is that if children learn at a young age to expand their repertoire of coping abilities, they will be less likely to develop serious problems in childhood, adolescence and even adult life when they are confronted with the inevitable occurrence of stressful situations.

Research Aims

The specific aims of this study are to:

i. Determine if an international emotional literacy programme for young children can be successfully implemented in an Irish school setting.

ii. Determine the short and long term impact of the programme on the children who participate when compared with children in a control group who do not participate in the programme.

iii. Examine the process of implementation in order to determine the conditions which need to be created to achieve successful outcomes.

Methods

The evaluation research employed a randomised controlled design, with assessments before, during, immediately after and 12 months post-implementation. A total of 688 pupils and 43 teachers from 41 designated disadvantaged schools were randomly assigned to control and intervention groups. The programme is being evaluated by the teachers, children and parents in order to assess the impact, process and outcomes.

A series of structured questionnaires together with the qualitative draw and write technique are being used to determine the impact of the programme. An in-depth analysis of the process of implementation is being carried out through the use of weekly questionnaires, a school ethos questionnaire, Zippy’s class observations, focus group review sessions and child participatory workshops.

Progress to Date

All baseline and interim data have been collected. Analysis of baseline data and interim data is complete and an Interim Report was produced in October 2008. End of programme data collection will commence in February 2009. An end of programme report will be published in September 2009 and a 12 month follow-up report will be published in September 2010.

Dissemination

SCOPING RESEARCH FOR THE DEVELOPMENT OF
INTERNET-BASED HEALTH PROMOTION MATERIALS

Principle Investigators: Dr Jane Sixsmith in collaboration with Ms Cindy Dring
Health Promotion Officer NUI, Galway
Researcher: Ms Priscilla Doyle
Funder: Student Services, NUI, Galway

Background
In order to foster a health promoting environment within third level institutions, the provision of accessible, up-to-date, accurate and relevant information about health issues and available services for students is considered to be of the utmost importance.

Research Aim
The aim of this project was to explore the feasibility of the development of internet based health promotion materials for third level students across third level institutions, specifically University College Cork (UCC), Trinity College Dublin (TCD), and NUI, Galway (NUIG). These institutions were actively involved in the initiative with the Health Service Executive.

Methods
There were three components to the study:

i. Review - desk based scoping research to review the literature in relation to the dissemination of health information via the internet.

ii. Universities Perspectives - a group interview and individual communication with personnel from computer services with representation from each institution.

iii. Students Perspectives - Six focus groups with students were undertaken, two per institution to determine the acceptability and gauge the willingness of students to utilise the resource.

Results
Student's indicated that they use the internet, specifically Google, as their main source of health information; however they expressed a sense of mistrust with this. This led them to respond positively to the development of a health information website by the HSE and University. They identified that any such website should be professionally presented, with interactive features and accessed via university homepages and desktop icons. Students outlined that they would like the content to be professionally written by experts. Topics identified to be addressed included service provision, alcohol, drugs, mental health and nutrition. Computer personnel identified technical issues such as authentication and hosting as potential difficulties. However, neither of these were seen as insurmountable barriers to the provision of internet based health information targeted at students across the participating third level institutions. These results suggest that the development of internet based health promotion materials for third level students across third level institutions is feasible.

Dissemination
EVALUATION OF THE ‘CHOOSE SAFETY’ HEALTH PROMOTION PROGRAMME

Principal Investigator: Dr Margaret Hodgins
Researchers: Ms Vicky Hogan and Ms Marie Galvin
Funder: Health and Safety Authority

Background
‘Choose Safety’ is a school-based health promotion programme that is targeted at young people on the brink of employment. The higher vulnerability of young workers in respect of occupational accidents may be linked to risk-taking in adolescence generally, and therefore their perspective on an educational programme is critical to an evaluation. This project is based on a comprehensive evaluation model and includes impact, process and outcome indicators.

Research Aims
To conduct a comprehensive evaluation of the Health and Safety Authority ‘Choose Safety’ module.

Methods
Pre-course questionnaires were administered to students in five designated locations (2,331 students), assessing safety knowledge, attitudes and beliefs based on specific topics addressed in the educational material, in addition to demographic and work-related questions. The post-course version of the questionnaire contained additional questions intended to assess student perspectives on perceived usefulness of the structure and content and perceived efficiency of the administration of the module material. A control group, involving a small number of schools not participating in the ‘Choose Safety’ programme, also received questionnaires for comparison. All teachers of the course received a questionnaire to be completed by them at the end of the delivery of the module.

Results
Seventy one class groups (1,277) students in the intervention group returned pre-intervention questionnaires and 36 groups in total returned post-intervention questionnaires. The response rate for students was 46%, and 52% for teachers. An employment rate of 44% was reported, with many students engaged in long hours of work e.g. 25% reporting work hours in excess of 11 hours per week. A positive change in learning was demonstrated by the intervention group between the pre and post intervention questionnaire responses. Completion of the ‘Choose Safety’ module had little influence on student safety behaviour as measured by two questionnaire subscales and had little influence on safety beliefs. The students were generally positive about the ‘Choose Safety’ material, with more enjoying it than not. However, 28% considered the material too easy.

Teachers reported in general that they enjoyed teaching the ‘Choose Safety’ module, perceived student interest to be high and that interaction in class was good. However, time constraints was the most frequently raised difficulty.

Dissemination
c. Health Service Research

- RESEARCH INTO THE OPTIMAL SETTING FOR CHLAMYDIA SCREENING IN IRELAND
- INFANT FEEDING: DEVELOPMENT OF AN ANNOTATED BIBLIOGRAPHY
- EXPLORATION OF RISK COMMUNICATION IN RELATION TO CRYPTOSPORIDIUM CONTAMINATION OF THE PUBLIC WATER SUPPLY
### Background and Research Aims

The aim of this study is to:

- Build a focused evidence base of public and professional perspectives on Chlamydia testing.
- Design appropriate service models based on identified enablers and barriers to service uptake in Ireland.
- Pilot these models in a number of varied non-STI specialist centres such as general practices (rural and urban), student health and family planning clinic settings.
- Assess the feasibility and response uptake of the screening and community based partner notification programmes in these settings.

### Methods

The project has two phases carried out over a 2 year period:

**Phase 1** comprised a series of interlocking baseline research studies with potential users and service providers of the opportunistic screening. Findings of Phase 1 studies were used to inform the design of opportunistic screening models in primary care settings (Phase 2 is currently being conducted in both healthcare and non-healthcare settings in Galway).

An economic analysis of Chlamydia screening is also being conducted using a stochastic, individual based, dynamic sexual network model developed to simulate sexual behaviour and Chlamydia transmission in Ireland. The impact of the opportunistic screening strategy compared to no screening will be modelled in terms of the effect on annual Chlamydia prevalence. A health economic model was constructed to estimate the costs of acute infection, the number of complications and their associated costs, and the costs of the alternative screening strategies under consideration. The results from the transmission dynamic model and the health economic model are combined to conduct a cost effectiveness analysis of the opportunistic screening strategy.

### Progress to Date

To date, the following sub-studies and screening outcomes are being reviewed and analysed:

- Structured online questionnaire survey of students in 5 Third Level Colleges around Ireland with over 5,000 responses.
- Qualitative in-depth interviews with 71 young adults.
- 22 in-depth structured interviews with health care service providers.
- 100 self-completed structured questionnaires with attendants of STI clinics.

Pilot screening has commenced in 27 general practices, 2 student health units, a family planning clinic and youth-based primary care services in County Galway. Screening tests have been conducted with young adults (aged 18-29) with community based partner notification being carried out on positive cases.

A progress report has been submitted to the Health Protection Surveillance Centre.
INFANT FEEDING: DEVELOPMENT OF AN ANNOTATED BIBLIOGRAPHY

Principal Investigators: Dr Saoirse Nic Gabhainn and Dr Vivienne Batt
Researchers: Ms Aingeal de Róiste and Ms Aine O'Connell
Funder: Health Services Executive

Background
In order to support the implementation of the National Breastfeeding Strategy (National Committee on Breastfeeding, 2005), the Health Promotion Research Centre, National University of Ireland, Galway has been commissioned to produce a comprehensive bibliography of published and unpublished studies and post-graduate theses related to infant feeding in Ireland. The purpose of this bibliography is two-fold: to provide a platform for previous research and to identify research gaps and reduce duplication of research.

Research Aims
The three main objectives are: to produce a bibliography of published and unpublished studies, post-graduate theses, and other research studies related to infant and young child feeding in Ireland; to document the status of each piece of research in terms of its public accessibility, length and subject matter; and to procure in hard and soft copy each available report of research on infant feeding in Ireland that has been identified.

Methods
A number of methods were used to source the reports included in this bibliography. Keyword searches for relevant research were made in library catalogues and databases. A list was compiled of key informants in the infant feeding research area who might have had material to contribute to the bibliography. Those informants were contacted by letter and invited to send relevant material to the research team for inclusion in the bibliography. Follow up e-mails and calls were made as necessary. Similarly those who are known to have conducted research into infant feeding in Ireland, as identified by library searches and personal recommendation were contacted.

Progress to Date
Almost 200 pieces of relevant literature have been identified, collected and reviewed. The dissemination format has been completed for each individual piece of research which includes the Full Citation, Publication status, Key Research Question(s), Study Design, Participant group(s), Study Conclusion(s), Key Words and Holding Status. Preliminary findings indicate a number of prominent gaps in infant feeding-related research that include the areas of breastfeeding mothers and babies being protected from discrimination in public places and mechanisms to enable hospital/community and volunteer breastfeeding support programmes to provide seamless, timely, co-ordinated, consistent, and comprehensive services to all mothers. A draft final report has been completed and submitted to the funders and it is anticipated that it will be provided as an on-line searchable e-Health library resource.

Dissemination

**Background**

The contamination of the public water supply in Galway city and county with cryptosporidium provides an opportunity to examine the process of risk communication from the experts to the public via the mass media. Through exploration of the process of information transfer the effectiveness with which the authorities and print media communicate risk to the public associated with a specific health threat can be illuminated.

**Research Aims**

To illuminate the processes of risk communication from official sources to public interpretation via newspaper reporting of a specific health threat.

Objectives include:

i. To identify and analyse official documentation of risk in relation to cryptosporidium water contamination of the public supply.

ii. To identify and analyse newspaper reporting of risk in relation to water contamination.

iii. Analysis of objectives i. and ii. through both quantitative content analysis and discourse analysis.

**Methods**

A qualitative approach to the exploration of risk communication was appropriate due to the nature of the dissemination of information as a process and the importance of context to the communication process. Content and discourse analysis of media reporting in newspapers, national and regional will be undertaken.

**Progress to Date**

Identification, gathering and collation of newspaper articles reported in local and national press in relation to the contamination of the public water supply has been compiled. Analysis of the data is underway using NVIVO computer software.
d. Policy Research

- DEVELOPMENT EDUCATION RESEARCH NETWORK (DERN)
- CONNECTING HEALTH RESEARCH IN AFRICA AND IRELAND CONSORTIUM (CHRAIC)
- BENCHMARKING IMPLEMENTATION OF THE BANGKOK CHARTER (WHO, 2005)
- TRAINING AND ACCREDITATION IN HEALTH PROMOTION IN EUROPE INCLUDING PROFESSIONAL STANDARDS AND COMPETENCIES
- BEST PRACTICE IN PROMOTING MENTAL HEALTH IN SOCIALLY MARGINALISED PEOPLE IN EUROPE (PROMO)
- TOWARD INTERNATIONAL COLLABORATION ON COMPETENCIES AND ACCREDITATION IN HEALTH PROMOTION AND HEALTH EDUCATION: THE GALWAY CONSENSUS CONFERENCE
- DEVELOPMENT OF A DATA STRATEGY FOR CHILDREN IN IRELAND
- SUBSTANCE USE IN NEW COMMUNITIES IN THE WEST OF IRELAND
- ETHICAL REVIEW AND CHILDREN’S RESEARCH
Background and Research Aims
DERN is an interdisciplinary, cross-faculty network, established in 2005. DERN’s key aims are to mainstream development education within existing degree pathways, develop research capability and enhance professional and technical expertise relevant to development education and to build a Development Education agenda into civic engagement on campus and beyond.

Methods
A capacity-building approach was taken to developing the DERN network and to the delivery of development education and the building of research capacity and civic engagement. This involves working with the diverse existing interests and needs of the network members for course material and course development, as well as identifying new opportunities for members to develop their research and respond to new research funding opportunities by working together as a research consortium.

Progress to Date
DERN has placed strategic importance in networking. It has expanded its network base to the wider community, formed connections with other third level institutions and is represented on the Executive Committee of the Irish Development Education Association (IDEA). Through these connections, DERN is developing its development education resources, and promoting linkages between research, education and activism. The DERN website www.nuigalway.ie/dern and mailing list are used for sharing information on research funding opportunities and development education events. DERN identified Health and Human Rights as its thematic focus 2008 – 2011, and facilitated 8 seminars through the “Dialogues across Disciplines” series delivered by guest lecturers to a cross section of NUI, Galway students, staff and community activists. To mark the 60th anniversary of the Universal Declaration of Human Rights, DERN screened ‘Invisibles’, an award winning series of films about unreported human rights health crises, followed by a roundtable discussion. The network has facilitated members to attend and present at ten conferences and workshops on issues of development, health, environment and human rights.
DERN introduced development education content into existing and new teaching modules in the following disciplines: Philosophy, Sociology and Politics, Nursing, Community Development, Social Work and Human Rights. DERN delivered Development Education lectures to SUAS and to the undergraduate BA in Nursing.

Dissemination
In Promoting North-South Dialogue, DERN Postdoctoral fellow Dr Felipe Revollo delivered three seminars in universities in Colombia and Bolivia and completed three discussion papers. DERN Postdoctoral Fellow Dr Vanessa Andreotti has been promoting the internationalisation of development education through the use of critical literacy and the ‘Through Other Eyes’ project. Dr Andreotti has published 6 specialised articles on development education for leading publications, delivered 4 keynote speeches to conferences, was guest lecturer to 9 universities and has been engaging with DICE, Trocaire, and IDEA.

Dr Khoo and Dr O’Donovan represented NUI, Galway at the Irish-African Partnership for Research Capacity Building (IAPRCB) in Dublin and Uganda. Dr Khoo participated in the ESRC Global Health and Human Rights and the Society for Research in Higher Education (SRHE) conferences. She has also contributed 3 articles to Policy and Practice.
Background
Researchers from three Irish institutions, six African countries and one non-governmental organisation (NGO) comprise a long-term partnership for capacity building for pro-poor health research in Africa.

Partners:
- Irish researchers are from the Royal College of Surgeons in Ireland (RCSI), Trinity College Dublin (TCD), the National University of Ireland Galway (NUIG).
- African researchers are from Lesotho, Malawi, Mozambique, Sierra Leone, Sudan and Uganda. The Malaria Consortium’s main headquarters is in the UK and its main Africa office is in Uganda.
- The Council for Health Research for Development (www.COHRED.org), which has unique expertise in research capacity building, and the Alliance for Health Policy and Systems Research (www.alliance-hpsr.org), which focuses on research prioritisation and research into policy processes, are both advisers to the Programme.

Research Aims
To summarise existing research and knowledge gaps on health systems’ capacity to deliver interventions for the Health and HIV/AIDS Millennium Development Goals (MDGs); fund and train five PhD students; assess and strengthen the partners’ research capacity; conduct Irish Aid-relevant research; and strengthen research into policy links.

Progress to Date
Phase 1 (May 2008 – April 2009):

i. All partners participated in a Dublin workshop in June 2008 to agree plans for collating, summarising and synthesising existing research findings and knowledge gaps. Results from the reviews and synthesis are to be presented in workshop in Uganda in April 2009.

ii. A taught course has been developed for the CHRAIC PhD programme. Five PhD studentship in total will be funded from the Programme for the academic years 2008/2009 and 2009/2010. Existing research modules have been used, with some adaptation, from the Health Research Board PhD Scholars programme and the Masters in Global Health at TCD. Some new training modules have been designed, in particular the Social Determinants of Health in NUI, Galway. Modules will be adapted and made available to all partners on an electronic intranet.

iii. Preliminary partner research capacity assessments to identify: (a) capacity-strengthening needs; and (b) ‘good fits’ – by discipline, experience and research interest – for research teams to address priority questions.

iv. A progress report has been submitted to the HEA and Irish Aid.
Background and Research Aims

In 2006, Ireland joined as one of 10 countries in benchmarking progress on the Bangkok Charter for Health Promotion in a Globalised World (WHO, 2005). In September 2006, Professor Barry chaired a meeting in Oman of a WHO Technical Implementation Group to progress this benchmarking initiative. Work on developing the benchmarking process and template is ongoing since 2007, and the Irish input is being co-ordinated in collaboration with senior officials from the Department of Health and Children and the Health Services Executive.

Methods

This initiative focuses on developing a set of benchmarks and indicators to assess country level progress on implementing the Bangkok Charter’s four commitments and action areas. Part of this process entails the sharing of experiences and expertise within and between countries on the implementation of the Charter and the implications for infrastructure development and policy implementation at the country level. The work on this initiative is ongoing and includes preparing a technical paper with the WHO technical group on benchmarking progress on the Charter commitments. This paper focuses on how health promotion can contribute to the global health agenda and examines the extent to which international aid can be channeled to support the promotion of health and action on its social determinants.

Progress to Date

A symposium, chaired by Professor Barry, on progress to date, including four country level reports, was held at the IUHPE 19th World Conference in Vancouver in June 2007. Publication of a series of technical papers and a report on benchmarking progress on the Charter’s commitments is planned in 2009/10 and dissemination of progress will take place at the next WHO World Conference on Health Promotion in 2010.
Background and Research Aims

To support the ongoing work of the IUHPE EURO Sub-Committee on Training and Accreditation in Health Promotion, which is chaired by Professor Margaret Barry, two studies were undertaken at NUI, Galway: i) a scoping study on training and accreditation in health promotion across the European region (Morales and Barry, 2007) and ii) a feasibility study on implementing a pan-European framework for health promotion accreditation in Europe. The feasibility project aims to further the development of national and IUHPE action plans on implementing a competency-based accreditation system in Europe. The study includes an overview of the health promotion systems and structures within participating countries, identifies potential key stakeholders and lists the barriers and drivers to developing accreditation in each of the participating countries. The report considers the findings in the context of developing a pan-European accreditation system.

Progress to Date

The pilot project worked with participants from seven countries - Ireland, Finland, Spain, UK, Italy, the Netherlands, and Israel - to explore the feasibility of developing a pan-European accreditation system.

The main findings of the feasibility project are:

- There is interest in developing accreditation systems but there is a lack of resources to take this work forward. This is the case even in those countries where significant progress on accreditation has already been made (e.g. the Netherlands).
- Differences between countries in health, education and social care systems and health promotion structures need to be taken into account when developing a shared accreditation system.
- Accreditation for health promotion is not usually a priority for professional and educational systems with limited resources. There is, therefore, a need to lobby key decision makers to influence them to recognise the importance of standards and accreditation in relation to accountability and quality assurance in health promotion.

The participants in the project, together with eleven other partners, developed a successful proposal for funding to the Executive Agency for Health and Consumers (EAHC) of the European Commission, which will enable the development of a pan-European accreditation system over the next three years. The project was also active in the development of the Galway Consensus Statement on Domains of Core Competencies in Health Promotion which will usefully inform future work on the development of competency-based professional standards and accreditation in Europe.

Dissemination


BEST PRACTICE IN PROMOTING MENTAL HEALTH IN SOCIALLY MARGINALISED PEOPLE IN EUROPE (PROMO)

Principal Investigator: Professor Margaret Barry
Researchers: Mr Reamonn Canavan and Ms Maeve O’Sullivan
Funder: DG SANCO, European Commission

Background
PROMO (Best Practice in Promoting Mental Health in Socially Marginalised People in Europe) is funded by the European Commission and is being conducted in 14 European capitals. The focus of the project is on the delivery of health and social care for people with mental health problems who belong to one of the six following groups: (1) long-term unemployed; (2) homeless; (3) prostitutes/sex workers; (4) asylum seekers/refugees; (5) illegal immigrants; (6) travellers.

Research Aims
i. To review policies and legislation related to promoting mental health and preventing mental ill-health amongst the relevant socially marginalised groups.

ii. To select two most deprived areas in 14 European capitals and to
a) obtain information on services providing health and social care in these areas for marginalised people with mental health problems.
b) assess the overall quality of care in these areas for marginalised people with mental health problems.
c) analyse the data to identify good practice on the level of services and systems of health and social care.

iii. To formulate policy recommendations for the promotion of mental health of socially marginalised people in Europe.

Methods
- Identify the relevant services, both statutory and voluntary, in the two most deprived areas in Dublin City.
- To look at the organisation of each service, its clients, components of care, how the service work is linked and coordinated and funding arrangements, using an assessment tool developed specifically for the project.
- Conduct interviews with relevant experts assessing the overall quality of care for each marginalised group in both identified areas using a tool developed specifically for the project.
- To identify best practice through the analysis of the quantitative and qualitative data collected on policies, legislations, services and systems of services as above.

Progress to Date
- The two most deprived areas in Dublin city were identified using the Hasse deprivation indices based on the 2006 census.
- The relevant services in each area have been identified.
- To date forty nine interviews have been conducted with services in area 1.
- Two project meetings of all 14 partners have been held in London, September 2007 and Paris, December 2008.
- Data collection for the assessment of services and the quality of mental health care in both identified areas will be completed by end of June 2009. Data sets will also be forwarded to the co-ordinating centre in Queen Mary College, London for further analysis.

Dissemination
Background and Research Aims
Developing a competent health promotion workforce is a key component of capacity building for the future and is critical to delivering on the vision, values and commitments of global health promotion. An international consensus meeting, jointly organised by the International Union for Health Promotion and Education (IUHPE), the Society for Public Health Education (SOPHE) and the Centers for Disease Control (CDC) Atlanta, with participation from international leaders in the field, took place at the National University of Ireland, Galway, in June 2008. The purpose of the Galway Consensus Conference was to begin the process of promoting international exchange and understanding concerning core competencies and accreditation in the professional preparation of health promotion and health education specialists. The Consensus Conference sought to develop a shared vision of the core competencies, professional standards and quality assurance mechanisms necessary for developing workforce capacity across countries and continents.

Methods
As a first step in this process, the Galway Consensus Conference convened a working group of international leaders in the field that have been prominent in the development of competency-based and accreditation movements in global public health and population health. A Consensus Statement, based on the proceedings of the meeting, was produced which outlines core values and principles, a common definition, and eight domains of core competency that are required to engage in effective health promotion practice. The core domains of competency agreed to at the meeting are: catalysing change, leadership, assessment, planning, implementation, evaluation, advocacy and partnerships.

The proceedings of the meeting and the Consensus Statement are being published in special issues of the journals Global Health Promotion and Health Education and Behavior in May 2009.

Progress to Date
The work on this initiative is being taken forward by the Centre’s Director, through her role as Global Vice President for Capacity Building, Education and Training (2007-2010) with the IUHPE. A wider consultation process is taking place in collaboration with the IUHPE Regional Officers and the WHO Regional Offices in order to continue the process of building international consensus with regard to health promotion core competencies. The findings will be presented at the next IUHPE World Conference in Switzerland in 2010.

Dissemination
Background
Within the partnership agreement “towards 2016”, there is an explicit commitment to the development of a data strategy on children’s lives. The Office of the Minister for Children and Youth Affairs (OMCYA) is responsible for this strategy which will set out a clear vision, goals, principles and actions for the collection, compilation and dissemination of data and will facilitate the availability of good quality, easily accessible, internationally comparable information about children in Ireland. HPRC has been involved in the preparation of two background documents related to the key issues to be addressed during the development of the data strategy.

Research Aims
The objectives of the literature review were to provide: an overview of operational and technical issues arising at each stage of the data cycle; an analysis of key policy issues arising in an Irish context; an overview of national and international frameworks and models around data quality and of documented models of good practice internationally. The aim of the collective case study analyses was to understand how data structures and processes for the development, collection, analysis and dissemination of data influence the utilisation of data on children’s lives by key stakeholders.

Methods
The literature review drew on involved a review of available literature from policy, scientific, technical and practice-based sources. These issues include: considering the purpose of having a data strategy, data management challenges, data integration and data protection. Consideration of legal and policy issues was provided by the OMCYA. Cases from 5 countries that met pre-defined criteria were identified and existing documentation on each case was fully reviewed. Interviews were conducted with 18 key personnel from Canada, UK, Sweden, Finland and Ireland, and the data were transcribed, analysed and compared.

Progress to Date
These reports highlight that the development, production and implementation of a data strategy is both complex and multi-faceted. The co-operation of multiple key players as well as inter-departmental collaboration is essential. While there are statistical programs and private companies available to be parties to a productive efficient data strategy, the development of a data strategy for children’s raises many legal and ethical challenges that require detailed consideration. Draft reports have been submitted to the Office of the Minister for Children and Youth Affairs.

Dissemination

SUBSTANCE USE IN NEW COMMUNITIES IN THE WEST OF IRELAND

Principal Investigator: Dr Saoirse Nic Gabhainn
Researchers: Ms Cliona Fitzpatrick and Dr Colette Kelly
Funder: Western Region Drugs Task Force

Background
Ireland is an established host country for migrant workers and asylum seekers from around the world with a high proportion migrating to the West of Ireland. Such new communities have brought a diverse range of cultural practices and customs to the western region and require a host country that is culturally sensitive to meet their needs. The Western Regional Drugs Taskforce recognises these new communities and thus their role in assessing their needs around the prevention and treatment of substance misuse. This research was commissioned by the Taskforce in order to feed into the next strategic policy for the region.

Research Aims
This research aims to provide an overview of the new communities in the west of Ireland and to explore substance misuse in key countries of origin as well as among new communities living in Ireland and in particular the west of Ireland. It also aims to document the main risk factors for substance use in new communities and recommend appropriate service level responses.

Methods
The main methods for this research comprise review of the scientific and policy literature. These are supplemented by data collection with service providers and analyses of regional media sources.

Progress to Date
Relevant literature have been identified, collected and reviewed. Service providers have been contacted and interviewed and newspaper articles have been collected and analysed. A draft final report has been completed and submitted to the funders.

Dissemination
ETHICAL REVIEW AND CHILDREN’S RESEARCH

**Principal Investigators:** Dr Heike Felzman-Schmidt and Discipline of Philosophy with Dr Jane Sixsmith and Dr Saoirse Nic Gabhainn

**Researchers:** Ms S. O’Higgins, Ms M. Ward, Ms S. Ni Chonnachtaigh, Ms A. McMahon and Ms A. O’Connell

**Funder:** Office for the Minister of Children and Youth Affairs

**Background**
A substantial increase in research into the lives of children has been experienced in Ireland over the last few years. Compared to requirements in research with adult research participants, research with children faces additional ethical challenges. While there is a tradition of highly formalised and professionalised research ethics review procedures in North America, the development of comparative structures has proceeded at a significantly slower pace in Europe. Ireland is considered to have a relatively unregulated environment in relation to research ethics review. Few national studies on the functioning and remit of ethics committees have been conducted and large scale studies of review of research on children have been particularly rare.

**Research Aims**
The aim of this research is to provide an overview of the current mechanisms for applying for and achieving ethics approval for studies being undertaken with children in Ireland.

**Methods**
This study was in two main parts; literature review and ascertainment of stakeholder perspectives. A quantitative postal survey of identified Research Ethics Committees was undertaken in conjunction with a HSE research team. A response rate of 64% (n=32) was achieved. A variety of qualitative data collection techniques were employed with the specific stakeholder groups; chairs of Research Ethics Committees, both academic and medically orientated, administrators of Research Ethics Committees, members of Research Ethics Committees, children’s researchers, parents and children.

**Results**
The majority of Irish RECs identified that they reviewed research with children as part of their function. The diversity and range of research with children reported reflected the range of general research reviewed in every way. Therefore, the generic challenges and tensions identified are applicable to the ethical review of research with children. The stakeholders’ perspectives demonstrate clearly some of these tensions and also illustrate the continuing evolution of RECs within the current lack of any agreed national governance framework which is likely to lead to further divergence. The participants’ perspectives also highlight the range of stakeholders in the review process which include schools, health care and academic institutions as well as various professional groups, families and children. It is therefore incumbent for all stakeholders, including children, to be able to voice their respective views as the beginning of a necessary dialogue for the effective ethical review of research with children.

**Dissemination**
v. Dissemination

The Health Promotion Research Centre hosts a range of meetings, conferences and seminars which aim to advance multidisciplinary collaboration for health and to further the translation of health promotion research into policy and practice. An important aspect of our work is ensuring that our research activity and findings are disseminated through reports, peer review publications and conference presentations. Centre activities have also been widely reported in the media.

a. Publications


Hodgins, M. & Swinburne, L. (2008). 'It sort of widens the health word' evaluation of a health promotion intervention in the youth work setting. *Youth Studies Ireland, 3*(1), 30-44.


b. Presentations


c. Media Coverage

Newspaper and Magazine Articles


Campaign launched to tackle teenage drinking (2008, June 5). *Bray People (Ireland)*. (pg. unknown)


O’Connor, Gavin. (2008, June 18) Binge culture pushes our teens to top of Europe’s booze league; Call for urgent action after shock figures are released. *The Western Mail*, p. 14.

Young British teens 'heaviest drinkers in Western world'. (2008, June 18). *Yorkshire Post*, (p. unknown)


Our children are fitter and happier. (2008, June 18). *Evening Herald (Ireland)*, (p. unknown)


Children’s happiness and health are hit by inequality. (2008, October 7). *Irish Independent*, (pg. unknown)


SOCIAL SCIENCE; New findings from University of Copenhagen in the area of social science published. (2008, October 9). *Politics & Government Business*, p. 67.


Children aged just 10 admit they get drunk. (2008, December 9). *Evening Herald (Ireland)*, (p. unknown)


Reports of HPRC research were covered by the following broadcast media

**Internet Articles**  
http://home.eircom.net/content/irelandcom/breaking/13093349?view=Eircomnet &cat=Breaking%20News

http://www.mediawatch.ie/mms/listBroadcastSummary.jsp?iClipId=117266&username=nuig&password=nuig9t


http://www.irishhealth.com/article.html?level=4&id=14386


**National Television**  
6.1 News  
TV3 news (5.30pm)

**National Radio**  
Newstalk  
Newsbeat (2FM)  
Today FM  
INN (news bulletins)  
Today FM (news bulletins)  
2FM (news bulletins)  
Radio na Gaeltachta (Nuacht hAon)  
FM104 (news bulletins).

**Local/Regional Radio**  
Galway Bay FM  
Highland Radio (Shaun Doherty Show)  
Galway Bay FM (Keith Finnegan Show)  
East Coast Radio (news bulletins)  
Galway Bay FM (news bulletins)
d. Health Promotion Conference 2008

One of the Centre’s largest dissemination events is the Annual Health Promotion Conference which is organised in conjunction with the Population Health Directorate of the Health Services Executive, the Health Promotion Policy Unit, Department of Health and Children and NUI, Galway. This conference serves as a national platform for the dissemination and integration of theory, research, policy and practice. Themes addressed include; evidence-based health promotion practice; nutrition; social capital; mental health promotion; health inequalities; re-orienting health services and population health. The theme for our 2008 conference was **Capacity Building for the Future: Health Promotion Competencies and Professional Standards.**

*From left to right: Mr Brian Mullen, Department of Health & Children, Mr Paul Barron, Department of Health & Children, Ms Catherine Murphy, Population Health, HSE, Professor David McQueen, CDC, Atlanta, Minister Mary Wallace, Minister for Health Promotion, Professor Maurice Mittelmark, University of Bergen, Professor Margaret Barry, NUI, Galway.*
## Conference Programme

**Thursday 19th June 2008**

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Venue</th>
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<tbody>
<tr>
<td>10.00am</td>
<td><strong>Registration &amp; coffee</strong></td>
<td>Foyer, 1st Floor, IT Building</td>
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<tr>
<td>11.00am</td>
<td><strong>Welcome and Opening Address:</strong></td>
<td>IT125, 1st Floor, IT Building</td>
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<td></td>
<td>- Minister Mary Wallace, Minister for Health Promotion and Food Safety, Department of Health &amp; Children</td>
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<td>- Professor Margaret Barry, Department of Health Promotion, NUIG, IUHPE Vice-President for Capacity Building, Education and Training</td>
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<tr>
<td>11.30am</td>
<td><strong>Plenary: International Perspectives on Capacity Building for the Future</strong></td>
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<td>- Professor David McQueen, Associate Director for Global Health Promotion, Centers for Disease Control (CDC), Atlanta, President IUHPE</td>
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<td></td>
<td>- <em>Capacity Building in Health Promotion: A Sense of Urgency and Global Perspectives</em></td>
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<td>- Professor Maurice Mittelmark, University of Bergen, IUHPE Vice President Communications</td>
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<td></td>
<td>- <em>Essential infrastructure for health promotion: What do we have and what do we lack?</em></td>
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<td>Chair: Mr. Paul Barron, Assistant Secretary, Primary Care, Department of Health &amp; Children</td>
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<td>12.45pm</td>
<td><strong>Lunch</strong></td>
<td>Orbsen Building Foyer</td>
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<td>2.00pm</td>
<td><strong>Plenary: International Perspectives on Competencies and Professional Standards in Health Promotion and Health Education</strong></td>
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<td>- Ms. Elaine Auld, Executive Director, Society for Public Health Education (SOPHE), USA</td>
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<td>- <em>Competencies and Professional Standards in Health Promotion and Health Education in the U.S.: Reflections on 60 Years and Beyond</em></td>
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<td>- Professor John Allegrante, Columbia University, USA</td>
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<td>- <em>History, Rationale, and Vision for a Unified Public Health Education Accreditation System in the United States</em></td>
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<td>- Professor Alyson Taub, Professor of Health Education, New York University, USA</td>
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<td>- <em>Identifying Competencies for Professional Practice: The USA Experience</em></td>
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<td></td>
<td>- Professor Margaret Barry, Department of Health Promotion, NUIG, IUHPE Vice-President for Capacity Building, Education and Training</td>
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<td></td>
<td>- <em>International Collaboration in Developing Core Competencies and Professional Standards in Health Promotion</em></td>
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<td></td>
<td>Chair: Ms. Elaine Auld, Executive Director, SOPHE, USA</td>
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3.15pm Roundtable Discussions (coffee to go)

Employers: Chair (Brian Neeson)
Venue: IT207, 2nd Floor IT Building

Practitioners: Chair (Siobhan McGrory)
Venue: IT203, 2nd Floor IT Building
Chair (Kate Walshe)
Venue: IT205, 2nd Floor IT Building

Academics: Chair (Margaret Hodgins)
Venue: IT313, 3rd Floor IT Building

Students: Chair (Aingeal De Róiste)
Venue: IT206, 2nd Floor IT Building

6pm Drinks reception and barbecue Venue: College Bar

Friday 20th June 2008 Venue: IT125, 1st Floor, IT Building

9.00am Plenary: Irish Perspectives on Competencies and Professional Standards in Health Promotion

- Ms. Charlotte McCoubrey, Therapy Advisory Unit, Department of Health & Children
  Building for the Future: Competencies and Professional Standards

- Ms. Ann O’Riordan, Irish Health Promoting Hospitals Network
  HPH: Process of standard development and associated competencies

- Mr. Brian Neeson, Health Promotion, Population Health, HSE
  Competencies and Professional Standards in Health Promotion

Chair: Ms. Catherine Murphy, Assistant National Director for Population Health, HSE

10.15am Tea/Coffee Venue: 1st Floor, IT Building

10.30am Open Papers: Parallel Sessions

Group A Venue: IT125G, Ground Floor, IT Building

- Susan Redmond and Eva Devaney
  The Impact and Influence of Volunteerism on Community Participation and Health Promotion in Western Africa

- Fiona Falvey, Ita O’Connell, Asa Ageirsdottir and Margaret Hodgins
  Healthy Together

- Larissa Kaminskyj and Maureen Gleeson
  The workforce-in-waiting

Chair: Dr. Margaret Hodgins, Department of Health Promotion, NUI, Chair AHPI
Group B

Barbara Battel Kirk
*Developing Competencies and Professional Standards for Health Promotion Capacity Building in Europe: IUHPE/ EURO Competencies and Accreditation Project*

Genevieve Becker
*Valuing views of service-users in setting standards and assessing performance.*

Edel O’Donnell and Martha Sweeney
*Implementation of SPHE (Social Personal and Health Education) in post primary schools in Galway, Mayo and Roscommon....... the challenges and the rewards on this long distant journey - what sustains those on the road and our hopes for the future!*

Chair: Dr. Saoirse Nic Gabhainn, Department of Health Promotion, NUIG

11.30am **Plenary Discussion Panel**

Venue: IT125, 1st Floor, IT Building

Presentation of key points from each roundtable.

**Discussants:**
- Ms. Olive McGovern, Health Promotion Policy Unit, Department of Health & Children
- Ms. Catherine Murphy, Population Health, HSE
- Dr. Margaret Hodgins, Department of Health Promotion, NUIG, Chair AHPI

Chair: Ms. Barbara Battel Kirk, BBK Consultancy.

12.30 **Response and conference close:**

**Mr. Brian Mullen**, Principal Officer, Health Promotion Policy Unit, Department of Health & Children.

1pm **Lunch**

Venue: Orbsen Building Foyer.

*Speakers and delegates at the HPRC 2008 Conference*
# vi. Research Grants & Donations

<table>
<thead>
<tr>
<th>Project Title</th>
<th>Funder</th>
<th>Principal Investigator</th>
<th>Total Grant</th>
<th>Project Dates</th>
</tr>
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<tbody>
<tr>
<td>Best Practice in Promotion Mental Health (PROMO)</td>
<td>Public Health Executive Agency, EC</td>
<td>M. Barry</td>
<td>€82,612</td>
<td>1/9/07-31/8/10</td>
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<tr>
<td>Bibliography of Infant Feeding</td>
<td>HSE</td>
<td>S. Nic Gabhainn V. Batt</td>
<td>€10,000</td>
<td>30.11.07-30.9.08</td>
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<td>Capacity for Development Education</td>
<td>CELT, NUI, Galway</td>
<td>D. O’Donovan</td>
<td>€15,000</td>
<td>1/6/05-22/1/08</td>
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<td>Chlamydia Screening</td>
<td>Health Protection Surveillance Centre (HPSC)</td>
<td>D. O’Donovan</td>
<td>€175,947</td>
<td>18.10.07-31.3.09</td>
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<tr>
<td>ChRAIC</td>
<td>HEA &amp; Irish Aid</td>
<td>D. O’Donovan</td>
<td>€138,494</td>
<td>1.10.07-30.8.13</td>
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<td>Development Education Research Network/DERN</td>
<td>Irish Aid</td>
<td>D. O’Donovan, S. Ming-Khoo</td>
<td>€330,000</td>
<td>1/6/06-30/6/09</td>
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<td>Development of a Data Strategy for Children in Ireland</td>
<td>Atlantic Philanthropies</td>
<td>S. Nic Gabhainn</td>
<td>€49,259</td>
<td>30/11/07-1/07/09</td>
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<td>Economic Evaluation of Chlamydia Screening</td>
<td>HPSC</td>
<td>D. O’Donovan</td>
<td>€64,463</td>
<td>16.6.08-31.5.09</td>
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<tr>
<td>European Network for Mental Health Promotion (IMHPA Phase 2)</td>
<td>Implementing Mental Health Promotion Action (IMPHA)</td>
<td>M. Barry</td>
<td>€1,684</td>
<td>20/11/06-31/4/08</td>
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<td>Evaluation of the Choose Safety Health Promotion Programme</td>
<td>Health &amp; Safety Authority</td>
<td>M. Hodgins</td>
<td>€42,471</td>
<td>10/10/07-10/10/08</td>
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<td>Evaluation of the Mind Out Programme</td>
<td>Health Service Executive West</td>
<td>M. Barry</td>
<td>€50,000</td>
<td>1/10/07-31/08/08</td>
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<td>Evaluation of Zippy’s Friends</td>
<td>Health Service Executive West</td>
<td>M. Barry</td>
<td>€66,240</td>
<td>1/11/07-30/4/10</td>
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<td>Exploration of Risk Communication with Cryptosporidium Contamination</td>
<td>Health Service Executive</td>
<td>J. Sixsmith</td>
<td>€13,754</td>
<td>30/1/08-30/4/09</td>
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<td>Friends of Albania</td>
<td>Irish Friends of Albania</td>
<td>D. O’Donovan</td>
<td>€2,893</td>
<td>30.6.08-31.12.08</td>
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<td>Galway Healthy Cities</td>
<td>Health Service Executive West</td>
<td>M. Barry, M. Molcho</td>
<td>€28,476</td>
<td>1/9/07-30/11/08</td>
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<td>Health Behaviour in School Age Children (Ireland)</td>
<td>Department of Health &amp; Children</td>
<td>S. Nic Gabhainn</td>
<td>€671,275</td>
<td>1/4/06-31/12/09</td>
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<td>Project Title</td>
<td>Funder</td>
<td>Principal Investigator</td>
<td>Total Grant</td>
<td>Project Dates</td>
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<td>Health Services Activities (2)</td>
<td>Health Service Executive</td>
<td>D. O’Donovan</td>
<td>€150,000</td>
<td>1/1/06-31/3/10</td>
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<td>Healthy Together</td>
<td>Leonardo da Vinci, EC</td>
<td>M. Hodgins</td>
<td>€39,035</td>
<td>16/10-/06-5/10/08</td>
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<td>HEPS Schoolkits</td>
<td>European Commission</td>
<td>S. Nic Gabhainn</td>
<td>€13,669</td>
<td>1.9.08-30.4.11</td>
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<td>HIV/AIDS Consultancy</td>
<td>Irish Aid</td>
<td>D. O’Donovan</td>
<td>€16,500</td>
<td>1/1/06-31/3/08</td>
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<td>HPRC Annual Summer Conference 2008</td>
<td>HSE DOHC NUI, Galway</td>
<td>M. Barry</td>
<td>€3,000</td>
<td>1.1.08-31.12.08</td>
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<td>Integrating Safer Motherhood</td>
<td>Irish Aid</td>
<td>D. O’Donovan, M. Manandhar</td>
<td>€336,078</td>
<td>23/12/04-31/3/08</td>
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<td>Investigating Food Poverty</td>
<td>NUI, Galway Millennium Grant</td>
<td>M. Molcho</td>
<td>€8,000</td>
<td>30.11.07-31.12.08</td>
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<td>Middle Childhood</td>
<td>Office of the Minister for Children &amp; Youth Affairs (OMCYA)</td>
<td>S. Nic Gabhainn</td>
<td>€40,000</td>
<td>1/4/06-31/12/09</td>
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<td>Networking Grant for Global Health</td>
<td>HRB</td>
<td>D. O’Donovan</td>
<td>€8,400</td>
<td>14.8.07-14.8.08</td>
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<td>Nutrition &amp; Dietetic Service</td>
<td>Health Service Executive West</td>
<td>G. Nolan, M. Barry</td>
<td>€60,000</td>
<td>1/2/07-30/4/08</td>
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<td>PhD Fellowships: S. O’Higgins (3 years)</td>
<td>OMCYA NUI, Galway IRCHSS</td>
<td>S. Nic Gabhainn, S. Nic Gabhainn, M. Barry</td>
<td>€141,000 + fees</td>
<td>1/10/07-30/9/10, 1/9/08-30/8/11, 1/9/08-30/8/11</td>
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<td>A. Gavin (3 years)</td>
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<td>A. Clarke (3 years)</td>
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<td>Scoping Research – Internet Based HP Materials</td>
<td>Health Service Executive with Student Services, NUI, Galway</td>
<td>J. Sixsmith, With C. Dring</td>
<td>€31,121</td>
<td>1/1/08-30/9/08</td>
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<td>SLÁN 07</td>
<td>Department of Health and Children</td>
<td>M. Barry, M. Molcho</td>
<td>€1,883,484</td>
<td>1/11/06-30/9/09</td>
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<td>(€66,103)</td>
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<td>Training &amp; Accreditation in Europe</td>
<td>International Union of Health Promotion &amp; Education (IUHPE)</td>
<td>M. Barry</td>
<td>€4,800 (Feasibility study €18,000 funds held with IUHPE)</td>
<td>1/1/06-31/12/08</td>
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<td>Ulysses Networking Grant</td>
<td>IRCHSS</td>
<td>S. Nic Gabhainn</td>
<td>€2,460</td>
<td>1.2.08-31.12.08</td>
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<td>Work Life Balance</td>
<td>NUI, Galway Millennium Grant</td>
<td>V. Hogan</td>
<td>€9,288</td>
<td>30.11.07-31.12.08</td>
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<tr>
<td><strong>Total Grants &amp; Donations</strong></td>
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<td><strong>€2,677,522</strong></td>
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vii. Governance

a. Management Structure Health Promotion Research Centre

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

The Advisory Group consists of representatives from Health Promotion practice, policy and research at national and international level (Advisory Group members external to the HPRC are listed below).
b. External Members of the International Advisory Board

- Dr Desmond O’Byrne, (retired) Department of Chronic Diseases and Health Promotion (NMH/CHP) WHO Headquarters Geneva, Switzerland
- Professor Maurice Mittlemark, University of Bergen, Norway (from October 2007)
- Mr. Brian Mullen, Principal Officer, Health Promotion Policy Unit, Department of Health and Children, Dublin
- Ms. Catherine Murphy, Assistant National Director Population Health, Health Services Executive
- Professor Gerry Loftus, Dean of the College of Medicine, Nursing and Health Sciences, National University of Ireland, Galway
- Professor Kevin Barry, Dean of the College of Arts, Social Sciences and Celtic Studies, National University of Ireland, Galway
- Ms Martha Shaughnessy, Research Office, National University of Ireland, Galway.