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Evidence-based research and practice: attitudes of reproduction nurses, counsellors and doctors




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Dr Caroline Smith is an experienced clinical research and acupuncture practitioner. She brings expertise in relation to acupuncture research and clinical skills in relation to women's health and reproductive health. She has a background in evidence based research in relation to acupuncture and other complementary therapies and the integration of Chinese medicine and biomedical research protocols, predominately in the areas of women's health. She has extensive experience in evidence based research including the design, conduct of randomised controlled trials and systematic reviews.

Abstract The importance of providing evidence-based health care in reproduction medicine has resulted in a wealth of research which has largely focused on patient outcomes. Comparatively little is known about the knowledge and attitudes of health professionals who are often required to contribute to research. This study sought to examine the knowledge and attitudes to research of reproductive medicine health professionals and to explore the motivators and barriers to participating in research. A cross-sectional online survey was developed from previous research. The survey was distributed to members of the Fertility Society of Australia between November 2012 and February 2013. Ninety-six health professionals consented to participate and completed the questionnaire. The majority acknowledged the importance of research in informing practice and improving patient outcomes. While many clinicians expressed an interest in participating in research, time and resources were acknowledged as barriers that hindered their involvement. Collaborations with academics may offer a pathway to building the evidence to improve patient care. 

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KEYWORDS: attitudes of health professionals, barriers to research, evidence-based research and practice, improving patient outcomes, reproductive medicine, survey

Introduction

Evidence-based medicine is an important factor in contemporary health care, although this has not always been the case in the field of reproduction medicine. In the early 1990s, Vandekerckhove et al. suggested that reproduction medicine lagged behind other specialties in using randomized methodology in research, although the reasons for this were unclear (Vandekerckhove et al., 1993). Since then, there has been a wealth of studies (including randomized controlled trials) in the field of reproduction medicine, largely aimed at improving patient outcomes. Much of this clinical research has been synthesized in systematic reviews. Over 50 Cochrane systematic reviews covering all stages of assisted reproduction technology (Farquhar et al., 2013) and 34 other reviews covering fertility interventions such as ovulation induction and intrauterine insemination (Brown et al., 2012) have been published. The development of evidence-based research and practice impacts on the health provider, yet relatively little attention has been paid to examining knowledge and attitudes to research among reproduction healthcare professionals.

The attitudes of health professionals to research have been explored in other health professions, including nursing (Roxburgh, 2006), midwifery (McSherry, 1997), pharmacy (Cvijovic et al., 2010; Peterson et al., 2009) and doctors (Davies, 2011). This research identifies attitudes and contextual factors that both enhance and act as barriers towards evidence-based research and practice. Many health professionals recognize the importance of research in improving patient care (McSherry, 1997; McSherry et al., 2006; Meah et al., 1996; Roxburgh, 2006) and describe the need for research to be relevant to practice (Albers and Sedler, 2004; Meah et al., 1996; Roxburgh, 2006; Toohar and Middleton, 2008). For some, however, research is not seen as essential to the profession's development and is thought unlikely to influence practice (Hicks, 1995). Research with midwives describes how they perceive a potential role with undertaking research, including identifying research questions and collecting and evaluating data (Meah et al., 1996), although this finding was not supported by Hicks (1995) where midwives did not consider research was part of their role.

Effective recruitment strategies for maternal and perinatal trials highlight that clinicians' attitudes to research can influence their research participation (Toohar and Middleton, 2008). Barriers to involving health providers with the recruitment of their patients to clinical trials includes a perspective that to do so may restrict their ability to provide individualized care if they have a preference for a particular treatment. Concern about the effect of research on the patient–doctor relationship has also been reported, where its impact on usual care was a concern (Rendell et al., 2007). Other concerns may relate to the use of placebo or an intervention that was more aggressive than standard care, strict eligibility criteria and complex protocols. Clinicians felt the research must be relevant, especially to the local context.

The objective of this study was to examine and understand the knowledge and attitudes of clinical health professionals working in reproduction medicine towards evidence-based practice and research.

Materials and methods

A cross-sectional online survey was undertaken using the Survey Monkey tool. Ethics approval was obtained from the University of Western Sydney, and the Board of the Fertility Society of Australia (FSA) approved the research (reference no. H9876, approved 27 September 2012). The research focused on clinical practitioners. Participants were reproduction medical doctors (clinicians who were medically qualified), nurses and counsellors (including both social workers and psychologists) holding membership with the FSA: this included membership of Fertility Nurses of Australasia (FNA) and the Australian and New Zealand Infertility Counsellors Association (ANZICA). These three groups were chosen because they were those most likely to interact with patients and thus most likely to influence patients' participation in clinical research. This work excluded laboratory scientists only (diagnostic or IVF laboratory scientists).

A self-administered questionnaire was designed to examine participants' attitudes towards research participation and evidence-based research and practice, identify barriers and enablers to research engagement and examine if there were differences in attitudes between the three professional groups (Appendix 1, available online). The questionnaire also included demographic questions including gender, place of residence, age, year of professional qualification and details about research qualifications. The questionnaire utilized questions used in previous research (McSherry, 1997; Roxburgh, 2006). The research awareness scale contained three independent measurement scales that assess attitudes towards understanding and confidence about research, the research process and the support for research utilization (McSherry et al., 2006). Statements of the questionnaires were rated along a 5-point Likert scale where participants indicated their attitude ranging from strongly agree to strongly disagree. The reliability of this research instrument has been tested (Artley, 1994; McSherry, 1997). Additional questions addressing motivators and barriers to participation in research and research activities were drawn from research by Roxburgh (2006). Questions on motivators and barriers to research allowed free-text responses. For a specified list of items, participants indicated whether they thought the item was a research activity (yes, no or uncertain).

A convenience sample was used with, all healthcare providers categorized as a medical doctor, nurse or counsellor sent a questionnaire. An email was sent from the FSA to members with an invitation letter and a link to the survey. A reminder questionnaire was sent 1 month later.

Statistical analyses were carried out using Statistical Package for Social Sciences version 19 (IBM SPSS, Chicago, IL, USA). Descriptive statistics, using frequencies and percentages, were calculated for demographic and categorical data. Inferential statistics were used to compare attitudes with socio-demographic characteristics or professional groups. Chi-squared tests were undertaken to examine activities that were identified as research and perceived barriers and enhancers to research participation with socio-demographic characteristics. Analysis of variance was undertaken to examine attitudes towards evidence-based

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