

**Research Literacy
for Health and Community Practice
Second Edition**

Sonya L. Jakubec and Barbara J. Astle

Glossary

 **CANADIAN
SCHOLARS**
Toronto | Vancouver

Research Literacy for Health and Community Practice, Second Edition

Glossary

Sonya L. Jakubec and Barbara J. Astle

Canadian Scholars, an imprint of CSP Books Inc.

425 Adelaide Street West, Suite 200

Toronto, Ontario

M5V 3C1

www.canadianscholars.ca

Copyright © 2021 Canadian Scholars. All rights reserved.

Canadian Scholars gratefully acknowledges financial support for our publishing activities from the Government of Canada through the Book Publishing Industry Development Program (BPIDP) and the Government of Ontario through the Ontario Book Publishing Tax Credit Program

- Absolute risk:** The actual probability or likelihood that an event will occur itself is often referred to as the *absolute risk*. The higher the absolute risk is, the more likely it is that the something will happen—although it still is not guaranteed to take place. This risk is understood by dividing the number of events (good or bad) in treated or control groups by the number of people in that group
- Abstract:** A brief, objective summary of the essential content of a book, article, speech, report, dissertation, or other work that presents the main points in the same order as the original but has no independent literary value. In a scholarly journal article, the abstract follows the title and the name(s) of the author(s) and precedes the text. In an entry in a printed indexing and abstracting service or bibliographic database, the abstract accompanies the citation.
- Adapt:** The fifth step in the evidence informed decision making process, to adapt is to consider if and how research evidence can be applied to a local context.
- Analysis of variance (ANOVA):** A statistical test for comparing mean differences in three or more groups by comparing variability among groups.
- Anatomy of a research paper:** Generally, a research paper will contain these sections: abstract, introduction (including the literature review), methods (including the methodology, ethics, sample, data, and analysis), results, and discussion (including limitations, implications, and conclusions). Also referred to as the *structure of a research paper*.
- Anthropology:** The study of humans and human behaviours.
- Application of knowledge:** The iterative process by which knowledge is put into practice.
- Appraise:** The process of assessing the quality of study methods in order to determine if findings are trustworthy, meaningful, and relevant to your situation.
- Association:** A potential causal connection between two variables.
- Authority:** The knowledge and experience that qualifies a person to write or speak as an expert on a given subject. In the academic community, authority is based on credentials, previously published works on the subject, institutional affiliation, awards, imprint, reviews, patterns of citation, etc.
- Autonomy:** The ability to make choices for oneself.
- Average:** The common name of the arithmetic *mean*, which is the sum of all the observations in a data set divided by the number of observations.
- Behavioural bias:** Bias that occurs when people within a study behave in a given manner because of some underlying reason that usually affects all similar individuals.
- Beneficence:** The ethical principle of doing good.
- Best practice guideline (BPG):** Practice recommendations that are usually based on a rigorous review of many studies by experts on the topic. In reference to clinical practice issues, also called *best practice guideline*.
- Bias:** In the context of research, anything in the design or undertaking of a study that causes an untruth to occur in the study potentially affecting the outcome of the study. See also *measurement bias, recall bias, response bias, and selection bias*.

Bibliography: In the context of scholarly publication, a list of references to sources cited in the text of an article or book or suggested by the author for further reading; it is usually given at the end of the work.

Blinding: The process of hiding from either the participant (single blind) or both the participant and the researchers (double blind) to which arm of a study (usually a randomized controlled trial) a participant is allocated. Also known as *masking*.

Bracketing: A phenomenological research process to identify and suspend any of the researcher's preconceived notions about the topic.

Broader term: In a hierarchical classification system, a subject heading or descriptor that includes another term as a subclass (e.g., "Libraries" listed as a broader term under "School libraries"). In some indexing systems, a subject heading or descriptor may have more than one broader term (e.g., "Documentation" and "Library science" under "Cataloging").

Capacity development: The development of knowledge, skills, and attitudes among individuals and groups of people. It also involves the creation of structures, resources, policies, and procedures in organizations and networks to sustain and achieve relevant goals, cope with complexity, and innovate.

Case-control study: A design that matches similar types of patients who receive a treatment (i.e., cases) with patients who do not receive the treatment (i.e., controls). A case-control study involves identifying people who have the outcome of interest (cases) and control patients without the same outcome, and looking to see if they had the exposure of interest.

Case report: A study reporting observations on a single individual.

Case series: A report on a series of patients with an outcome of interest with no comparison group.

Case study: A research design that focuses in depth on specific (often small) populations or well-defined events that are bounded by time.

Causality: A relationship of cause and effect that meets (at a minimum) the following three conditions: a strong relationship between the proposed cause and effect; the proposed cause precedes the effect in time; and the proposed cause must be present whenever the effect occurs.

Causation: Studies that consider risk factors (exposure) for certain diseases/problems/conditions (outcomes)—for instance, the effect of patient characteristics (exposure) on the development of pressure ulcers (outcome). Also referred to as *etiology* or *aetiology*.

Cause: In a study of the relationships of variables, the cause is the agency or event that connects and creates the change in another process (the effect). It is measured as the independent variable.

Central tendency: Measures of the centre of the scores in a given data set. These may also be called a centre or location of the distribution. The most common measures of central tendency are the arithmetic mean, the median, and the mode.

χ^2

- Citation:** A reference that lists the bibliographic details of the material paraphrased, mentioned, or quoted in your research. The reference provides information such as title, author, journal title, volume, issue, publisher, and date of publication so as to identify the specific resource used.
- Clinical practice guideline:** An evidence-informed recommendation, usually based on a rigorous review of many studies by experts on a topic, for care that should be accompanied by practitioner judgment and experience, as well as patient preferences.
- Clinical relevance:** How well a study proposal or the results addresses a meaningful issue related to practice.
- Clinical significance:** Assesses whether the size of the effect of an intervention is big enough to justify the investment required for its implementation. Assessing clinical significance takes into account factors such as the size of a treatment effect, importance of the problem being addressed, other potential outcomes of the intervention, and cost of implementation.
- Cluster randomized controlled trial:** Randomization by cluster or group to an experimental intervention or a control group.
- Cochrane Collaboration:** An international organization for the development and updating of systematic reviews on health care effectiveness topics.
- Cohort study:** A design referred to as an observational study that monitors a defined group (cohort) or subgroups (cohorts) over time. It involves the identification of two groups (cohorts) of patients, one that did receive the exposure of interest, and one that did not, and following these cohorts forward for the outcome of interest.
- Collaboration:** A process of interaction where people (e.g., interprofessional practitioners) work together to achieve desired outcomes.
- Common knowledge:** Something that is generally known. Information that is *not* of a specialist or arcane nature, or which requires specific study or training.
- Community of practice:** Voluntary, flexible networks of people with a common interest that learn, share knowledge, and develop expertise on an issue.
- Comparison group:** Participants in a study who receive the standard of care or conventional treatment instead of the experimental treatment (intervention).
- Concept:** An abstract idea formed by examining specific instances. It cannot be measured directly and is based on observations of certain behaviours or characteristics (e.g., grief).
- Conceptual model or framework:** A term that refers to how variables are expected to relate to each other and why (e.g., variables related to the use of complementary and alternative medicine [CAM]). At a higher level of abstraction, it may be defined as concepts that are interrelated by virtue of their relevance to a common theme (e.g., psychological and social factors related to the decision-making process).