

# The JBI Model of Evidence-based Healthcare: The concept of evidence

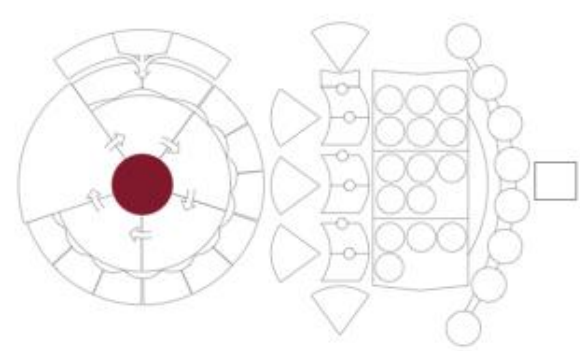
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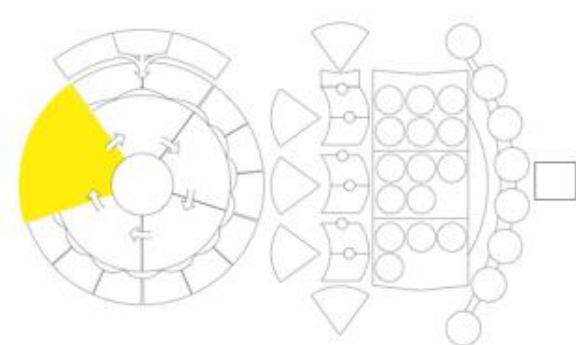
Faculty of Health Sciences

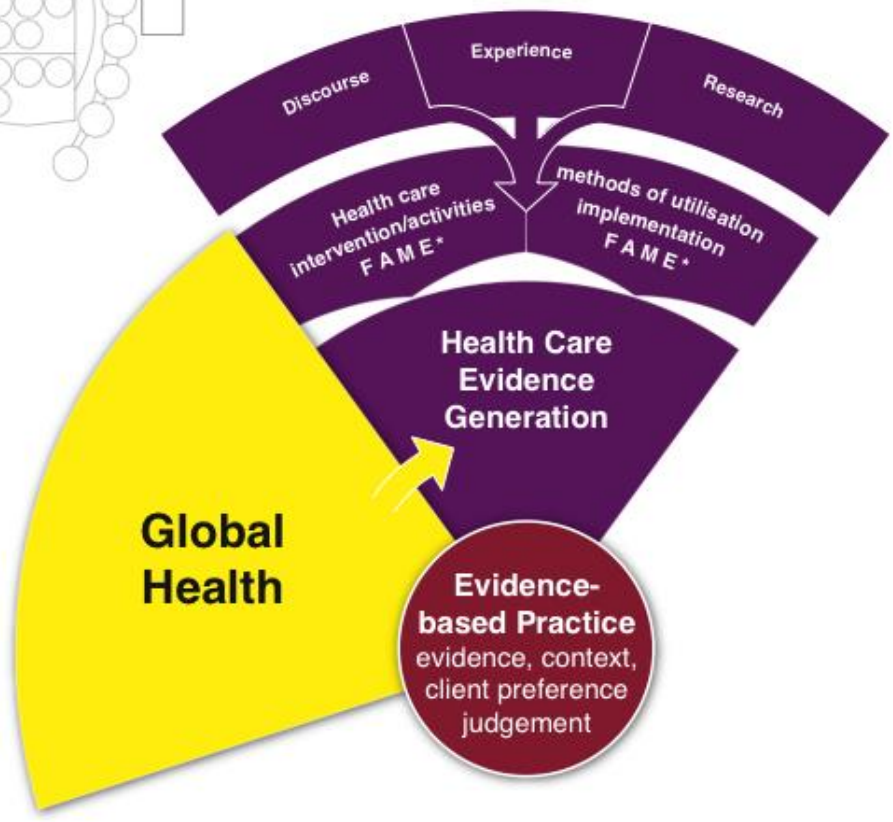
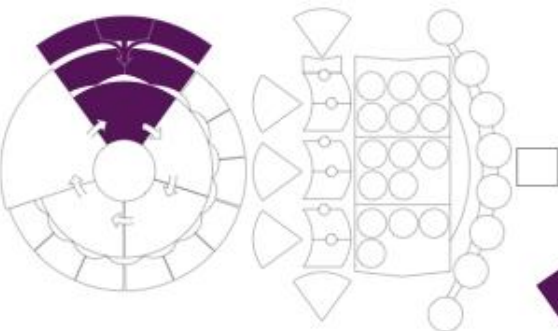
The University of Adelaide

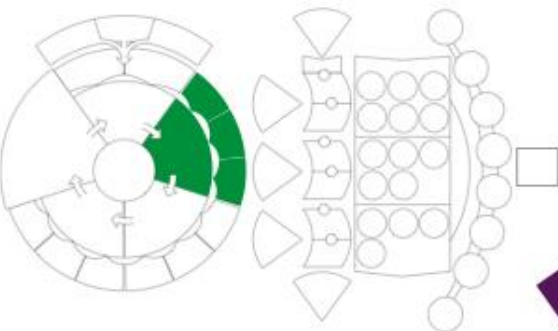
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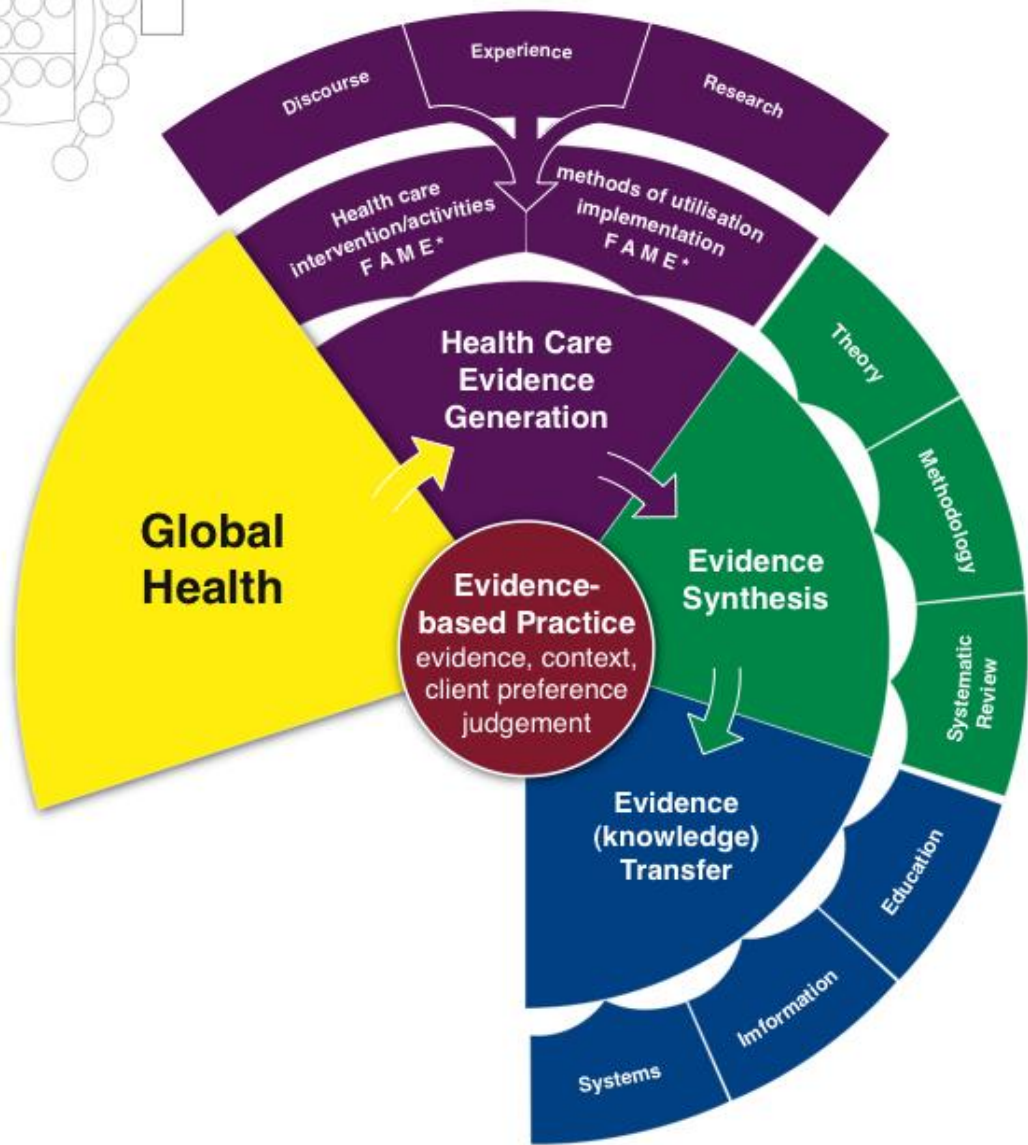
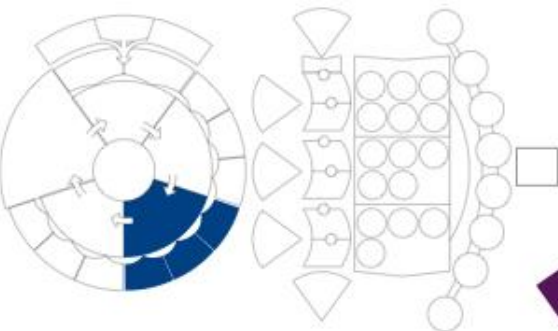


**Evidence-  
based Practice**  
evidence, context,  
client preference  
judgement









**Global Health**

**Evidence-based Practice**  
evidence, context,  
client preference  
judgement

**Evidence Synthesis**

**Evidence (knowledge) Transfer**

**Health Care Evidence Generation**

Health care intervention/activities  
FAME\*

methods of utilisation implementation  
FAME\*

Discourse

Experience

Research

Theory

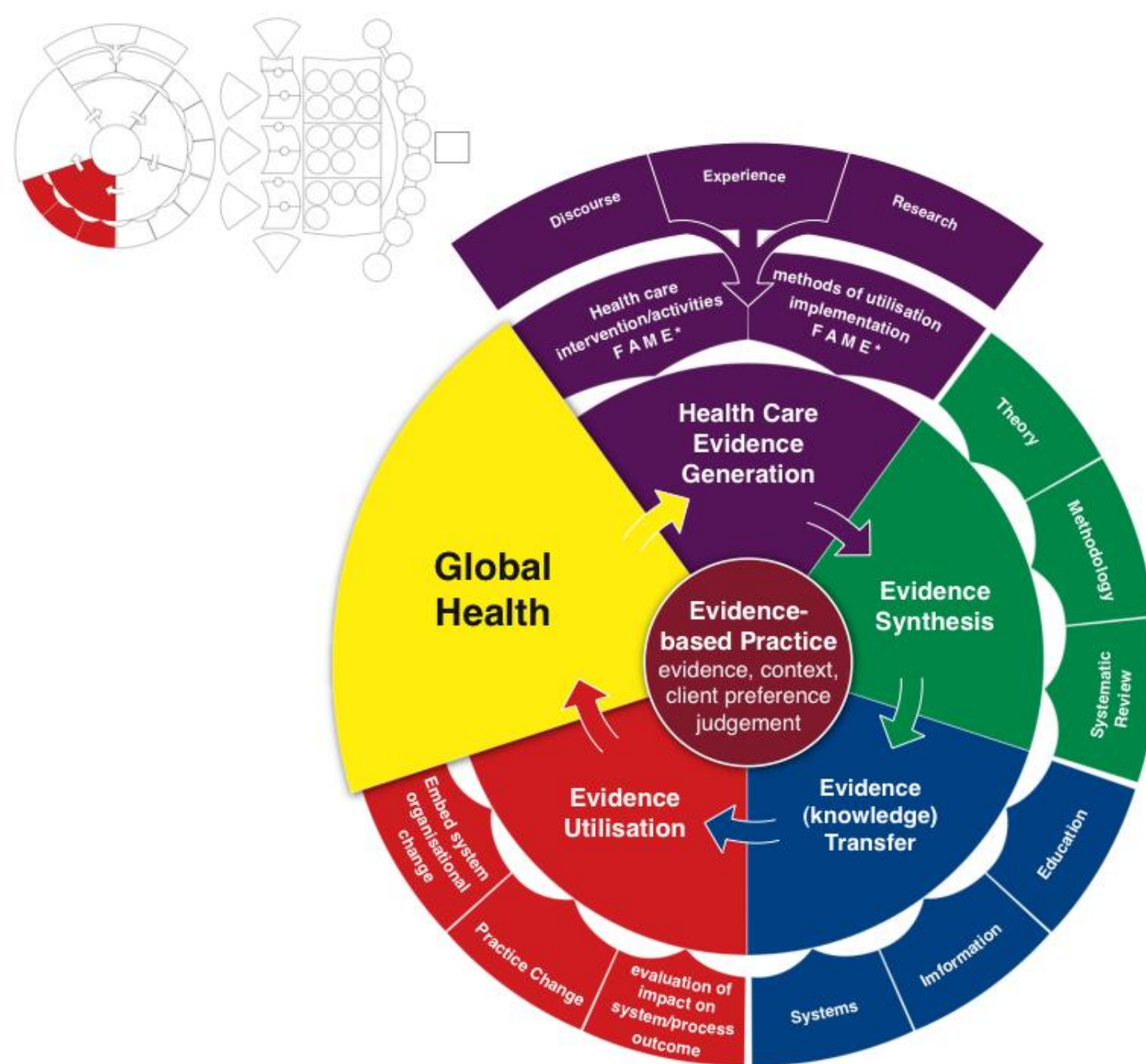
Methodology

Systematic Review

Education

Systems

Information



From: Pearson, A., Wiechula, R., Lockwood, C. and Court, A. (2005). The JBI Model of Evidence- Based Health Care. International Journal of Evidence- based Health Care3:8, 207-216

# What is “evidence”

- “Research” and “evidence” are words that are value laden and differently understood



# Evidence is...

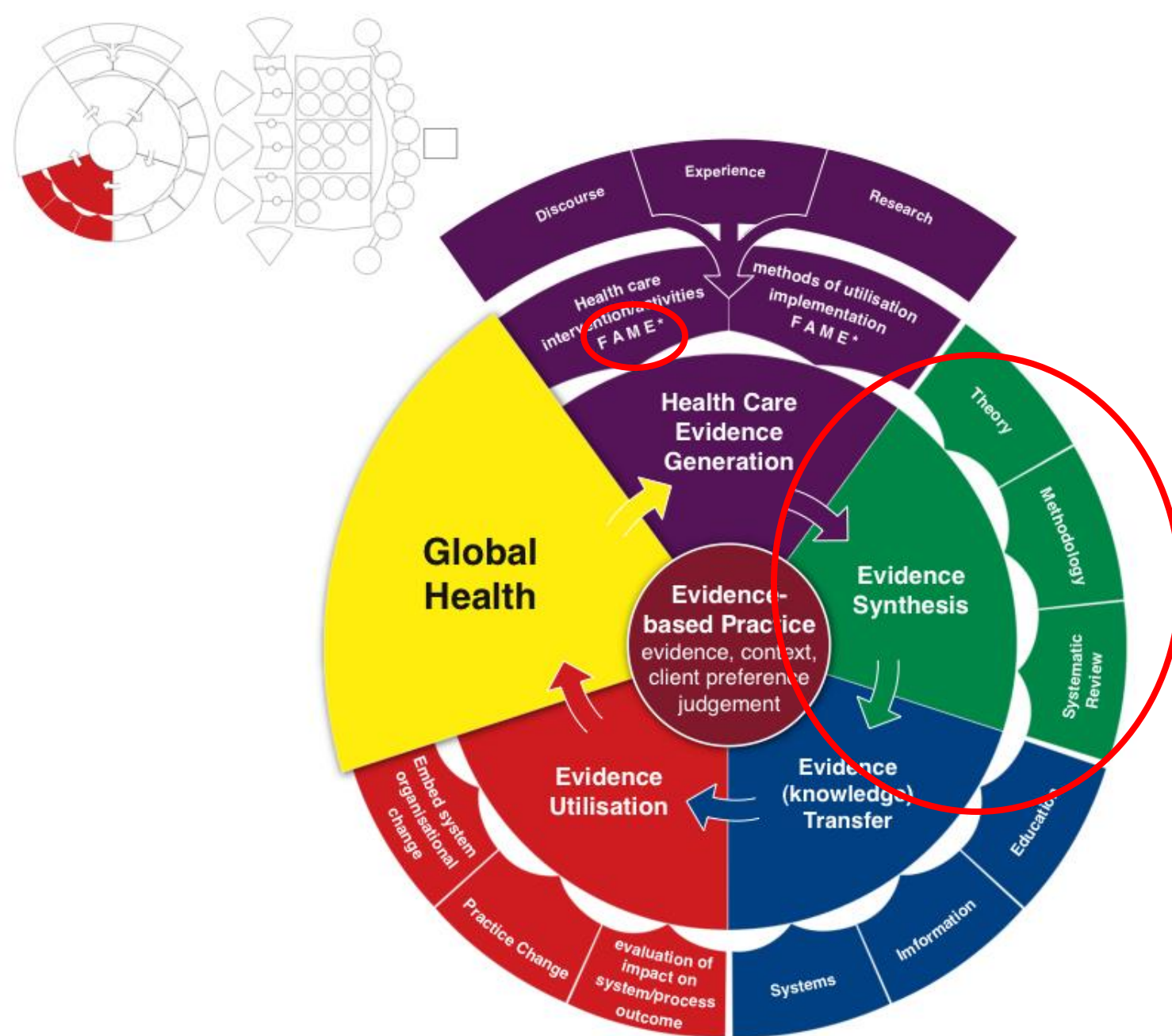
- ‘...the available facts, circumstances etc supporting or otherwise a belief, proposition etc or indicating whether a thing is true or valid...’

Pearsall and Trumble 1995

# Or...

- “...any statement, record, testimony which tends to prove the existence of a fact in issue”

Nygh and Butt 1997, p435



Pearson, A. et al (2005) The JBI model of evidence-based healthcare.

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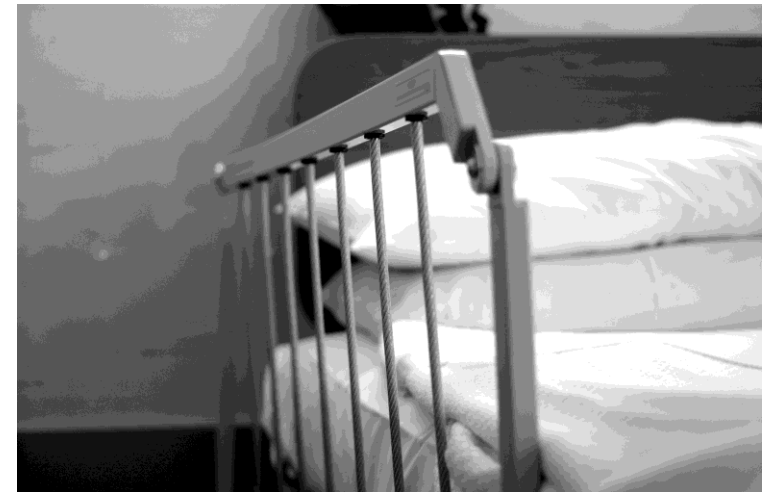
# The FAME Scale



# The Evidence Interests of Clinicians



What questions do clinicians need answers to?



Does it work?

**What is the problem?**

*Will the politicians support it?*

**How does it work?**

Is it more important  
for some people  
than others?

*Is it acceptable to do this?*

*What  
does it  
mean to  
the  
client?*

**Does doing this cost more?than?**

**What works best for  
adult males?**

**How do I get support for this from policy makers?**

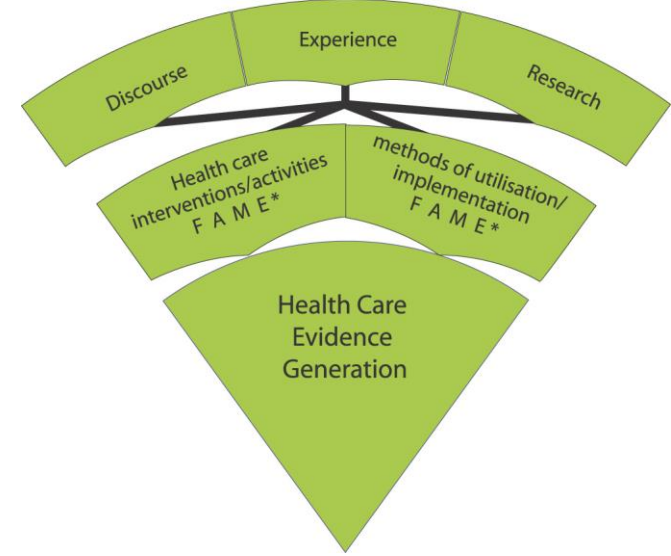
...a wide range of questions surrounding the decisions they make, including (but not limited to) ‘does it work?’





... is it...

- Feasible?
- Appropriate?
- Meaningful?
- Effective?



# Feasibility

Feasibility is the extent to which an activity is practical and practicable. Clinical feasibility is about whether or not an activity or intervention is physically, culturally or financially practical or possible within a given context.

Pearson, A., Wiechula, R., Court, A. and Lockwood, C. (2005) The JBI model of evidence-based healthcare. JBI Reports. 3:8, 207- 216

# Appropriateness

Appropriateness is the extent to which an intervention or activity fits with or is apt in a situation. Clinical appropriateness is about how an activity or intervention relates to the cultural or ethical context in which care is given.

# Meaningfulness

Meaningfulness refers to the meanings patients associate with an intervention or activity as a result of their experience of it. Meaningfulness relates to the personal experience, opinions, values, thoughts, beliefs, and interpretations of patients or clients.

Pearson, A., Wiechula, R., Court, A. and Lockwood, C. (2005) The JBI model of evidence-based healthcare. JBI Reports. 3:8, 207- 216

# Effectiveness (Effects)

Effectiveness is the extent to which an intervention, when used appropriately, achieves the intended effect. Clinical effectiveness is about the relationship between an intervention and clinical or health outcomes.

# Sources of evidence for clinicians include:

- The findings of quantitative research
- The findings of qualitative research
- Available statistics/metrics
- The opinions of experts
- Public/professional discourses
- Experience/anecdote

*They are essentially pluralistic in this regard.*



**THE JOANNA BRIGGS INSTITUTE**  
Promoting & Supporting *Best Practice*

