Basic and Applied Social Research (*Updated 11/11/2016*)

• Thus far, we have mostly covered “basic” research, which seeks to learn about which aspects of family life impact health. It seeks general principles (e.g., how stress affects the body). Basic research is sometimes said to seek “knowledge for the sake of knowledge.”

• Today, we will begin more in-depth coverage of “applied” research, which seeks to intervene or initiate programs to improve people’s health or solve other problems. It is more practically oriented, putting the knowledge from basic research to use.

• The study we reviewed on providing college-student visitors to nursing-home residents (Schulz & Hanusa, 1978) involved an applied intervention, growing out of basic research on the importance of having a sense of control for well-being.

• Video on distinction between basic and applied research

• Idea of mutual feedback between basic and applied research

See also Scott Greer, *Basic vs. Applied Social Science Research*
Action Research

• “...the generation of scientific knowledge for the purpose of improving the quality of individual lives, families, and communities” (Small & Uttal, p. 938).
• Much basic research is conducted without any initial vision of how the findings could be applied to societal problems (if at all).
• Action research can be seen as basic research, done with the intent of producing findings with applied relevance.
• Key principles of action research (Small & Uttal):
  • Researchers typically work with community partners
  • Geared to a specific situation (e.g., reducing teen pregnancy in a particular community).
  • Challenges in bridging the different cultures of academia (e.g., complex data analysis, technical reports) and community organizations (findings delivered fairly quickly in layperson-friendly manner).
• Example: Dr. Reifman and his students working with the South Plains Food Bank to conduct a survey on the extent of hunger locally, as part of a national hunger survey.


- Because patients see multiple doctors and medical staff can turn over during a long illness, families “are often the only people who have experienced the entire trajectory of their family member’s illness” (p. 265).

- “Depending on the nature of the illness and the life stage of the patient, interventions may be directed toward the patients with family members as supportive others or may be directed toward the caregivers who must help a child or an elderly relative manage an illness” (p. 265).

- Numerous studies are reviewed, according to medical condition. For each summarized study in the article, two things to pick out are:
  - The content or components of the intervention. If the description in the Shields et al. article is too brief, you may need to consult the original study.
  - To what type of control group is the intervention group compared (e.g., Standard Care or SC).
Agency for Healthcare Research and Quality (AHRQ or “Ark”)  
(Office in the Federal Government)

Website

Guide to Patient and Family Engagement in Hospital Quality and Safety

(Four strategies; also includes links to model handouts for hospitals)