How to build research capacity: a case study from the Department of Public Health

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Overview

► Achievements in last three years
► Key factors
  ▪ Strategic vision with values base
  ▪ Clear focus on the area we wanted to excel in
  ▪ Staff recruitment and retention – career planning
  ▪ Support to staff in research functions – grant applications
  ▪ Links with practitioners and policy makers, communities
  ▪ Achieving through writing, research influence
  ▪ Keep at it
Achievements in last three years

► PhD Program grown from 3 students to 10 students (8 FT)
► 2 NH&MRC project grants
  ▪ Location and Health $449,000
  ▪ Indigenous Location and Health $412,000
► ARC Linkage:
  ▪ Social Capital and Policy $210,000 plus industry cash contribution $112,000
  ▪ Mitsubishi study $308,559 plus industry $450,000
  ▪ Children’s exercise

Achievements in last 3 years

► Range of grants less than $20,000 relating to food, inequities, health governance, arts and health, community participation – about $100,000 pa in total
► Negotiated governance of South Australian Community Health Research Unit to University
  ▪ Core budget Dept. of Health $450,000 pa
  ▪ Consultancy income approx $150,000 pa
► NH&MRC Capacity Building Grant $2.5m over 5 years – Australian Health Inequities Program
Strategic vision with values base

► Annual retreat
► Broad research directions
► Working group to determine our research purpose and key research areas
► Specific action plan
► Ways to support action plan

Our vision

► We aim to make a significant contribution to socially just public health policy and practice. In order to achieve this, we will conduct quality research, disseminate the findings actively and advocate for improved policies and practice.

We will therefore promote healthy environments and the health of individuals and populations by:

- Undertaking and supporting multidisciplinary research, including strong research programmes for postgraduate students.
- Broadening the research funding base by obtaining collaborative research grants and undertaking projects that demonstrate and support diversity in research methods and paradigms.
- Establishing a research environment that fosters collaboration between researchers, educators and practitioners, and multidisciplinary research which can be readily applied to solving policy and practice issues.
Key Research Areas

► **Health Promotion development and evaluation** including Healthy Cities and Healthy Settings, arts and health, community health services, food and health, community participation, drugs and public health

► **Research into the causes of health inequities** including location and health, work, labour market and health, housing and health, low income and health, aboriginal people and health

► **Critical review of public health policies and research practices and workforce development issues**

Specific aims

► Complete existing funded projects in each of these areas by the due date for the projects

► Gain additional funding to commence new projects in each of these areas – we would like to win 6 new externally funded research grants over $10,000 in value between Jan 2004 and Dec 2006

► We aim to win a NH&MRC Capacity Building Grant in Population Health related to health inequities

► Each staff member to have won some competitive funding for their research by January 2006
Specific aims

► Maintain PHERP funding at least at current levels until 2010
► Each academic staff member to have published 4 peer reviewed articles between Jan 2004 and Dec 2006
► Enrol 5 new PhD students by January 2006 in areas related to the above topics
► Have 12 DrPH students commence their research dissertations
► Graduate 2 PhD students and 6 DrPH between Jan 2004 and Dec 2006
► Explore the feasibility of an honours program in public health and if feasible commence in 2005

Support for Plan (agreed in 2003)

► In order to achieve these objectives we will aim to support research with:
  ▪ A funded position of Research Manager to assist with grant preparation and grant administration
  ▪ Continued integration of SACHRU into DPH
  ▪ Develop research links with other relevant Faculties and Universities, especially those that bring a multi-disciplinary element to our research
  ▪ Stronger support for PhD and DrPH students
  ▪ Study leave and other research and writing time for staff
Clear focus

► We knew where are strengths and passions lay
► Looked for opportunities to obtain funding for these – do not chase every funding opportunity
► Worked on these and developed alliances to help eg. Andrew Beer and Sue Richardson in Social Science

Support for staff

► Research financial manager – essential support to me and to other staff in terms of grant application, accountability and monitoring especially on complex projects
► Writing time
► Study leave – hard with high teaching commitments
Remember why you are doing research

► Make a difference to health status and health policy
► Our Department fosters links with policy makers and practitioners

Understanding of research transfer processes

► Working on this since 1980s through SACHRU – research in partnership with communities, involving key players in research process and writing about this
► Thinking about this process and keeping up to date with developments e.g. Canadian experience, Global Forum on Health Research
► Considering the push and pull factors that make for good research transfer
► Teach a DrPH topic on this issue because we recognise the importance
Department has strong links

- SACHRU gives as good working links with DoH, regional health services and especially community health
- CRCAH – important source of knowledge and networking
- 20 years links with health services in south
- Key roles in NGOs e.g. Kidsafe, People’s Health Movement
- Advocates who are often on media eg. Colin MacDougall on children and health, John Coveney and food, FB on health system,

Achievements

- Publishing – peer review and reports for users of research
- Winning grants
- Department that people like to work in
- Research work that people feel is meaningful and they can believe in
- Link the work to advocacy roles e.g. Commissioner on WHO CSDH
Last word

► Commitment to values – “Learn to make a difference”
► Persistence
► High standards