Could you provide an overview of the Nova Scotia Health Research Foundation (NSHRF) and its primary aims and objectives within the field of health research?

The NSHRF was established in 2000 after the Health Research Foundation Act (Bill 22) was proclaimed on 1 January 2000 – the Act received royal assent on 3 December 1998. Our goal is to assist, collaborate with and fund individuals and organisations conducting health research in the province.

The NSHRF exists to improve the health of Nova Scotians through research. We support the health research enterprise through three programmes: the Research Enterprise Development Initiatives (REDI) Program, the Research Program, and our Relevant, Excellent, Accessible, Legitimate (REAL) Knowledge Program. Programme elements are either investigator- or priority-driven. Our priorities maximise the impact of the health research enterprise on informed decision making through the focused and efficient use of the NSHRF’s resources.

Would you summarise the mission of REDI, the Research Programme and REAL?

REDI supports the development of the health research enterprise in Nova Scotia by taking a systems-level approach to identify necessary elements to support Nova Scotia’s health research enterprise and designing initiatives targeted to creating, evolving and/or sustaining those elements.

The Research Program aims to build capacity in health research across the four health research categories (biomedical, health policy, health services and health outcomes). Funding opportunities are available to early career health researchers, researchers new to the province, established researchers and research trainees.

The REAL Knowledge Program was created to help decision makers understand the current evidence around complex issues. It is the foundation on which effective decisions are made. It accounts for change, context and complexity, and is effective, strategic and forward looking. An exciting initiative that has garnered attention nationally and internationally, the REAL Knowledge Program Manager has been invited to implement a similar programme for other organisations.

Do you coordinate joint programmes that help to promote health in Canada?

The NSHRF attempts to identify opportunities for collaboration in promoting health in Canada. The National Alliance of Provincial Health Research Organizations (NAPHRO), of which I am a co-founder, helps to promote dialogue, linkages and partnership activities of provincial health research organisations. One of the more recent examples of this type of collaboration is our work with a sister agency in another province to develop a new electronic Grants Management System (GMS) platform for competitive programmes.
The NSHRF’s approach to health

In addition to their mandate of improving the health of Nova Scotians through health research, the NSHRF follows the ENDs Policies, as outlined by our Board of Directors. These include:

- The NSHRF contributes to a vibrant, well-balanced health research community that is competitive nationally and internationally.
- The NSHRF-funded health research reflects contemporary standards of excellence.
- Health research provides a foundation for informed health-related decisions in Nova Scotia.
- There is greater public awareness about the benefits of health research.

NSHRF towards these policies by collaborating with a variety of stakeholders, including provincial government, health authorities, health charities and universities on a number of initiatives and funding opportunities.
What can be done to generate greater public awareness of health research and to encourage the public to better monitor their health?

Generating greater public awareness of health research is a priority of the NSHRF. Not only does it attract attention to the worthwhile research being conducted in Nova Scotia, it builds support for the health research enterprise that can translate into increased funding.

To generate greater public awareness, the NSHRF created the Knowing About Research (KARes) Program to support the research community in creating an enhanced understanding of the health research activities in Nova Scotia and ensure that provincial politicians have an opportunity to understand the quality, importance and impact of the work currently taking place in Nova Scotia. The KARes Program provides information, tools and direction to members of the health research community to help establish relationships with elected officials. The activities offered by the KARes Program can help increase politicians’ awareness of the health research community in Nova Scotia.

Which areas of health are you focusing on specifically and why?

In 2010-11, the NSHRF identified new health research priorities that have been implemented through the programmes and services that the NSHRF provides. We have defined our health research priorities in broad topic areas that will ensure all four health research categories can be reflected within any priority. These priorities are:

Population Health: changing demographics; factors that contribute to inequities (income, education, race, culture, literacy, etc.); issues specific and unique to marginalised populations in Nova Scotia; disease prevention; and mental health

Health Services: continuing care models; primary health care (access); models of Health Human Resources (HHHR); and governance, sustainability and costs

What are your plans for the foreseeable future?

The NSHRF is about to embark on a multi-year initiative to enhance the competitive capacity of the health service and policy research community, specifically with a view to involve social scientists. We are also working with the Government of Nova Scotia to implement the research related recommendations of the Responsible Gaming Strategy. Right now, we are in the early stages of coordinating a socioeconomic study with multiple partners at academic institutions on the impacts of gaming and gaming revenue on Nova Scotia.

Would you highlight some of your international health initiatives? With whom are you collaborating in this context?

Currently, we are one of several funding partners in the Canadian Consortium on Neurodegeneration in Aging (CCNA). The aim of CCNA is to accelerate innovative and collaborative Canadian research in neurodegenerative diseases in ageing that have an impact on cognition. The international component of this strategy has facilitated the participation of Canadian researchers in key international partnerships.

A recent international partnership included work with Dr Gail Tomblin-Murphy, Director of the World Health Organization/Pan American Health Organization (WHO/PAHO) Collaborating Centre and her initiative, ‘Health Human Resources Planning and Utilization: Capacity Building and Knowledge Exchange between Canada and Brazil’. The results of the project highlight the benefits of international capacity building and knowledge exchange activities, and provided excellent opportunities for shared learning, both in Canada and Brazil. During the early stages of the project in 2008, I travelled to Jamaica and Brazil to establish connections with these international partners.

A short-term objective of the NSHRF is to pursue more international collaborations. I had the opportunity to attend the Qualitative Research for Policy Making 2012: 3rd Annual Conference in Lisbon, Portugal in 2012 and the World Research and Innovation Congress, Brussels, Belgium in 2013. Attending such international conferences provides us with linkages and opportunities. Check back with us next year!

www.nshrf.ca

The NSHRF’s four health research categories

Medical Research – basic scientific and biomedical study; clinical and epidemiological investigations

Health Policy Research – the impact of social factors; allocation of resources; legal and ethical issues; and the administration, organisation and financing of healthcare

Health Outcomes Research – changes in the health status of populations as a result of health programmes or services

Health Services Research – how efficiently and effectively health services are managed, organised and delivered