## fusebrief

### Fuse - Centre for Translational Research in Public Health

- A partnership of public health researchers across the five universities in North East England
- Focused on working with policy makers and practice partners
- A founding member of the NIHR School for Public Health Research (SPHR)
- A UK Public Health Research Centre of Excellence

# How do public health professionals view and engage with research evidence?

Researchers from Fuse and the University of Cambridge conducted in-depth interviews with public health professionals and researchers. These explored opportunities and barriers to public health professionals engaging with research evidence, and what, if anything, could be done to improve their experiences.

This research focused on case studies from two responsive research schemes: the Public Health Practitioner Evaluation Scheme (PHPES) run by the NIHR School for Public Health Research; and Fuse's AskFuse. We examined the type of research requests that were submitted to both schemes between 2013 and 2015 and selected a small number of case studies for further investigations. Interviews were conducted with public health professionals and researchers involved in each of the case studies.

PHPES is a national, competitive, grant-awarding scheme which offers public health professionals support to evaluate local interventions in partnership with SPHR researchers.

AskFuse is a regional responsive research and evaluation scheme operated by Fuse. AskFuse provides public health professionals with a portal to access research expertise across the five North East Universities. It supports all requests for help with evidence and research, including evaluations of local interventions.

Public health professionals who had not submitted an application to AskFuse, or who had submitted an unsuccessful application to PHPES, were also interviewed. This provided a comparison with those who had been successfully involved in either scheme.

In total 18 interviews were conducted, 11 with public

health professionals and seven with researchers. The interviews were transcribed and analysed using thematic Framework analysis.

Preliminary findings are presented here. We verified and expanded on the results in a regional stakeholder workshop with a select group of public health professionals and academics in the North East to identify solutions that increase the co-production of evidence.

### **Key Findings**

- Public health professionals thought research evidence was important, particularly when they had to justify financial decisions
- There was strong consensus that public health professionals and researchers did not always mean the same thing by 'evidence' and that the type of evidence produced by researchers was not always the same as the type of evidence required in practice
- Main barriers to approaching and engaging with research related to: cost, timescales and finding the right people
- Rigorous research is expensive and the cost is often unaffordable by local public health teams
- In public health practice, local problems are often identified and solutions needed within quite short timescales. Researchers were often unable to deliver in these timescales
- Public health professionals felt that researchers did not often understand the value of research undertaken by practitioners, or the importance of evidence of need, for example the views of a local councillor's constituents
- Since the move of public health to local authorities there has been an increasing reliance on this type of 'soft' or grey evidence.

### Some proposed solutions

- Increase mutual awareness of the structures and challenges public health professionals and researchers are working under
- Use embedded researchers and student placements to enable this
- Put systems in place to set up collaborative working and establish more formal links
- Create spaces and places to foster early level discussions
- Encourage pragmatism and compromise to allow co-production of evidence of mutual benefit.

## **Quotes from respondents**

"Evidence is a whole range of different things. The views and the knowledge of local politicians for me is part of that evidence."

"An academic institution will approach you and say, 'We're doing this study on this,' and it does sound quite interesting, but it's so far removed from what is happening on the ground that it's difficult to make that relevant....It's maybe that understanding of what's happening locally."

"I suppose closer relationships between academia and public health, on a practical day-to-day level, will hopefully enhance the knowledge in academia of the procedures that we have to operate around."

"Politicians say very, very clearly they don't want great big long research reports. They want a page of bullets. They want a short paragraph saying what it means in terms of funding and recommendations about what they should do. And then they want to hear local stories from local people that make it real. All in about two pages."

### BRIEF DESCRIPTION OF THE RESEARCH

Researchers from Fuse, the Centre for Translational Research in Public Health, and the University of Cambridge have conducted In-depth interviews with public health professionals and academics to identify the support needs of public health professionals for meaningful engagement with research, evaluation and evidence.

This work is supported by the National Institute for Health Research (NIHR) School for Public Health Research (SPHR), via the Public Health Practice Evaluation Scheme (PHPES).

An interactive workshop was held in January 2016 to discuss the findings of the research with a select group of public health professionals and academics in the North East of England and to identify solutions that increase the coproduction of evidence.

### FURTHER INFORMATION

This project involved Newcastle and Teesside universities.

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Fuse is one of five UKCRC Public Health Research Centres of Excellence. It brings together public health researchers from across the five universities in North East England.

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