A national partnership developing systems approaches for chronic disease prevention

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This presentation

- The Australian Prevention Partnership Centre
- Our model for knowledge co-creation
- Operationalising the model
- Key lessons to date
The Australian Prevention Partnership Centre

- One of two NHMRC Partnership Centres established in 2013
- Team of 31 investigators from five states and territories and more than 20 agencies
- Resources of $22.6 million over five years from NHMRC, the Australian Government Department of Health, NSW Ministry of Health, ACT Health, HCF and the HCF Research Foundation
- Administered by the Sax Institute and co-hosted by the Sax Institute and the Centre of Excellence in Intervention and Prevention Science
Partners in collaboration

**Funding partners**
- National Health and Medical Research Council
- Australian Government Department of Health
- NSW Ministry of Health
- ACT Health
- HCF Research Foundation

**Host Institutes**
- The SAX Institute, NSW
- Centre of Excellence in Intervention & Prevention Science (CEIPS), VIC

**University and Research Institutes**
- ANU, ACT QUT, QLD
- The Menzies Centre for Health Research, NT
- University of Notre Dame, NSW
- University of NSW, NSW
- University of Sydney, NSW
- University of Newcastle, NSW
- The George Institute of Global Health, NSW
- University of Melbourne, VIC
- Deakin University, VIC

**Government Departments, Institutes & Agencies**
- Department of Health, VIC
- Department of Planning and Infrastructure, NSW
- NSW Treasury, NSW
- Premier & Cabinet, NSW
- Major Cities Unit, Department of Infrastructure and transport (Commonwealth)

**Non-Government & Industry Agencies**
- Cancer Council of Australia
- NHFA
- HCF
- Hassell Architects
Our vision and purpose

- Our vision is for an **effective, efficient and equitable** system to prevent lifestyle-related chronic disease in Australia.

- We will provide **knowledge, frameworks and capacity** to enable health decision makers to make **more informed choices** about prevention at policy, strategy, program and implementation levels.
Our model for knowledge co-creation (i)

- Recognises the need for systems approaches
  - Being systematic
  - Working across ‘different’ systems
  - Making full use of the power within the setting
  - Explicitly using systems tools and systems theories

- Equally values evidence from research and practice

- Has a focus on translation through capacity building
Our model for knowledge co-creation (ii)

- Researchers and the end users of the research work together to:
  - specify research questions
  - conduct the research
  - interpret, disseminate and use the findings

- Financial and in-kind resources committed to the work plan
Operationalising the model

- Five year program of work agreed in partnership with funders; 30 projects and opportunities for emerging ideas (Governance Authority)

- Projects at high level then scoped prior to resourcing (Leadership Executive)

- Explicit policy and practice involvement – pull strategies

- Formal and informal learning and development – sharing outcomes across projects and responsive to needs

- Communications and engagement

- Coordinating Centre
Some of our first projects (i)

- How aspects of Australian food supply affect availability, affordability and acceptability of different foods. Led by Professor Sharon Friel, Australian National University

- Developing and validating national liveability indicators associated with chronic disease risk factors and health outcomes. Led by Professor Billie Giles-Corti, University of Melbourne

- Developing methods for the economic evaluation of prevention. Led by Professor Stephen Jan, University of Sydney
Some of our first projects (ii)

- Developing new evaluation methods that are suitable for scaling up interventions. Led by the Rapid Response Evaluation Capacity

- Approaches to framing and story-telling needed for system-level prevention. Led by the Communications Capacity

- Developing methods for equally valuing and including evidence from policy and practice. Led by the Synthesis Capacity

- Developing ways to measure prevention policy and program implementation in terms of resource intensity or dose, unit of delivery and diffusion. Led by the Systems Science and Implementation Capacity
Lessons to date
Balancing act ...

Administrative structure and processes

- Set up time to establish processes and recruit key personnel
- Complex agreements, new way for Universities to receive and then fund research
- Contracts across multiple partners, but research program needs to remain flexible

Coordinating Centre has a key role

- Implementing processes and facilitating start of projects
- Connecting projects, people and new knowledge
And more balancing ... 

Agreeing research priorities

- Push versus pull – need to constantly support slipping into traditional roles
- Allowing innovation and academic freedom, whist ensuring key objectives are met

Expectations

- Different needs of different types of partners
- New ways of working in old structures
- Documenting expectations essential
And even more …

Communications and engagement

- Key messages and awareness of Centre’s vision and purpose
- Easy to forget the multiple hats people wear
But when the balance is ok …

- Enthusiastically non linear – uncertainty and complexity allows for constant reflection, adaptation and innovation
- Value new connections and access to expertise
- Good will, openness and honesty
- Optimistic about potential - whole greater than sum of the parts
- Partnership model can be slow, messy and challenging – a bit like the chronic disease epidemic we’re trying to tackle!
Thank you

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Find out more

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Check out our website and subscribe to our newsletter: www.saxinstitute.org.au/our-work/preventing-chronic-disease
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