<u>Happenings</u>

Population Health Intervention Research in Canada: Catalyzing Research Through Funding

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"Population health intervention research involves the use of scientific methods to produce knowledge about policy and program interventions that operate within or outside of the health sector and have the potential to impact health at the population level" (Canadian Institutes of Health Research-Institute of Population and Public Health, 2006).

The growing field of population health is coming of age in Canada, with increasing interest in this area of research being expressed by provincial/territorial and international funding councils. Given their critical roles in developing, implementing, and studying population and public health interventions, nurses have an important contribution to make in this field of research. The Canadian Institutes of Health Research-Institute of Population and Public Health (CIHR-IPPH) supports researchers who generate relevant, credible, and timely evidence of what population health interventions work, for whom, and under what conditions. Issues of equity and considerations related to vulnerable populations are at the forefront of these efforts.

In its 2009–14 strategic plan, the CIHR-IPPH identifies four intersecting priorities: (1) understanding pathways to health equity; (2) examining the impacts of population health interventions on health and health equity; (3) examining how the systems in which population health interventions are implemented (both within and outside of the health sector) may influence their impacts; and (4) stimulating theoretical and methodological innovation in knowledge generation, synthesis, and integration in population and public health. (Additional information on this strategic plan is available at http://www.cihr.ca/e/27322.html.) We are working on several fronts to address these priorities.

To catalyze research in these areas, the Institute offers several strategic funding opportunities, including the ongoing Operating Grant in Population Health Intervention Research, Catalyst Grants related to

Table 1 Examples of	Examples of Recently Funded Population Health Intervention and Health Equity Research Projects	ntervention and F	Iealth Equity Research Projects
Funding opportunity and term	Partners	Total investment by IPPH and partners	Examples of projects
Operating grant: Programmatic Grants in Health and Health Equity (2011–12 to 2016–17) 2016–17)	The CIHR Institute of Population and Public Health in partnership with the Institutes of Aboriginal Peoples' Health, Circulatory and Respiratory Health, Gender and Health, Neurosciences, Mental Health and Addiction, Nutrition, Metabolism and Diabetes; the Heart and Stroke Foundation of Canada; the New Brunswick Health Research Foundation; the Ontario Ministry of Health and Long-Term Care through its Applied Health Research Neucost functione; and the Public Health Agency of Canada	\$21.3 million	 11 funded projects, including: *Browne, A., et al. (University of British Columbia): Equity-Oriented Primary Health Care Interventions for Marginalized Populations: Addressing Structural Inequities and Structural Violence Martens, P., et al. (University of Manitoba): PATHS Equity for Children: A Program of Research Into What Is Effective in Reducing the Gap for Manitoba's Children *Pauly, B., et al. (University of Victoria): Reducing Health Inequities: The Contribution of Core Public Health Services in BC

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Operating grant: Population Health Intervention Research (Fall 2010 competition and Summer 2010 competition)	The CIHR Institute of Population and Public Health in partnership with the CIHR Institute of Nutrition, Metabolism and Diabetes; the Canadian Population Health Initiative of the Canadian Institute for Health Information; the Heart and Stroke Foundation of Canada; the Public Health Agency of Canada; the New Brunswick Health Research Foundation; and the Ontario Ministry of Health and Long-Term Care through its Applied Health Research Networks Initiative	\$3.26 million	 18 funded projects in the Summer and Fall 2010 competitions, including: Campbell, S., et al. (University of Waterloo): Improving Quitline Reach and Integration: Evaluating a Policy Intervention Aimed at Increasing Tobacco Cessation *Waldner, C., et al. (University of Saskatchewan): Water Regulations: Impact on First Nations Health Equity and Promotion *Okoli, C., et al. (BC Centre of Excellence for Women's Health): Smoking on the Margins: An Equity Analysis of the Outcomes of an Outdoor Smoke-Free Policy
	For the Fall 2010 competition, the CIHR Institutes of Cancer Research and Aboriginal Peoples' Health were also partners.		 *Benoit, C., et al. (University of Victoria): Interventions to promote health and health equity for pregnant and early parenting women facing substance use and other challenges *Dahinten, S., et al. (University of British Columbia): Using Administrative Data to Evaluate a Population-Based Parenting Intervention
★Team includes at least one nurse investigator.	rse investigator.		(Continued on next page)

Table 1 (cont'd)			
Funding opportunity and term	Partners	Total investment by IPPH and partners	Examples of projects
Catalyst grant: Health Equity (2009–10)	The CIHR Institute of Population and Public Health in partnership with the Public Health Agency of Canada and the Population Health Improvement Network	\$1.04 million	 15 funded projects, including: *Cohen, B., et al. (University of Manitoba): Advancing the Evidence to Build a Research Program for Developing Public Health Capacity to Promote Health Equity *Gagnon, A., et al. (McGill University): Developing Population Interventions for Migrant Perinatal Health Equity *Stewart, M., et al. (University of Alberta): Mapping Policy Pathways for Community Action on Urban Respiratory Health Inequities in Children and Adolescents
* Team includes at least one nurse investigator.	rse investigator.		

health equity, grants on the built environment and intervention research (led by the Heart and Stroke Foundation of Canada), and Programmatic Grants to tackle health and health equity. Nurse researchers are leading several of these initiatives (see Table 1). Along with the CIHR Institute of Aging and Institute of Health Services and Policy Research, we have re-launched a funding opportunity related to Advancing Theoretical and Methodological Innovations, recognizing that such advances are critical for understanding pathways to reduce inequities in population health. Researchers whose work focuses on immigrant populations are encouraged to apply for these types of funding opportunities.

To advance scientific dialogue and discuss theories and methods in population health intervention research, the Institute held an international symposium and workshop in November 2010, in collaboration with partners at the Population Health Intervention Initiative for Canada. This event reinforced Canada's leadership role in building the field of population health intervention research globally. Proceedings are available on the IPPH Web site (http://www.cihr.ca/e/43787.html). The Institute is partnering with colleagues at the US National Institutes of Health and the US Centers for Disease Control and Prevention on a follow-up event set for March 2012. Health equity and vulnerable populations was also the focus of an invitational knowledge-exchange workshop related to pH1N1 in September 2011 and will be prominent in a health equity and public health practice workshop to be co-led with the National Collaborating Centre on Social Determinants of Health early in 2012.

The Community-Based Primary Healthcare (CBPHC) Roadmap Signature Initiative, which we co-lead with the CIHR Institute of Health Services and Policy Research, is an example of efforts by CIHR and its partners to address challenging concerns about key elements of our health-care system that are fundamental to the delivery of high-quality, accessible, and client/family-centred care in the community. The overall goal of this initiative is to catalyze innovative research and translate results into the improved delivery, for Canadians, of community-based primary health care (including primary prevention, public health, and primary care services provided within the community). To achieve this goal, we target two priority areas for action: developing new or evaluating innovative models of delivery for chronic disease prevention and management in CBPHC, and improving access to appropriate CBPHC for vulnerable populations. Research related to immigrant health, immigrants' experiences with CBPHC, and how current CBPHC services are addressing the needs of immigrant populations align with both of these priority areas.

Through multi-year investments in cross-jurisdictional, multidisciplinary teams of researchers and decision-makers undertaking programmatic research, by providing superior training environments, and by developing a new cadre of scientists working at the coalface of CBPHC delivery, our initiative will generate robust research evidence; strengthen capacity for research excellence; and facilitate knowledge translation in policy, community, and clinical settings to transform the delivery of communitybased primary health care in Canada. Provinces and territories across Canada and countries around the world are experimenting with primary health care reform. We are building partnerships with other funding organizations to provide novel opportunities for cross-jurisdictional collaborations, comparative research, and the scaling-up of promising innovations in the delivery of high-quality CBPHC to immigrant and other populations. A major funding opportunity for this initiative is expected to be launched in fall 2011.

The 2 years since the launch of the Institute's new strategic plan have been exciting and productive. As we explore the potential of these collaborative opportunities and advance our strategic priorities, the IPPH looks forward to partnering and also providing leadership to build the field of population health intervention research for health and health equity in Canada and globally. Nurse researchers in Canada are playing a critical role in these research initiatives.

References

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