



June 2008

**Submission from the Dietitians Association of Australia  
NHMRC Review of Public Health Research**

The Dietitians Association of Australia (DAA) is the national association of the dietetic profession with over 3500 members, and branches in each State and Territory. DAA is a leader in nutrition and advocates for better food, better health, and better living for all.

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DAA appreciates the opportunity to make a submission to the NHMRC review of public health research. While DAA is not a research organization as such, some members are engaged in research and others look to outcomes from public health research to inform practice or policy development.

DAA commends the new NHMRC focus in 2008 on policy and practice in health.

DAA submits the following comments against the terms of reference of the review:

**1. The effectiveness of NHMRC mechanisms for supporting public health research**

- The material provided on the Review website shows that public health and health sciences research does not receive as much funding as other disciplines. DAA would like to see more funding allocated to public health research.
- In view of the nutrition-related public health issues such as obesity, cardiovascular disease and diabetes there is clearly a need to increase investment in public health research funding particularly in the areas of nutrition, health promotion and disease prevention.
- Furthermore research around interventions appears to attract less funding in the broad research area of public health. DAA is supportive of funding for both prevention and management approaches to public health issues, for example funding an intervention for the management of obesity in children may also be a prevention strategy for adult obesity.
- The developmental phase in public health research is important, but does not always attract sufficient funding. DAA would like to see greater consideration given to developmental funding for public health interventions which are often complex and an appropriate methodology may not be apparent in the early stages of a project. Consequently funding is needed to allow collaboration over time between researchers and communities to establish project aims, objectives and design.

- It would also be desirable to award funding for longer periods, say 5 years rather than the 3 years generally awarded for project grants. This is because outcomes from public health research often have longer lead times than is the case for basic scientific studies.
- The current capacity building opportunities are limited in nutrition-related public health research and DAA recommends that these be extended, possibly via increased post-doctoral and career development fellowships.
- Given the number of women in the public health workforce DAA strongly supports greater flexibility in both capacity building initiatives and grants to allow researchers to combine a part-time research career with part-time family duties.
- It would be helpful if the nomenclature used in NHMRC submissions could identify obesity specifically, rather than being listed under 'other diseases'.

**2. Whether current selection criteria and assessment processes should be modified to better support public health research.**

**3. The nature of modifications to criteria and processes**

- There are fewer experienced researchers in public health as opposed to basic science. Consequently there is a smaller pool of researchers available to work on review panels, with the potential to overburden reviewers. Given that panel review work is of a voluntary nature, and that experienced public health researchers may decline offers or be unavailable to sit on panels, finding alternative sources of reviewers is necessary. A solution may be to increase the number of overseas reviewers to increase the pool of appropriately experienced reviewers, as well as enhancing the depth and breadth of reviewers available. Also, there has been a suggestion to provide recompense for reviewers or to second reviewers to the NHMRC for panels to make this activity more attractive, even though such contributions have traditionally been voluntary.
- Refinements to the research review panels might help to increase the number of applications which are considered worthy of funding. For example, it may be helpful to remind members of review panels to consider applications broadly on their merit and potential impact to ensure that projects worthy of funding are rated appropriately. The idea here is that it takes well experienced public health researchers to review and identify the research applications that have the best potential to contribute significantly to public health outcomes and to the existing public health pool of knowledge.
- In the usual assessment of applications, the track record of applicants considers only peer reviewed publications. However it is suggested that other publications such as reviews or reports prepared for government agencies such as VicHealth, Diabetes Australia etc. might be considered for public health research applications.

**4. Whether there is a need for NHMRC to develop other means for funding public health research**

- Other approaches to funding public health research would be useful. Consideration might be given to new types of funding models, similar to the ARC model of linkage, with cooperation between State and Commonwealth health agencies, and/or non-government agencies in the areas of policy or practice.
- Funding forums or networks to enable partnerships between experienced researchers and practitioners with limited research experience, from research and health agencies would assist in the development of public health research.
- Increasing the number of training scholarships for public health practitioners to engage in research would be desirable, as would an increase in capacity-building in nutrition-related public health research, possibly via increased post doctoral and career development fellowships.

**5. Draw conclusions on how the NHMRC can contribute to the wider Australian public health research infrastructure**

- Infrastructure requirements for public health research are likely to depend more on human resources than equipment, and so this should be reflected in the criteria for submissions. Awards which allow practitioners to combine their work with research should be extended. Also, funding specific knowledge and skills, such as statistics to ensure methodologies are appropriate, and to assist in data analysis.
- Some countries such as Finland, have a national public health institute. This provides a focus for publicly funded research to minimise duplication of efforts and maximise coordination. A separate institute in Australia might sit well beside the preventative health agency recommended in the 20:20 summit. Even if this model was not found to be suitable for the Australian context, some of the experience of countries, such as Finland, could be used to inform NHMRC funding models.
- It may also be possible for the NHMRC to help with infrastructure to promote more efficient and effective collaboration across sectors. Intersectoral collaboration is highly relevant to improving public health outcomes but one of the limiting factors to this is the variable research experience across sectors. Increased capacity building for researchers located outside of the health sector, but working on public or environmental health projects, would be desirable.
- Encouraging registration of all funded public health research on the Clinical Trials Register might assist other researchers by raising awareness of past and present projects to enhance opportunities for cooperation and reduce the likelihood of duplication of effort.

**6. Any other matter**

- Increasing the proportion of representatives on the NHMRC from a public health research background could lift the profile of public health research.
- Improving publicly funded data collection and data linkage would assist public health research, particularly in areas of strategic importance. For example, better food and nutrition monitoring and surveillance would assist in public health nutrition research. While collection of such data is not within the brief of the NHMRC, advocating for this would be appropriate, as would advocating to government and non-government agencies for greater sharing of data in a timely fashion.