

Objective/Purpose:

The CIHR Cross Cultural Palliative NET is a five year New Emerging Team (NET) Grant established to foster excellence in cross cultural palliative and end of life care research and improve research capacity. The NET has sought to develop a collaborative and multi disciplinary program of research that supports new training opportunities to advance a better understanding of how culture and palliative end of life care intersect.

Research Question:

How can improved research capacity be achieved in the context of Cross Cultural Palliative/End of Life care?

Methods:

- ❖ Establish multi-provincial, multi-disciplinary collaboration using a cross- cultural lens;
- ❖ Partnerships – build partnerships with clinicians, service providers, consumers and policy makers;
- ❖ Linkages – work with other jurisdictions to build on existing work;
- ❖ Evaluation - achieved research capacity measured in comparison to its stated objectives

What is Research Capacity:

- Complex concept that involves quality and quantity. Common characteristics include:
- ❖ Long term process;
 - ❖ Involves leveraging strength and creating new opportunities;
 - ❖ Is a means to an end;
 - ❖ Process and/or results oriented;
 - ❖ Human resource and organizational development components;
 - ❖ Sustainable changes to existing system.

Performance Measurement:

A tool that links objectives to a framework of expected outcomes and established empirical indicators to measure performance.

Program Objective	Expected Outcomes	Outcome Measures
<ul style="list-style-type: none"> • Improve research capacity 	<ul style="list-style-type: none"> • Establish new investigators in identified areas of focus (Cross Cultural, Palliative and End of Life Care) • Enhance quality of research • Provide support for new scientists and researchers • Strengthen intra and inter institutional linkages 	<ul style="list-style-type: none"> • Increased number of trainees in identified areas • New tools (database development) and methodologies (pilot projects) in these areas • Resource allocation • Grant applications • Pilot Projects • Increased number of relationships, partnerships



Results:

- ❖ **Multi Disciplinary and Multi Institutional**
 - BCCA, UBC, Dalhousie, University of Saskatchewan, Cancer Care Nova Scotia and CIHR
 - Anthropology; Epidemiology; Health Services Administration: Population and Public Health: Psychology; Statistics; Social Work; and Sociology
- ❖ **New training opportunities**
 - Post doctoral fellows, PhD's and New Investigators; MSFHR Career awards

Results:

❖ New research opportunities

- Advance Care Planning; Ayurvedic Medicine; Compassion Fatigue/Compassion Satisfaction; Complementary and Alternative Medicine (CAM) Culture as a explanatory variable; Data mining; Knowledge Exchange/Knowledge Translation; Mindful Meditation; Occupational Therapy; Palliative care providers; Palliative Care Systems; Palliative outcome scale; Places of Death; Psychosocial Screening; Quality of Life; Survivorship; Registry data; Systemic Therapy; Traditional Chinese Medicine; Yoga therapy.

❖ Relationship building

- British Columbia Hospice Palliative Care Association; Canadian Association of Psychosocial Oncology; Canadian Society for Palliative Care Physicians; Cancer Care Nova Scotia; Capital District Health Authority, Nova Scotia; Central Okanagan Hospice Palliative Care Program; Centre for Healthy Aging at Providence Health; CIHR; Dalhousie; Fraser Health; Health Association of African Canadians; Health Canada; International Cancer Control Congress; International Psycho-Oncology Society; Secretariat for Palliative and End of Life Care; Traditional Chinese Medicine Healing Centre; University of Saskatchewan; Vancouver Coastal; Vancouver General Hospital; World Cancer Congress.

Conclusions/Lessons Learned

- ❖ Risk of the process becoming the product (“how” may become more important than “what”)
- ❖ Explicit statement of goals, targets and appropriate measures would enhance progress
- ❖ Efforts to develop capacity need to be more focused on strategic improvements or quick wins (i.e. leverage more funding; improve graduate and new researcher training opportunities such as fellowship and doctoral awards, new investigator salary, junior investigator and research trainee awards)

Next Steps:

- ❖ **Build on current experience**
Additional funding opportunities
- ❖ **Partnership with Palliative NET's**
Integrate existing Palliative/EOL NET teams
- ❖ **Identify Champions**
New Primary Investigator and Co-Investigators
- ❖ **Follow Up Mechanisms**
Assessment, evaluation and measurement tools