

# Interprofessional Research: Challenges and Opportunities

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## Outline

- Some definitions
- Challenges and experiences
- Some thoughts about solutions





## About Peter Mac

- Australia's only stand alone cancer centre
- Comprehensive cancer centre campus
- Four radiotherapy satellite services
  - 3 metropolitan co-located with general hospitals
  - 1 rural single machine unit
- Around 6,000 new patients per annum



## Research at Peter Mac in 2001



- Large and very successful laboratory research division
- Smaller clinical research program dominated by medical oncology clinical trials
- Almost no other research
  - Small speech pathology program in head & neck cancer
  - Some medical support for research students in nursing, psychology and social work

## 2001



- Establishment of a Professor of Nursing position
- Organisational goal to increase nursing research
- My goal:
  - To develop research that improved the supportive care outcomes of people affected by cancer
  - To develop an interprofessional research team capable of doing this.




## Why Interprofessional?



### Some definitions


- Cross/Multiprofessional
  - 2 or more disciplines used but not integrated
- Interprofessional
  - Some integrations but separate disciplines still discernable
- Transprofessional
  - Such integration that tracing distinct disciplines is difficult

Strober 2006



*The extraordinary complexity of knowledge in today's world creates a paradox. On the one hand, its sheer volume and intricacy demand disciplinary specialization, even sub-specialization; innovative research or scholarship increasingly requires immersion in the details of one's disciplinary dialogue. On the other hand, that very immersion can limit innovation. Disciplinary specialization inhibits faculty from broadening their intellectual horizons—considering questions of importance outside their discipline, learning other methods for answering these questions and pondering the possible significance of other disciplines' findings for their own work.*

*Habits of Mind – Strober in Social Epistemology, 2006, Vol 20(3-4): 315-331.*



“[S]ome parts of the scientific frontier require... the mobilization of interdisciplinary research teams... Increasingly, investigators will need to integrate knowledge... And greater prominence must be given to research in the behavioral and social sciences”

(National Institute of Medicine 2003: 51–52).

## Heinrich Hoffman (nanotech)



- Argues that interdisciplinary research influenced by:
  - Goals of funders
  - Needs of researchers for access to knowledge & research tools
  - Resources availability
  - Opportunities for interaction
- Also argues that 50% of collaborations fail!

## Ananta Kumar Giri - 2002



- Academic disciplines have exercised a dominant influence in the way we think, perceive & seek to understand reality
- We look at the world through the eyes of the discipline to which we belong and tend to think that the whole world is characterised by a disciplinary significance

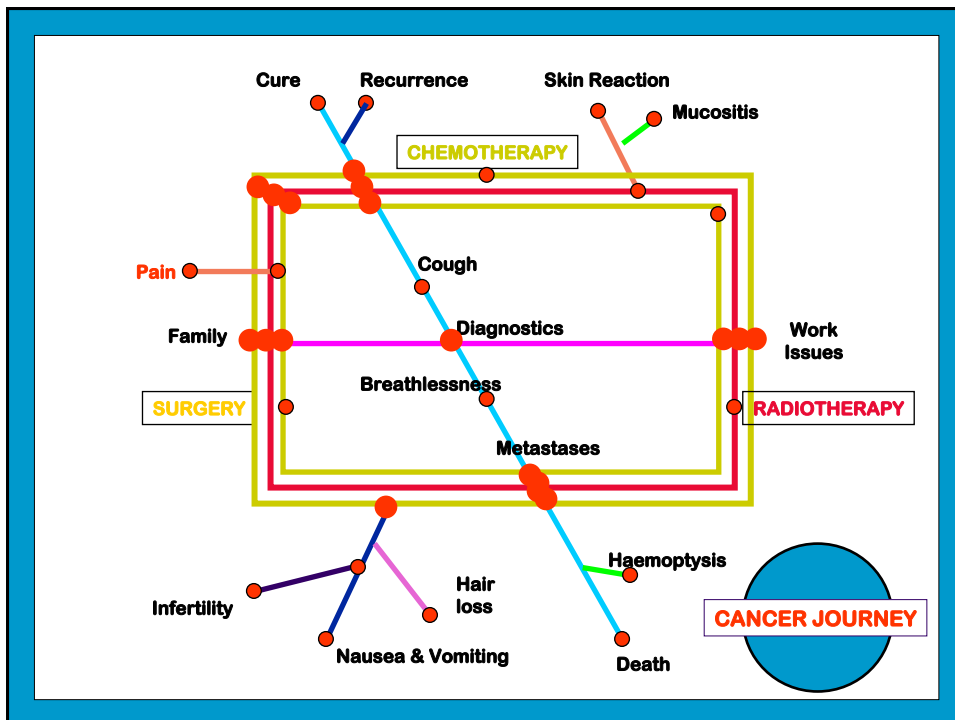
## Disciplinary blinkers



- Define
  - What we see as salient
  - How we see things
  - How we understand what is happening
  - How we approach problems
  - Where we look for solutions
  - How we react to alternative ideas
- The example of nursing and medicine in approaching research in advanced cancer



# Whose reality informs supportive care research?



## Who are our research team?

- Nurses
- Doctors
- Behavioural scientists
- Allied health clinicians – psychology, social work, nutrition, physiotherapy
- PATIENTS and FAMILIES
- Information systems scientists
- Social Scientists
- Statisticians
- Anyone else who is relevant



## Challenges – Strober’s Habits of Mind

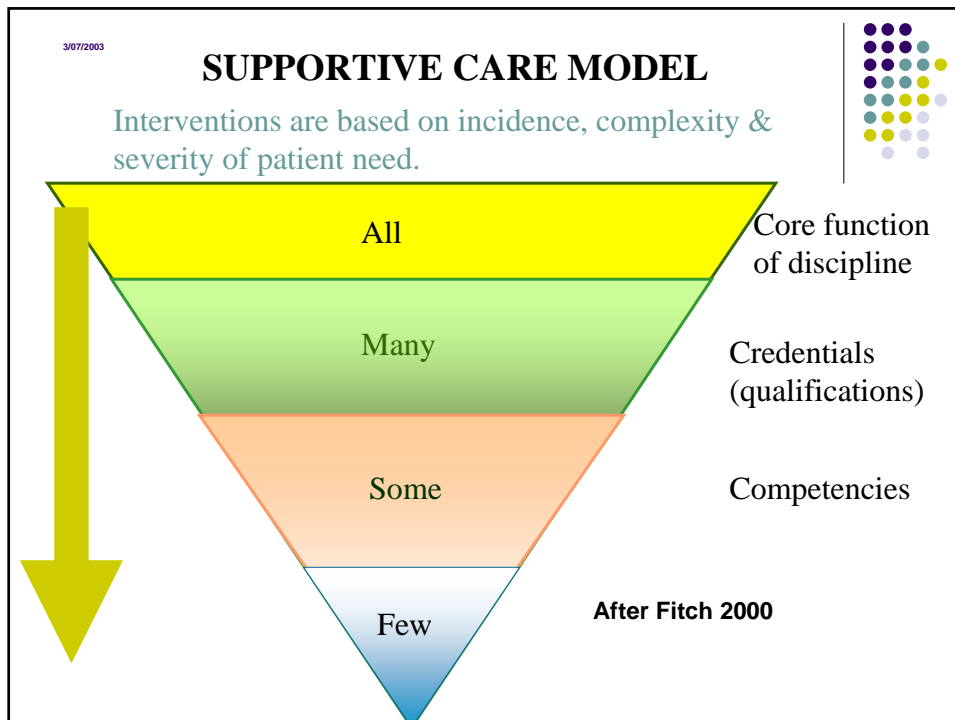


- Differences in terms of:
  - Content
  - Styles of thinking
  - Styles of presenting
  - Styles of questioning

## The challenges

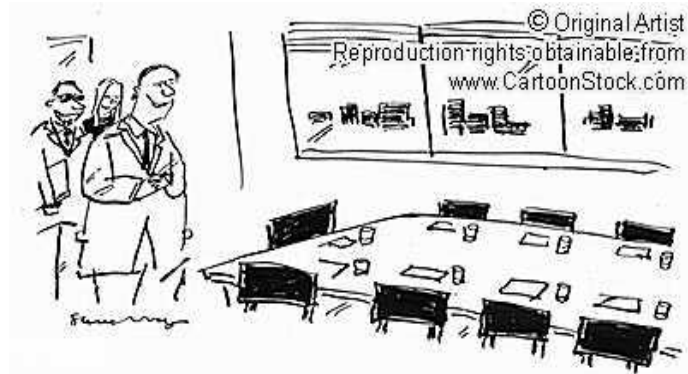


- Overcoming “Habits of Mind”
  - Language
  - What counts as valuable
    - Methodologically
      - Methods for complex problems. RCT as gold standard
    - Theoretically/Conceptually
    - Clinically
      - Who owns psychosocial care?



## The challenges

- Overcoming “Habits of Mind”
  - Language
  - What counts as valuable
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      - Methods for complex problems. RCT as gold standard
    - Theoretically/Conceptually
    - Clinically
      - Who owns psychosocial care?
  - Parity of Esteem (Hart et al 2005)
    - Who has supremacy?



"I love this room, so many happy memories of killing innovation..."

## The Rewards



- Having thinking challenged
  - Neuropathic pain and genetics
  - Information science is more than IT
- Developing collaborative practice
  - Shared service development
- Becoming a better researcher
  - New capacities as a team
  - Larger scale work

## The Micro Solutions?



- Communication
  - Regular team meetings
    - Include team rules of behaviour
    - Negotiate styles of presentation and debate
    - Don't gloss over points of difference and discomfort
    - Who isn't speaking? Who is dominating?
- Manage differences in status
- Develop accountabilities that both play to strengths but allow innovation
- Encourage willfull suspension of one's own concept of what is right

## The Macro Solutions



- Recognise the elongation of timeframes
  - Funding
  - Structured opportunities
- Reward system reorientation
  - Organisational goal setting
  - Breakdown structural impediments
- Develop educational opportunities
- Invest in young researchers and teams

