

Investments in Mental Health Research Create Knowledge, Drive Innovation and Improve Lives



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Over the past two decades, mental health research has been funded primarily by public money. What is the payback from these investments? How can we increase the benefits of research in the future?

This is a fundamental question for psychiatrists. Evidence-based practice is the foundation of our profession and many of us are actively engaged in research. The Canadian

Psychiatric Association (CPA) promotes the translation of knowledge into practice through *The Canadian Journal of Psychiatry*, its scientific journal, and the CPA Annual Conference, the largest educational event in psychiatry in Canada, where psychiatrists present their latest research findings.

A recent international study, employing case studies from Canada, the United States and the United Kingdom, attempts to answer the question about research benefits and payback. *Mental Health Retrosight: Understanding the returns from research (lessons from schizophrenia)* looks at payback through: knowledge production, research targeting and capacity-building, policy and product development, health and health sector benefits, and broader economic benefits. Overall the study found that during a 20 year period research has had major academic, health, social and economic impacts.

The study suggests that clinical research, where researchers involve patients, results in more – and more

rapidly adopted – innovations in evidence-based patient care than basic research. Basic brain research in the last 20 years has had limited direct application to treating patients. This suggests that while basic research may be useful over the long-term, for a more immediate translation of research results into practical applications, funding should be directed towards clinical research innovations. This finding aligns closely with the Council of the Federation's Health Care Innovation Working Group's efforts to accelerate the adoption of innovations that improve the health of Canadians, the care they receive and overall value-for-money.

An interesting and significant finding is that researchers' motivations matter. Researchers motivated by patient needs, with a practical application in mind, can drive the development and implementation of innovative interventions.

My colleague, Dr. Don Addington, Chair of the CPA Board of Directors, and a leading expert on schizophrenia, can testify to the

importance of motivation. "As someone who has done extensive research into effective treatments for schizophrenia, I know my engagement with patients, my in-depth knowledge of the disease, and my desire to achieve a specific outcome, fundamentally affects the kind of research that I do," says Dr. Addington.

But over the short-term, even when innovative interventions are developed, there may be no dramatic shift or momentous discovery. Even treatments that prove very effective may take years to be adopted or may be used in some regions and not others.

Why is this? Failure exists at both the clinical and systems levels. Implementation into clinical practice depends on professional and healthcare organizations, government funders and regulators supporting essential implementation steps. These steps include population-based planning, performance and fidelity measurement. Fidelity tells us the extent to which the intervention adheres to the delivery protocol or program

model originally developed. At the systems level, access and continuity of care are not well-integrated into our mental health system.

How can we translate promising innovations into effective evidence-based treatments more rapidly? A long-term accelerated strategy is required. One potential model is the Transformational Research in Adolescent Mental Health (TRAM) network, funded by the Graham Boeckh Foundation and the Canadian Institutes of Health Research (CIHR), which challenges researchers to collaborate with multiple stakeholders to develop more accessible and effective mental health services for youth.

If funders and regulators want a greater payback from research they should support researchers who focus on health system research, as well as specific services or interventions. The most effective researchers work collaboratively in teams or have interests in a range of mental health research fields.

Perhaps now is the time to consider the creation of a *National*

Mental Health Innovation Fund? The federal government can play a leadership role by supporting mental health research innovation and working with the provinces and territories to accelerate the adoption of applied innovations that currently exist in pockets across the country. In addition to identifying knowledge and research gaps, CPA members can help translate new knowledge into practical interventions to improve mental health treatments and clinical decision-making.

Recognizing the relationship between research and its potential impact on health system performance, the Canadian Psychiatric Association advocates for three key mental health system attributes:

- Population-based plans with clear performance measures
- Measurable goals for timely access to patient-centred, evidence-based care
- A transparent funding process and an equitable share of health care funding