

RESEARCH THEME WORKING GROUPS

The Research Theme Working Group (RTWG) has been evolving into an interactive intensive session that engages both researchers and stakeholders in discourse that advances the field for pressing and/or emerging areas, while informing the Canadian Institute for Military and Veteran Health Research (CIMVHR) of system issues to which it might be able to direct focus.

CIMVHR hosted six RTWG sessions in Vancouver on November 20-21, 2016 with 273 people participating. A synthesis of post-session reports filed by the Working Group Leads follows, which highlight the strengths, challenges, opportunities, and barriers facing engaged stakeholders in each research area.

Participation Demographics						
	Canadian Armed Forces	Veterans Affairs Canada	University Researchers	Industry rep or private practitioner	Other	Total Attendance
RTWG 1	12	4	20	3	6	45
RTWG 2	13			4	6	23
RTWG 3	12	7	7		7	33
RTWG 4	58				13	71
RTWG 5	26	19	17		15	77
RTWG 6	1		2	19	2	24
	122	30	46	26	49	273

RTWG 1

International Session – Research Collaboration on Military, Veteran and Family Health

Working Group Lead(s):

Dr. Stéphanie Bélanger, Interim Co-Scientific Director, CIMVHR

Dr. Heidi Cramm, Interim Co-Scientific Director, CIMVHR

Session Overview: This session will outline the benefits of international collaboration; provide an overview of CIMVHR's Knowledge Translation Initiatives, featuring the Journal of Military, Veteran and Family Health Research and will introduce the UK's Veterans Research Hub Project.

Strengths:

- Existing global research
- Enthusiasm and uptake for partnerships and collaboration

Challenges:

- Variations in methodologies and definitions related to how we approach military/veteran health and wellbeing questions
- Mitigating space and time zone challenges as well as cultural differences

Opportunities:

- Centralized e-exchange hub
- KT action plan to engage public and political interests
- Engage students to grow the research field

Barriers:

- Funding
- Methodology variations

RTWG 2

Clinical Research 102: A primer for health care professionals

Working Group Lead(s)

Dr. Eric Robitaille, Physiotherapy Section Head, Department of National Defence

Session Overview: Due to their regular contact with patients, health care professionals are in an optimal position to contribute to clinical research and thereby promote a culture of quality improvement and evidence informed practice. RTWG 2 participants will review the value of each of the research designs in the hierarchy of evidence and explore the use of a standardized tool for evaluating the quality of randomized controlled trials. We will aim to develop a multi-disciplinary appreciation of the subjective, self-reported and objective, functional outcome measures recommended in the evaluation of impairments, activity limitations & participation restrictions in CAF members with lower back pain. Our aim is to develop a comprehensive strategy to promote collaboration between researchers and health care professionals to participate in clinical research.

Strengths:

- Existing standardized scales and tools (PEDro, COSMIN, R2MR, PLE, SBST)

Challenges:

- Variations in lexicons
- KT: researcher/clinician effectiveness vs efficacy dialogue
- Prediction of MSK injury is CAF's largest medical challenge
- Few tools available to perform simple and quick assessments
- Limited inter-disciplinary collaboration opportunities available within CAF

Opportunities:

- Collaboration with other clinicians/health care professionals (i.e. social workers) and researchers through CIMVHR Forum, mentorship programs, research social networking sites (UNlweb, ResearchGate)
- Adapt available tools (LIFE, Sorenson) for broader use
- Collaboration with clinicians to determine research questions

Barriers:

- Communication between research and clinical practice
- Accessing mental health stigma
- Limited E-health record accessibility
- Post graduate studies research options

RTWG 3

Collaborating to Advance the Health and Well-being of Military and Veteran Families

Working Group Lead(s):

Dr. Heidi Cramm, Interim Co-Scientific Director, CIMVHR

Dr. Nicola Fear, Professor of Epidemiology at the Academic Department of Military Mental Health, Co-Director of the King's Centre for Military Health Research

Session Overview: This session will engage academic researchers, government scientists, policy makers, military and Veteran family service providers, and charitable agencies to:

- Describe the ways in which the field is evolving,
- Identify barriers and facilitators for collaboration, and
- Explore opportunities to create the conditions for successful and effective collaboration within and across sectors.

A panel of experts will describe the current landscape, followed by small group working sessions and large group discussion. The session aims to come up with the “next steps” in advancing collaboration within the field. Session objectives include:

1. Describing advancements in military and Veteran family health and well-being research
2. Identifying barriers and facilitators to collaboration across and within sectors
3. Identifying potential opportunities and strategies to advance the field through collaboration

Strengths:

- Existing partnerships and potential for future collaboration

Challenges:

- Data sharing – between government and academics
- Obtaining uniquely Canadian data
- Accessing subjects/recruitment
- KT: sharing information between and across sectors, disciplines and countries and how to normalize this
- KT: creating a culture of dissemination and understanding to increase lay audience access to findings and research
- Maintaining project momentum and generating new projects
- Operationalizing and linking research with other organizations were applicable

Opportunities:

- Create flexible data sharing agreements and infrastructure with government to simply access to families and provide timely security clearance for researchers /students
- Identify key research gaps
- Define who a Military Family is and how it fits within the definitions used by researchers, government and service providers and then develop a common lexicon

- Provide feedback on websites and databases to improve functionality
- Review potential institutional barriers/challenges to assist with sharing and collaboration and

Barriers:

- Different languages used amongst researchers
- Workloads of service providers limit ability to assist with research

RTWG 4

Musculoskeletal Health in the CAF, how do we stem the tide? Injury prevention for the 21st century

Working Group Lead(s):

LCol Markus Besemann, Head of Physical Medicine and Rehabilitation CF H Svcs Gp in conjunction with Force Health Protection, CF Physio, and DFIT

Session Overview: This session will provide an overview of the epidemiology of MSK injuries in the CAF, review current Injury reduction strategies, emerging novel means of risk profiling and the application of corrective exercise. The concepts aim to provide participants with practical knowledge and skills as well as tools to incorporate into practice. A summary discussion and small group breakout session will allow participants to provide direct input as to the optimal delivery of the strategies discussed.

Strengths:

- Evidence-based research
- MSK injury is preventable
- Annual fitness assessments

Challenges:

- Lack of injury surveillance and data
- Fitness and injury prevention are not in the operational training schedule
- Competitive nature of FORCE leads to increased injuries
- KT: getting ideas into practice

Opportunities:

- Develop and define a proper training program geared to individual's required level
- Provide standardized access to services on each base
- Use DFIT to implement unit training program to each member as long as baseline testing
- Engage students to grow the research field
- Create a communications plan to engage leadership in injury prevention strategies
- Generate collaborative research

Barriers:

- Lack of statistics to demonstrate that new fitness regimes are superior to old ways of doing things
- Lack of new fitness regime buy-in from base commanders and leadership
- Poor 'physical function' literacy rates and unfit/unprepared members

RTWG 5

Veteran Identity and Well-Being in Military-Civilian Transition: What do we know and what can we do?

Working Group Lead(s):

Dr. Jim Thompson, Medical Advisor, Research Directorate, Veterans Affairs Canada

Wendy Lockhart, Senior Policy Officer, Research Directorate, Veterans Affairs Canada

Session Overview: There is growing interest in the role of identity in successful military-civilian transition. Experts who work with military personnel and Veterans as they adjust to leaving military life observe that challenges with identity are important determinants of transition success. How well Veterans are living in all areas of their lives, including work, finances, health, social integration and housing defines successful transitions (global well-being)?

The goal of this working group is to enhance knowledge of the role of identities in the well-being of Veterans and their families.

Strengths:

- Strong international military sociology research focus on identities in serving military personnel, particularly in relation to civilian identities
- Increasing researcher interest and networking amongst researchers and knowledge users in Veterans' (post-military) identities
- Considerable interest at Veterans' administrations about Veteran identity.
- Emerging consensus regarding the importance of identities in the well-being of military personnel and Veterans (ex-military), particularly in dealing with challenges during military-civilian transition
- Researchers are applying theories developed in other types of transitions to Veterans

Challenges:

- There is no accepted conceptual framework for Veterans' identities.
- Lack of accepted ways to measure Veterans' identities and the effect of identity-related interventions and programs on well-being, in part owing to differences between the perspectives of researchers and administrators and the perspectives of Veterans and their families.
- No epidemiologic information on the numbers of types of military-civilian transition trajectories (e.g. number struggling with identity issues versus those not struggling).
- Research on serving members does not readily translate to life after service.
- Limited KT tools for getting academic findings in this area into the hands of service providers, policy-makers, Veterans and their families.
- Lack of information on Veterans' "family" issues with respect to identities.

Opportunities:

- Extend research Canadian and international research on identities in military and Veteran phases of life.
- Engage students to grow the research field
- Explore alternative theories (i.e., intersection theory)
- Engage and teach policy-writers, program developers and service providers inside and outside of government how to apply learnings about military and Veteran identities to support their well-being in service, in transition to civilian life and in life after service.

Barriers:

- Given that Vets are a minority population among minorities, there has been less interest in understanding identity issues in Veteran populations
- Multiple perspectives and lack of a commonly accepted etymology and conceptual framework for turning findings into practical solutions
- Lack of a common forum for exploring Veterans' identities in research
- Lack of understanding of how to translate the knowledge into practical solutions.

RTWG 6

Public Safety and First Responder Mental Health: Planning for coordinated research in the 21st Century

Working Group Lead(s):

Dr. Nicholas Carleton, Associate Professor, University of Regina

Steve Palmer, Executive Director, The Collaborative Centre for Justice and Safety, University of Regina

This session aims to provide a space for researchers working with first responders and other public safety personnel to engage in knowledge translation and mobilization regarding contemporary research efforts at the local, provincial, national, and international levels. It will include a presentation by the working group Leads, followed by an interactive discourse regarding current and planned activities. The Working Group intends to facilitate national collaborative efforts in support of first responders and other public safety personnel.

Strengths:

- Nationally led and coordinated efforts for mental health research and mental health care resources appear well supported by Public Safety Personnel leaders and members
- Current research activities indicating increases in advocacy, standardizations, and opportunities for big-data usage
- Public Safety Steering Committee and the CIPSRT Scientific Leadership Council

Challenges:

- Participant recruitment
- Research dissemination – particularly given challenges with communication channels
- Funding issues for CIPSRT
- Policy and ethics

Opportunities:

- Usefulness of CIPSRT Prevalence Survey results - inform research, policy, advocacy, leverage funding
- Research collaboration between Public Safety Steering Committee and the CIPSRT Scientific Leadership Council

Barriers:

- Lack of funding