Mental Health Retrosight is about understanding how research translates into clinical application, with a focus on schizophrenia. The burden of mental ill-health, including schizophrenia, is a significant and growing problem worldwide. How can funders and policymakers encourage the most efficient and effective use of research resources to quickly bring new treatments and cures to millions of sufferers?

Our aim in this study was to identify where and how mental health research has translated (or not) into advances in schizophrenia care, in order to find those attributes of the research, researchers and research context that have previously led to success. These attributes could be selected for, promoted or nurtured as appropriate by funders, policymakers and researchers themselves, to increase the impact of future research.

Our method combined two approaches from the toolbox of the ‘science of science’ to examine how research conducted 20 years ago is related to patient benefits and wider impacts today:

FORWARD-TRACING CASE STUDIES began with 18 different high-profile research projects of 20 years ago, and traced the paths of their outputs forwards into the wide range of impacts experienced today, including academic, health and wider social and economic benefits. The tracing combined interviews with the original researchers and clinicians with bibliometrics and desk research, in an iterative process to develop a nuanced narrative and add depth and detail.

BACKWARD-TRACING PERSPECTIVES began with six different current interventions or treatment advances. Using interviews with experts in the field, combined with desk research, we attempted to build a textured narrative that traced backwards (sometimes further than 20 years) to identify the research antecedents of each advance.

The observations and policy provocations from the two arms of the study were examined for complementary and reinforcing messages, and combined to give the full set of findings, provocations and an emerging research agenda, summarised overleaf. The four headline findings and their related policy provocations are also highlighted in the box (right).

Headline findings

1. The case studies and perspectives support the view that mental health research over the past 20 years has led to a diverse and beneficial range of academic, health, social and economic impacts.
2. Clinical research has had a larger impact on patient care than more basic research has over the 20 years since the research was undertaken.
3. Those involved in mental health research who work across boundaries are associated with wider health and social benefits.
4. Committed individuals, motivated by patient need, who effectively champion research agendas and/or translation into practice are key in driving the development and implementation of interventions.

Policy provocations

- Funders aiming to make a difference in patients within 20 years should focus on clinical research.
- Support individuals who work across boundaries – both disciplinary boundaries and stages of the translation pathway – possibly by providing soft ‘expenses’ type accounts and facilitating networking activities.
- Identify and support researchers who are motivated by patient need.

Strengths and weaknesses of the study arise from the methods: they are resource intensive and strong on uncovering details of the research translation process, but this means that the sample size is relatively small. To strengthen the rigour of the study we used a number of techniques to insulate the observations from the biases of the research team.

Findings, policy provocations and emerging research agenda are summarised overleaf. For the full policy report, methods report and documented case studies and perspectives, visit www.randeurope.org/mhr
Mental Health Retrosight: findings, policy provocations and emerging research agenda

HEADLINE FINDINGS

The case studies and perspectives support the view that mental health research over the past 20 years has led to a diverse and beneficial range of academic, health, social and economic impacts.

Clinical research has had a larger impact on patient care than more basic research has over the 20 years since the research was undertaken.

Those involved in mental health research who work across boundaries are associated with wider health and social benefits.

Committed individuals, motivated by patient need, who effectively champion research agendas and/or translation into practice are key in driving the development and implementation of interventions.

FINDINGS

Personal interactions between researchers, whether through the convening of conferences and meetings or through more informal events, allow the sharing of research ideas and implementation experience and are often key in sparking collaborations.

The development and adoption of interventions is affected by broader trends such as the rising emphasis on evidence-based medicine and the recovery movement.

The uptake of new practices then allows further practice-based and epidemiological research.

There are country-specific differences in research and uptake, which may be associated with health system organisation, with national culture and/or with disciplinary perspectives.

Non-academic stakeholders such as regulators, funders, professional and healthcare organisations, industry and the media can play a large role in affecting the rate of adoption of new interventions and ideas.

The publication of research findings and reviews of the evidence in the international research literature is important in supporting the progress of research.

KEY

Findings emerging from the perspectives
Findings emerging from both the case studies and the perspectives

POLICY PROVOCATIONS

Funders aiming to make a difference in patients within 20 years should focus on clinical research.

Support individuals who work across boundaries — both disciplinary boundaries and stages of translation pathway — possibly by providing soft ‘expenses’ type accounts and facilitating networking activities.

Identify and support researchers who are motivated by patient need.

Develop opportunities for networking across disciplinary and translational boundaries.

Support face-to-face meetings, workshops and conferences.

Improve learning across different countries and different contexts through systematic comparative analysis.

Support open publication of all research results.

Reach outside the research funding arena to work collaboratively with other organisations in the mental health policy and care community.

RESEARCH AGENDA

Investigate ways to develop and nurture the boundary-spanning potential of researchers.

Unpick the role of motivation in driving the impact of researchers and research teams.

Work to develop more nuanced classifications of basic research and understand the different impacts of these types of research.

Investigate the distribution of impacts across basic research.

Investigate the role of open-access publication in promoting the translation of research into patient benefit.

Map the importance of face-to-face interactions in an increasingly virtual scientific world and the relative strengths of different virtual environments.

Investigate ways to inspire researchers to pursue patient needs.

Investigate the correlation between academic and wider societal impacts more widely.

This research brief describes work funded through the Alliance of Mental Health Research Funders and documented in Mental Health Retrosight: Understanding the returns from research (lessons from schizophrenia), Policy report, by Steven Wooding et al., RR-325-GBF, 2013 (available at www.randeurope.org/mhr). The brief was written by Claire O’Brien. The RAND Corporation is a nonprofit research institution that helps improve policy and decisionmaking through research and analysis. RAND Europe’s publications do not necessarily reflect the opinions of its research clients and sponsors. RAND® is a registered trademark.
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