

## 2003 COLLABORATIVE WORKSHOP

## Place and 21st Century Health Care Research: Concepts, Methods, and Findings

Date: June 12, 13, 2003

Location: St. Andrew's Club and Conference Centre, Toronto

Download Program: <link to:program.pdf>

**Download Summary Newsletter** 

The 2003 HCTP Workshop was designed to create conditions for sustained interdisciplinary health research and mentorship in 2003-2004.

**On Day 1**, the Workshop kicked off with energetic presentations that drew attention to a wide range of "places" that are meaningful in health services research.

Dr. <u>Rick Malthaner</u>'s lively presentation showed that robotic surgery improves precision, reduces surgeon fatigue, and shortens recovery times, while raising important questions about relationships among technology, human bodies, and places in contemporary health care. In robotic surgery, the focus of attention in the operating room shifts from the patient's actual body - which the surgeon may never see or touch - to the computer screen, with the result that procedures and surgical training can transcend vast distances, and care providers and recipients need no longer to be proximal in space. Pascale Lehoux < link to database> responded with the challenging reminder that even 'simple' technological innovations can have powerful social effects.

In light of Toronto's SARS Crisis, novelist <u>Catherine Bush</u> and architect <u>Norm Abrams</u> addressed the experiences and exigencies of "quarantine." Broad-ranging discussion about cultural and clinical roles for hospitals followed. Participants articulated a tension between a need for engineering and epidemiological solutions to limit contagions and a need to "bear witness" to human experiences of isolation, exclusion, and dread that may accompany these solutions. This tension may be ideally addressed through interdisciplinary collaborations.

<u>Sarah Nettleton</u> capped the morning with an historical analysis of privileged medical spaces and technologies. In the 21st Century, our medical cosmology has shifted from an emphasis on bedside care and laboratory science, to a view of medical knowledge as information. Formal institutions re no longer privileged sites for informational medicine, which is available to all across the networked 'scapes' of the Internet.

**On Day 2**, activities, addressed methods for facilitating and measuring successful interdisciplinary health research. Morris Barer described the commitment of the CIHR and IHSPR to interdisciplinarity. During the animated discussion wihc followed, participants identified institutional changes that are also necessary for cultivating interdisciplinary research. These include flexibility in financial agreements for multi-institutional research projects and better recognition of the scientific contributions made through mentorship and knowledge translation. Gale Murray introduced the HCTP-Change Foundation Strategic

Alliance. The discussion emphasized the usefulness of involving stakeholders and community groups through the research process. Frank Kessel shared observations from interdisciplinary health research success stories from the U.S. Finally, Alex Jadad < link to: database> urged participants to champion interdisciplinarity with courage. Canadian culture is an optimal environment for energetic, collaborative interdisciplinary health research, and HCTP can be an important leader in creating new pathways to transformative, transdisciplinary knowledge.

## Core Feedback re: "Place" in Health Research

Definition of "Place": "Place" is a multivalenced concept. HCTP should capitalize on its many applications, rather than generate a singular definition of "place".

Research Priority: Developing methods for measuring and recording the multiple dimensions of place in health care services should be a priority research area for HCTP. HCTP will become a leader in this area.

## Core Feedback re: Interdisciplinarity in Research/Mentorship

Students as Partners: Students should be deeply involved in shaping their educational experience at HCTP. Students should participate in research activities with Mentors.

Non-Academic Partners: Non-academic perspectives must be integrated in the research process (this is another aspect of interdisciplinarity). HCTP (with Change Foundation Alliance) should prioritize Knowledge Translation/Transfer methods to accomplish this.

*Listening, Explaining, Clarifying*: Explaining our (disciplinary) perspectives to others (outside our discipline) helps to clarify our perspectives to ourselves.