

Dear Professor Morris and Mr Stephens,

RE: Response to CSO Research Strategy 2014

I am writing in response to the draft CSO Research Strategy 2014 which was circulated for consultation. I would support the strategy for high quality research in Scotland. As one of very few academic GPs in Scotland, I would like to emphasise the importance of investing in primary care research and in particular a more holistic approach to prevention of health problems. I would like to draw attention to the absence of academic practice nurses in Scotland, and as a result there is little research to inform their increasingly important role in primary care. Similarly, there are few academic health visitors and a very weak evidence base for health interventions in the period from birth to preschool, despite the economic and health arguments for this critical window of opportunity. I would therefore like to raise the following:

1. Early years has been recognised as a key priority for Public Health and the NHS in Scotland. The CSO could address this opportunity by developing research partnerships between primary care, secondary care, public health and the third sector and funding programme grants to develop interventions. Scotland is well placed to lead in this research area.
2. General Practice has the broadest access to the population of any health discipline, yet there are very few academic GPs and even fewer nursing and allied health professional academics. It is crucial in my view to build capacity and to create a wider range of opportunities to engage primary care academics in research. Working with the Royal Colleges could result in more innovative ways, in addition to the traditional routes, to build primary care research capacity for the future.
3. Research on prevention has tended to focus on single behaviours and single diseases. Prevention has received less attention than downstream management of multi-morbidity. Opportunities for upstream multi-disciplinary research into cost-effective interventions that prevent ill health are urgently needed particularly in pregnancy and early years, as there is growing evidence of the early origin of disease. It is argued by Heckman and colleagues [1] that this period is where the economic and societal benefits are greatest.

Thank you for considering these comments.

Kind regards



Professor Pat Hoddinott

Chair in Primary Care

Nursing Midwifery and Allied Health Professionals Research Unit

University of Stirling

[1] Heckman JJ. The case for investing in disadvantaged young children. In: First Focus, editor. Big Ideas for Children: Investing in our Nation's future. Washington DC: First Focus; 2008.