

UKPRP annual conference 2021 post-conference report – summary of discussions

Introduction

The first UK Prevention Research Partnership (UKPRP) annual conference was held virtually over two days, 7 and 8 September 2021. The conference had a UKPRP community focus and was well attended by the UKPRP-funded consortia and networks, UKPRP Scientific Advisory Board and the UKPRP Funders. The aims were to:

- Share learning across the UKPRP-funded consortia and networks
- Provide opportunities for identifying/building on synergies between consortia and networks, particularly with the new consortia funded under the second call
- Highlight the progress of the UKPRP Community of Practice and future plans
- Provide a platform for discussions on key themes; including policy development and design, health inequalities, managing multi-, inter- and trans- disciplinary projects and methodologies.
- Provide a networking opportunity between the UKPRP consortia, networks, funders and Scientific Advisory Board

The format of the event was a mixture of keynote speeches and presentations, panel discussions and interactive breakout group discussions. The event was organised by the UKPRP Secretariat in consultation with the UKPRP Community of Practice and UKPRP Funders.

This report summarises the main discussions and provides a social media engagement report.

Day 1

Welcome and introduction

The day kicked off with an introduction from Professor Kevin Fenton, London Regional Director for Public Health England and Chair of the UKPRP Scientific Advisory Board. Professor Fenton highlighted that this was the first time that the UKPRP community had come together as a whole and was a great opportunity to discuss achievements and challenges, learn from each other and welcome the new projects recently funded by UKPRP.

Session 1

UKPRP Call 1 consortia and networks panel discussion – emerging opportunities and challenges two years in.

Professor Rachel Cooper chaired a panel with representatives from the Call 1 consortia and networks to discuss emerging opportunities and challenges for NCD prevention research. Panellists reflected on the need to be agile and innovative, particularly when responding to the impact of the Covid-19 pandemic on the delivery of their projects. However, this was not without its challenges, particularly with regard to building relationships amongst the project team, engaging with stakeholders and recruiting staff.

Panellists recognised that public health challenges and health inequalities have worsened over the past 18 months, and these changes will need to be kept under consideration as the projects continue.



Session 2

Breakout discussion session – Strategies for managing multi-, inter- and trans-disciplinary projects and networks, including during the Covid-19 crisis

Reflecting on some of the challenges highlighted in session 1, attendees were split into breakout groups to discuss their experiences and learnings of either (i) co-production; (ii) managing multi-, inter- and trans- disciplinary projects and networks; or (iii) virtual engagement and public involvement.

(i) Co-production

Discussions centred around the challenges posed by the pandemic which had kept policy makers and public health agencies busy and less available to take part in research. Moreover, the use of remote engagement had exposed a greater need to build trust than when meeting face to face. It was suggested that for the future, a blended approach of online and face-to-face communication might help reach more people, sometimes in more effective ways, but that care would need to be taken not to create new exclusions. A key challenge with co-production is that researchers may not always recognise when they need to release a degree of control.

(ii) Managing multi-, inter- and trans- disciplinary projects and networks

A central theme was about the potential difficulties of bringing together different teams with different cultures and priorities, for example those doing quantitative analysis and those looking at things qualitatively. Clarifying management structures and working practices was agreed to be important, as was the need to arrive at a common language and understanding

of what is to be achieved. It was perceived that video conferencing and remote working had been beneficial in some cases as it enabled an equalisation of communications between and within groups. Discussants expressed views that it was difficult to publish the results of transdisciplinary work, and to gain an audience for it with policy makers.

(iii) Engaging virtually and public involvement

Despite the challenges, it was generally acknowledged that the move to virtual engagement has enabled the inclusion of some individuals who had previously been unreachable due to health reasons or location. Some researchers had been surprised by the diversity of participants and how far their 'virtual reach' has been. However, there remained a need to take a flexible approach to engagement with some harder to reach groups. It is not yet understood how a truly hybrid approach to engagement will work, with participants noting that in some cases it had proved a challenge to establish a rapport during virtual meetings. It was also considered that some digital platforms that have been developed primarily for team working are less effective for public engagement.

Session 3

Introduction to the UKPRP Call 2 awards

Professor Fenton invited the three new UKPRP-funded consortia to introduce their awards and describe what they hoped to achieve.

Professor Peter Fonagy and Professor Tim Hobbs of the Kailo consortium presented an overview of their research programme for a systemic approach to improving adolescent mental health.

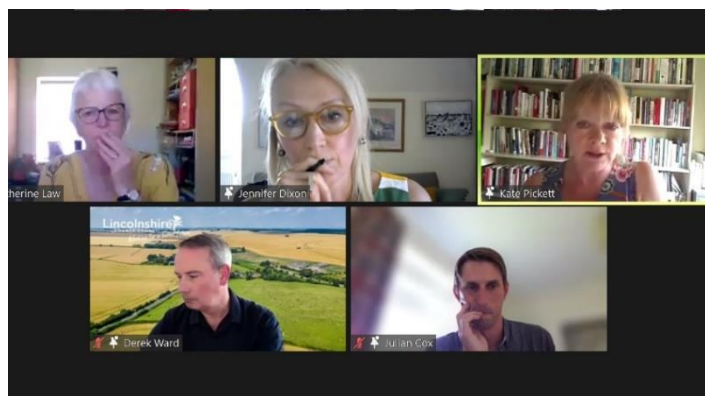
Dr Ruth Hunter, Professor Ruth Jepson and Professor Sarah Rodgers of the GroundsWell consortium then spoke about how they will apply systems science to maximise the contribution of urban green and blue spaces to prevent NCDs and reduce health inequalities.

Finally, Professor Sylvia Walby introduced the VISION consortium, which aims to reduce the violence that harms health by improving the measurement and analysis of data on violence.

Session 4

Panel discussion session – How can prevention research address health inequalities?

For the final session of day 1, Dr Jennifer Dixon (Health Foundation) chaired a panel of researchers - Professor Kate Pickett (University of York) and Professor Catherine Law (University College London), and local government partners - Julian Cox (Greater Manchester Combined Authority) and Professor Derek Ward (Lincolnshire County Council) to discuss how prevention research



can help to reduce health inequalities.

The panellists discussed the challenges in persuading national government to take action to address health inequalities as well as the complexities faced by local government when needing to compare interventions and make choices as to where to invest their funding.

Day 2

Welcome and introduction

Professor Kevin Fenton started the second day by reflecting on the key themes from the previous sessions. Co-production was a major theme and many delegates had talked about the challenges in identifying new partners to engage with, and other pressures that have prevented partners from working together. Fortunately, the benefits of online tools have also been revealed, enabling richer conversations between partners in some cases.

There had been good discussions on ensuring that prevention research influences policy by understanding at which level of the system effort is best placed to create the most impact, and how to work with local policymakers/government to ensure effective translation of research outcomes into policy.

Professor Fenton invited colleagues to share their reflections during the coming discussions, including the need to learn from the positives and negatives of engaging online in order to take forward a blended approach, and the need to take research upstream to address factors that affect health inequalities downstream.

Session 1

Breakout discussion session – Methodologies

Dr Ges Rosenberg chaired the first breakout discussion session of the day to share practice and ideas on agent-based modelling (ABM) and the design of interventions in complex systems research.

(i) Agent-based modelling

Discussion centred on how agent-based models can be used to explicitly model the interactions between micro and macro agents. ABM is used for testing mechanisms and theories to see how a system is affected by an intervention. So an advantage is that ABM can allow policymakers and stakeholders to identify the most effective levers of change. The key challenge with ABM is that people's behaviour is complex. Models can take some time to develop as some theory of how agents behave is required in order to generate them. The groups discussed the need for training up end users so that they can make direct use of the models that are developed.

(ii) Design of interventions in complex systems research

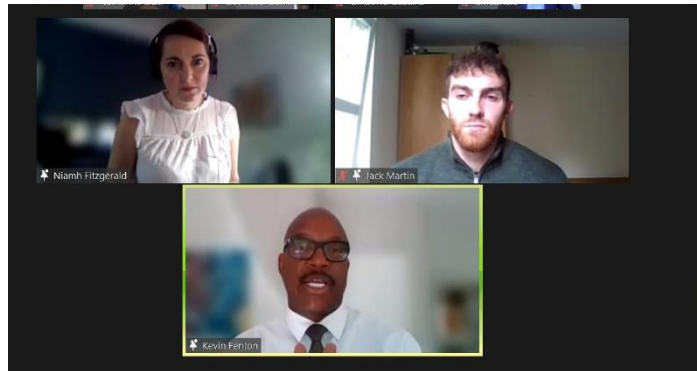
The groups discussed the need to establish a common understanding of what is meant by a systems approach as well as what is meant by interventions, particularly amongst research teams who work across disciplines. A key challenge with taking a systems approach to interventions is that health is impacted in areas outside the health sphere, so there is a need to work with non-health organisations to persuade them to include health as part of their agenda.

Session 2

UKPRP Community of Practice – update on progress and future plans

Professor Niamh Fitzgerald and Dr Jack Martin outlined the progress and future plans of the UKPRP Community of Practice (CoP).

The CoP's current development themes include consortium and network management, UKPRP network development, impact-orientated research, and commercial interactions. The CoP plans to have its website up and running soon and will be introducing itself to the new set of UKPRP-funded consortia in order to explore ideas for future development themes.



Session 3

Panel discussion session - Policy development and design - how to feed in new evidence

For the final session of the conference, Dr Andrew Fraser (Public Health Scotland) chaired a panel with Professor Jim McManus (Hertfordshire County Council), Professor Stephen Palmer (Emeritus Cardiff University) and Rachel Conner (Department of Health and Social Care) to discuss how researchers can most effectively influence policy makers.



Panellists shared their advice on investing the time in building relationships with policy makers, developing policy analysis skills, and ensuring engagement with decision makers right at the beginning during the scoping phase of research.

Closing summary

Professor Rachel Cooper closed the conference by thanking delegates for their contributions and the rich discussions throughout the two days and she thanked the funders for enabling this work to happen and continue.