

Developing Population Health Research Priorities in Asian City State: Results from a Multi-Step Participatory Community Engagement

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For which topic were research priorities identified?

population health

In which location was the research priority setting conducted?

Asia - Singapore

Why was it conducted at all?

There is a growing recognition of the importance of community involvement in setting the strategic directions of population health research agendas. In the past, the role of the community and public (e.g. patients, residents, care providers) has been restricted to being end users and beneficiaries of health and social research whereas decision-making on what research is conducted has been the domain of a small group of experts, mainly researchers. This clear task division seems evident not only in clinical research in general but it can be also observed in population health research. In the past decade, however, active involvement of the public and patients in health research has been increasingly advocated by major research funding programmes in western nations.

What was the objective?

to identify a broad range of research priorities to inform the studies seeking to improve population health outcomes based on the engagement of diverse stakeholders

What was the outcome?

a list of 6 research areas

How long did the research prioritization take?

No information provided.

Which methods were used to identify research priorities?

focus group; interview; survey

How were the priorities for research identified exactly?

Step 1: survey 1: community leadership feedback: participants were asked to provide feedback on what constitutes a successful population health system and priority areas for improvement and directions for future strategies, data processing: thematic analysis, grouping of responses into similar clusters. Step 2: survey 2 and focus groups: survey comprising 10 broad priority areas, participants were asked to rate each priority area, in parallel two focus groups to explore population health needs and challenges and to elicit participants' views of priority areas to be targeted for improving population health. Step 3: in-depth interviews with key informants: to further explore emergent concepts about population health priority and to identify divergent perspectives, interview data analyzed via thematic analysis. Step 4: research priority formation: thematic analysis to synthesize research priorities, themes and suggested research questions were sorted and collated, then categorized into sub-themes, sub-themes then merged into 6 priority areas

Which stakeholders took part?

Health and social care providers, representatives from the Singhealth regional health system, government agencies, voluntary welfare organizations and private sectors and users of population health services. Survey 1: 6 participants. Survey 2: 42 participants. Focus groups: 20 participants: healthcare professionals, researchers, a government official and community partners in areas of chronic disease management, care of older people and end of life care, regional health system (public healthcare entity) staff, nurses involved in care management and managers of voluntary welfare organizations. Interviews: 95 participants: 68 care providers, 27 service users.

How were stakeholders recruited?

The Community Partnership Council (CPC) members were invited to participate.

Were stakeholders actively involved or did they just participate?

Stakeholders were mere participants of the research prioritization process; they were not actively involved in the process.