Core Values and Leadership Principles

Institute History

The O’Brien Institute for Public Health has evolved over the past ten years into a collegial environment that is more than the sum of its parts. Although many individuals or teams of researchers, in many population health- and health services-related disciplines, did and would have demonstrated excellence in the absence of the Institute, the value proposition of the institute structure is that it further enhances any existing merit, and elevates the level of success among the broader networked environment.

Before the naming donation in 2014, minimal human and financial resources were available, and these were allocated toward networking events and the provision of voluntary programs of expertise-sharing among the membership (including internal peer review and mentorship). The academic and societal benefits of applying the institute model to Calgary’s population health and health services research endeavor quickly became evident, and compelling enough to merit the O’Brien donation. The resultant infusion of resources accelerated the Institute’s advancement from being a late addition to the Cumming School of Medicine’s six health research institutes in 2010, to arguably its top institute* in 2019.

Leadership Principles

The Institute’s success has been attributed to a unique ethos, which in turn is due in large part to the vision and values of its inaugural Scientific Director. The decisions made in populating committees, building a support team, drafting terms of reference, designing programs, allocating resources, and interacting with members and stakeholders laid the groundwork for an inclusive, facilitative, multidisciplinary, competitive, and socially responsible organization. Some truisms, operating principles, and core values resulting in these attributes are compiled below:

Inclusive

1. Effective health research endeavours include senior faculty, junior faculty, students, research staff, administrative staff, health care providers, patients, decision makers; and both “high flyers” and unheralded contributors.
2. Every member is an institutional asset, with different strengths to share and contributions to make, from very different positions and backgrounds, toward many different activities within the Institute, including knowledge generation, knowledge translation, stakeholder engagement, tools/methods development, policy development, committee representation, etc.
3. The main value of the Institute’s programs comes from marshalling the voluntary and mutually beneficial sharing of expertise among the membership, so breadth and variety is useful in the membership.
4. There is currently no identifiable disadvantage to having a large membership (other than manageable operational challenges).
5. It is advantageous for the Institute to be inclusive/welcoming rather than selective/demanding in its membership and activities, and to focus much of its resources on the support of networking.

Encouraging

6. The default response to members requesting support should be ‘yes’ rather than ‘no’. When financial or human resources make an unqualified ‘yes’ impossible, the response should be “yes, but...” (Always consider what does it says to the requester about the Institute if the answer is ‘no’).
7. Peer review is an important and somewhat idiosyncratic aspect of public health research: members are encouraged to be generous, constructive reviewers, and to carefully interpret their own reviews during the iterative revise/resubmit process. In most situations, members are strongly encouraged to revise/resubmit.
8. Members are encouraged to search out internal peer review of draft applications and manuscripts. Although applicants are encouraged to access the Institute’s formal program for IPR of funding proposals as early as possible, Institute staff and invited reviewers try to accommodate late requests when possible, acknowledging members’ demanding schedules.
9. Serendipity has been involved in creating many of the most fruitful research teams and projects, so early and broad sharing of potential research questions and ideas are encouraged as part of Institute networking.

Multidisciplinary

10. Public Health research comprises health services and population health research, and there is a very important area of overlap between these fields.
11. Societally impactful research requires frequent and effective interactions with stakeholders outside academia.
12. Complex health research topics, especially the ‘grand challenges’ facing modern society, require multidisciplinary, cross-sectoral teams and approaches.

13. For historical and geographic reasons, Department of Community Health Sciences researchers are very familiar with the Institute and its offerings; extra efforts are required to orient (potential) members in other Cumming School of Medicine Departments, and in other University of Calgary Faculties/Schools.

**Competitive**

14. Too much internal funding may make a researcher complacent about competing for prestigious external, peer-reviewed awards, so allocations of O’Brien operating funds to members are kept low, at levels sufficient to bridge or seed competitive projects and are conditional on the members’ commitment to maintain external funding pressure.

15. Research metrics including publication numbers, citations, H-index, research funding, awards, etc have acknowledged weaknesses and blind-spots, but it would be a disservice to members to not monitor and try to support individual and group progress in such measures.

**Socially responsible**

16. Potential benefit to society, with consideration to equity and social justice, is a main criterion for work supported by the Institute.

17. The Institute benefits enormously from supporting UofC, CSM, Alberta Health, and Alberta Health Services priorities and aligning with their institutional guidelines; in some instances the Institute adapts/interprets guidelines to most effectively support the needs of its public health researchers.

18. Institute members are often extremely busy with clinical, teaching, service, and community roles, and should be forgiven/accommodated for lateness or lapses. Their efforts with funding applications and publications should be lauded and supported; their successes celebrated as the exception rather than the rule in this highly competitive environment; and their failures acknowledged as an inevitable step in the research endeavour.

19. Members are part of an interconnected environment of academic and clinical Departments, Faculties, other University Institutes, and other sectoral affiliations; it is advantageous to the member when credit (and debits!) for their work are shared between O’Brien and these other affiliations.

20. Members’ service to the Institute is acknowledged in individual annual reports, which the members are encouraged to share with their supervisors.