

**SIMON FRASER UNIVERSITY**

***OFFICE OF THE VICE-PRESIDENT, ACADEMIC***

**MEMORANDUM**

**To:** Senate

**From:** J. Osborne, Acting Chair  
Senate Committee on Academic Planning

**Subject:** The Institute for Health Research and Education  
(SCAP Reference: SCAP 00-14)

**Date:** May 18, 2000

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Action undertaken by the Senate Committee on Academic Planning gives rise to the following motion:

"that Senate approve and recommend to the Board of Governors the establishment of the Institute for Health Research and Education, as set forth in S.00 -57 ."



# SIMON FRASER UNIVERSITY

*Office of the Vice President, Academic*

## MEMORANDUM

**TO:** Senate Committee on Academic Planning    **FROM:** J.M. Munro,  
Vice President, Academic

**SUBJECT:** Institute for Health Research  
and Education                      **DATE:** May 11, 2000

The attached proposal for the creation of the Institute for Health Research and Education is the product of an academic planning process called the Health Initiative. The Health Initiative has been guided by a Steering Committee<sup>1</sup> of representatives of the Faculty Deans and informed by extensive interaction with the many faculty members at Simon Fraser who have interests in health research. Advice was also obtained from a consultant appointed by the President last June.

There are three attachments to this memorandum. These are:

1. The proposal for the creation of the Institute for Health Education and Research (IHRE).
2. An outline of a proposed development strategy for IHRE. One of the first tasks for the Institute would be the development of its own strategic plan.
3. A background paper on the current and prospective environment for health research in Canada.

### **The Institute for Health Education and Research (IHRE).**

IHRE is designed to be an organizational vehicle to expand and extend health research and education at Simon Fraser University. The objectives and organization are specified but exactly what the Institute will do and what priorities it will give to different opportunities as they arise are left for IHRE itself to determine. IHRE is not just a research institute (and it is not being proposed under Policy R 40.01) - rather, it has been developed to bring a sense of organizational mission and focus to a broadly defined area, health, that will be increasingly important in the years ahead.

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<sup>1</sup> Members of the Committee are: J. Munro (Vice President, Academic and Chair), B. Clayman (Vice President, Research), J. Dickinson (Applied Sciences), N. Haunerland (Science), S. Pigg (Arts), G. Poole (Arts), S. Roppel (Office of the Vice President, Academic), D. Shapiro (Business Administration).

Health is, in some senses, the missing program area in our University. Its specific absence from our programs reflects pre-1965 planning decisions to omit specialized program areas from Simon Fraser that were available at the University of British Columbia. Health research and education are now much less specialized and the decades-old desire to avoid UBC program areas has generally been laid to rest. As the background paper (Attachment 3) notes, Simon Fraser began to fill in some of the gaps in health as early as 1970.

### Development of the IHRE Proposal

The current process leading to the development of the IHRE proposal involved several steps. The Steering Committee was formed last August and has met regularly since then. In September the Committee initiated a self-study of research interests among all Simon Fraser faculty with identified interests in health research. Seventy-eight faculty members and 12 academic units completed questionnaires. The self-study found a very broad range of interests in health research and various types of professional involvement in health. Grants and contracts for health-related research total over \$3 million annually.

Several open meetings were held with interested faculty. In January a half-day workshop organized around the five health research sectors identified in the proposal was held. It attracted over 40 faculty members and provided the basis for the IHRE proposal. Three drafts of the proposal have been circulated widely. The first draft was discussed at an open meeting on March 31<sup>st</sup>. A second draft that incorporated feedback from that meeting was discussed at a second open meeting on April 6<sup>th</sup>. Both open meetings were well-attended.

There was some opposition to the proposed Institute at the open meetings. This opposition was primarily with regard to what was perceived as a lack of specific information in the proposal about how IHRE would operate and exactly what its relationships with academic units and existing faculty members would be. Major objections to the IHRE proposal are briefly summarized and answered below. (These points were part of the material recently distributed to faculty members for comment.)

1. The definition of "health" is too broad to be meaningful. (The definition is based on the underlying ideas of the Canadian Institutes for Health Research and, as well, it reflects the breadth of faculty interests at Simon Fraser. The broad definition of "health" in the Institute proposal is intended to ensure that both core and non-core health research is developed at Simon Fraser. Core areas of research will be defined by IHRE. The Institute is, however, also designed to support non-core health research.)

2. The University should commit new resources to established health research areas rather than dispersing it to undeveloped areas.

(IHRE will support its core research areas through increased faculty resources, additional space and infrastructure. The organizational structure of IHRE will enable it to participate more effectively in resource allocation processes at Simon Fraser. IHRE will make Simon Fraser more competitive to external funding agencies by investing in core areas and by increasing the visibility of health research at the University. Since it is in part modeled on the sectoral classification of CIHR, IHRE should encourage opportunities for research collaborations that will be preferred by federal granting agencies.)

3. The specific relationships between IHRE and Departments should be specified.

(These relationships will occur according to existing University policies and practices. It would be undesirable to include an unnecessary level of detail in this proposal; IHRE is designed to work with Departments in the same ways that other extra-departmental initiatives have done. Maintaining flexibility is essential for the successful development of IHRE.)

4. The Institute will do little for faculty members who already have research support from established funding sources such as the Medical Research Council of Canada.

(IHRE's purpose is not just to improve research grant success. By increasing the visibility of Simon Fraser health research, however, it may prove to be very successful in this regard. Through research dissemination, support for grant applications, and development of workshop and seminar series, IHRE will provide new services, networking opportunities, and exposure to all its members.)

5. The process for recruiting and appointing new faculty members under the joint auspices of IHRE and Departments should be specified.

(Health research is dispersed across the university with combinations of Departmental concentrations and singular researchers within Departments. This organizational complexity can be accommodated so long as IHRE maintains its flexibility. Detailed recruiting and appointment procedures would prematurely constrain the flexibility required by IHRE to meet the needs of its various constituents and partners.)

6. The administrative structure for IHRE will bring members with opposing views concerning the development of health research at Simon Fraser into close proximity in the governance and development of the Institute.

(Hopefully, those holding opposing views will begin to appreciate the advantages of working together. In any case, any University-wide initiative runs this risk and for most of these the risk turns out to be slight.)

## Support for IHRE

The final version of the proposal was circulated for consideration to faculty members with an interest in health for a two-week period between April 26<sup>th</sup> and May 8<sup>th</sup>. Forty-one faculty members have provided written support for this proposal. No one who responded was opposed. The faculty members who were in favour come from 16 Departments, Schools and Faculties.

## The Proposal in Brief

The purposes of IHRE are evident in the attached proposal. According to the resource plan, IHRE will have, at the end of five years (2004/05 if IHRE starts this year) base budget support of \$1.8 million and will, over the intervening five years, have spent \$1.1 million in non-recurring funds. These amounts, and the detail that supports them are notional but it is important to provide them because the level of commitment to IHRE has to be stated to give it credibility inside and outside the University. If the 2000/01 University budget can be taken as an indication of future funding flexibility, IHRE is financially feasible, assuming it enjoys sufficient priority as budget allocations are made each year. The funding required for 2000/01 is in the process of being allocated.

The resource plan includes mention of a 30,000 square foot building - exactly how and when space would be needed remains to be determined. The administrative space required for IHRE's first period has been identified.

If Senate and the Board approve the IHRE proposal in June, then the following implementation steps will be taken.

1. Determine the membership of the Institute.
2. Establish search committees to appoint the two Associate Directors.
3. Create the Steering Committee for the Institute
4. Establish a Search Committee for the position of Director.
5. Begin to carry out the research facilitation parts of IHRE's mandate.
6. Establish the Advisory Council.

cc. J.P. Blaney  
S. Roppel



**Proposal for the  
Institute for Health Research and Education  
at Simon Fraser University**

11 May 2000

**A. Preamble**

The Institute for Health Research and Education is based on a broad conception of the term "health". The Institute will cover the whole spectrum of research approaches, methods of inquiry, levels of analysis and research perspectives that are employed by researchers engaged in exploring and understanding health and disease. Some of its researchers will investigate the social roots of disease, the organization and social dynamics of clinical practice, and the factors that control health-related institutions, systems, and policies. Research in association with the Institute will explore environmental aspects of health, the impacts of social policies and programs, the development of health policy, and the investigation of alternative approaches to disease prevention and health promotion. The Institute will support research directed to understanding biological, physiological, anatomical, biochemical, behavioural, biobehavioural, genetic and other phenomena that operate at the level of the molecule, cell, organ, individual or society. The Institute will promote research aimed at the application of health treatments and clinical interventions, technological innovations in support of discovery and understanding, health information systems, and the ways in which health services are administered, structured, and provided. The Institute has a comprehensive conceptualization of health research and it will invite all faculty engaged in health-related research to participate in its evolution.

The Institute will, over time, develop core strengths that will ensure it contributes significantly to Canadian health research. It will also be an incubator and promoter of health-related research outside of its core areas, providing researchers in these areas with the support necessary for their research agendas to flourish.

The Institute's proposed administrative structure will bring together health researchers from across the University and provide an environment to strengthen existing research and initiate and support opportunities for research that integrates researchers from across disciplines.

**B. Purpose**

The purpose of the Institute is to foster health-related research at Simon Fraser University through the development of internal research collaborations and partnerships with the external health community, the provision of structural and administrative support to SFU faculty engaged in health-related research, and the

facilitation and dissemination of health-related research. The Institute will promote, stimulate and nourish research collaborations that bridge basic biomedical, clinical and social science sectors<sup>1</sup> and incorporate multiple health research perspectives. The Institute is also charged with the development and offering of innovative graduate programs in health.

### C. Objectives

1. To encourage, coordinate and support applied, basic biomedical, and social scientific health research.
2. To stimulate dialogue and innovative thinking on emerging health issues in society among its members.
3. To create opportunities for internal health-related research collaborations which cross sectoral boundaries and which incorporate multiple research perspectives.
4. To support existing arrangements with the external health community and forge new partnerships.
5. To share expertise with individuals and communities around the world by seeking out research, education, and service opportunities for graduate students and faculty.
6. To evolve into an internationally respected Graduate School for Health Research and Education offering unique health-related graduate programming.

### D. Vision

When fully developed, the Institute will bring together researchers from all sectors of health research in an environment that will promote and foster new cross-sectoral research collaborations in addition to strengthening outstanding existing health research within each sector. Innovative approaches to health problems will be generated by undertaking research from biological, individual, socio-cultural, and population-based perspectives. The Institute will facilitate important discoveries in the development and transfer of new technologies and treatments into the community, in basic biomedical research, and in the creation of new knowledge and understanding of health issues from population-based, individual and biological perspectives. The Institute will be one of the leading centres for dialogue on health problems, issues and discoveries in Canada among academics and the external

<sup>1</sup> For the purposes of this document, health-related research will fall under at least one of the following sectors: (1) Basic Biomedical, (2) Clinical Interfaces, (3) Health Services and Systems, (4) Societies, Cultures and the Health of Populations, and (5) Technology and Health.

health community. The Institute will achieve international recognition for the discovery of factors related to the maintenance of health and the conceptualization and treatment of disease in society. It will be known for excellence and innovation in graduate programming that provides students with a cross-sectoral and multi-perspective education in health.

## **E. Proposed Areas of Activity**

### (1) Promote and Facilitate Cross-Sectoral Health Research Collaborations

The Institute will provide a forum in which the research interests, activities and expertise of its members will be publicized and networks of researchers spanning sectoral boundaries will be developed and nurtured. With its coordinating focus, the Institute will provide members with information about cross-sectoral research and funding opportunities and will seek to facilitate research projects by stimulating dialogue across sectors.

### (2) Develop Linkages to Existing Departments<sup>2</sup>

The Institute for Health Research and Education will work closely with Departments to promote and support existing health-related research at Simon Fraser University and to initiate opportunities for new research collaborations among Departments and the Institute.

### (3) Develop Partnerships

The Institute will initiate partnerships with the external health community, including the private sector, community groups, the not-for-profit sector and government at all levels, extend relationships with other institutions carrying out health research, and seek international opportunities for research collaborations and project-based inquiries, educational exchange programs, and the sharing of health-related expertise. Initially, partnerships will be directed towards research but opportunities for health programming expansion will not be overlooked and will assume an increasing level of activity as the Institute evolves towards a Graduate School for Health Research and Education.

### (4) Establish a Unique Environment for Graduate Education in Health Research

The Institute will work with existing Departments and the Dean of Graduate Studies to develop innovative cross-sectoral graduate programs at the Masters and Doctoral levels that provide students with a strong foundation in the premises and possibilities of multiple approaches to health research and to enhance understanding of their inter-relationship. These multiple approaches will span the

<sup>2</sup> The term "Departments" includes Schools and Programs.



basic biomedical sciences, methodological techniques including biostatistics, clinical applications of health discoveries, and social, cultural, historical, and population-based perspectives on health and medical treatment. Its programs will provide graduate students with the expertise required to pursue careers as highly qualified health research personnel. New and existing faculty members will have opportunities to participate in the instructional activities of the Institute through instruction in courses within their Departments that augment or complement the curriculum of the Institute and through the development of collaborative partnerships with Departments that facilitate sharing of faculty resources between the Institute and Departments.

#### (5) Develop a Plan to Attract and Support Excellent Graduate Students

The Institute will work in partnership with the Dean of Graduate Studies to develop competitive recruitment strategies to attract the highest caliber of graduate students wishing to engage in cross-sectoral health research. The Institute will develop comprehensive scholarship and financial support packages for graduate students engaging in health research within the Institute.

#### (6) Build on the Interests of Existing Faculty Members

The Institute will be built around the interests of existing faculty members at SFU. Financial and administrative support mechanisms will be developed to facilitate existing faculty members' participation in the Institute. These will aim to facilitate, promote and expand existing faculty members' research programs and to provide opportunities for existing faculty members to significantly contribute to the direction of the Institute through graduate program development and the determination of the Institute's research priorities.

#### (7) Recruit New Faculty Members to the Institute

The Institute will develop a comprehensive and proactive recruitment strategy for new faculty members. The Institute will seek to recruit faculty members who complement the existing expertise of health researchers at Simon Fraser University and whose research programs will facilitate cross-sectoral research collaborations. Such positions will be identified in consultation with interested Departments. Faculty members recruited under the auspices of the Institute will have their responsibilities determined by agreement between the Institute and interested Department(s). The Institute will support innovation and flexibility in these arrangements.

#### (8) Seek Additional Funding to Support the Activities of the Institute

The Institute will actively seek additional resources from both private and public partnerships in order to foster its mission to strive towards continued excellence

and growth as one of Canada's leading Graduate Schools of Health Research and Education.

#### (9) Disseminate Research

The Institute will create mechanisms for disseminating research. The Institute will also develop various other informational and promotional materials to communicate the Institute's activities to the public, to raise awareness about health-related research at SFU, and to raise our profile as an institution committed to health research and education.

#### (10) Organize Health Research Workshops and Similar Events

The Institute will sponsor and coordinate workshops, seminars, speaker series, and other events on health-related topics to an audience of students, faculty and the external health community.

The programs and events will be designed to meet one of the following three objectives:

- To disseminate discoveries, new technological applications, and new understandings with the academic and external health communities and to stimulate dialogue and debate with the goal of generating innovative future research ideas;
- To facilitate interconnections among SFU researchers engaged in health research and foster partnerships with external researchers; and,
- To provide a forum for the public to discuss contemporary health issues.

#### (11) Facilitate Grant Applications to Research Funding Agencies

The Institute will work in partnership with the Office of Research Services to provide its members with information about grant and other funding opportunities and will assist faculty in preparing high quality, competitive applications to the Canadian Institutes for Health Research and other funding agencies.

### **F. Administrative Structure**

#### (1) Positions

The Director of the Institute will be a full-time senior academic administrative appointment holding a faculty position in an appropriate unit who will report to the Vice-President, Academic. The initial appointment of the Director will be for a five-year term with the possibility of renewal for an additional five-year term. The Vice-President, Academic will convene and Chair a search committee for the selection of the Director.

The Associate Director of Basic Biomedical and Clinical Health Research will be an academic administrative appointment filled by a Simon Fraser University faculty member and will report to the Director of the Institute. The Associate Director of Basic Biomedical and Clinical Health Research will be appointed for a three-year term with the possibility of renewal. The Vice-President, Academic will convene and Chair a search committee for an internal faculty candidate.

The Associate Director of Social, Cultural and Population Health Research will be an academic administrative appointment filled by a Simon Fraser University faculty member and will report to the Director of the Institute. The Associate Director of Social, Cultural and Population Health Research will be appointed for a three year term with the possibility of renewal. The Vice-President, Academic, will convene and Chair a search committee for an internal faculty candidate.

(2) The Director shall have the following responsibilities:

- Chair the Steering Committee for Health Research and Education and maintain effective liaison with members of the Institute;
- In consultation with the Associate Directors, the Steering Committee for the Institute, and the members of the Institute, develop the Institute's strategic plan;
- Promote and facilitate cross-sectoral research collaborations;
- Promote and facilitate synergistic partnerships with Departments to meet the strategic planning objectives of both the Departments and the Institute;
- Develop, in collaboration with Departments, a comprehensive and proactive recruitment plan to attract health researchers;
- Develop financial and administrative arrangements to facilitate existing faculty members' research programs;
- Facilitate research grant applications;
- Organize health research workshops, seminars, and other events;
- Seek additional funding to support the activities of the Institute;
- Develop partnerships with the external health community;
- Extend relationships in health research with other post-secondary institutions;
- Seek opportunities for international collaborations and partnerships;
- Support the work of the Advisory Council on Health Research and Education; and,
- Develop graduate programs and strategies to recruit graduate students.

(3) The Associate Director of Basic Biomedical and Clinical Health Research shall have the following responsibilities:

- Promote, foster and facilitate research collaborations among researchers working in the Basic Biomedical and Clinical health sectors;

- Work with the Associate Director of Social, Cultural and Population Health Research to coordinate and promote cross-sectoral research collaborations;
- Represent the interests and needs of faculty members who are participating in research which falls within the Clinical and Basic Biomedical health sectors in the activities of the Institute;
- Work with the Director to prepare a strategic plan for the Institute; and,
- Work with the Director to develop innovative graduate programming.

(4) The Associate Director of Social, Cultural and Population Health Research will have the following responsibilities:

- Promote and facilitate research collaborations among researchers addressing health issues from population-based, community-based, socio-cultural, and historical perspectives;
- Work with the Associate Director of Basic Biomedical and Clinical Health Research to coordinate and promote cross-sectoral research collaborations;
- Represent the interests and needs of faculty members who are participating in research which falls within the Social, Cultural and Population health disciplines in the activities of the Institute;
- Work with the Director to prepare a strategic plan for the Institute; and,
- Work with the Director to develop innovative graduate programming.

## **G. Governance and Reporting**

- (1) Membership in the Institute will be open to all Simon Fraser University faculty who have an interest in the purposes of the Institute and who request membership.
- (2) The Director of the Institute will report to the Vice-President, Academic. A comprehensive annual report on the Institute's activities, funding and expenditures, will be prepared by the Director and submitted to the Vice-President, Academic.
- (3) The Institute's activities will be conducted in accordance with all University policies.
- (4) A Steering Committee for Health Research and Education (SCHRE) will be established for the Institute. The SCHRE will consist of the Director, the Associate Director of Basic Biomedical and Clinical Health Research, the Associate Director of Social, Cultural and Population Health Research, the Vice-President, Research, and 10 elected faculty members (two each from the five health research sectors: Basic Biomedical, Clinical Interfaces, Health Services and Systems, Technology and Health, and Societies, Cultures and the Health of Populations). Faculty members seeking election to the SCHRE must be a member of the Institute and must identify which of the five health research

sectors they are proposing to represent. All Institute members will vote in the election of each sectoral representative. Members elected to the SCHRE will serve a two-year term, with five of the initial appointments having a three-year term for continuity.

The Steering Committee for Health Research and Education will provide advice to the Director of the Institute on the activities of the Institute; assist the Director in the promotion and facilitation of cross-sectoral health research; and advise the Director in the development of a proposal for a Graduate School of Health Research and Education. The Steering Committee will also participate in the development and implementation of measures to encourage and facilitate excellence in health-related research by SFU faculty members.

- (5) An Advisory Council on Health Research and Education will be established to advise the Vice-President, Academic on the activities and evolution of the Institute, to promote the activities of the Institute in the broader community, and to assist in identifying resources and support for the Institute. The Advisory Council will have up to 20 members and will include representation from members of the Institute, active health researchers from British Columbia and elsewhere, health professionals, community health groups, the provincial government, the not-for-profit sector, and the private sector. The Director of the Institute, the Vice-President, Research, and the Vice-President, Academic will also be members of the Advisory Council.

# *Development Strategy*

## *Institute for Health Research and Education (IHRE)*

11 May 2000

### **Introduction**

If Simon Fraser University is to emerge as a significant centre for Canadian health research, we must find ways to create new opportunities for existing health researchers and build on our broad and substantial strengths. We must invest in leaders, in new faculty, and in infrastructure to expand and complement our current strengths. To accomplish this, we must "commit significant new resources that would allow for the recruitment of key personnel. ... Such a financial commitment would signal to the outside world that [SFU] intends to enter the market at a level envisaged by the CIHR project. ... Success locally and in changing the perception of SFU as an Institution interested in health research will require a significant commitment of resources."<sup>1</sup> This paper outlines a potential five year human resource and infrastructure strategic plan that would enable the Institute for Health Research and Education to succeed in meeting its objectives.

### **Funding Sources**

Although funding will be required from recurring and non-recurring university budgets, a variety of external sources will be fully explored to offset the financial costs to the University to the greatest extent possible. There are a number of significant new and continuing funding opportunities available for IHRE. Some of the most likely sources outside the University's operating budget include:

- designated grants from the provincial government,
- private and public funding secured by University Advancement,
- collaborations with other research-focused partners delivered by University Advancement and International Co-operation,
- national granting council funding,
- Canada Research Chair funding,
- the Canada Foundation for Innovation,
- the British Columbia Knowledge Development Fund, and
- the British Columbia Health Research Foundation.

### **Development Strategy**

This development strategy represents the ideas of the Health Initiative Steering Committee and is designed to illustrate the level of commitment that will be necessary for the Institute to succeed. One of the first tasks of the Institute and its leaders will be

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<sup>1</sup> Memo to Dr. John Munro from Dr. Stuart MacLeod dated February 21, 2000.

to develop a strategic plan that will spell out a more definite and detailed plan for the development of IHRE.

According to this development strategy, the Institute would, by the year 2004/05, have the following resources to carry out its mandate.

- 1) A Director
- 2) An Associate Director of Basic Biomedical and Clinical Health Research
- 3) An Associate Director of Social, Cultural and Population Health Research
- 4) An Advisory Council on Health Research and Education
- 5) A Steering Committee for Health Research and Education
- 6) Ten new full-time faculty members appointed collaboratively by IHRE and Departments
- 7) A base budget for supporting existing faculty with strengths in health research and teaching
- 8) A sizeable number of research personnel
- 9) Research support in the base budget
- 10) A complement of graduate students
- 11) A base budget to support the graduate program
- 12) Support staff positions
- 13) A base operating budget
- 14) A library acquisitions budget
- 15) A building of 3,115 square meters (33,495 square feet)

These resources would be put in place according to the following timeline.

#### 2000/01

During the first year of the Institute, the following objectives would be accomplished: appoint two Associate Directors, set up an Institute office (including hiring a secretary for the Institute), establish the Steering Committee for Health Research and Education, appoint an Advisory Council on Health Research and Education, commence the search for a Director, establish programs to assist in grant applications and other research project support, and begin fundraising activity. It is anticipated that approximately \$35,000 in non-recurring expenses (for office set up and equipment) and \$250,000 in recurring requirements for personnel and operating expenses would be required in the 2000/01 fiscal year.

#### 2001/02

During the year 2001/02 the Institute would be joined by its Director. It would also recruit three new faculty members, finish development of a strategic plan, develop financial and administrative support mechanisms to facilitate existing faculty members' participation in the Institute, commence graduate program planning, increase external research funding, hire an additional support staff member, and continue fund-raising efforts. The estimated recurring financial needs for this period are primarily associated with the appointment of new personnel and support for existing faculty who are affiliated with the Institute. Requirements are estimated to be in the vicinity of \$550,000 for new faculty, the Director, and support staff position. An additional \$150,000 would be needed for

an expanding operating budget, research support to existing faculty, and library acquisitions. Non-recurring costs would be in the neighborhood of \$330,000, primarily for faculty start-up. Should the University decide to use any of the Canada Research Chairs for IHRE, then the estimated recurring personnel costs identified above would be significantly reduced. CFI funding may also be a potential source to offset the costs associated with start-up for new faculty members.

#### 2002/03

As the Institute, in this scenario, begins its first offering of graduate programming, the primary activity of the Institute would be further development of its research and educational activity. Three new faculty appointments are envisioned for 2002/03, bringing with it an expected \$450,000 in recurring faculty salary costs, research support and costs of developing graduate programs. Non-recurring funding of approximately \$310,000 would also be required for faculty start-up. Research funding is expected to increase as the complement of faculty grows and other external fund-raising would help support the goals of the Institute.

#### 2003/04

Faculty recruitment would continue in 2003/04 with the appointment of four new faculty members. The Institute would also see a sizeable increase in its graduate enrolment and would begin developing a proposal for a Graduate School for Health Research and Education. A fund-raising goal of \$2 million is expected to help meet the financial operating requirements of the Institute. The new recurring costs envisioned for 2003/04 are in the area of \$400,000 and correspond to new and continuing faculty salary costs. As in previous years, significant non-recurring funding (approximately \$415,000) would be required for faculty start-up.

#### 2004/05

By year five of the Institute's existence, all major financial requirements would have been met and the Institute should be in a position to operate without additional financial resources.

In total, investment in the Institute for Health Research and Education would amount to approximately \$1.1 million in non-recurring equipment and start-up funding, as well as \$1.8 million in recurring faculty, administrative, support staff and other operating costs. External avenues would be explored fully to help offset these financial requirements for this new initiative at Simon Fraser University.

#### **Space**

In order to launch an initiative of the magnitude of the Institute for Health Research and Education, infrastructure and space requirements must be considered at the outset. After five years of operation, it is envisioned that the Institute (by then the Graduate School of Health Research and Education) would require a dedicated facility in the magnitude of 3,115 net assignable square meters (33,495 square feet). Fundraising by



the University Advancement Office as well as applications to the Canada Foundation for Innovation would finance this facility.

Until such time as a new building was in place, the following phased space arrangements could meet its needs. In the first year of the Institute, 2000/01, offices for the two Associate Directors and an Institute secretary has already been identified. By the second year, however, the addition of faculty members and research laboratories would exceed the space available around the university campus. It is proposed that space be leased from Discovery Parks on an incremental basis for years 2001/02 through 2004/05, or until such time as a dedicated facility is available.

## *Background Paper*

### *Institute for Health Research and Education (IHRE)*

11 May, 2000

#### **Health Program Development at Simon Fraser**

Simon Fraser University has a long history of health research and education. Two of the more visible health-related programs are in the School of Kinesiology and the Gerontology Research Centre and Programs. In 1970 Simon Fraser University was one of the first two universities in the country to establish a Department of Kinesiology whose approach was to study human movement as a discipline rather than as part of physical education. The Gerontology Research Centre was established in 1982 to conduct research on topics relating to aging and the aged, foster and facilitate research by providing consultation and technical assistance, serve as a central source of information about aging and the aged, and promote the use of existing knowledge. Health research activity has also existed for many decades in other departments across the University. Its importance has increased, especially in the last ten years.

In June 1991, a Task Force on Applied Health Programs was established to advise the University on program directions and strategies for developing new programming in health. In May 1994, the Task Force tabled a comprehensive report recommending the development of a new unit for the delivery of a Health Studies Program at the undergraduate and graduate levels with five areas of focus: Human Growth and Development; Health as Health Promotion/Disease Prevention; Health, Society and Social Policy; Socio-Cultural Aspects of Health and Healing; and Community Health Services Management. The Senate Committee on Academic Planning supported the general direction of the report and recommended the establishment of an Applied Health Programs Planning Committee. However, a decision was made in June 1995 not to proceed because there appeared to be neither an obvious champion to lead the programming initiative nor a stable funding source to ensure successful implementation and continuation of new health programs.

However, interest in expanded health programming has continued. In May 1996, the report of the Presidential Committee on University Planning (PCUP) noted considerable interdisciplinary interest in health at both the undergraduate and graduate levels and recommended that such opportunities should be actively pursued. Four years later we again have the opportunity for expansion of health-related research and teaching at Simon Fraser University. Last summer Simon Fraser University decided to explore the opportunities for expanded research and teaching in health-related fields once again. A consultant<sup>1</sup> was engaged to assist the University in evaluating its prospects for launching a comprehensive Health Initiative and an internal Steering Committee<sup>2</sup> was convened to manage and direct the project.

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<sup>1</sup> The consultant is Dr. Stuart MacLeod, former Dean, Faculty of Medicine, at McMaster University, and current Director of the Father Sean O'Sullivan Research Centre at St. Joseph's Hospital in Hamilton.

<sup>2</sup> The following individuals form the Steering Committee: Jock Munro (Vice President, Academic, Chair), Bruce Clayman (Vice President, Research), John Dickinson (Kinesiology), Norbert Haunerland (Biological

Over the past six months the Steering Committee has been actively working to develop the Health Initiative at Simon Fraser University. Its most important activities have been an extensive self-study of health-related research of faculty, development of a thematic framework for organizing interdisciplinary health-related research, a workshop with interested faculty members to discuss the focus and shape for the future of health-related research, and the development of the attached proposal for an Institute for Health Research and Education and its review by interested faculty members. At the same time, the first round of competitions for funding associated with the new Canadian Institutes of Health Research (CIHR) were completed.

### Opportunities

According to the President of SSHRC, Marc Renaud:

Canadian health research is entering a brilliant new era - one where biomedical researchers work with sociologists - where clinicians collaborate with economists. I encourage you to enter this new era by participating ....<sup>3</sup>

In fact, in recent months a number of new funding opportunities have been introduced that reinforce the timeliness of the Health Initiative. These include new federal funding to the three research granting councils, the increased investment in health research through the creation of the Canadian Institutes of Health Research (CIHR) to replace the Medical Research Council of Canada, the Canada Research Chairs program, and the extended mandate of the Canada Foundation for Innovation.

### Canadian Institutes of Health Research

The CIHR is of particular interest to the proposed Institute. It will deliver a broad range of crucial health research funding and support activities. According to its mission overview, CIHR's "program design will broaden the reach and scope of health research, integrate the work of researchers across the difference sectors, address gaps in the current funding programs, promote knowledge gain through interdisciplinary approaches and partnerships, translate research findings into information and knowledge for a wide range of user groups, and promote applied clinical research to inform evidence-based practice and decision making".<sup>4</sup>

The identification of substantial funding for the creation of new Chairs in health areas and "career research awards" which provide salary support and operating grant support over the course of faculty members' careers at an institution are one measure of increased research support. The CIHR also established a series of transition programs, most importantly for SFU researchers the CAHR (Community Alliances for Health

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Sciences), Stacy Pigg (Sociology & Anthropology), Gary Poole (Psychology), Danny Shapiro (Business Administration) and Sue Roppel (Office of the Vice President, Academic).

<sup>3</sup> Marc Renaud, e-mail to Vice Presidents, Academic of Canada, October 22, 1999.

<sup>4</sup> "Proposed Program Structure for the Canadian Institutes of Health Research: A Working Paper of the Programs Sub-Committee", presented to the Interim Governing Council of the Canadian Institutes of Health Research, September 1999.

Research) program and the IHRT (Interdisciplinary Health Research Teams) program. In the first round of funding competition, Simon Fraser University submitted seven applications for CAHR grants, and one application for an IHRT grant. Decisions regarding these applications should be announced this month. Future funding competitions in these areas should be able to attract significantly more applicants with longer lead time and an organizational structure to assist the development of Interdisciplinary Health Research Teams.

### Canada Research Chairs

The 2000/01 Federal Budget confirmed \$900 million in recurring funding to establish and sustain 2,000 Canada Research Chairs by the year 2004-05. "The Canada Research Chairs will strengthen Canada's academic research base and help Canada play a leading role in natural sciences and engineering, health, and the social sciences and humanities."<sup>5</sup> While Simon Fraser University will seek Chair positions for a variety of strategic initiatives, the Institute for Health Research and Education would be an attractive location for some Canada Research Chairs.

### Canada Foundation for Innovation

A second element in the federal budget is continuing one-time funding for the Canada Foundation for Innovation. This funding is to be focussed on creating "new opportunities for established researchers and promising new researchers" as well as "meeting the infrastructure needs of the new Canada Research Chairs initiative" outlined above. The integration of the CFI and Canada Research Chairs suggests that a proposal such as the Institute for Health Research and Education which will involve both people and infrastructure would be an extremely attractive candidate for combination funding envisioned in the Federal Budget. It is also significant that to date, "about half the money awarded by the Foundation has been spent on health research".<sup>6</sup>

### Provincial Funding

While the national funding environment is extremely favourable for launching a new Institute for Health Research and Education, the provincial funding environment has been less supportive. Since 1992, the provincial government has increasingly eroded its support for the B.C. Health Research Foundation (BCHRF). In response, representatives from BC universities, teaching hospitals, community health organizations, the biotechnology industry and major funding agencies have formed a Coalition for Health Research in British Columbia in order to take proactive steps to propose new provincial government funding priorities in the health area.

Earlier this year, the Coalition sponsored three workshops designed to draft a comprehensive proposal to the BC government to build research capacity in British

<sup>5</sup> "The Budget Plan 2000", tabled in the House of Commons by the Honourable Paul Martin, P.C., M.P., Minister of Finance, February 28, 2000, p. 110.

<sup>6</sup> "The Budget Plan 2000", tabled in the House of Commons by the Honourable Paul Martin, P.C., M.P., Minister of Finance, February 28, 2000, p. 110.

Columbia. In preliminary white papers arising out of these workshops, the Coalition seeks to identify "a strategic plan that provides for stable, long term funding of support programs designed to build research capacity".<sup>7</sup> The three areas of concentration within this strategic plan are: (a) human resources training, recruitment and retention, (b) research infrastructure, and (c) new opportunities. Many of the recommendations being drafted by the Coalition will be supportive of the objectives identified for IHRE.

### Other Developments

One imperative for current and proposed health research funding programs is to align initiatives with the Canadian Institutes of Health Research. This is a most important consideration for funding success for the proposed new. The principles of the CIHR are also very supportive to the type of health research currently underway at SFU.

Other Canadian universities are developing health-related programs and institutes compatible with the CIHR vision and many are putting significant human and financial resources behind such efforts. Recent examples include:

- The University of British Columbia recently advertised for the position of "Director, Institute of Health Promotion Research"<sup>8</sup>. One of the primary responsibilities of the Director will be to "lead the Institute to foster collaborative research and to attract stable funding".
- The University of Saskatchewan has advertised for a "University Coordinator of Health Research". Among the responsibilities of the University Coordinator will be to "play a lead role in Saskatchewan's response to initiatives of the CIHR".<sup>9</sup>
- In January, 2000 the University of Northern British Columbia tabled a proposal for a British Columbia Rural and Remote Health Research Institute "to enhance the health of people in rural and remote areas of British Columbia and Canada through research and through enhancing the capacity for evidence-based health planning".<sup>10</sup> This proposal includes the addition of two new Research Chairs (one for population and community health research, and one for health research and policy development), support staff and infrastructure support. The proposed operating budget for the first five years is \$ 2 million.

As our external consultant has advised, "timing is now critical to this venture ... there is a window of perhaps 12-15 months in which SFU [will] need to establish itself as having a new orientation to health research".

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<sup>7</sup> "White Papers Arising from Workshops", British Columbia Health Research Foundation, February 24, 2000, p.2.

<sup>8</sup> Advertisement placed in "University Affairs", Association of Universities and Colleges of Canada, February 2000, page 50.

<sup>9</sup> Advertisement placed in various newspapers across Canada as well as on the workopolis.com job site.

<sup>10</sup> University of Northern British Columbia Proposal for a British Columbia Rural and Remote Health Research Institute at the University of Northern British Columbia, Prince George, British Columbia, January 2000.