

Mental Health Research and Evaluation Expert Committee

Priority Research Areas

<p>Theme A: Building capacity in the gaps</p>	<p><i>Research which can fill significant gaps and build the capacity of certain sectors to undertake research.</i></p> <p>To date, the research literature is limited in relation to these priority areas.</p>
<p>Priority Area One Psychosocial rehabilitation</p>	<p><i>Research into the practices that help sustain people living in the community with psychiatric disability.</i></p> <p>Priority research in this area may focus on a broad range of themes as they relate to the health and wellbeing of people with a mental illness, including accommodation, vocational, social skills, recovery models, strengths models and social relationships.</p> <p>The intention of a focus on psychosocial rehabilitation is not only to strengthen research activity, but to build the research capacity of the non government organisation sector.</p>
<p>Priority Area Two Consumer-led research</p>	<p><i>Building capacity for consumers and carers to lead research.</i></p> <p>This priority focuses on the importance of research conducted by and with consumers as opposed to research conducted on behalf of consumers, with consumers as research subjects. This focus is concerned with maximising an active consumer contribution to the community of knowledge and building capacity to enable research that reflects a diversity of consumer interests and abilities.</p>
<p>Priority Area Three Inter-sectoral linkages</p>	<p><i>Research examining the service and program level relationships across specialist mental health and health, welfare and other sectors.</i></p> <p>Dual diagnosis/comorbidity</p> <p>Research concerned with issues arising from the co-occurrence of mental illness and any one or more of the following:</p> <ul style="list-style-type: none"> • drug and alcohol, intellectual disability, acquired brain injury, medical illness. <p>Service linkages</p> <p>To date there has been considerable work examining the interface between mental health and primary care providers. Further work is required in the area of partnerships with drug and alcohol services, housing, protective services, police etc, with a focus on:</p> <ul style="list-style-type: none"> • care transition • collaborative care models • capacity building, particularly in first contact and generalist services.

<p>Theme B: Building innovations in service</p>	<p><i>Research activities, which further service development.</i></p>
<p><i>Priority Area Four</i> Systems evaluation</p>	<p><i>Evaluation of existing systems and services.</i></p> <p>Evaluative effort can be considered at two levels:</p> <p>Intra-program evaluation – research with an emphasis on the efficacy of particular service elements and practices within specialist mental health, including new and developing areas of service delivery such as early psychosis and PARC services.</p> <p>Inter-program evaluation – research concerned with how service elements individually and collectively contribute to the efficiency and effectiveness of the specialist mental health service system. Can include the benchmarking of like services within the system.</p>
<p><i>Priority Area Five</i> Translational research</p>	<p><i>Research concerned with the effective translation of research findings into program design, delivery, quality and practice change.</i></p> <p>Activities in this priority area can include:</p> <ul style="list-style-type: none"> • the translation of research into well documented and evaluated programs • evidence based approaches to influencing practice change and workforce development • development of evidence based best practice models • continuous quality improvement processes