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The International School on Research Impact Assessment

ADVOCACY 'Making the case' for research

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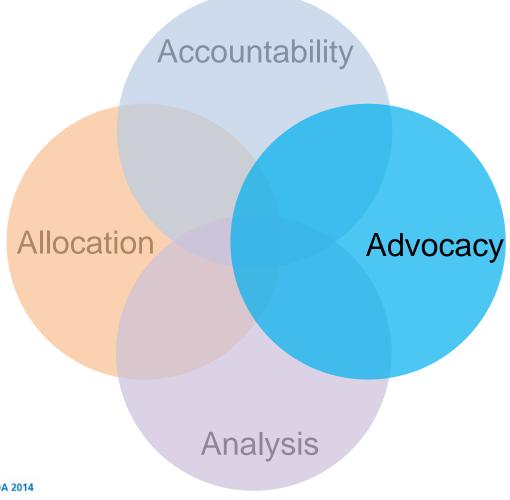
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Why assess research impact?





Learning outcomes

- To become familiar with patient advocacy and research advocacy approaches and achievements
- To know when and where to use an advocacy approach
- To become familiar with the concepts that are typically being considered in an advocacy approach

Contents

- Why use advocacy? When to use advocacy?
- Primary drivers of research and Research Impact Assessment (RIA) audience
- Considerations for using RIAs for advocacy
- Approaches and examples of RIAs
- Key messages

Why use advocacy?

- To make the case for (more) support in research
- To secure funding in context of austerity
- To make the case for research of quality (avoid waste)

When to take an advocacy approach?

- Charity wanting to get additional donations
- Redefinition of government priorities/strategies
- Government funder looking to secure funding in austerity
- Changing funding cycles
- University wanting to take a strategic reorientation
- Riding on public opinion



What are the primary drivers of research?

'Curiosity' driven (advancing knowlegde)

- Impact factor
- Number of indexed publications
- Citations

Meritocratic (prestige)

- Number of Prizes, awards, Doctor Honoris Causa
- Professional carriers

Capacity driven

- Number of PhD
- Number of researchers

Market-driven (profits)

- Lisensed patents
- Number of spin-off and start-up
- New drugs introduced into market
- Company profits

Economic –driven

- Spillover
- Added value
- Jobs created
- Income from taxes

Social / health driven

- Cases
- Health gain (QALY)
- Net monetary benefit (cost-benefit)
- ▼Time lag (long term)



CONSIDERATIONS FOR USING RIA FOR ADVOCACY



Global heterogeneity



Local history on using RIA, in terms of:

- Previous studies carried on and implications
- Applications of studies
- Demand / need for such studies

Contextual R&D policy

State of the art in R+D policies

Resources for advocacy studies

- Information
- Skills
- Capacity

Receptivity of the environment

- Contextual capacity to uptake research results into impact
- Consider low and middle income countries



Considerations according to target audiences

General public

- Doing RIA might not be the best strategy
- 'Proximity to disease' and solidarity are key drivers for donors
- Donations might have little connection with the economic cycles
- Patient involment might help accelerating impact

Public funder

- Aim to demonstrate social impact
- Social impact e.g. in health, education, sustainability, capacity building, job creation, value added, spillovers
- Public funding is usually countercyclical. Therefore advocacy usually needed in times of austerity

Research user body (e.g. Health services)

 Focus on demonstrating the role of science in recognised changes

Industry

- Need to use an 'industry' approach
- Economic return
- Specific spillovers, licensed patents

Academia

- Focus on benefits of building capacities
- Benefits of developing research carriers
- Concept of absorvative research

Charity governing board

Social impact focus



Qualitative evolution of advocacy





Increasing value / reducing waste

Demonstrating economic and health value

Making the case for research funding

 Advocacy evolved from demonstrating economic and health gains to advocate for research that is efficient (closing the rellevance gap)

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APPROACHES AND EXAMPLES OF RIA

Common approaches, methods and concepts being estimated

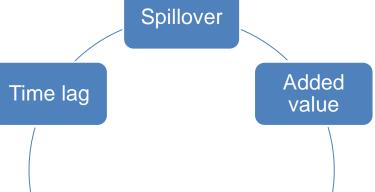
'Top-down' approaches

- US "exceptional returns" study (Murphy & Topel 2003)
- Australia "exceptional returns" (2003, 2008, 2011)

'Bottom-up' approaches

- Health and economic benefits of CVD and mental health in the UK
- Health and economic benefits of cancer from the UK
- Economic benefits from Northen Ireland





Non-

monetary

benefit

Methods

- Case studies
- Economic rate
- Econometrics
- Bibliometrics
- Cost benefit analysis

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gain (Qaly)

Health

13

Jobs

created

Case example (1): Short term economic impact in Catalonia



DIRECT IMPACT

- Output: 34,4 M€
- Gross Value Added: 18,8 M€
- Employment: 572 jobs
- Fiscal revenues: 4 M€

INDIRECT IMPACT

- Output: 17,6 M€
- Gross Value Added: 6,5 M€
- Employment: 93 jobs

INDUCED IMPACT

- Output: 16,1 M€
- Gross Value Added: 8,3 M€
- Employment:169 jobs
- Fiscal revenues: 6,6 M€

68,1 M€
activity
33,6 M€ de
gross value
added
834 jobs
10,6 M€ fiscal
revenues

MONOGRAFICS

Central de

Resultats
Impacte econômic de dos

grans instituts d'investigació

 Input output tables: short term spillover (multiplier) of biomedical research institutes: 2



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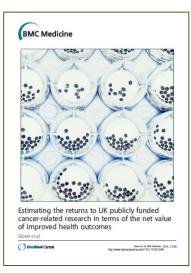
Case example (2): Northern Ireland Health Research



- 2013 study funded by the Northern Ireland Dept.
 Health, Social Services and Public Safety (DHSSPS)
- Were interested in showing that funding invested in research has value and should be maintained
- Needed to be able to show the economic benefits gained through providing government funding in a small research environment
- This study used surveys, case studies and country analysis (document review)
- The study found that every £1 invested by DHSSPS leveraged £4.14 for research projects
- Also noted the comparative benefits against other countries



Case example (3): Estimating economic and health benefits of cancer research in the UK



- Study commissioned by multiple UK research funders
- While the stated aim of the study is around accountability for public funds, the approach and 'bottom-line' findings are advocacy tools
- This study took place in an austerity funding environment where evidence of financial returns on investment is a valuable tool to maintain funding
- Study used a combination of methods (including bibliometrics, health economics and economic analysis)
- Each £1 invested provides annual return of 40% to UK

Spillover around 33%

Health gain: 7-10 %

Timelag: 17-19 years

Map of England

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Key messages

- There is a time and place for advocacy RIAs
- That time and place is determined by a number of factors (target audience, reason for advocacy, etc.)
- Doing RIA is not always the best strategy for research advocacy
- There are certain aspects to take into account when doing advocacy RIA (method, design, understand stakeholders, etc.)
- There are examples already that people can build on for their own advocacy RIA
- Advocacy is also oriented to improve research efficiency and reduce waste

Thank you!

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