Personal reflections on my road into research.

When I qualified in podiatry, research was something that other people did. There were a few early researchers in the field but most were self taught or had come to study and practice podiatry as a second career bringing their previously scientific training with them.

My first experience of research came when I spent time with VSO in India. My project was a leprosy hospital where many of the patients became permanent residents. This, despite the fact that in most cases leprosy was treatable and once under treatment was not longer infectious. I was concerned because I felt that we had to do something to enable patients to return to society, so I wanted to find out what was preventing them from leaving the hospital. I designed a very amateurish questionnaire and with help from the staff team and some patients we undertook structured interviews with patients. The findings revealed not surprisingly the main limiting factor was in fact being able to earn a living outside the walls of the leprosy hospital. This enabled us to put bids in to the State and National Government agencies for funds to support patients returning to society and enabled them to start small businesses. I think this made a small difference to the lives of some people whom might otherwise have stayed in the hospital for the rest of their lives. The point of this example was that somehow I stumbled on the application of research and for me this has always been for me one of the great values of any enquiry.

My next foray into research was when I had the temerity to decide to undertake a PhD. I was in fact the first Podiatrist to take this step. It left me feeling very exposed, as failure at this level is very public. However, I soldiered on and learnt a great deal through the process. I learnt that research is a privilege, it isn’t an opportunity that everyone has. This made me feel very responsible, I had to make sure that what I did was of value to my profession and to patients, I also felt responsible to future researchers. As I undertook my literature searches and reviews I was thankful to those who had researched in the same field before me. I was grateful that they had left me stepping-stones so that I could move forward. This taught me the importance of publication leaving stepping-stones that others could use as they progress. This is how professions grow and expand, how services improve and how human beings progress. It is no smaller than this and it is therefore a responsibility that anybody who sets out to undertake research must shoulder.

Finally, I would like to mention the importance of undertaking research in health that has value and benefit for patients. When I was working in New York in a busy city hospital I realised that unless we involve the patients in our plans our research was not going to be successful. If the topic wasn’t of value to them they were not likely to wish to participate in it, which means we wouldn’t have subjects, furthermore it was a waste of our resources to undertake studies that were not going to improve the lives of our patients. I started a “Patient Provider Think Tank” that brought together a small group of hand picked patients and four researchers. The patients did more than help us chose research they also participated in designing it, analysing data and disseminating findings. The difference the engagement of patients made was significant, our clinical trials were well populated and other studies became more relevant to the work of clinical colleagues.

The moral of the story is don’t undertake research in isolation, do work with others and never forget the end user, that is other researchers, patients and society.

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