

CURRENT GRANT WRITING...

By Prof. Julie Redfern



Grant writing season in Q1 of 2021 has been hectic.... As a research-focussed academic I am looking forward to returning to some sort of normality. In a 'fellowship year' it is has been a tough gig. I could not count the number of times I have checked word and character counts and looked up publication metrics. I have been crafting and revising (over and over again) written pieces about impact, consumer engagement, how things will impact policy etc etc etc. Then there is of course scientific quality, collaborations and team skills to perfect. Then there are the amazing people who have helped me with reviewing and refining and managing taking on the amazing feedback from colleagues. From my perspective it is getting more complex and time-consuming. I don't think I am alone.

Recent overhauls by NHMRC and Heart Foundation funding schemes has seen a shift in the required content, skills and approaches. I am 100% supportive of a shift impactful research that involves end-users.

However, this has created new challenges for researchers. I have spent countless weekends, nights and early mornings creating written pieces, analysing metrics, deciding what to include (what not to include), trying to make a complex program of research and detailed methodology meet tiny word counts. There is also support and mentoring of early career researchers (some for the first time) to help them to navigate the complex grant system and writing requirements. Job security is at an all time low in academia and the pressure does at times feel intense. I have asked myself "why" and I have considered giving up many times....

I don't think I am alone....

ARE THERE POSITIVES?

... I DON'T THINK I AM ALONE

There definitely will be positives for those who succeed but the vast majority will not. Many great ideas will not be supported and that's a shame. I have tried to reflect on what skills make a successful contemporary researcher. I am sure many will disagree, but I propose they are creativity, resilience and a deep desire to make a difference to health. Creativity is vital to coming up with new ideas, being open to 'shaking things up', creating new ways of to solve problems and overcome hurdles as we deliver ground-breaking research. For example, creativity is needed if we are to discover new biological mechanisms, test effectiveness of new medicines/interventions and to navigate the complex ethical requirements for data linkage and implementation. Resilience is vital because it enables researchers to keep 'pushing on' and overcoming barriers while facing defeat (and rejection). Most importantly, for me, it is a deep desire to make a difference and improve health. After all, that's why I became a health professional in the first place. It is the one thing that keeps me going and also keeps me grounded.

There are many great researchers among us, there are institutional supports, librarians, online services and many more. Each will have a different focus and a different view and that adds to the complexity. Ultimately, my advice is to strive to make a difference, believe yourself, believe in what you are doing and be your own best critic. Be proactive about getting feedback and share stories of success and failure. As for the applications, we should also share feedback and suggestions for improvement with funding agencies.

Now it's time for me to get outside and enjoy what is left of Autumn. These are just my personal thoughts and reflections but

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Julie Redfern is a Professor of Public Health in the Faculty of Medicine and Health at the University of Sydney. A practicing physiotherapist, Julie holds a NHMRC Career Development Fellowship, is Co-Chair of the CSANZ Clinical and Preventative Cardiology Council, a Member of Education Trust and ACOR Board. From 2009-2016 she was the Chair of the Allied Health Council and represented that group on the Board for those 6 years. She has been awarded over \$30 million in peer reviewed grants and published over 180 peer reviewed manuscripts in high-ranking journals.

In 2020 Julie was Chief Investigator of the team who was awarded an inaugural \$5 million NHMRC Synergy Grant for a project that will reform cardiac rehabilitation and care for people with heart disease.

The project: Solving the long-standing evidence-practice gap associated with cardiac rehabilitation and secondary prevention of coronary heart disease (SOLVE-CHD). The goal of the project is to modernise after-hospital care, provide the best quality support to more patients and reduce the number of people who die or have to be readmitted to hospital.