This is a particularly interesting topic in light of the many social, economic, and organizational policies that could be discussed. This session will focus on how child health research related to critical health determinants should be structured, the content of interdisciplinary research, and how to develop and sustain collaborative American Academy of Pediatrics and Royal College of Paediatrics and Child Health research initiatives.

One goal of research is to determine whether specific interventions improve child health outcomes. However, there may be differences in research strategies depending on whether we are seeking to determine what works or we wish to determine whether interventions developed in research settings can be successfully implemented in the “real world” of practice. Researchers who are interested in developing and testing new innovations may need to design their studies differently from those who are interested in improving delivery systems. For example, in studies designed to determine whether a new technology is effective, the researcher seeks to focus on 1 specific change and eliminate confounding variables so that the impact of the new technologic approach can be quantified accurately. In studies that seek to implement new approaches within delivery systems, the question is how to change the system so that it can accommodate the increased complexity associated with the new technology. Implementing new technology depends on our ability to continuously evolve current health systems.

A recent Institute of Medicine report on the US health care delivery system may provide background regarding this point. The report focuses on the need to change health care delivery systems so that new knowledge can be introduced into practice. We are excellent at producing new knowledge. For example, there has been an exponential growth in the number of published randomized trials over the past several years. Sequencing of the human genome was completed in less than half the anticipated time, but the products of new knowledge take too long to be translated into clinical care. The degree of change in the clinical delivery system is related to the complexity of the new technology. For example, the introduction of the pneumococcal vaccine will require many fewer changes in the health care system than changes that might be required to implement a community-wide injury prevention model. What we are describing may be analogous to engineering research that seeks to improve production systems. This typically involves informed observation of the system as sequential changes are made. It usually does not involve randomized trials.

As our speakers present, let us consider the issue of how to match the research design to the meeting goals of advancing equity, decreasing disparities, and improving child health outcomes. Stuart Logan, MB, ChB, MSc, FRCPCH, will pose and discuss 3 questions: why continue to do research, where should the research efforts focus, and how best can we facilitate the development of research? Sarah Stewart-Brown, BM, BCh, MA, PhD, FRCPCH, FFPHM, will discuss emotional and social well-being as key determinants of health and social inequalities and potential approaches to intervention that warrant research. Robert Greenberg, MD, FAAP, will finish the session with a presentation of an agenda and framework for future joint Royal College of Paediatrics and Child Health-American Academy of Pediatrics research.

REFERENCE
**Session 7 Introduction: Research in Relation to Equity in Child Health**

Leslie Davidson and Peter Margolis

*Pediatrics* 2003;112;758

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