

Social sciences meet basic sciences in new era of health-services research

Health Canada's National Health Research and Development Program (NHRDP) closed its doors Dec. 31,

glitterati (well, perhaps the *Who's Who*) of Canadian health-service research. The NHRDP's work is remarkable because when it was founded there was virtually no health-services research in Canada. No avenue for training young investigators, which already existed for research in the basic and clinical sciences, had been developed 30 years ago. Today there is a comprehensive research and training program that has been internationally recognized and emulated.

The event at Queen's was attended by most of the current NHRDP award holders. One of them, Dr. Stephanie Strathdee, epitomizes NHRDP achievements. In a passionate and personal address, she pointed to the early support she received as an master's student at the University of Toronto and to the current partial support she receives as an associate professor at Johns Hopkins University.

In 2001, NHRDP funding for research and training will be just one of several functions of the new Canadian Institutes of Health Research (CIHR, www.cihr.ca). It will bring researchers

from different disciplines together in topic-specific virtual institutes. The result will be researchers from widely different disciplines — molecular medicine and political science is one example — coming together in the same institute. (For a full list of CIHR institutes, see page 254.)

Those attending the conference applauded Health Canada for its work but at the same time vented their concerns about CIHR's ability to maintain and further develop health-services research in Canada.

The Canadian Health Services Research Foundation used the occasion to reveal the winners of its first annual Health Services Research Advancement Award. Dr. David Naylor, dean of medicine at the University of Toronto, was named first recipient because of his long-standing efforts to advance health-services research and training. Meanwhile, Drs. Richard Lessard and Denis Roy accepted an award on behalf of the Direction de la santé publique of the Régie régionale de la santé et des services sociaux de Montréal-centre for their attempts to bring scientific evidence into the planning of health services in greater Montreal. — *John Hoey, CMAJ*



Dr. Stephanie Strathdee: a career recipient of NHRDP funding

ending a successful 30-year run. In late November those 30 years were marked during the Health Policy Research Nexus Conference at Queen's University in Kingston, Ont.

It was a great show that celebrated a truly remarkable achievement, with guests and speakers representing the

If you can't beat 'em, join 'em, BMA decides

For the first time in its history, the salaried head of the British Medical Association is a lawyer. Jeremy Strachan, an executive director with Glaxo Wellcome, was named general secretary of the BMA in December. A physician has always filled the post, the highest unelected position in the 120 000-member association.

The *Independent*, one of England's leading papers, says "the appointment of a barrister is significant at a time when doctors are under fire from the government and public, and threatened with new regulations on their conduct and performance."

Strachan's selection may point to a general broadening of the skills being sought by medical organizations. The CMA, which is currently seeking a new secretary general—CEO (see *CMAJ* 2000;163[12]:1663), says the position requires an "MBA degree or equivalent experience," and either a medical degree, master's in health administration or master's in health science, plus association or administrative experience. — *Patrick Sullivan, CMAJ*

CMA membership enjoys growth spurt in 2000

For the first time in its 133-year history, the number of physicians, residents and medical students belonging to the CMA has surpassed the 50 000 mark. The total of 50 279 members, which was announced Dec. 6, 2000, represents an increase of more than 1000 members a year in each of the last 5 years.

The CMA attributes the increase to several factors, including an aggressive recruiting campaign and increased emphasis on physician advocacy, particularly on Parliament Hill. Additional factors may include the success of its financial subsidiary, MD Management Ltd., health-related efforts like its *Determining Medical Fitness to Drive* guide and the relatively high profile of publications such as *CMAJ*. The CMA is the largest medical organization in Canada. Second largest is the Royal College of Physicians and Surgeons of Canada, which has 35 000 members.