Negotiating a transport and health, researcher-practitioner partnership

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A partnership

Research team

The community

Auckland Transport (AT)

This presentation
Interviews: context and methods

• First interviews undertaken when frustrations high

• Interviewer not previously involved in project
  • First round: Jan-Feb 2015
  • Second round: Mar-May 2017
  • Nine interviews at each time point
Timeline conflicts

‘They [the research team] spent a lot of time gathering the data, doing consultation, doing scheme designs which is more than a year and a half and they thought in six months we could do the design and construction, which is really very disappointing.’ (T)

‘Right now obviously we’re tracking a date but really from an AT perspective we’ll deliver when we can deliver.’ (T)

‘I see that project in the context of other great projects...’ (T)

T: transport agency staff member; R: researcher
Difficulty innovating

‘...there's definitely a tension where AT are pushing to just move on to the next phase, get it done, deliver, deliver, deliver, while the research group are trying to redesign, or do quality assurance or things like that’. (R)

‘When you employ consultants and professionals ... what all their training tells them is you’re supposed to put something that's tried and true and tested versus using people as guinea pigs’ (T)

‘...If you step outside of that boundary, you're exposed to those legal elements... it can be a personal prosecution’. (T)
Budget expectations

‘They [the research team] seem to perhaps not appreciate how constrained funding is and maybe they take for granted that we will deliver this project for them without compromising on some of the deliverables.’ (T)

‘We’re sort of pushing hard deliberately and that’s given us all sorts of benefits’ (R)
‘My sense is that AT works in a different world... their work is contingent on so many factors that are not directly under their control or only just under their control, that they don’t have tight timeframes... they are accustomed to working to a sort of deadline plus X kind of world where the X is difficult to pin down until you get closer to the deadline.’ (R)

‘...the kind of system inertia, and rules that come right down from a national level to a local level, that mean that innovation is really difficult...’ (R)
Benefits of consultation

‘I’m hoping that one of the things we’ve established is that the first thing is to actually go to the community with the issues, not with the solution.’ (R)

‘Getting that understanding of the community's future desires has really strengthened [the project] and that's something that we don’t do on the scale that the research team has undertaken.’ (T)

‘...[it's] interesting when you get feedback from people who are not sort of traffic engineers...[they] just throw all sorts of ideas at you, lots of them being ‘well hell no we’d never do that type of thing’ to some really good ideas.’ (T)
Feeding back interview findings

• Report distributed to interviewees, steering group

• A ‘revelation’ to those involved

• A watershed moment for the collaboration – coinciding with funding success
Second round of interviews

• Post-construction
• Turnover since beginning of project
  • Auckland Transport project team: 100%
  • Research team: 0%
• Reinforced many earlier themes
Conclusions

• All parties believed in the value of the project and its health rationale, and are proud of the outcome
• But the logics underpinning the partners respective ways of working were in conflict
• Actors within the collaboration were not initially able to discern the drivers of conflict
• Innovation stymied by standardised regulatory processes and professional norms that actively maintained BAU
A ‘wish list’, if we could start over

• A champion within AT, with population health focus
• A memorandum of understanding to set out expectations, timelines, budget
• Streamlined procedure for new street treatments
• Better understanding of constraints at outset
• Orientation for transport agency staff new to project – particularly population health focus
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