The Charles Perkins Centre: a new model for tackling chronic disease

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# Like all animals, humans have evolved to minimize energy expenditure and maximize accessibility to safe and palatable food



# We have built a world that meets our ancestral 'heart's desire' ... and is killing us



- Food production and supply systems maximize the qualities missing in our ancestral environments.
- Cities, homes and workplaces designed to allow minimal energy expenditure.
- Economic systems are designed to value wealth over health.
- Companies that sell us what we want prosper; even if that means selling us foods that degrade health.

Prevention is better than cure, yet makes little profit or garners votes in the short term.

### Why is a University well placed to offer solutions?

- Endless source of clever young people at their peak of creativity
- Huge multidisciplinary potential a one-stop-shop
- But need to break down disciplinary silos to gain depth and breadth

#### What was CPC asked to deliver for the University?

- Bring University together across its disciplines and locations and collocate critical research mass to address this major societal problem
- Build new collaborative, multi-disciplinary research and education with impact
- Design, build and populate the CPC Research and Education Hub

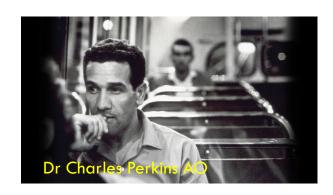
#### And for society - our mission:

To ease the burden of obesity, diabetes, cardiovascular disease and related conditions by generating collaborative research and education that translates into real-world solutions

"...health of the nation and its children is inextricably linked to a complex web of influences..."

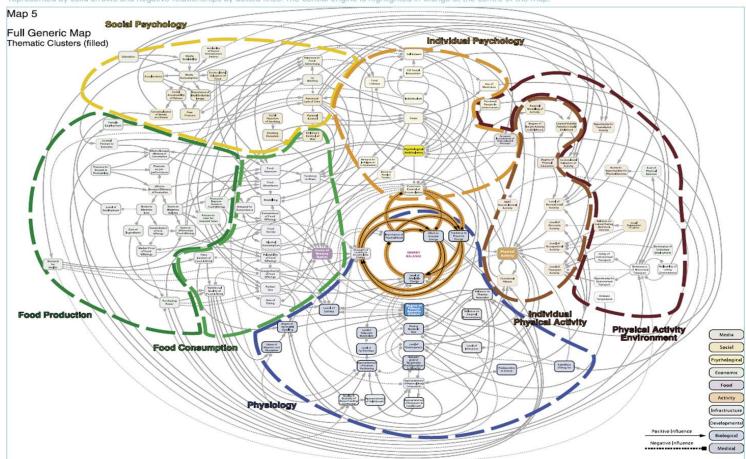
(National Academy of Science, Accelerating Progress in Obesity Prevention: Solving the Weight of the Nation).

Taking a complex systems approach is the key to success

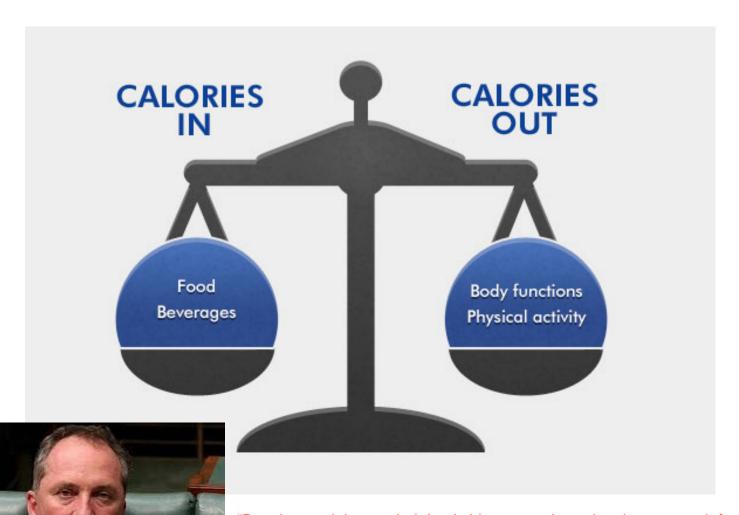


### Complex problems requiring new approaches

Figure 5.2: The full obesity system map with thematic clusters (see main text 5.1.2 for discussion)<sup>17,18</sup> Variables are represented by boxes, positive causal relationships are represented by solid arrows and negative relationships by dotted lines. The central engine is highlighted in orange at the centre of the map.



#### The too simplistic



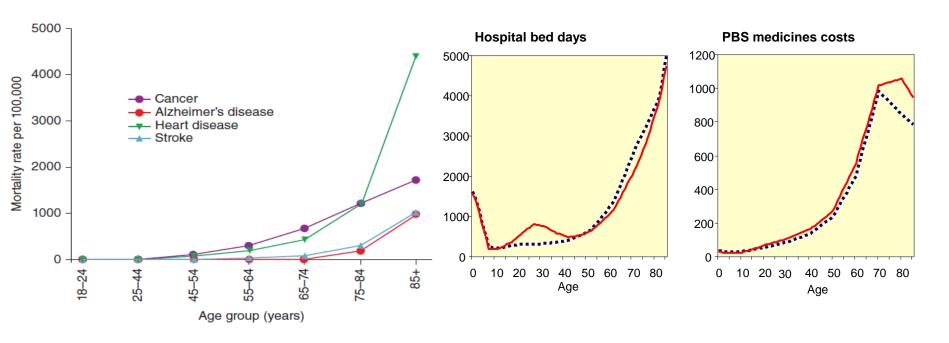
"People are sitting on their backside too much, and eating too much food ...

So get yourself a robust chair and a heavy table and halfway through the meal, put both hands on the table and just push back. That will help you lose weight."

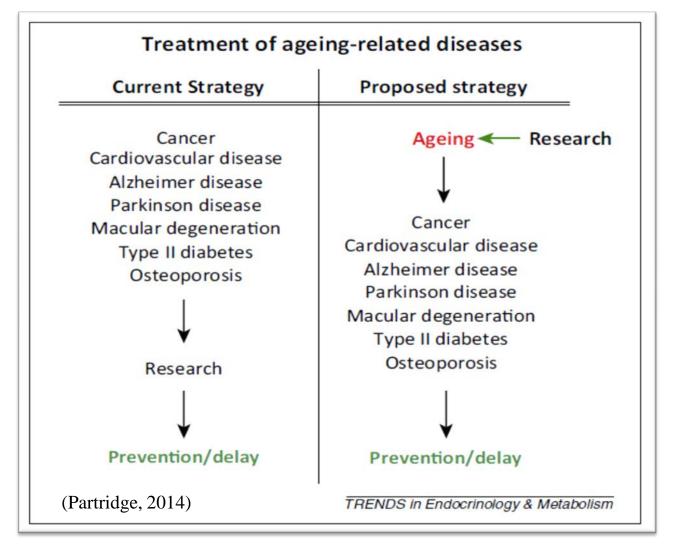
### But admitting complexity is not enough - need to tame it

- Model suites of interventions that have greatest impact within complex systems
- Look for common causes rather than take a disease-centric view

#### Ageing as an example:

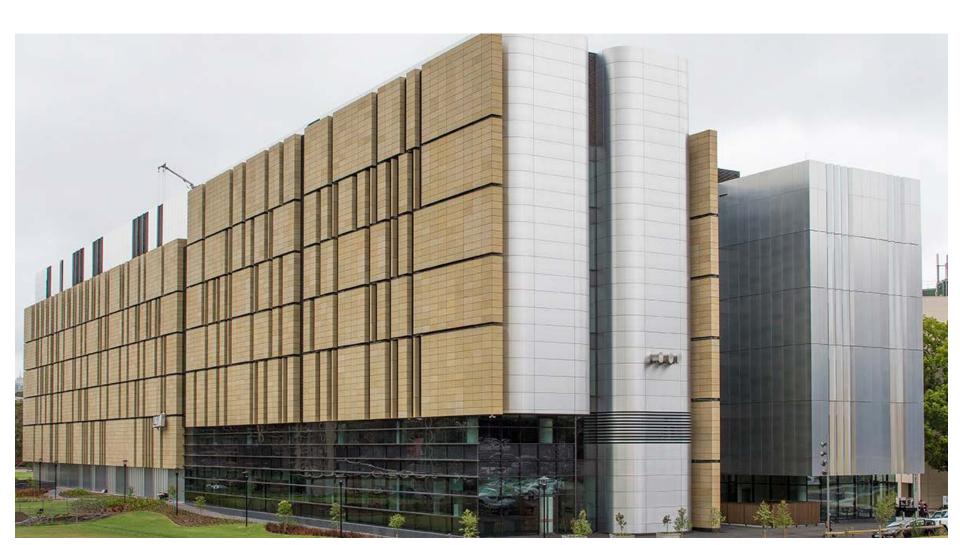


Understanding the biology and determinants of ageing offers the potential to delay geriatric outcomes and improve health in late and middle age

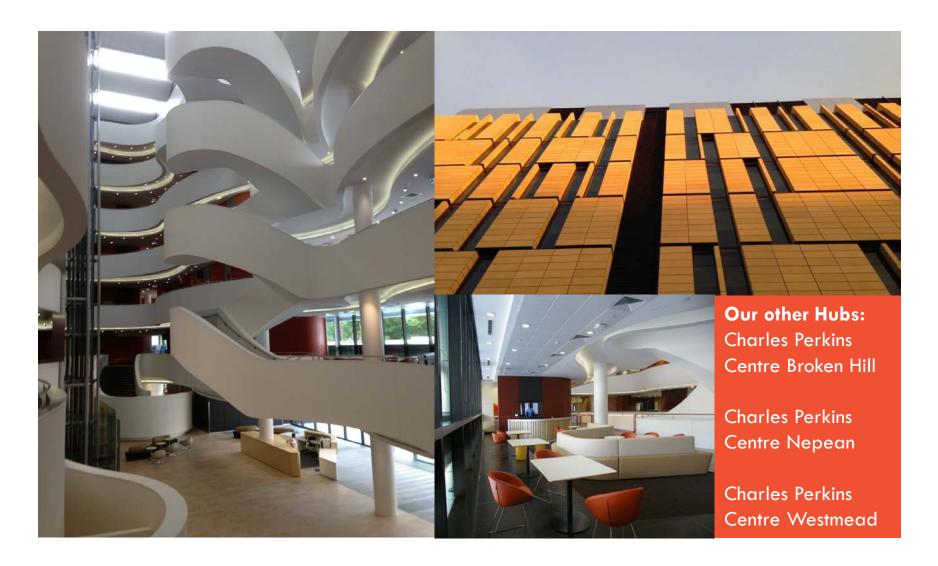


#### **Research and Education Hub**

- > \$385 million building
- 50,000 m<sup>2</sup> of wet lab, dry lab, teaching, core facilities, Ainsworth Interactive Collection of Medical Pathology, and the CPC RPAH Clinic
- > >850 researchers spanning many disciplines

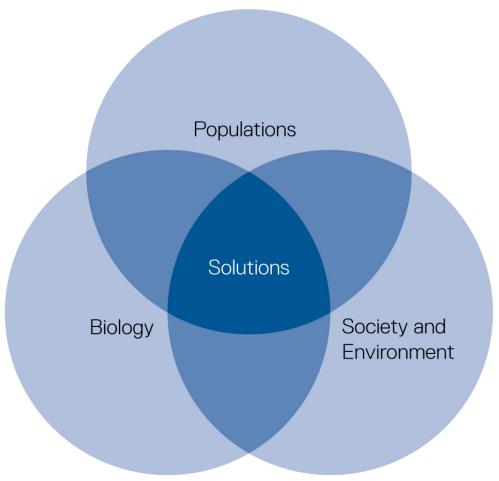


#### Research and Education Hub



# **Research Strategy: DOMAINS**

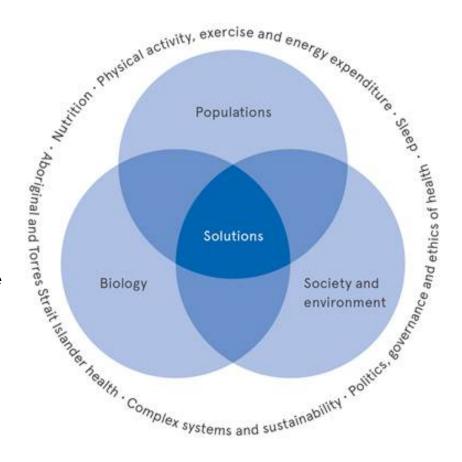
Our research comprises four interlinked domains (broad discipline areas)



### **Research Strategy: THEMES**

Several themes run as threads throughout all four domains, and offer a means of tying together the entire research network:

- Nutrition
- Physical activity, exercise and energy expenditure
- Sleep
- Aboriginal and Torres Islander health
- > Ethics, politics and governance of chronic disease
- Complex systems and modelling



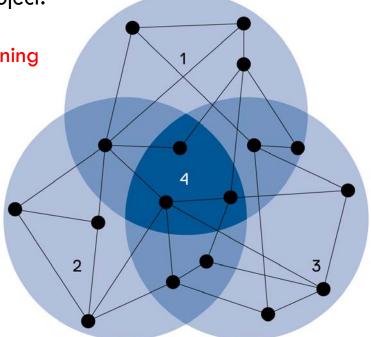
### Research Strategy: PROJECT NODES

Our research domains are addressed by a dynamic network of richly linked project nodes established around a specific multidisciplinary research project.

Membership of CPC accompanies initiating/joining nodes.

#### Research domains:

- 1. Populations
- 2. Biology
- 3. Society and Environment
- 4. Solutions



## 67 active Project Nodes established since June 2012, including:

- Aboriginal Nutrition, Physical Activity and Wellbeing
- > BABY1000 preconception, pregnancy and childhood cohort study
- > Building system wide capacity for complex and big data analysis and storage in T2D
- Broken Hill an integrated community-led, community-level intervention study
- > Businesses, Markets and the Social Context of Health
- Cardiac Translational Imaging
- > Chronic Disease Management Clinical Project Node
- Community Academic Partnerships (CAP) in Health, Wellbeing, and Health Workforce development
- > E-health in Gaming and Avatars
- Developmental Origin of Health and Disease (DOHaD)
- Gut Microbiome
- > Health and Economics: cross portfolio impacts of health on individuals and families
- Health Literacy Chronic Disease Network
- Human-Animal Interactions
- > Lifestyle Management Clinical Project Node
- > Paddock to Plate: optimising food production and delivery with a focus on nutrition
- Politics of Obesity
- Population Analysis of Human Diet and Nutrition
- Translational Gerontology
- Women's Health Clinical Project Node
- Wireless Wellbeing and Personalised Health
- Writer in residence and commissioned playwright too





# Attracted new and existing stars - established and early career



Prof David James



**Prof Paul Griffiths** 



Prof Stephen Colagiuri



Prof Adrian Bauman



Prof David Raubenheimer



Prof Zdenka Kuncic



Prof Peter Cistulli



**Prof Sharon Naismith** 



Prof Philip de Chazal



Prof Lisa Bero



Prof Robyn Gallagher



**Prof Manos Stamatakis** 



Prof Joerg Eberhard



Prof Shaun Jackson



Prof Philip Hogg



Prof Peter Thorn



Dr Melkam Kebede



Dr Samantha Solon-Biet



Dr Laurence Macia

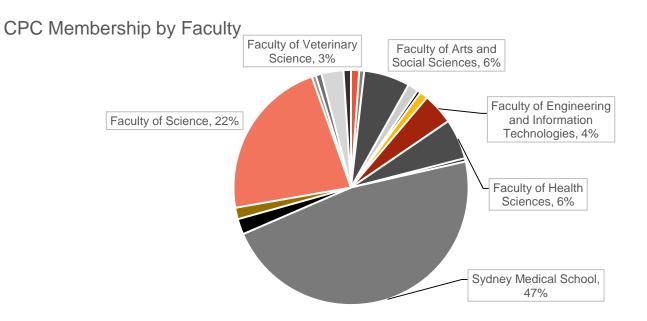


Dr Alistair Senior



A/Prof Greg Neely

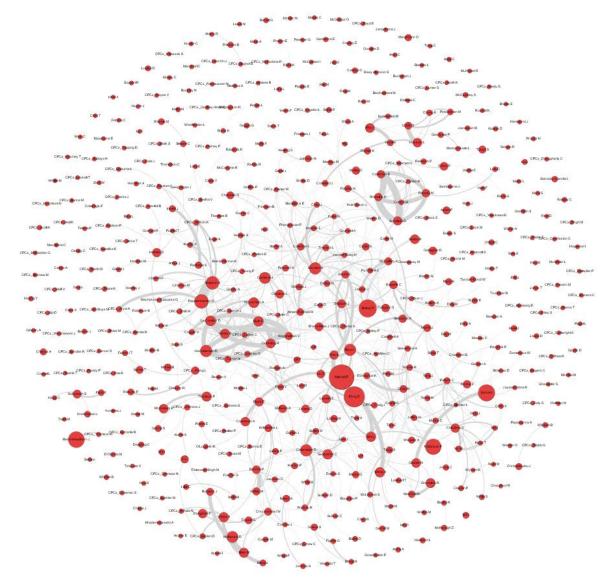
#### Engaging all 16 (as was) Faculties



- Faculty of Agriculture and Environment
- Faculty of Arts and Social Sciences
- Faculty of Dentistry
- Faculty of Engineering and Information Technologies Faculty of Health Sciences
- Sydney Law School
- Faculty of Nursing and Midwifery
- Faculty of Science
- Conservatorium of Music
- Heart Research Institute

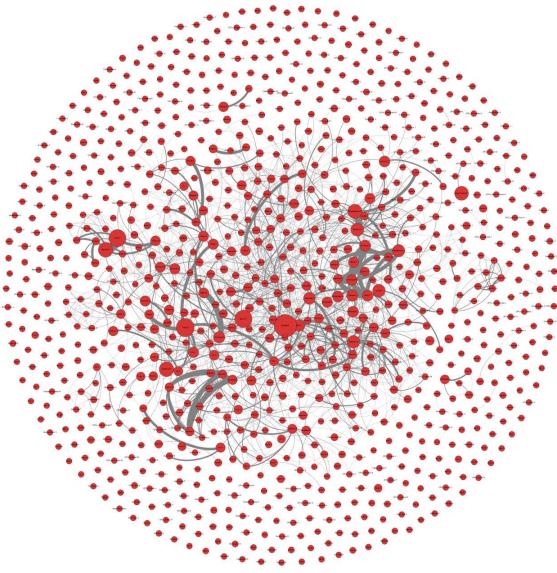
- Faculty of Architecture and Design
- Sydney Business School
- Faculty of Education and Social Work
- Sydney Medical School
- Faculty of Pharmacy
- Sydney College of the Arts
- Faculty of Veterinary Science

#### The collaborative network of new members - 2014

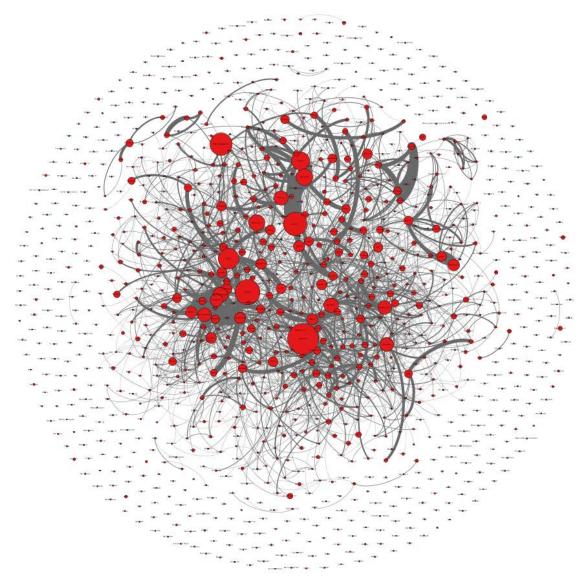


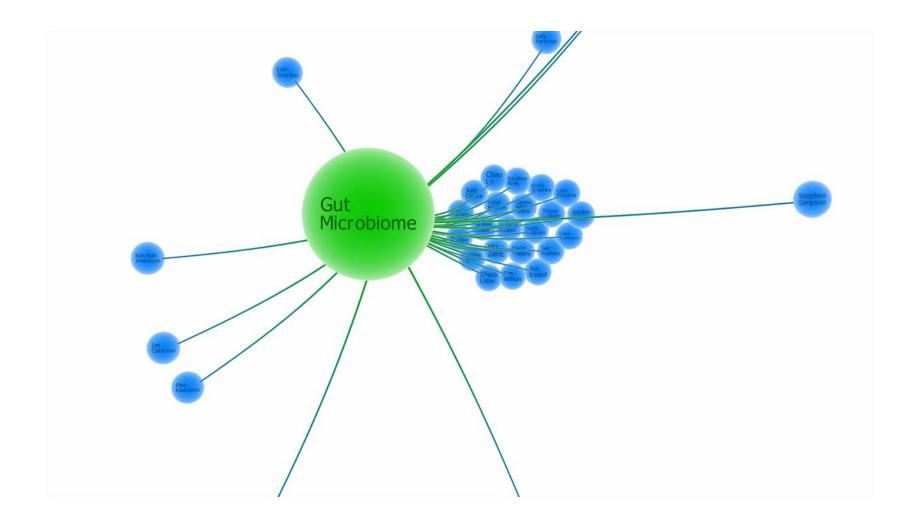
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#### The collaborative network of new members - 2015



#### The collaborative network of members - 2016





#### It all comes back to the power of complex, adaptive systems

Set up the model correctly and you get order and impact for "free"

- Make it attractive and easy for individual researchers to engage
   .... and make it worthwhile for their Faculties to let them;
- Set the rules of engagement ambition, collaboration, sharing, partnership;
- Make it easy to find compatible expertise, thereby keeping disciplinary depth and gaining breadth;
- Set a single overarching mission but don't prefigure routes to that end, constrain what is done based on presumptions of what is relevant, or insist on everything being directly translatable (useful);
- Nodes will yield new knowledge but also inevitably interconnect to yield larger outcomes;
- Capture and communicate these for public good;
- Foster entrepreneurship and commercialisation.