Following Heather Gardner's retirement, we take on joint editorial responsibility for the Australian Journal of Primary Health. We plan to maintain the high standards set in the past and to continue the editorial policy of promoting the dialogue between policy, research, and practice in primary health. We could not take on the editorial role without acknowledging Heather's tremendous contribution as the Journal's founding editor. Her creation of its first eight volumes is a truly staggering effort, for which all of us are deeply appreciative.

Greater translation of evidence into policy and practice is an important challenge for the primary health and community care field. This Journal is a vehicle for that project. We depend on the commitment of researchers and practitioners to publishing their ideas, experiences, and evidence. But commitment is not enough. Through the Journal we aim to encourage discussion of the evidence, policy, and practice relationships in primary care, as well as to support practitioners and researchers to publish material in this area. Furthermore, there is a long history of teaching and research in hospital settings and an increasing interest in the hospital-community interface and relationship. Development of this linkage in terms of research, policy, and practice is an important issue in primary health care, and one that we wish to support. We need institutional support to translate evidence into policy and practice.

There are number of examples where research centres and community agencies have come together to generate important insights into health influences, interventions, and practice for primary health settings; for example, the early work at the Alameda Population Laboratory provided much of the basic knowledge that underlies the field of social epidemiology (Berkman & Breslow, 1983). The Public Health Observatory work in Liverpool (http://www.liv.ac.uk/PublicHealth/obs/LPHO.htm) shifted the emphasis from observation to working in partnership with health service providers through conducting needs analysis and services planning. Yet more recently, the Urban Health Research Centre in Detroit (http://www.sph.umich.edu/urc/) has brought together community organisations and researchers from the University of Michigan School of Public Health to develop research projects on the basis of community-defined health priorities.

These examples vary in their emphasis on observation, intervention, and development, and their focus on the individual, organisational, cultural, and institutional determinants of health and wellbeing. They also vary in the form investigations have taken. Some have observed communities and catchments with little engagement and ownership by the community. Others have strongly emphasised collaboration with community organisations and agencies. What they demonstrate is the importance of building these links between research and practice.

While a number of centres focus on assisting primary health care workers to undertake research and evaluation in Australia, there is considerable scope for building on these initiatives to promote and expand relationships between teaching, research, and practice in primary and community health and support services. This might, for example, see the development of student placement schemes, joint research projects, demonstration centres for the development of good practice, and so on, for particular population catchment areas. If nothing else, this Journal would support initiatives like these as one of the recipients of the many excellent contributions to the literature that would result!

Hal Swerissen and Rae Walker
Editors

References
The Australian Journal of Primary Health is planning a special edition for its second issue in 2003. The special issue will focus on current policy, practice, and research issues in the management of chronic disease in primary care settings. Papers with a focus on the implementation and effectiveness of chronic disease self-management programs are particularly encouraged.