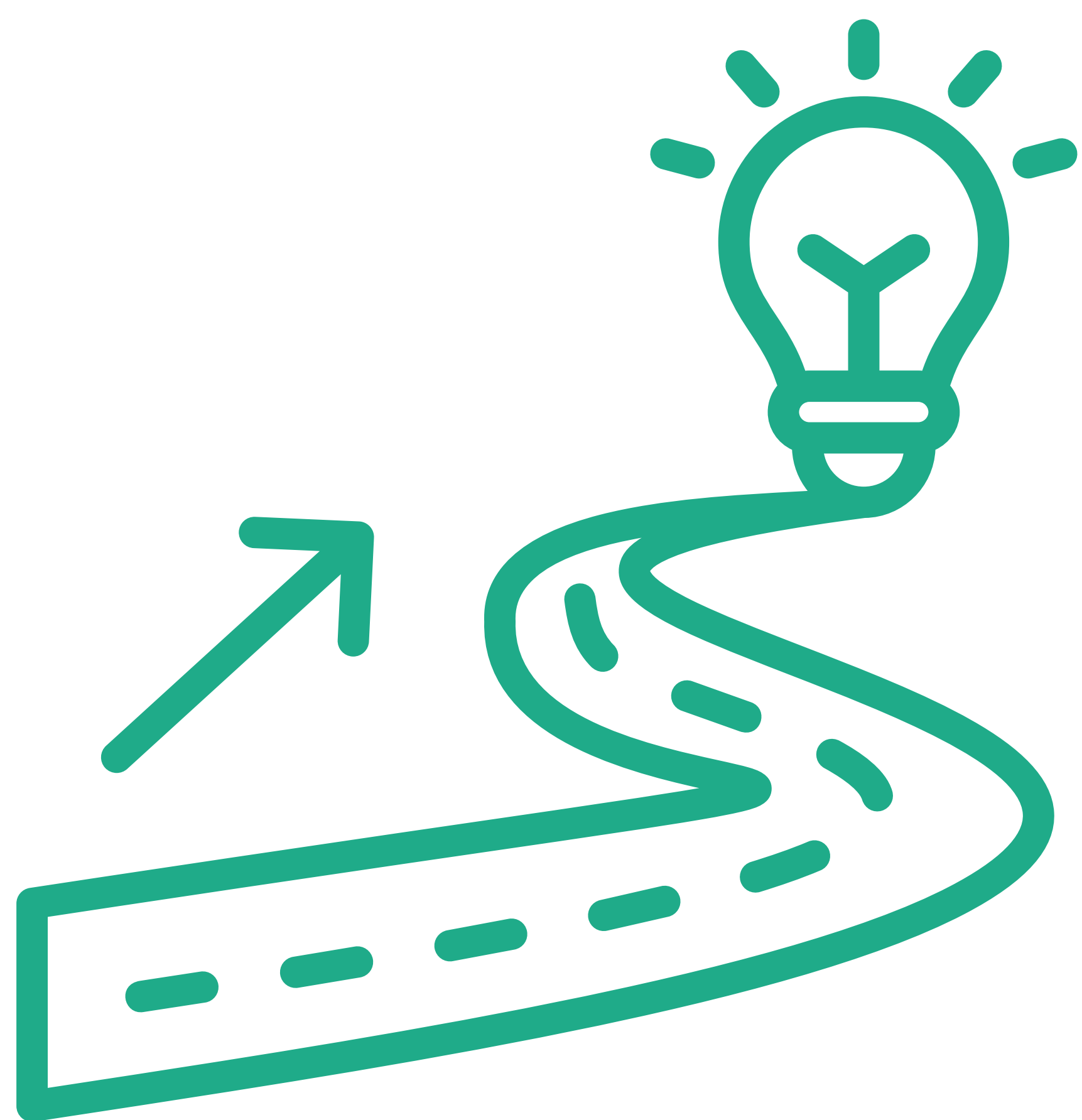
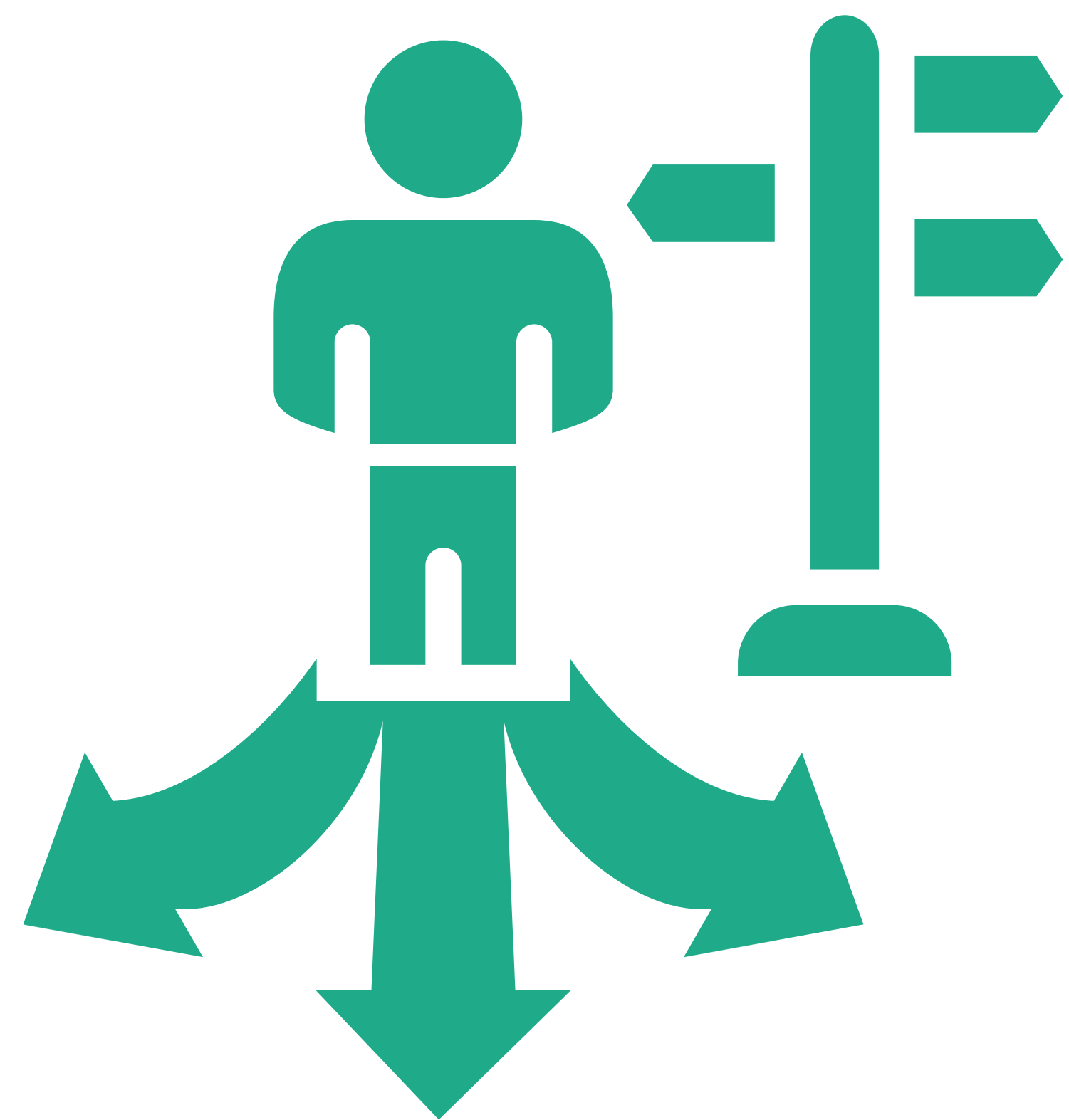


# EXPLORING CAREER EXPERIENCES IN HEALTH SERVICES RESEARCH

Dr Jenny Wheeldon  
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On behalf of HSR UK



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# ACKNOWLEDGEMENTS

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- ▶▶ Professor Judith Smith, HSR UK Chair
- ▶▶ Dr Ashrafunnesa Khanom, HSR UK Trustee
- ▶▶ Hanifah Khanom, Swansea University
- ▶▶ Zoe Phillips (formerly of Nuffield Trust)

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[www.health.org.uk](http://www.health.org.uk)

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# EXECUTIVE SUMMARY



## WHY THIS MATTERS

Health Services and Social Care Research (HSR) helps us to understand how to make social care and health services more accessible, high quality and equitable. Pathways in HSR careers however, are often precarious and unequal, and risk the loss of talent. The research undertaken for this report provides clear and triangulated evidence of the barriers and facilitators shaping HSR careers and sets out actionable steps for HSR UK and the wider community to improve HSR career experiences and opportunities.

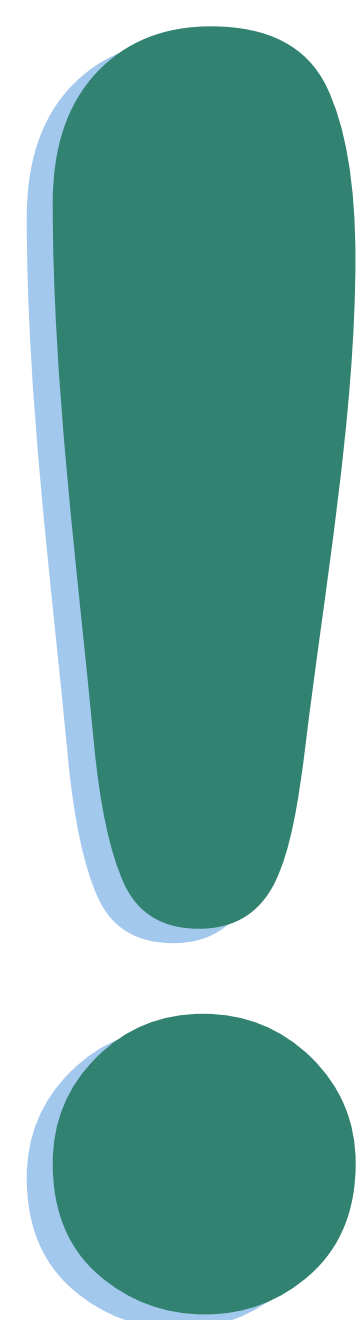
## WHAT WE DID

We conducted a mixed-methods programme of activities:

1. A literature review of 32 sources spanning HSR and adjacent disciplines
2. A national survey of 248 respondents across academic, NHS and third sector roles, exploring employment contracts, satisfaction, stigma, support and progression
3. 18 in-depth qualitative interviews with early, mid and senior-career HSR professionals across sectors to explore more detailed lived experiences



## HEADLINE MESSAGES



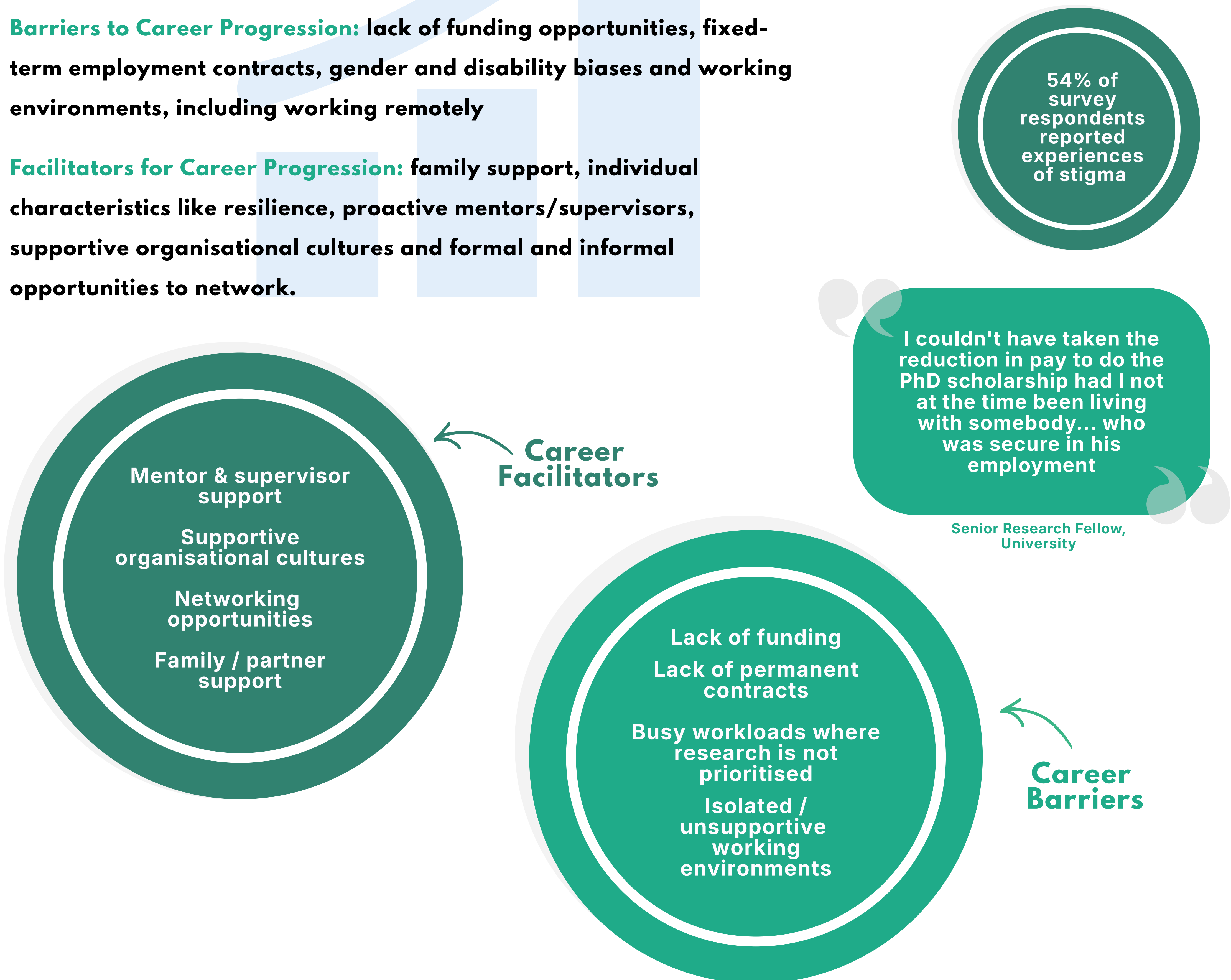
- ▶ Contract precarity is systemic and reduces career satisfaction and progression, particularly in universities
- ▶ Funding shortfalls between contracts force individuals to rely on family/partner income, unpaid roles or secondary employment to remain in research
- ▶ Mentoring and networking opportunities facilitate careers, but access is often inconsistent and informal
- ▶ Inequities impacting careers include gendered care giving responsibilities, disability needs and classed “norms” (such as accents and individual background)
- ▶ Roles spanning NHS and academia are valued but can cause fragmented career identities
- ▶ The sector currently relies too heavily on the personal resilience of individuals; without structural reform, this will continue to foster unequal opportunities

## WHAT THE DATA SHOW

**Career Satisfaction:** survey respondents on non-permanent contracts reported slightly lower career satisfaction than those on permanent contracts (65% vs 74% satisfied), though the difference was modest and not statistically significant. However, non-permanent staff were more likely to say they are “neither satisfied nor dissatisfied,” which may signal uncertainty or mixed feelings about career progression.

**Barriers to Career Progression:** lack of funding opportunities, fixed-term employment contracts, gender and disability biases and working environments, including working remotely

**Facilitators for Career Progression:** family support, individual characteristics like resilience, proactive mentors/supervisors, supportive organisational cultures and formal and informal opportunities to network.



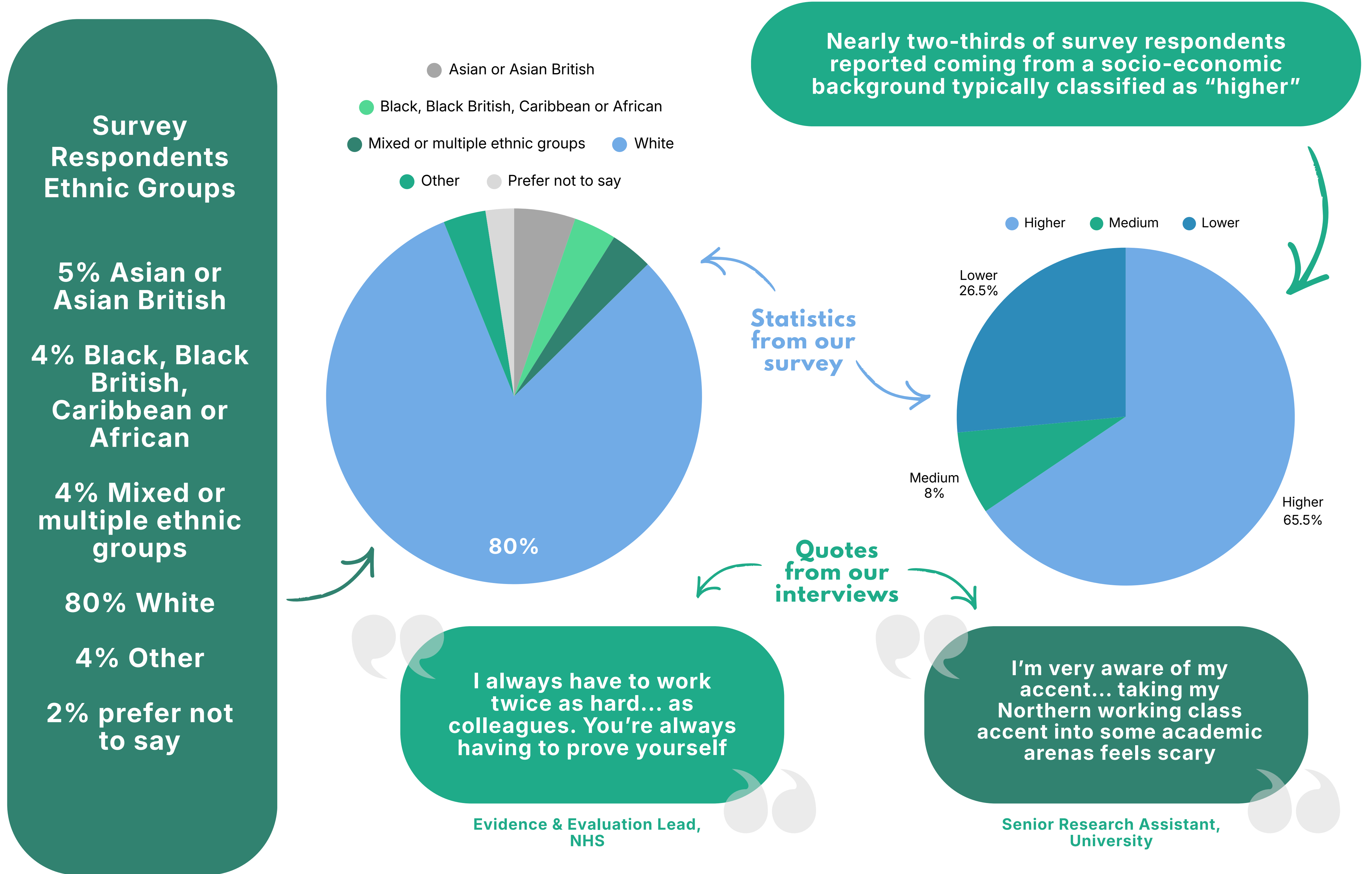
## INTEGRATED ANALYSIS

Across the literature, survey and interviews, we identified 8 integrated themes:

1. Job security & contract precarity (dominant cross-source theme)
2. Funding gaps & bridge support (especially relevant for early to mid career transitions)
3. Mentoring & networks (high impact, uneven access, minimal incentivisation)
4. Organisational support & culture (protected research time, inclusive leadership)
5. Gender, disability & caregiving bias (variable but consequential)
6. Socio-economic inclusion (working-class researchers face cultural & financial barriers)
7. Personal resilience (necessary but inequitable to rely on)
8. NHS & academia interface (identity & belonging challenges; opportunity for co-design)

# IMPLICATIONS FOR THE HSR COMMUNITY & CAREERS

**Talent loss risk:** Without structural reforms, HSR will continue to under-recruit and under-retain diverse researchers, constraining innovation, relevance and the diversity of research perspectives needed to address the needs of underserved communities.



**Equity and excellence are linked:** inclusive career infrastructures that foster mentoring and bridge-funding opportunities and protected time will improve the quality and relevance of research, not just fairness.

**Culture change is possible:** incentivising mentorship, valuing diverse research methods and normalising flexible career pathways are feasible if cultural and organisational norms and practices are challenged.

**Reliance on personal resilience is inequitable:** researchers who are resilient and determined may progress in current career frameworks, but resilience is not an equal resource; it depends heavily on individuals' financial security and personal circumstances.

## SENSE CHECKING: FINDINGS FROM OUR STAKEHOLDER WORKSHOP

As part of our project activities, we convened a stakeholder workshop on the 13 January 2026 to sense-check the emerging findings and ensure they aligned with real-world experiences from across sectors, roles and career stages. Participants included health services researchers from various employers across early, middle and senior level career stages. Their reflections confirmed key themes around employment precarity, barriers to accessing mentoring and networks, inequities around class, disability, neurodiversity and caring roles and the unsustainability and inequity of relying upon individual resilience.

## A NEW WAY OF THINKING: TACIT RESEARCHER KNOWLEDGE

Stakeholders also identified the value of tacit researcher knowledge, which included informal knowledge of the unwritten rules and hidden expectations that often shape HSR careers. Key insights included:

- ▶ **Insider information is unevenly distributed:** those without stronger academic networks or senior champions may feel disadvantaged in understanding career navigation, funding timelines and promotion opportunities.
- ▶ **Line managers and supervisors act as gatekeepers:** access to insider knowledge depends heavily on individuals in leadership positions, rather than formal organisational processes.
- ▶ **Tacit knowledge may reinforce existing inequities:** working-class, disabled, neurodivergent and non-academic sector researchers may be less able to access informal networks where this knowledge circulates.

## WHAT NEEDS TO CHANGE

### Make HSR Careers Stable

Reduce reliance on short-term contracts and create clearer, more predictable career pathways.

### Fix Funding Gaps

Ensure smoother funding continuity, especially during high-risk transitions such as post-PhD and early career stages

### Make Mentoring Fair and Accessible

Provide equitable, incentivised mentoring so support isn't left to luck or informal networks.

### Tackle Inequalities Structurally

Embed disability adjustments, caring-friendly policies and support for those without financial safety nets

### Build Healthy, Inclusive Cultures

Prioritise inclusive leadership, protected research time and recognition of diverse contributions across sectors and methods

### Strengthen Belonging Across Sectors

Create better structures for researchers navigating NHS-academic roles, and strengthen links with third sector organisations.

## HSR UK'S NEXT STEPS

HSR UK will now focus on identifying what works in practice to build more inclusive, sustainable HSR career pathways. Phase Two will:

- ▶ Explore how to make tacit knowledge visible – clarifying the “unwritten rules” of research careers.
- ▶ Explore line-manager support – identify how we can support consistent, equitable management.
- ▶ Explore how we can support accessible networking models – especially for carers, disabled and neurodivergent researchers.
- ▶ Deepen our understanding of disability and neurodiversity – including disclosure and adjustments.
- ▶ Improve our support beyond universities – continue to explore the needs across NHS, charity and mixed-role settings.
- ▶ Continue to explore what works through case studies, fieldwork and stakeholder engagement, and share practical guidance, including at the HSR UK Annual Conference.

## HSR UK

HSR UK is an independent charity dedicated to the promotion of health services and social care research in policy and practice. We aim to be the collective voice of UK health services research and our members, including universities, research centres, think tanks, NHS organisations and NIHR Applied Research Collaborations.

By convening and connecting producers and users of health services and social care research, we support evidence-based policy and practice in the NHS and social care, helping to mobilise research, build capacity and make an impact. We also influence policy leaders and funders to improve the profile and landscape of health services research, enabling it to thrive.

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