

Healthway Knowledge Translation Guide

Healthway is a Western Australian (WA) Government health promotion agency dedicated to improving the health of all Western Australians. We work in partnership with sports, arts, racing, and community event organisations, as well as health and research organisations to build a healthier WA.

Our research program is based on supporting research that has potential to influence health promotion policy and practice in WA. All applicants are required to outline how this will occur in a detailed Knowledge Translation (KT) plan, as part of their application.

This short guide aims to provide further information to support Healthway research program applicants in developing and implementing a KT plan for their research projects.

Defining Knowledge Translation

There are different definitions used for Knowledge Translation. The World Health Organisation (WHO) defines KT as the "The synthesis, exchange, and application of knowledge by relevant stakeholders to accelerate the benefits of global and local innovation in strengthening health systems and improving people's health." WHO considers KT a key component of bridging the "know-do" gap, or the gap between what we know through research and what we do in practice.

A definition from one Australian organisation working in research impact, simply defines KT as "getting the right information, to the right people, at the right time, and in a format they can use, so as to influence decision making".

For Healthway, knowledge translation maximises the impact of research by facilitating the use of the knowledge gained through the research and putting it into practice.

Knowledge Translation Within Our Research Program

At Healthway, we want to encourage research that is aligned to the needs of health promotion policy makers and practitioners (knowledge users) in WA. For us, KT means actions to ensure that knowledge generated from Healthway's funding is changing policy, practice and contributing to better community health outcomes.

We want to fund research that resembles community context to ensure there are opportunities for upscaling and real-world applicability.

For us, it is important that the research funded through our research program is not only published in academic journals, but also reaches those who can apply it to their work practices and make a positive impact on the health of our community.



This is more likely to be achieved through a genuine collaborative approach where research priorities and processes are co-created with, or informed by, stakeholders and knowledge users. To achieve this, knowledge users need to be engaged in every step of the research development and implementation process.

Applicants are required to undertake a process of co-design by engaging policy makers, practitioners and other knowledge users at all stages of their research, where appropriate and feasible. This includes when setting the research priorities, designing the research project, conducting the research, communicating the findings and translating the findings to ensure the research meets the needs of the knowledge user and ultimately the WA community (refer to Figure 1).

It is acknowledged that health promotion interventions aren't always of a programmatic nature. Intervention research may focus on other approaches such as built and natural environment, community development, social marketing and communications, regulation and legislation. Therefore, we also encourage policy-relevant research. When undertaking policy-relevant research, it may not always be appropriate to engage policy makers in the co-design process. In this case, appropriate knowledge users may include advocacy groups, policy actors, or other public health agencies or committees who are working to inform and influence state and national policies.

These knowledge users are expected to have sound knowledge of the stakeholders required to inform and advocate for policy change. Applications focused on policy-relevant research are encouraged to specify what evidence will be produced and how it will be used to inform and influence state and national policy and legislative reform.

A knowledge user is someone who is likely to use research results to make informed decisions about health policies, programs and/or practices .

³Woodall J, Warwick-Booth L, South J, Cross R. What makes health promotion research distinct? Scand J Public Health. 2018;46(20_suppl):118-122. doi:10.1177/1403494817744130

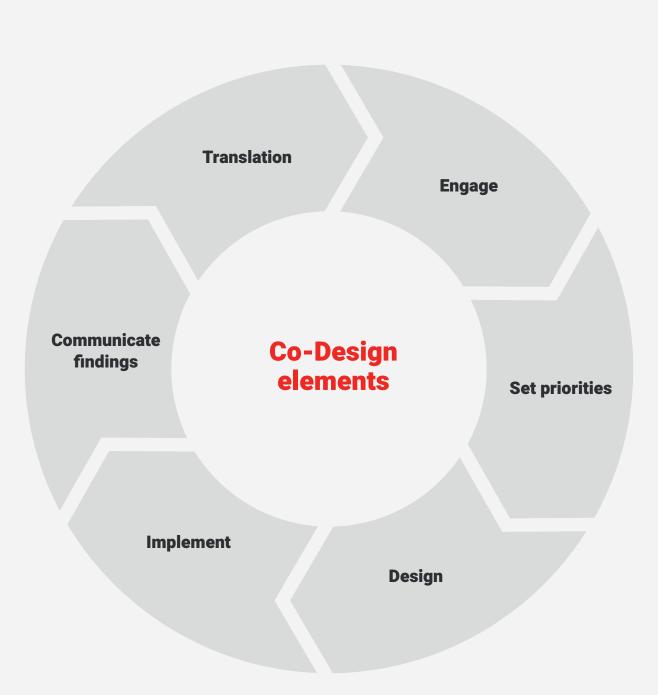
*Wolfenden, Luke & Ziersch, Anna & Robinson, Priscilla & Lowe, John & Wiggers, John. (2015). Reducing research waste and improving research impact. Australian and New Zealand journal of public health. 39. 303-4. 10.1111/1753-6405.12467.

⁵Shantz E. Knowledge translation challenges and solutions described by researchers. Canadian Water Network. 2012.

⁶Canadian Institutes of Health Research, 2016. Retrieved from: https://cihr-irsc.gc.ca/e/34190.html#k [Accessed: 22 June 2020].



Figure 1: Cycle of Co-Design to Support Knowledge Translation



Developing a KT Plan

As part of the application process for research funding, a KT Plan is required to be submitted. We strongly encourage that applicants consider the following when developing their KT Plan:

- · What are the KT goals for your research?
- · Who are the stakeholders and knowledge users, and how will they be engaged in your research?
- If you are not including particular stakeholders and knowledge users is there are valid reason?
- · How will your research be communicated throughout and at completion?
- How will the knowledge gained through your research be implemented into policy or practice?
- · What resources need to be allocated for the purposes of supporting KT?
- How will you measure the impact of KT strategies?

Examples of KT goals: (What impact do you want your research to make?):

- Change practice
- Change awareness or knowledge (of practitioners, community members etc)
- Influence technology
- Inform policy
- Share knowledge (e.g. develop practice guidelines)
- Inform future research

Examples of how applicants may integrate KT into their funding applications are provided below. This is a guide only, KT strategies should be selected as appropriate for your KT goals and research outputs.



Table 1: Examples of activities that may be identified in a KT Plan

Strategies	Examples of activities
Engagement of knowledge users	 Stakeholder identification process to identify relevant organisations, groups and individuals for your research Develop research questions with knowledge-users to ensure the questions address their current needs Engage knowledge users who are likely to replicate or adapt the intervention in the intervention design stage Appoint a research team that includes policy makers or practitioners or appointing them to an advisory committee or steering group Define partner/stakeholder roles in the research Design the research methodology with knowledge user partners to ensure the data and findings are applicable to the real-world context Involve knowledge users in the interpretation and dissemination of results to make best use of expertise, enhance impact and ensure cultural security Include a strategy for ongoing engagement with, and input by, end-users throughout implementation and evaluation. Examples may include structures such as reference groups/research advisory groups Knowledge exchange strategies and participatory research methods that may be employed could include, joint priority-setting processes, deliberative dialogues, community of practice, participatory action research and Arts-based KT.
Planning for the translation of findings	 Define KT goals, audiences, appropriate communication and dissemination strategies and measures for evaluation Consider in the planning stages any barriers and facilitators to implementation of the research outcomes Describe how data will be shared in order to support upscale and replication should the research support this.
Comprehensive communication and dissemination plan	 List what communication products you will create. This may involve identifying and utilising various non-academic outputs such as infographics, podcasts, guidelines, checklists, a new program or adjustment to a current program, policy briefs, evidence summaries Describe how you will ensure each product reaches their intended audience(s). This may involve channels such as professional newsletters, professional/policy networks, communities of practice, social media, webinars, workshops, etc.

Strategies	Examples of activities
Appropriate resourcing	 Appoint a knowledge broker to act as the intermediary between researchers and the knowledge users, the role may:
	 Facilitate the collaboration throughout the design, implementation and translation phases Assist with the analysis of evidence against current context and practice Support the knowledge users with integration of new knowledge. Co-locate within the partner agencies workplace to support the knowledge exchange processes.
	Budget for KT activities in the overall project budget



Measuring the impact of KT

Knowledge translation in research can involve a range of outputs such as consultation, colearning, advocacy and the development of resources. Evaluation of KT efforts helps us understand the value of KT in promoting research impact beyond the academy.

Outlined below are some examples of measures that can help to demonstrate real-world translation of evidence into policy and practice. We acknowledge that not all of these will be relevant to your research, and many will not be achievable within the timeframes of funded research projects.

We encourage you to consider what KT strategies you are able to evaluate. For example, stakeholder engagement activities throughout the project can be documented, policy influence can be traced, and communication products for active dissemination can be tracked using relevant metrics. Only attempt to evaluate those aspects that you expect to change as a result of your KT efforts and research outputs.

KT impact measurement

- Submissions made to public, Government or parliamentary enquiries on public policy/ health issues (including reviews of legislation and laws) based on processes or findings from the research
- · Contributions to advocacy activities related to public health issues
- Informing guidelines or policies developed by Government or non-Government organisations (including Government departments, schools, local Government)
- Representation on government taskforce, expert working group, steering committee etc.
- Implementation of evidence-based guidelines (e.g. schools, local Govt.)
- Policies adopted and/or improved as a result of evidence from research
- Responding to requests from community groups or public for guidance or advice based on research
- Innovation and entrepreneurial activity, as evidenced by new products or new ventures launched or assisted, licensed patents
- Evidence of changes to programs or policies in settings that research targeted (e.g. schools).
- Altmetrics and other web analytics demonstrating reach of communication products and their influence upon public discourse
- Partnerships developed for future collaborative research or evaluation with stakeholders



Project Reporting

As part of your reporting to Healthway, we request that funded researchers report on KT activities. This includes:

- 1. Knowledge user involvement in the research process.
- Impact of knowledge outputs and channels used (results from evaluation).
- 3. Additional feedback from knowledge users including further knowledge needs.

Resources and further reading

Click the buttons below

Guide to Knowledge Translation Planning (Canadian Institutes of Health Research)

KT Presentation
(WA Child and Adolescent Health Service Research Skills Seminar Series 2019)

Online workshops and training in KT (Research Impact Academy)

Articles on Knowledge Translation