REVISITING INTERACTION IN KNOWLEDGE TRANSLATION

KEY MESSAGES

- For some studies – including those expected to receive significant news media attention – the most important time for researchers and decision makers to interact is near the end of the study, with interaction continuing when and after study findings are released.

- When studies generate considerable public attention, stakeholders want knowledge translation efforts like forums and web conferences to take place close to the release date of the study’s findings.

- Discussions between researchers and decision makers should continue after the findings become public, to look at what the findings mean and how they can be put into action.

This is a summary of an article by Liane R. Ginsburg, Steven Lewis, Lisa Zackheim and Ann Casebeer

Establishing early and prolonged contact between researchers and decision makers may not always be a critical part of getting research results used. For certain types of studies, especially those that are expected to attract a lot of public or news media attention, the most important time for researchers and decision makers to interact may be closer to the end of the study, when the study findings are released, and again afterwards, to discuss how the findings might be applied. This was one of the main findings of the research article, *Revisiting interaction in knowledge translation* by Ginsburg and colleagues.

**Discussing high-profile research**

A team of researchers looked at the effectiveness of the knowledge transfer strategy related to the Canadian Adverse Events Study (CAES) released in 2004. Given the objective of the CAES was to report on the incidence of adverse events in Canadian hospitals, the study was thought to be of national interest and it was anticipated that its findings on patient safety would be covered widely by the media. (Indeed, the findings were startling: the study reported that somewhere between 9,000 and 24,000 accidental deaths could have been prevented in Canadian hospitals in 2000.)
To promote the study, many stakeholders were invited to attend forums and web conferences before the results were released. Stakeholders included government representatives, healthcare professionals’ associations, regulatory colleges, organizations providing services to hospitals, organizations representing health facilities and health executives, and safety organizations.

Information was shared by providing detailed explanations of the methodology used in the CAES, by holding discussions about safety initiatives, and by discussing how to prepare the news media for the study’s release. Most of the discussions took place during the first two forums, which were held two years and one year before the results were released. The two one-hour web conferences provided only brief study updates and were held four months and one month prior to release.

To find out if these forums and web conferences had their desired impact, the research team held 33 semi-structured interviews with a random sample of forum stakeholders, along with 11 researchers and three forum organizers. The interviews took place after the first forum, after the second forum, and one month before the CAES results were released.

Research findings need further discussion

Researchers found that the forums made an obvious difference to how much stakeholders were thinking about the CAES and patient safety issues in general. Participants said the forums contributed to the sense of urgency they felt about tackling the issue of patient safety. (This positive feedback was given despite a rough start with the first forum due to unclear objectives.)

Stakeholders also said they felt positive about the more social, face-to-face, interactive aspects of the forums, which increased their awareness, allowed them to share information and encouraged them to network. However, they stated that the forums were held too far in advance of the release date of the study’s findings and that the forums did not prepare them for news media enquiries about the CAES. They also said that discussions should have continued after the findings were released, so that researchers and decision makers could have discussed what the findings meant, and to provide opportunities to develop strategies to change patient safety based on the study’s results. Despite these significant criticisms, stakeholders said they would take part in further forums or web conferences related to the CAES.

Bibliographic Reference(s)


This summary is an interpretation and is not necessarily endorsed by the author(s) of the work cited.