THE NATURE OF EVIDENCE RESOURCES AND KNOWLEDGE TRANSLATION FOR HEALTH PROMOTION PRACTITIONERS

KEY MESSAGES

- Lack of time, research interpretation skills and patience for jargon stops practitioners from putting research into practice in their daily work.

- Before putting research into use in their own practice, practitioners would ideally like to see pilot tests of new approaches that are straightforward and affordable to emulate.

- Health promotion stakeholders suggest a central agency, such as a government health department, should become the main resource to fund, collect, summarize and promote promising research findings in a format that appeals to practitioners.

This is a summary of an article by Rebecca Armstrong, Elizabeth Waters, Belinda Crockett and Helen Keleher, published in Health Promotion International in September 2007.

While Australian healthcare practitioners working in community, primary and women's health services are enthusiastic about using research-based resources to inform how they care for their patients, they don’t always do it.

In a recent study, practitioners admitted that many things stand in the way of putting to use research on how to promote healthier lifestyles. They blame a lack of time, difficulty evaluating and applying the research, new staff members who don’t know the resources are available to them, and wading through text littered with jargon.

Making resources friendly

To figure out what influences practitioners’ use of research findings, the research team involved in this project first analyzed six health promotion resource documents. All of these documents were considered to be well-researched and all were created to help practitioners implement new health promotion techniques and strategies. The team then discussed the six resources with close to 50 people, including the resources’ authors, government policy officers, leading agencies and practitioners. After these discussions, the research team addressed whether these resources were living up to practitioners’ needs.

The outcomes of this investigation were very specific ideas of what an ideal health promotion resource would include. For example, participants appreciated detailed examples (preferably local ones) of how others have put new techniques and strategies into practice, and with what level of success. Resources were also said to be more useful when they suggested affordable new approaches that are relatively easy to put into practice, kept up-to-date with new research, and included interesting new ideas and promising practices, even if there had not yet been a full evaluation of the impact or results.
Plain-language advice on how to implement new techniques and strategies is also important to practitioners, as is the effect of new approaches on patients who are part of a minority group or marginalized in society. Also on practitioners’ wish list is the ability to search a database of related research and programs.

The wrapper matters too - practitioners want to see a polished and professional-looking resource, and prefer to see it labeled as a "practitioner guide." Inside, resource documents preferably have sections addressing planning and evaluation, making clear links between the research results and how to put them into action. Ideally, all this would be presented alongside short and clear summaries that are supplemented with more detailed reports.

**Greater role for government**

Even though practitioners were pleased with the level of effort shown by the state government in producing these six evidence-based resources, they still felt the need for a central agency - such as a governmental health department - to take on a bigger role in promoting the use of research results in day-to-day practice.

Aside from simply funding and generating research, a central agency would systematically collect, group, summarize and promote the research findings in a format that appeals to practitioners, said participants. It could also build networks with like-minded organizations and produce more “user-friendly” resources. Participants identified hiring research brokers to bring valuable research results to the attention of the people who need it as a potential strategy. These brokers would develop guides and resources and help increase organizations’ capacity to use research.

**Getting the word out**

Of course, the best research can easily be overlooked if it lacks an effective dissemination plan. The six resource documents discussed in this project had no consistent plans for spreading the word - dissemination efforts were dictated largely by budget, not practitioners’ preferences. There is a definite need to have a detailed dissemination strategy, said the interview subjects. And while strategies should include both active methods of dissemination (such as workshops or presentations), and more passive efforts such as print and electronic media, practitioners preferred to learn about new resources through more active means and to be consulted in the development of new health promotion approaches. If these and other preferences are ignored, valuable resources may fail to have the impact they should.

**Reference**