Demystifying knowledge translation: learning from the community

Sarah Bowen, Patricia Martens, The Need to Know Team

Department of Community Health Sciences, Manitoba Centre for Health Policy, University of Manitoba, Winnipeg, MB, Canada

Objectives: While there is increasing interest in research related to so-called Knowledge Translation, much of this research is undertaken from the perspective of researchers. The objective of this paper is to explore, through the participatory evaluation of Manitoba's The Need to Know Project, the characteristics of effective knowledge translation initiatives from the perspective of community partners.

Methods: The multi-method evaluation adopted a utilization-focused approach, where stakeholders participated in identifying evaluation questions, and methods were made transparent to participants. Over 100 open-ended, semi-structured interviews were conducted with project stakeholders over the first three years of the project. These interviews explored the perspectives of participants on all aspects of project development. Formal feedback processes allowed further refinement of emerging theory.

Results: This research suggests that there has been insufficient emphasis on personal factors in knowledge translation. The themes of 'quality of relationships' and 'trust' connected many different components of knowledge translation, and were essential for collaborative research. Organizational barriers and lack of confidence in researchers present greater challenges to knowledge translation than individual interest or community capacity. The costs of participation in collaborative research for community partners and the benefits for researchers, also require greater attention.

Conclusions: Participation of community partners in The Need to Know Project has provided unique perspectives on knowledge translation theory. It has identified limitations to the common interpretations of knowledge translation principles and highlighted the characteristics of collaborative research initiatives that are of greatest importance to community partners.

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Introduction

There is increasing recognition of the need to make research findings accessible to potential users and to transfer research findings from academic to practice and policy settings. This trend is evident within the field of health services research, as researchers are challenged to disseminate research findings more effectively, and policy makers and practitioners are urged to adopt evidence-based decision-making processes. It is, therefore, not surprising that there has also been a growth in research in the area of knowledge translation. This research attempts to address questions such as, What are the characteristics of effective knowledge translation? and In what contexts is knowledge translation more successful? However, little of this research, has incorporated the perspectives of the anticipated users of research. The purpose of this article is to report on research conducted through evaluation of Manitoba's The Need to Know Project, which explored knowledge translation from the perspective of community partners.

The Need to Know Project

The Need to Know Project is a Canadian Institutes of Health Research (CIHR)-funded project designed to address the critical need for research to support the decision-making of rural/northern regional health authorities (RHAs), and further promote and develop models of collaborative research. Initiated in the spring of 2001, the project includes as partners the Manitoba Centre for Health Policy (MCHP), the rural/northern RHAs of Manitoba and Manitoba Health. MCHP is an academic research unit of the Department of Community Health Sciences in the University of Manitoba's Faculty of Medicine. MCHP uses the universal health care system's administrative billing claims to undertake secondary data analysis at a population level. The 10 rural and northern RHAs vary in remoteness, population characteristics and service availability. Populations

Sarah Bowen PhD, Assistant Professor, Patricia J Martens PhD, Director, The Need to Know Project, and, Associate Professor, Department of Community Health Sciences, Manitoba Centre for Health Policy, University of Manitoba, Winnipeg, MB, Canada, Susan Crockett, Designated Representative: The Need to Know Team, Director of Planning, Nor-Man Regional Health Authority, The Pas, MB. Canada.

Correspondence to: sarah bowen@shaw.ca

served range from 1000 to 98,000, with a total population of approximately 500,000 out of a provincial population of 1,1148,699 (2000).

MCHP has developed effective working relationships with Manitoba Health, the provincial health agency, with which it contracts to develop mutually-agreed-upon deliverables in the form of research reports. This established relationship with top-level policy makers has provided MCHP with significant experience in moving research into policy.² At the time *The Need to Know* Project was initiated, however, there was no established relationship between MCHP and the RHAs within Manitoba.

There are several differences between Manitoba Health and the RHAs in the level and scope of decision-making authority, as the RHAs are responsible for the implementation of policies and allocation of resources within a framework established at the provincial level. The project was, however, able to build on MCHP's partnership experience with Manitoba Health: experience in negotiating research projects of mutual interest, translating research results for specific audiences and addressing the tension between the needs of researchers and users.

The goals of the five-year *The Need to Know* Project funded by Manitoba Health are to: create new knowledge directly relevant to rural and northern RHAs; develop useful models for health information infrastructure, training and interaction; and disseminate and apply health-related research so as to improve the effectiveness of health services, and ultimately the health of RHA populations.

The CEOs of the RHAs were invited to select representatives for *The Need to Know* team. Three two-day team workshops held each year in Winnipeg, Manitoba, Canada, serve as the focus of project activities. These workshops provide opportunities for information sharing, capacity-building activities, planning and development of collaborative research projects, and opportunities for informal networking.

The Need to Know Project has two connected components: conducting the activities identified in the original proposal, and developing knowledge translation theory in collaboration with community partners. This paper focuses on the theory emerging through the participatory evaluation of the project. The extent to which the project has been successful in meeting its stated objectives is addressed elsewhere.³

Literature review

Three dominant themes emerged from an initial review of the knowledge translation literature related to health services research, and guided the development of the initial proposal. The first was the importance of *communicating findings* in a manner that influences decision-making. Both the quality of population health information and its accessibility to decision-makers can limit the effective use of health services information.^{4,5} It is also essential to *establish*

effective working relationships among the various groups concerned⁶ and to ensure in-person interaction and early involvement of stakeholders in the research process. ^{2,7,8} Finally, the research undertaken must be of relevance to intended users. Collaborative research, including the expertise of both researchers and decision-makers, is one way to ensure that relevant research is undertaken and that research findings are used. ⁷⁻⁹

It is proposed that the process of knowledge translation progresses from simple diffusion of information to actual use of research in planning and decision-making.^{6,10} There is increasing recognition that the goal of knowledge translation activities is utilization, not simply creation and dissemination of evidence,^{8,11} and that simply making research results understandable to a lay audience (one directional knowledge transfer) is of limited benefit.

The recent literature reflects an increased emphasis on the importance of developing respectful and trusting relationships, creating environments where these relationships can develop, and the need for collaboration at all stages of the research process, including developing the research framework and topic. However, in spite of stated commitment to collaborative research, researchers may be apprehensive about participation of community partners. ^{13–16}

Although barriers to evidence-based decision-making are receiving greater attention, limited attention has been directed to organizational factors affecting research use, either within research organizations or health authorities, 17 even though organizational changes are needed to support evidence-based decision-making. 18

Methods

The need for an evaluation was identified before the project began, and several key elements were in place before the first team meeting (June 2001). An external evaluator was hired, who - while functioning as a member of the team - maintained a position of neutrality among the partners. The initial goals of the evaluation were to assist the project directors continually monitor and improve the project (formative evaluation), and to gather baseline information to facilitate summative evaluation. By the end of the first year, the evaluation was reformulated and expanded – adopting a utilization-focused approach. 19 In this approach, the focus of evaluation is utilization of results (by all primary stakeholders, not only the project directors), together with stakeholder participation in the development of evaluation questions and methods. The evaluation incorporated several different methods: key informant interviews, pre/post test questionnaires, anonymous workshop evaluations and observational methods. Key informant interviews were the primary source of data for the research reported here.

Open-ended, semi-structured interviews were conducted with team members from all partner groups at

the beginning of the project (summer/fall 2001). Additional interviews were conducted yearly (summer/fall 2002, fall/winter 2003), and with new members joining the team. While questions in the initial interview focused on participants' research knowledge and confidence, current research use and objectives for project participation, subsequent interviews explored perceptions of the project, participants' concerns, and suggestions for project development.

Interviews were also held with members of the project Advisory Committee and the CEOs of the participating RHAs 18 months after the project began. The objectives were to identify key issues from the perspective of the project partners, encourage participation in project development and evaluation, and to monitor progress and emerging issues. A total of 101 interviews, with 62 different participants, were conducted over the three year period -45 with RHA team members, 32 with MCHP staff, 10 (including one group interview) with Manitoba Health staff, and 14 with Advisory Committee members and CEOs. With the exception of interviews with CEOs, which were conducted by telephone, all first interviews - and most second interviews - were conducted in person. An interview guide was used: while similar themes were explored with all stakeholders, the wording and focus of the questions varied depending on the respondent's role and experience of the project. Most interviews took from 45 min to one hour. Notes were taken and transcribed immediately following the interview. As interviews were not audio-taped, no long narratives were captured, although short quotations were captured verbatim.

Following each series of interviews, a draft report of the findings for each of the stakeholder groups was circulated confidentially to allow for private discussion and feedback. When the individual reports had been reviewed, a public report was prepared. As themes related to knowledge translation theory were identified, they were shared in feedback/discussion sessions held as part of the team meetings, allowing for further input and theory refinement.

Results

The project evaluation confirmed many of the elements of effective knowledge translation identified in the literature: the importance of trusting relationships; the need for multidirectional information exchange and an ongoing forum for sharing; and the creation of research relevant to users. It also identified several limitations to how these principles are commonly interpreted (Table 1), and which aspects were most important from the perspective of community partners. The results suggest that much of what is being discovered by researchers about knowledge translation is not new, but - once stripped of mystifying terminology - is equally well understood by researchers and community partners through their other life experiences.

Trust as an initial barrier

In the initial interviews, several team members expressed scepticism about The Need to Know initiative and, as the project progressed, participants became even more frank about their preconceptions of researchers, their usefulness and accessibility. They referred to 'Ph.D. prepared researchers,' who were 'remote,' 'aloof,' and 'isolated, don't know how things really work.' This lack of confidence extended to research itself. Some participants felt that MCHP used 'data in which I don't have any confidence'; that there was 'a real mistrust ...people don't value secondary data analysis, feel that the Centre is not looking at the right stuff' (RHA team members).

As experienced managers, RHA team members were also acutely aware that often the rhetoric of partnership was simply that - rhetoric. Some were not at first convinced that they were to be treated as full partners.

At the end of the day the question will be: How honest are we about the collaboration? Or will the Centre just listen to what it is interested in doing? Will the Centre actually 'hear' what the RHAs need – will they listen?

These perceptions were not based on previous experience with MCHP, as most had no direct experience with the organization - participants expressed a generalized lack of confidence in researchers and the potential benefit of research. The first task facing the project was, therefore, to address the concerns many community partners had about the relevance of research. It was also necessary to demonstrate that the partnership was genuine.

It was also necessary for researchers to develop trust in community partners. However, a different kind of trust and confidence was needed: confidence in community expertise, insights and capacity. Some researchers were, at first, anxious about whether community partners would be able to understand the potential and limitations of administrative data, and concerned that the project could generate inappropriate demands. In interaction with the larger research community, we also found that collaborative research was often perceived as time consuming, and as risking research quality through researchers losing control of the research process. Some academics expressed surprise at how quickly team members were able to develop research-related capacity, suggesting that researchers may underestimate the existing knowledge, capacity and unique insights of non-academic partners.

Participants highlighted the importance of both structured (e.g. collaborative development deliverables) and informal (e.g. team suppers) opportunities for interaction in developing this mutual trust. These activities allowed the preconceptions of both parties to be challenged. Researchers came to understand that 'it is no longer us and them'. RHA team members observed that researchers

Table 1 Components of effective knowledge translation

Necessary components	Common interpretation	Aspects requiring more emphasis
Creation of environment of interest in, and openness to, research	It is necessary to provide a setting for knowledge translation to occur Lack of interest or uptake is due to lack of knowledge or awareness of community partners	It is necessary to build confidence and trust between community partners and researchers: • confidence in researchers • confidence in research • confidence in benefits of research
Opportunities for collaborative research	It is useful for researchers to consult with and involve community partners Resources are needed to support collaboration	Community partners have their own priorities and interests Communities have knowledge and expertise that researchers do not have Based on past experience there may be suspicion by community partners of being used (managed community participation) In many cases community partners are less well resourced than researchers; even if financial costs are covered, there must be practical benefits to participants
Shared vocabulary and conceptual base	Researchers need to help build capacity of community partners related to research Researchers must learn to communicate in a more user- friendly way	Researchers need to learn from the community about the usefulness and validity of research Community partners have expertise related to knowledge translation Communication should be two-way not unidirectional Language may play a role in creating and maintaining barriers Research bodies may not have necessary skills in-house and may need to expand their skill base
Forum for sharing	In-person contact is important	The quality of in-person contact is important. Attention must be paid to the personal factor (not simply activities, process and structure) Informal opportunities (e.g. social activities) for networking are needed Research organizations may not have in-house expertise related to facilitation and network building
Understanding of research findings	Capacity building among community partners is required to help them understand research and its importance	Without development of trust, there may be suspicion of both results and the agenda behind research Researchers may need help from community partners in making sense of findings. Opportunities for critical feedback and researcher education are needed Most research is not presented in accessible format Several kinds of learning are involved in knowledge translation Understanding research findings is only one step in knowledge translation
Understanding of implications for practice	Implications and necessary responses will be evident once research reports are understood	Knowledge translation requires that findings be interpreted and applied in a specific setting
Application and utilization of research	Researchers should encourage research use but are not responsible for next steps	Without assistance at this stage, community partners may not be able to proceed There appear to be progressive levels of research impact; all must be addressed Organizational capacity-building is necessary for research utilization
Sustainability of interventions	It is important to plan for what will happen once research is concluded	It is important to establish ongoing relationships between decision-makers and researchers

were 'much more down to earth than I expected' and that the project allowed them to show 'how useful they can be.' RHA team members also highlighted the importance of 'how they were treated', observing that project staff made them feel 'special' and 'welcome', and that the care dedicated to organization of events contributed to their sense of being valued.

Respecting time and resource limitations of community partners

The research team indicated that they had gained an appreciation of the often intense resource limitations faced by RHA participants, and the multiple demands

they juggle on a day-to-day basis. While the literature recognizes the need for financial support for collaborative activities, ^{13,20} it often focuses on the need for an adequate research budget to enable academic researchers to engage in collaborative initiatives. Time and resource demands on community partners must receive equal attention: community partners are concerned not only that the financial costs of participation be covered, but also that their time not be wasted. They want concrete benefits from participation.

Developing a shared language and culture

In recognition that failure to develop a shared vocabulary often has the effect of silencing community

partners in research discussion, the project directors incorporated basic learning sessions on topics such as statistics and epidemiology into team meetings, and reviewed all presentations to ensure that jargon was removed and/or explained.

Several months into the project, it became apparent that there was a lack of clarity - not only among RHA participants, but also among researchers about what exactly was meant by 'knowledge translation'. Consequently, the team explored meanings of related concepts and jointly clarified how terms would be used within the project. Through this process they differentiated between knowledge transfer (which can be a one-way process) and knowledge exchange (the process by which researchers and decision-makers share expertise and knowledge for a specific purpose). The team found the term knowledge translation unhelpful and agreed to use the term 'KT' to describe the complex process of 'exchange, synthesis and ethically-sound application of knowledge - within a complex system of interactions among researchers and users';²¹ a definition that incorporates the concepts of collaborative research, dissemination and research utilization.

This process of clarification led to development of a first draft of the project's collaborative learning about KT. The most positive comments received from community partners were related to a short section entitled 'Making the links: or what our mothers told us about KT'.

... The concepts inherent in KT (if not the terms themselves) are not unknown to us. In fact, many of the principles have their roots in other disciplines and life experiences. From the field of adult education we have learned the importance of involving learners in selecting topics of interest to them, and of their active participation in the learning process. We know that teachers who treat adults as passive students who have a lot to learn from 'experts' are rarely welcomed or effective. Plain English writing is urged in a number of settings (from instructions for programming a VCR to health education materials) to increase effectiveness of communication with the public. We have learned from communications specialists that if you want someone's attention, it is helpful to tell them a story. From the field of public relations we are reminded that there is a difference between advertising and public relations or marketing. Telling people what you think they should buy (or want to know) is not as effective as identifying their needs and interests, then designing a product or service to meet those needs.

There are principles that we understand from our own life experiences that are even more compelling. We understand that if people treat us with respect, consult us on issues that concern us and show simple good manners, we are more likely to want to deal with them. We know that we are more likely to ask for help from someone we know and trust than from a stranger; that if people act in a trustworthy way, we are more likely to believe what they tell us; and that if we have a good experience, we are more likely to go back in the future. We recognize that people who monopolize the conversation are not much fun to be with; that we like to do things that are fun; and that if we find activities unpleasant, frustrating or simply a waste of time, we are less likely to get around to doing them. We also learn that if we want action, we have to involve the people who have the power to make it happen, and that sometimes it's not what you know, it's who you know. These 'common sense' principles, which we apply to personal relationships and business dealings, are also fundamental to KT initiatives.

This process illustrated, through everyday examples, many of the principles that are now recognized as necessary for collaborative research and its implementation.

It takes time

The Need to Know Project found that time was required to build trust, develop a shared culture, identify common priorities, and undertake collaborative research. It took over a year for participants to grow into the project - to clarify their roles, feel confident, and understand the potential of the project ('I'm just now starting to catch on, it's starting to jell'; 'I'm taking ownership of the project compared to a year and a half ago', RHA team members).

The importance of relationships in knowledge creation

Eighteen months into the project, all partners identified the greatest project accomplishment as the development of relationships and the building of networks. The following year, the selection and successful completion of the first research report, The RHA Atlas,²² was most often cited as the greatest accomplishment. Relationship development was perceived as a necessary pre-condition to the completion of deliverables or reports.

Trust was essential in selecting the research topics. A process was established for consultation within each RHA, with the final decision made through discussion with all partners at a regular team meeting. Because there was a high level of confidence in the researcher— RHA relationship by the time these discussions took place, RHA team members demonstrated respect for MCHP expertise as to the strengths and limitations of each proposed topic. However, the topic selected (mental health) was not the choice of the project director, who had a number of concerns about its feasibility. In spite of some hesitations, the project staff proceeded with the team's priority topic. This was a critical point in project development: the decision to respect the group process was interpreted by many on the team as a demonstration that the partnership was genuine ('It showed the Centre's commitment to the project'). This trust in the process was not misplaced: the topic selected was appropriate for analysis using administrative data, and the project - now completed has produced more useful information than anticipated.

Expanding the focus of capacity-building

The evaluation found that team members experienced three kinds of learning through the project:

- factual learning (e.g. research concepts, findings of specific research projects);
- how to locate and access needed information; and
- a change in how they viewed research, and their relationship to it.

The third kind of learning appears to be the most important. Our research suggests one reason why research may be more commonly used in conceptual ways than in applying specific findings to specific decisions. Unlike factual learning, a transformation of one's view of oneself through research is personally empowering. Changes in attitudes may result in greater openness to research and its potential usefulness – and so may be more immediately usable even by those who may lack the authority for direct implementation of research findings.

(It) has taught me to ask more questions and not just accept status quo. I think more in research terms and look for evidence for decisions – not just because this has always been done.

How I approach tasks is much broader than a couple of years ago. I understand all the things I should look at, and am learning about where other information is (RHA team members).

This conceptual use of research may be less rewarding to researchers (as their research may not be used directly and perhaps not as they intended); however, it may be of most long-term benefit. With more positive attitudes to research and its benefits, community team members become creative partners in research implementation, not simply conduits through which research flows towards predetermined targets.

From community partners to academics

The focus of capacity-building activities is often limited to community partners, with little attention to the potential benefits of such partnerships to researchers. Project staff report, however, that collaborative research has resulted in significant learning of:

- the importance of community-research partnerships and team-building activities;
- the expertise of community partners ('People on the RHA team know a whole lot more about a bunch of things than a lot of people at the university');
- the reality of planning in the community ('I learned a lot about the reality RHAs were facing and solutions until you are directly involved, you don't know what they do');

- barriers to research understanding and use ('it was an Aha! experience – realizing that there were 78 graphs and RHAs had to look through all 78 to get a picture').
- knowledge translation ('you read about it in the literature, but I'm involved in a project where it is working and the behind the scenes events that make it successful').

From individual to organizational capacity

The RHA team partners quickly identified the greatest challenge to project success – moving from individual capacity-building to influencing how research is used for planning within the RHAs.

The Need to Know Project evaluation has identified four levels of project impact. There is strong evidence that significant progress has been made at the first level – that of *individual learning* of team participants. Progress is also reported at the second level ('how I do my job'). These changes are often related to the conceptual use of research rather than application of specific findings ('I think I look at data and information differently now. I'm not totally daunted. Now I can have an intelligent conversation with planners'. RHA team member).

However, at the midway point of the five-year project, participants reported limited impact at the third level: changes in *how RHAs make decisions*. RHA team members themselves do not have the authority to implement regional change. Barriers identified by the team include (a) resource availability; (b) organizational structure/process; (c) organizational culture and leadership; and (d) the larger political context. Facilitating organizational change has not traditionally been seen as the role of research organizations; however, individual team members feel they cannot affect change at this level without assistance.

A fourth level of impact – on other networks and committees at the provincial level – has recently been identified. It is reported that there are changes in the way meetings are conducted (and that the project has raised expectations of how collaborative and productive such meetings should be), and information and tools developed through the project are being incorporated into other joint initiatives (e.g. the provincial Indicators Working Group). That greater progress appears to have been achieved in this larger arena (compared to the change documented within each RHA) is likely due to the relatively high number of team members who participate in these networks – creating a critical mass advocating for, and modelling, change.

Discussion

These findings have several implications for collaborative research. While relationship factors (such as personal contact and trust) are consistently identified

in the literature as key factors in knowledge translation, $^{1,11,23-25}$ our research suggests that the importance of personality has not received sufficient attention. Quality of interaction may help explain why some efforts at interaction have little impact, ²⁴ and why many diverse approaches to the linkage role are effective. If the key challenge is to gain trust and facilitate participation, whether the linking role is a project investigator, an identified knowledge broker,²⁰ a 'credible messenger',26 a 'charismatic leader' or a 'research transfer officer' may be relatively unimportant. Instead it may be 'the personal factor' 19 often overlooked in evaluation activities - that is the crucial variable. This 'personal factor' is more than being nice - it requires attention to the political and value issues related to decision-making and control. Our experience reinforces the observation that research topics chosen are not as important to collaborative research projects as the process used to decide them and the relationship developed between the researchers and users. 9,14

Personal factors are also important in selection of partners. Although much preparation went into creating a welcoming and collaborative environment, it has been suggested that the project was fortunate in terms of who was selected by each of the partner groups to represent them. This suggests that one of the most important criteria for selecting effective team members is their ability to work in a collaborative manner with peers.

The results also suggest that lack of interest in research activities may not be the result of ignorance of the benefits of research (as is often assumed in the literature), but a response based on past interaction. Community partners can differentiate between genuine participation and attempts to limit community involvement to advisory or feedback roles (with participation carefully managed to lead community partners to approve previously identified priorities). It is essential for research organizations to explore their own commitment to genuine collaboration and be honest about their assumptions of roles and authority. For example, because The Need to Know was an MCHP project, the deliverables developed were limited to those that could be addressed through analysis of administrative data. However, within that framework, MCHP staff honoured the commitment they made to the process for selecting the deliverable topics. They also responded to needs for broader research capability by offering introductory sessions on a number of research methods, modelling research ethics through the project evaluation, and assisting RHA team members find appropriate resources for regional research activities.

The differences between researchers and community partners are commonly described in terms of two different cultures. 25,28 This two-cultures hypothesis describes the different worlds in which researchers and decision-makers work, and employs the principles of intercultural understanding. Our work suggests that failure to develop authentic and respectful peer relationships or to share decision-making power may better explain many of the barriers to academic-community partnerships than any proposed differences between 'cultures'. A key challenge for any research relationship is to develop a shared project culture, with shared values.

The findings also reinforce the importance of ongoing relationships and the continuity of educational opportunities. While it may be realistic for the project to plan specific short-term activities with partners in the future, these will be built on an established basis of trust, and within a shared culture. Sustainability of relationships, therefore, emerges as a key issue.

Community partners, far more than researchers, continue to emphasize the importance of addressing organizational barriers to the use of research in planning and decision-making, and facilitating capacitywithin research organizations. suggests that knowledge translation initiatives must address organizational barriers, and not rely exclusively on education and training of individuals. It also suggests that research organizations should select community partners who are in a position to facilitate implementation of findings within their organizations.

Our results also suggest that greater attention must be directed to the barriers found within academia to university-community partnerships. While interpersonal skills are recognized as important in many professions, they have historically not been required of researchers. A skilled researcher may be inexperienced in the development of networks, group building and facilitation. Research organizations sponsoring collaborative research activities must ensure that appropriate skills in facilitation, adult education, networking and communication are present in influential positions on the research team.

The Need to Know Project challenged researchers to make changes in how they did their jobs, and to learn skills not necessarily taught in graduate programs or rewarded in academia. The excitement generated among researchers associated with the project suggests that researchers may be more receptive to collaborative research if they have the benefit of direct participation in an environment where it is rewarded. Although the evaluation found good participation and support for the project from within MCHP, it is unclear to what extent it will be possible to institutionalize the learning of individuals into organizational practice, and to prioritize the non-academic functions related to knowledge translation activities. Few research organizations dedicate resources to enhancing internal knowledge translation capacity,²⁹ with the result that planning and priority-setting activities unaffected by the knowledge gained by specific individuals. There has, however, been increased participation of The Need to Know team members on MCHP working groups.

Implications for The Need to Know Project

The evaluation has confirmed the importance of team meetings (including opportunities - such as the team suppers - for fun and informal interaction); the attention given to creating an environment that is supportive of mutual learning and tailoring activities to the interest of the group, and the collaborative decision-making processes instituted for deliverable selection and development. In response to participant interest, longer periods of time are now allocated for team discussions and elected RHA representatives participate on the project-planning team. In order to address barriers at the organizational level, in 2003 the project decided to increase team membership to two members from each RHA. More time is being allocated to development of dissemination plans and site visits. It is proposed that these activities will support organizational capacity-building in the regions.

At the time of writing, two of the three collaborative research projects have been completed, and the team has reached consensus on the topic of the third. RHA team members express a high level of confidence in the project, their research partners and their ability to participate in research activities. Challenges at this stage relate to the interpretation and application of research in specific settings, and establishing processes and structures to ensure sustainability of relationships and collaborative activities.

Conclusion

The participation of community partners in the evaluation of *The Need to Know* Project has provided unique perspectives on knowledge translation theory. Personal factors are critical in developing collaborative relationships, and the theme of relationships connects all phases of the collaborative research process. A focus on capacity-building of individual community partners is inadequate, as strategies must be developed to address barriers to the use of research at the organizational level within both RHAs and research organizations. Additional research is needed to determine the extent to which these findings can be generalized to other settings.

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