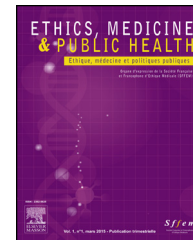




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METHODOLOGY

Knowledge translation and ethics in public and population health from a knowledge management perspective



L'application des connaissances et l'éthique en santé publique et vers les populations dans une perspective de gestion des connaissances

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KEYWORDS

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Summary Theoretical and empirical applications of knowledge translation (KT) are growing in the public and population health literature. However, not much existing literature has addressed ethical considerations of KT in this context. The current paper briefly reviews what is meant by the terms 'knowledge translation', 'knowledge management', 'public health', and 'population health', then discusses these areas with ethical considerations in mind. Two specific examples—communities of practice and populomics—are used. The paper aims to begin filling two gaps in the extant KT literature in health by, first, drawing attention to the need for increased consideration of ethics in knowledge translation activities and, second, suggesting that ethical KT in communities of practice and populomics is needed, especially pertaining to the communication of human health determinants in research and decision-making processes.

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MOTS CLÉS

L'application des connaissances ;
La gestion des connaissances ;
Santé publique ;
Santé de la population ;
Communautés de pratique ;
Déterminants de santé

Résumé Les applications théoriques et empiriques de valorisation des connaissances (KT) se développent dans les écrits en santé publique et en santé de la population. Cependant, peu d'écrits se sont penchés sur les considérations éthiques de la valorisation des connaissances dans ce contexte. L'article revient brièvement sur les définitions des termes « valorisation des connaissances », « gestion des connaissances », « santé publique » et « santé de la population », puis traite de ces thèmes sous l'angle des considérations éthiques. Deux exemples spécifiques — communauté de pratiques et « populomics » — sont développés. L'article a pour objet de commencer à combler ces deux vides existants dans les publications en santé traitant de valorisation des connaissances en attirant, tout d'abord, l'attention sur le besoin de prendre davantage en considération les questions éthiques dans les activités de valorisation des connaissances et, ensuite, de suggérer qu'il y a un vrai besoin au sein des communautés de pratiques et des « populomics », en se rapportant aux déterminants de santé des êtres humains dans le cadre de la recherche et des processus de prises de décisions.

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Introduction

Although the awareness and use of knowledge translation (KT) theory and application in public and population health is burgeoning, very little has focused on ethical considerations of KT in health contexts. Drawing upon the larger scope of knowledge management (KM), the current paper aims to address this KT literature gap in public and population health by:

- drawing attention to the need for increased consideration of ethics in knowledge translation activities;
- and suggesting that ethical knowledge management in communities of practice and populomics is needed, especially as they pertain to the communication of human health determinants in research and decision-making processes.

KT is a point of focus because “one of the most consistent findings from clinical and health services research is the failure to *translate* research into practice and policy” [italics mine] [1]. Knowledge translation opens the door for connecting clinical and health services knowledge to practice and policy action.

The majority of KM and KT literature discusses theories, case studies, systematic reviews, processes, methods, etc., but ignores ethics as central component of KM and KT practice. KM and KT are social in nature, yet extant literature has paid little to no attention to how ethics might play a role in KM and KT activities [2–4], especially in public and population health. Yet, ethics and ethical considerations have been identified as an important emerging trend in KT [5].

Via the classic KM concept of ‘communities of practice’ and the new concept ‘populomics’ from the healthcare literature, the current paper explores KT and ethics as they might pertain to both public and population health. Before reviewing the literature on KM, KT, ethics, and health, a brief review of the terms ‘knowledge translation’, ‘knowledge management’, ‘public health’, and ‘population health’ will be useful.

Knowledge translation (KT) and knowledge management (KM)

‘Knowledge translation’, a term made popular by the Canadian Institutes of Health Research (CIHR), is defined as “a dynamic and iterative process that includes synthesis, dissemination, exchange, and *ethically-sound* application of knowledge to improve [health], provide more effective health services and products, and strengthen the health care system” [italics mine] [6]. Notable is that ethics is included in this definition, yet the published KT literature has largely failed to engage in any serious conversation about ethics in knowledge translation.

The World Health Organization [7,8] has defined KT as “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”. Stakeholders include researchers, scientists, government officials, policy makers, medical practitioners, healthcare organizations, patients, communities, and any other entity involved in the health environment. More simply, KT can be defined as “the methods for closing the gaps from knowledge to practice” [9] or the bridge across “the gap between what is known and what gets done” [10,11]. At its most basic, KT is about creating bilateral pathways of knowledge flows among and between stakeholders. In the health literature, these pathways often are between researchers who *create* knowledge and practitioners (e.g., physicians, government officials, social workers, etc.) who *use* knowledge.

Although the need for the term ‘knowledge translation’ has been questioned and scrutinized [12,13], the term is useful for understanding that just because knowledge is created does not mean it will be effectively translated to be used or be used at all [1,9]. Knowledge, if it is to be used, should be translated from *researcher* mode to *user* mode and visa-versa in a way that promotes effective action. Consistently, the knowledge translation literature has emphasized KT’s concentrated effort for actively utilizing knowledge; that is, putting knowledge to use in applied, practical, real-life, real-time environments [14].

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