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## Original Research

# Exploratory study of the role of knowledge brokers in translating knowledge to action following global maternal and newborn health technical meetings

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## ABSTRACT

**Objectives:** There have been increasing calls for more research on interventions to successfully translate evidence-based knowledge into improved health policy and practices. This paper reports on an exploratory study of knowledge translation interventions conducted with participants of global health meetings held in Bangladesh in 2012 and in South Africa in 2013. We measured stakeholders' uptake of evidence-based knowledge in terms of their translation of this knowledge into actions around public health policy and practice. The research sought to determine whether participants shared and used knowledge from the meetings to improve health policy and practices in their settings and the factors influencing sharing and use.

**Study design:** An exploratory study employed quantitative and qualitative methods of online surveys and in-depth interviews to collect data from all meeting participants.

**Methods:** All participants in the Bangladesh and South Africa meetings were invited to complete an online survey during the meetings and over the following six weeks. Of 411 participants in the 2012 Bangladesh meeting, 148 participants from 22 countries completed the survey. Eleven of these respondents (from eight countries) were interviewed. Of the 436 participants in the 2013 South Africa meeting, 126 respondents from 33 countries completed an online survey; none of these respondents were interviewed.

**Results:** The analysis revealed that most respondents used new knowledge to advocate for policy change (2012: 65.5%; 2013: 67.5%) or improve service quality (2012: 60.1%; 2013: 70.6%). The type of knowledge that respondents most commonly shared was clinical or scientific information (2012: 79.1%; 2013: 66.7%) and country-specific information (2012: 73.0%; 2013: 71.4%). Most 2012 respondents shared knowledge because they thought it would be useful to a co-worker or colleague (79.7%).

**Discussion:** Findings on knowledge use and sharing suggest that most respondents saw themselves as knowledge brokers or intermediaries in a position to influence the translation of knowledge into action in health policy and practices in their countries. Results

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suggest that supporting knowledge brokers working in a local and regional context to spur change, as described in the paper, has the potential to improve health outcomes. Further research is needed to isolate specific interventions and their knowledge translation outcomes.

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## Introduction

Taking advantage of opportunities to increase the uptake of knowledge of ‘what works’ in health policy and practice—reducing what is sometimes called the ‘know-do’ gap—is an urgent need in public health and one of growing interest.<sup>1–6</sup> Applying research evidence leads to high-quality and cost-effective health care and optimal health outcomes, but the ‘know-do’ gap often results in that research evidence not being translated into action.<sup>3–5</sup> Consequences of the know-do gap are most evident in avoidable deaths among the poor and marginalised and failure to reduce health inequalities.<sup>2,7</sup> Among the relevant terms mentioned in know-do theories and models, and one growing in use is ‘knowledge translation.’

Knowledge translation refers to the synthesis, dissemination, exchange, and application of knowledge among research providers and users to improve health outcomes through evidence-based policy and practice.<sup>1,8,9</sup> The World Health Organisation's (WHO's) *World Report on Knowledge for Better Health: Strengthening Health Systems*<sup>10</sup> identified translation of knowledge from science to practice as a priority action for reaching Millennium Development Goals by 2015.

A number of models and frameworks have been proposed to explain successful approaches to knowledge translation, such as Graham et al.'s Knowledge-to-Action (KTA)

framework<sup>4</sup> (Fig. 1). This framework provides a useful conceptual basis for analysing evaluation data on knowledge translation interventions in global health programs, as is discussed later in this paper. The KTA framework portrays the movement of knowledge to application in two main processes, knowledge creation and knowledge action, which overlap and interact in a cycle of evaluation and refinement over the course of a health program. Important aspects of knowledge translation frameworks such as this one include interrelated processes for creating and synthesising knowledge, distributing knowledge tools and products, and adapting knowledge to local interventions that successfully address barriers to implementation. A role often mentioned in these KTA processes is that of a knowledge broker.

### Knowledge brokers: facilitators of knowledge translation

In knowledge translation processes, knowledge brokers facilitate interactions between researchers and users who apply research findings to policies and practice.<sup>2,5,11</sup> Knowledge brokers help research users adapt findings to a local context. Individuals, as well as organisations,<sup>11,12</sup> fill the role of knowledge brokers.<sup>6</sup>

Both organisational and individual knowledge brokers play a part in global health development. Many organisations work

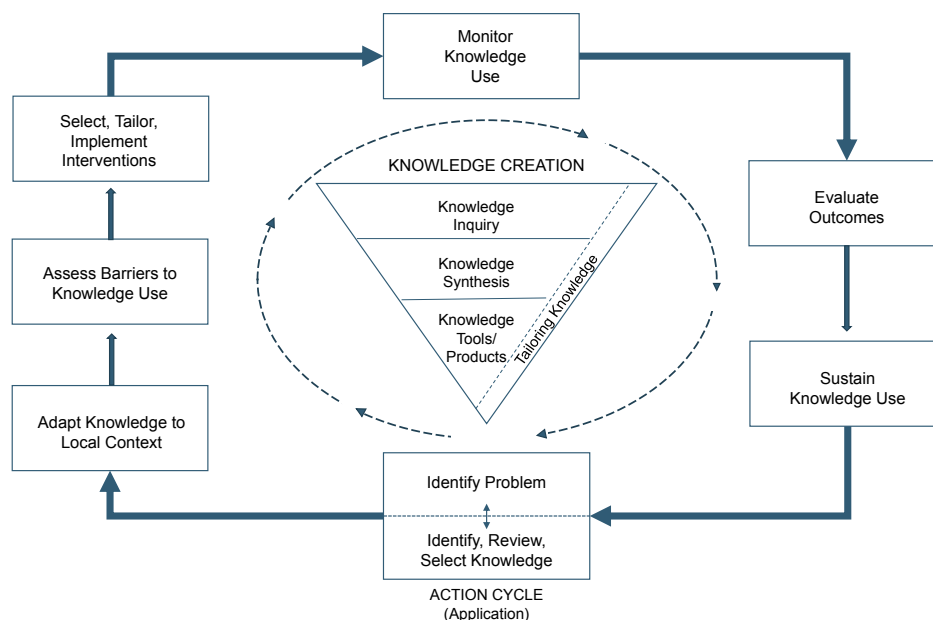


Fig. 1 – Graham's knowledge-to-action framework.

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