

Policy Position Paper

Knowledge Translation to Research Impact for Empowerment

Context

The Lowitja Institute Knowledge Translation to Research Impact for Empowerment Approach is the first of its kind that incorporates Aboriginal and Torres Strait Islander health research principles together with KT and research impact. The Approach aims to achieve positive health outcomes and wellbeing for Australia's First Peoples by creating impact literate individuals and research culture. It is underpinned by the philosophy that effective health research requires a process that reflects community priorities and earns trust and community engagement.

What is Knowledge Translation and Research Impact?

Achieving outcomes that make a difference involves individuals being empowered to understand how Knowledge Translation (KT) and research impact works.

Knowledge Translation

There are several terms (knowledge translation, knowledge exchange, knowledge transfer, knowledge integration and knowledge mobilisation) used to describe the approach to effectively **put research knowledge to use** (policy and/or practice). In some instances, "research" is substituted for "knowledge", creating even more terms, definitions and approaches. There are no clear consensus on which are best, though there does seem to be some agreeance that participatory processes tend to be most effective (6).

The Lowitja Institute recognises that there are many definitions of knowledge translation and research impact and that effective KT goes beyond mere changes in policy and practice. Drawing on a number of sources, including the Lowitja Institute Research Advisory Committee, the Canadian Institutes of Health Research (CIHR) (7), Dr Janet Smylie's work in the area of Indigenous KT, and Dr David Phipps' work in research impact, the Lowitja Institute has developed a definition specific to the Aboriginal and Torres Strait Islander health context.

Knowledge translation (KT) is the complex series of interactions between knowledge holders, knowledge producers and knowledge users, with the goal of achieving research impact, which we define as positive and

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sustainable long-term benefit for Aboriginal and Torres Strait Islander peoples, beyond the realm of academia.

This reciprocal process of combining experiential wisdom with academic research underpins the Lowitja Institute's approach to KT and research impact. KT is not only the dissemination of research findings, but also the process of setting research priorities and developing research questions, selecting methodologies, and the collection and analysis of data. Effective KT must centre Aboriginal and Torres Strait Islander communities and their wisdoms throughout in order to achieve maximum research impact and be implemented through a carefully designed process that minimises power dynamics and privileges Aboriginal and Torres Strait Islander perspectives.

Lowitja Institute Research Impact Measurements

Research impact is an emerging national requirement of government funded research projects. The commonly adopted definition of research impact is the "contribution research makes to the economy, society, public policy or health that is beyond contributions to academia" (8). Other research impact definitions include:

- "an effect on, change or benefit to the economy, society, culture, public policy or services, health, the environment or quality of life beyond academia" (9), and
- "when the knowledge generated by our research contributes to, benefits, and influences society, culture, our environment and the economy" (10).

Measuring research impact helps us to know if our investment and implementation of KT activities has been effective, that is, have we been successful in connecting research to impacts beyond academia for the benefit and empowerment of Aboriginal and Torres Strait Islander peoples.

Drawing on resources developed by the National Health and Medical Research Council (NHMRC) (11) and other sources, Lowitja Institute has identified five types of research impact which consists of:

Health impact
 Knowledge impact
 Economic impact
 Social impact
 Environmental impact

Table 1 provides a description of each type of impact and examples ofimpact.

There are **three** stages of measuring research impact:

- 1) **Short-term**: These are changes that take place less than 12 months after completion of the research project. It is important to note that short-term impacts can also occur throughout the lifetime of the research project.
 - a. Examples of these can be changes in awareness and individual health status, advances in knowledge, and capacity building
- 2) **Medium-term**: These are changes that take place between 1-5 years after the completion of the research project.
 - a. Examples of these can be changes in practices, service delivery and approaches, and development of policy or guidelines
- 3) **Long-term**: These are changes that take place after more than 5 years post-research project.
 - a. Examples of these are implementation of programs and policy



Table 1. Lowitja Institute Research Impact Measurements

Type of Impact	Description of the Impact	Examples of the Impact
Health impact	Improvements in health through new therapeutics, diagnostics, disease prevention or changes in behaviour; or improvements in disease prevention, diagnosis and treatment, management of health problems, health policy, health systems, and quality of life.	 Improved health and wellbeing for Aboriginal and Torres Strait Islander populations directly involved in research projects Development and implementation of policies, guidelines and programs, and additions to existing policies relating to Aboriginal and Torres Strait Islander peoples Changes in healthcare practices and healthcare service delivery
Knowledge impact	New knowledge, demonstrating the benefits emerging from adoption, adaption or use of new knowledge to inform further research, and/or understanding of what is effective.	 Generation of new research questions Changes in awareness and attitudes from the project team, project participants and key target audiences and stakeholders. Increase in uptake and use of research findings/recommendations in policy and practice to bring changes in individual, community and organisational levels
Economic impact	Improvements in the nation's economic performance through creation of new industries, jobs or valuable products, or reducing health care costs, improving efficiency in resource use, or improving the welfare/well-being of the population within current health system resources. An economic impact may also contribute to social or health impacts, including human capital gains and the value of life and health.	 Increase (and continued increase) in job creation for Aboriginal and Torres Strait Islander people Increased funding for Aboriginal and Torres Strait Islander research New collaborations/ partnerships established with Aboriginal and Torres Strait Islander peoples
Social impact	Improvements in the health of society, including the well-being of the end user and the community. This may include improved ability to access health care services, to participate socially (including empowerment and participation in decision making) and to quantify improvements in the health of society.	 Establishment of culturally safe workplaces for Aboriginal and Torres Strait Islander peoples Preservation and sharing of Aboriginal and Torres Strait Islander language and culture Empowerment of Aboriginal and Torres Strait Islander stakeholders to conduct community-led research
Environmental impact	Beneficial effect made to the environment (including flora and fauna). This may include the preservation of vulnerable animals and plants species.	 Preservation of threatened or near-threatened species of flora and fauna Recognition and uptake of caring for country practices



Why are KT and research impact important?

Despite an accumulation of data, information, and knowledge about Aboriginal and Torres Strait Islander health under the Closing the Gap agenda we have not seen the desired improvements in health outcomes. This gap between research and impact is highly concerning and indicates that health improvements are limited not by lack of evidence or knowledge, but by failure to apply this knowledge into practice. This indicates a strong case for an increased emphasis on how knowledge is currently being translated, as opposed to how it can or ought to be translated, to produce impact in the Aboriginal and Torres Strait Islander health context.

Knowledge Translation and Research Impact can be used to understand processes that Aboriginal and Torres Strait Islander people, and other First Nations, have successfully been doing for thousands of years. Complex knowledge banks have been refined and translated from generation to generation through forms of songs, art, practices, ceremonies, stories and kinship systems. The complexity is bringing the research knowledge and experiential knowledge together. The Lowitja Institute believes this can be done by adapting processes of Knowledge Translation to Research Impact.

KT and research impact are also particularly important for Aboriginal and Torres Strait Islander health research given the history and past practices of research with Aboriginal and Torres Strait Islander peoples where research was done **on** Aboriginal and Torres Strait Islander communities rather than **by**, **for** and **with** Aboriginal and Torres Strait Islander peoples. In the past, research, more often than not, treated Aboriginal and Torres Strait Islander people as passive subjects rather than active participants and as a result failed to translate findings into meaningful change for health policies and programs and, most importantly, to the lives of Aboriginal and Torres Strait Islander people.

The Lowitja Institute is the only known Aboriginal and Torres Strait Islander research institute in Australia that funds Knowledge Translation. Closing the gap in health and wellbeing status requires Aboriginal and Torres Strait Islander communities that are empowered with data, information and knowledge – to identify the problem, to identify solutions and monitor implementation.

The Lowitja Institute Position on KT and research impact is informed by:

- Recognition that Aboriginal and Torres Strait Islander peoples, like First Nations people around the world, have their own experiential knowledge banks.
- Creative Knowledge Translation strategies are being used by Aboriginal and Torres Strait Islander-led health and wellbeing research projects.
- Incorporating Aboriginal and Torres Strait Islander ways into Knowledge Translation methods is both practical (uses all available skills and resources) and ethical (involves both the researcher and the participants).
- Traditional knowledge is important in sustainable development and addressing problems related to health and wellbeing. The rights to the transfer of such knowledge is recognised by the United Nations Declaration on the Rights of Indigenous Peoples (Article 27, 31).
- First Nations knowledges have been recognised by national and international organisations to facilitate decision-making about health and wellbeing in ways that are diverse, risk-aversive and cost-effective.
- There is growing international recognition of the importance of intervention research and KT as a means of achieving good practice models that benefit First Nations peoples.
- First Nations knowledge is complementary to scientific knowledge. Its recent application in pharmaceuticals, agriculture, biodiversity, climate and environmental studies is evidence that Indigenous experiential knowledge also applies to health research.
- Effective KT can help foster a more thorough understanding of how and why things work the way they do in community settings and this can help practitioners recognise the essential factors and variables to successfully implementing programs.

What will we do?

The Lowitja Institute resolves to work towards the health and wellbeing of Aboriginal and Torres Strait Islander Peoples through the empowerment, sovereignty and connectedness of Aboriginal and Torres Strait Islander Peoples.

The Lowitja Institute will do this by:

- Balancing our investment in research, with investment in Knowledge Translation to demonstrate Research Impact so that we ensure Indigenous Knowledges and perspectives are used to enhance the health and wellbeing of Aboriginal and Torres Strait Islander peoples.
- Investing in community organisations to lead work on health and wellbeing issues in a holistic place-based way.
- Increasing the competency and knowledge of the health research workforce in KT and research impact.
- Implementing processes of co-design, that privileges Indigenous Knowledges and perspectives, in the way that we work towards our research priorities.
- Improving our Research Impact Data Collection, and developing our Research Impact theory, to be more inclusive of cultural measures.
- Contributing to the process of connecting policy makers to research evidence that can be adapted into Indigenous health policies, programs and plans.
- Continuous impact assessment of our commissioned research activities.
- Recognising the contribution of Indigenous health knowledge to Western science.

We will advocate for:

- Investment in evidence informed approaches to Aboriginal and Torres Strait Islander health and wellbeing.
- Impact-based evaluation of existing health and wellbeing research investments.
- Investment in, and inclusion of, Indigenous Knowledges and perspectives in health research and policy.

The Lowitja Institute Knowledge Translation to Research Impact for Empowerment Policy Position Paper, October 2020.

- Research inclusion measures that reflect Aboriginal and Torres Strait Islander research principles and protocols.
- For all research in Aboriginal and Torres Strait Islander health to include dedicated funding for KT activities.
- Training and development in KT and research impact for health researchers.
- A culture of research with, for and by Aboriginal and Torres Strait Islander people.
- Research that informs policy and practice and makes a meaningful change to the health and wellbeing of Aboriginal and Torres Strait Islander peoples.

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