


BARC Policy and Practice on Ageing Colloquium, Canberra, 4-5 July 2006

ARC/NHMRC Research Network in Ageing Well Research Development & Communication Processes

Workshop 2 - Dissemination and Translation

Presentation Slides:



**ARC/NHMRC Research Network
in Ageing Well**

**Dissemination and
Translation of Ageing
Research**

www.ageingwell.edu.au

**BARC Colloquium
5 July 2006**



Working group members

- Ms Barbara Squires, Centre on Ageing, The Benevolent Society
- Dr Matthew Carroll, ARC/NHMRC Research Network in Ageing Well
- Ms Ann Peut, Ageing and Aged Care Unit, AIHW
- Ms Janet Angel, Australian Association of Gerontology
- Mr Tony Coles, Population Ageing & Research Section, Office for an Ageing Australia
- Ms Mae Mulheran, National Ageing Statistics Unit, ABS
- Mr Greg Mundy Aged & Community Services Australia (ACSA)
- Lydia Ross, Ageing and Aged Care Unit, AIHW
- International discussant:
- Prof Marcia Ory, Health Promotion & Aging, Texas A&M University System

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Convened at: The University of Sydney

Major Partners: ANU, Curtin, Monash, UNSW, The University of Queensland




Issues to be discussed

- Communication between research and policy/administration
- Implementation of research
- Evaluation of outcomes changes to policy and practice

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Possible Network actions to be considered

- Inform researchers about the various ageing constituencies so that they can better communicate with them and identify policy and program needs when planning research?
- Promote the use of the Literature Database on Ageing Research among policy makers and service providers with a greater emphasis on translation in order to connect the "what" to the "why"?
- Conduct targeted workshops at key constituency conferences – e.g. workshops on how to make use of research at the Aged and Community Services Australia (ACSA) conference and on policy-based practice at the Australian Association of Gerontology (AAG) Conference?
- Advocacy to research funders regarding the need for detailed dissemination and translation planning?

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Discussion points

- Barriers from the review of healthy ageing research in Australia
- Issues and suggestions from the review of ageing research in Australia
- Saunders and Walter's three bridge building approaches
- Models of dissemination and translation
- Lomas Table 1 - Audience types, their research needs and preferred information formats
- Lomas table 2 - Challenges to linkage and exchange

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Workshop Summary

Workshop Chairs:

Barbara Squires (Chair)

Ageing Well Network Advisory Group Chair

Director, Centre on Ageing, The Benevolent Society and Immediate Past President, AAG

Dr Matthew Carroll (Co-chair)

Senior Project Officer, ARC/NHMRC Research Network in Ageing Well

International Discussant:

Professor Marcia Ory, Director, Health Promotion and Aging, Rural Public Health, Texas A&M University System

Rapporteur:

Taylor Dong, Early career researcher, The University of Sydney

Definitions:

Need to distinguish between terms that are often used interchangeably:

- Dissemination – getting the information out to key constituencies
- Translation – incorporating the findings into practice
- Sustainability – making the changes to practice continue over time

General comments:

It was noted that there wasn't enough representation from service provision/practice in the workshop and that they should be involved in future discussion. It was pointed out that service providers often don't have training on how to interpret research or access to research materials and that qualified research staff are hard to find. Further to this point, the contribution of the private sector to inform policy should also be mentioned. No one group has a monopoly on giving good policy advice, just as no one piece of research will answer a policy question. Researchers were asked to take these limitations in when communicating with service providers in order to ensure that information is disseminated appropriately.

Policy makers seek research to guide action and expect the producers of that knowledge to provide policy recommendations. However, researchers are often reluctant to make policy recommendations due to fear of going beyond the data. It was noted that policy should be based on evidence-based research, and research should influence policy in a synergetic process. However, what often occurs is that policy will happen, regardless of whether research is available to inform it.

Professor Peter Saunders pointed out that research can often be elitist and that researchers need to be more inclusive in terms of the information that they consider in their analyses and that the output of research should be couched in terms usable in the real world. An important aspect of this is for researchers to take input from service providers etc who implement the changes. Barbara Squires noted that research needs to focus on the whole range of service provision needs, not just residential aged care which is utilised by only a small proportion of the aged community.

It was also pointed out that philanthropy is growing, with representatives from 2 philanthropic organisations in attendance. Researchers were asked to consider these additional sources of funding.

Models:

The different models of dissemination and translation were discussed and it was agreed that we need to avoid a one size fits all approach. The idea of research leading directly to policy was rejected as too simplistic and it was suggested that the intervening stages be incorporated – e.g.

Research → consolidation → literature review → policy paper → sound byte picked up by Minister → policy change → practice change

It was also noted that clinicians have a similar process from initial research → acceptance by professional associations → incorporation into university teaching → use by practitioners at the coal face.

How to communicate with policy:

Participants noted that academic publications are important for dissemination and as markers of academic output but that clinical staff prefer to receive brief actions-focussed presentations. It was suggested that academics should consider training in how to present key messages for target audiences (stakeholders, policy, administration, media) or make use of communications consultants.

It was noted that policy makers do not have time to read full submissions so need clear executive summaries setting out the potential of the findings and follow this up through lobbying the policymakers, stakeholders, key researchers etc – i.e. take multiple approaches to disseminating the message. Using clinical champions can also help to drive a message home. It was also suggested that the financial imperative be emphasised – not only does the research work but it also saves money!

It was also noted that policy decisions can be driven by factors other than the evidence-base – e.g. political and time pressures. Researchers should be prepared to wait for a more opportune time and that there are always opportunities to implement research but these are normally in the form of minor policy changes between policy cycles rather than big policy initiatives. Researchers need to be prepared to engage with policy makers on the run during the implementation phase.

Participants discussed ways to increase the communication links between policy and research including building up on the Network or Ageing Research Online websites (<http://www.ageingwell.edu.au> and <http://www.aro.gov.au>) by adding a policy interface which researchers could use to locate appropriate contacts in the relevant departments. In addition, the possibility of loading policy relevant research abstracts (i.e. “sound bytes”) that policy makers can make use of was also seen as a worthwhile possibility.

How to translate and sustain research into practice:

Professor Marcia Ory, from Social and Behavioral Health at the School of Rural Public Health, Texas A&M University System, discussed methods for translating research into sustainable practice using the example of the “Active For Life” intervention program. Marcia noted that it was critical that clinical and community champions be identified who can take ownership of the ongoing process. Relevant organisations (churches, services, Parks and Recreation, Public Health offices etc) should be incorporated into the program and the link between the aims of the intervention and their organisational missions should be made clear to them.

When translating the outcome of an intervention study into practice it is important to identify the key elements that make the program work and the minimum level required to produce the desired outcome (i.e. a dose-response relationship) and then incorporate these elements into the program. There are no road maps for how to do this as each setting is different. The community partners must be given ownership of the program so that they can modify it to make it relevant to their community (age group, cultural background etc). The researchers need to include ongoing basic evaluation steps in the procedures but these should be brief markers rather than complicated questionnaires.

Additional available resources:

During the course of the discussions the following resources were referred to:

- The Ageing Research Online website – has links to key documents, searchable research, course and grants directories, key links etc - see <http://www.aro.gov.au>
- The Australian Institute of Family Studies Clearinghouses – provides access to data and systematic reviews on a range of datasets – see <http://www.aifs.gov.au/>
- The Australian Centre for Evidence Based Aged Care focuses on looks at translating evidence into practice - see <http://www.latrobe.edu.au/acebac>
- NHMRC Guidelines on putting evidence into practice – see <http://www.nhmrc.gov.au/publications/files/cp71.pdf>
- NSW Health Department “Framework for Building Capacity to Improve Health” – see http://www.health.nsw.gov.au/pubs/f/pdf/frwk_improve.pdf

Possible Network actions:

- Policy links:
 - Provide additional opportunities to link into policy and include more practice representatives in these discussions (e.g. further workshops, regular symposia around the country)?
 - Need to know who to pitch proposals to – who the appropriate policy contacts are – could the Network assist with this? Perhaps a policy interface on Network or Ageing Research Online websites?
 - Load policy relevant research abstracts that policymakers can make use of on the Network or Ageing Research Online websites?
 - Could the Network act as a connection point between researchers and policy via the Research Theme Chairs?
- Needs of Practice - Network could conduct discussions with key constituency groups on their dissemination practices and needs?
- Outcome of research
 - Need to be aware of the Research Quality Framework and collaborate with practice partners to lobby for the inclusion of the impact of research as a marker of research quality.
 - Collaborate with practice partners regarding ways to document the outcomes of research.
- Dissemination forms
 - Run spin courses on how to distil information down to sound bytes (health journalist Megan Styles suggested as a suitable person) or promote the use of communications consultants?
 - Disseminate directly to the aged community on evidenced-based key learnings on how to change their attitudes and behaviours?
- Interventions toolkit - create a toolkit on how to run sustainable interventions for the elderly or, if enough documents are in place, provide clear links to them on the website?