

Editorial

Knowledge Translation: Resolving the Confusion

Health care systems around the world are faced with the challenge of improving the quality of care and decreasing the risk of adverse events. Knowledge translation (KT) has emerged as a potential answer to these challenges. The finding that providing evidence from clinical research is a necessary but not sufficient condition for the provision of optimal care has created interest in knowledge translation, the scientific study of the methods for closing the knowledge-to-practice gap, and the analysis of barriers and facilitators inherent in this process. Interest in KT has grown exponentially during the past decade. In 1990, fewer than 100 articles were retrieved when searching these terms within MEDLINE. In contrast, several thousand were found when this search was done in February 2006. Moreover, funding agencies, policymakers, researchers, and educators have attempted to turn their attention to KT. However, along with this interest comes confusion about what KT is and isn't. This theme issue attempts to describe the field, explain some of the turmoil, and to address several of the challenges in the KT field.

Davis describes the bridge between KT and continuing education, a source of much confusion in the literature. Graham and colleagues further clarify the definition of KT and propose focusing on the use of the phrase "knowledge to action." They raise the concern that lack of clarity about the term KT has led to its misuse in some settings. They also offer a useful framework for the knowledge-to-action process to assist in resolving the confusion. Estabrooks and colleagues provide a useful overview of selected theoretical perspectives in KT. They highlight that one theory does not fit all contexts and help readers to understand how several theories can be useful in exploring KT.

Successful KT involves several targets, including the public, health care professionals, and policymakers. Lavis explores how KT can build bridges between researchers and policymakers. He also focuses on the need for rigorous evaluation of potential KT interventions. Zwarenstein and Reeves summarize systematic reviews on the effects of interventions for inter-professional education and collaboration. They describe a randomized trial that will collect quantitative and qualitative data on collaborative interventions, and they suggest ways that collaborative interventions might influence KT and evidence-based practice. Grimshaw and colleagues summarize contributions of The Cochrane Collaboration and how their systematic reviews can contribute to KT activities targeted to all relevant stakeholders. In particular, Cochrane reviews have been used to develop a number of KT interventions for various stakeholders, and the Effective Practice and Organisation of Care Group includes systematic reviews of several KT interventions.

In addition to the challenge of including relevant stakeholders, KT poses unique challenges in various settings, and several of the articles in this theme issue of *The Journal of Continuing Education in the Health Professions* feature them. Francis and Perlin identify key lessons in KT from their experience within the Veterans Administration Health Care System. They observe that relevant stakeholders must be included in the development of research questions and subsequently of KT interventions. Further, they shed light on the gap between the need for KT to optimize health care and the lack of proportionate funding to meet this need. Pablos-Mendez and Shademani assert that the challenge of KT is global—most apparent in the premature loss of lives among the poor. They describe strategies of the World Health Organization to encour-

age systems of learning and incentives and rewards to enhance KT and public health. Attempting to meet the challenge of enhancing KT in developing countries, Santesso and Tugwell provide a framework for tailoring KT strategies to barriers and facilitators in different settings. They illustrate how this framework can provide a method for targeting KT to improve health care in developing countries.

This is a tremendously exciting time for those interested in enhancing the quality of care through effective KT. Developed jointly with The Cochrane Collaboration Effective Practice and Organisation of Care Group, this issue of

the *Journal of Continuing Education in the Health Professions* provides thoughtful material featuring some of the successes and the challenges within the KT field. Moreover, we believe that the contributors have outlined the paths forward. We anticipate reflecting on this again in 10 years to see what further progress has been made.

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