BC Centre for Disease Control
Provincial Health Services Authority

**Knowledge translation
and public engagement**
Using theory to build practice during the
COVID-19 crisis

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KT Connects
July 2021

I live, work, and learn on the unceded and traditional lands of the Tsleil-Waututh, Squamish, Musqueam, and Kwikwetlem peoples

Jonathan Ho/Harlan Pruden

Learning Objectives

1. To explore the spectrum of activities involved in knowledge translation in the public health context.

2. To define and contrast knowledge translation and public engagement from a theoretical basis.

3. To examine and evaluate applied examples of knowledge translation and public engagement during the COVID-19 pandemic.

Change

COVID-19 is a story of making change familiar

- Physical distancing
- Social distancing
- Masking
- Quarantine
- Self-isolation
- Viral Load
- Test positivity
- Case counts
- World Health Organisation
- Epidemiology
- Public Health
- BC Centre for Disease Control
- Dr. Bonnie Henry

My background is interdisciplinary

Knowledge Translation Lead

- BC Centre for Disease Control
- BSc and MSc in Health Sciences and Archaeology
- PhD in Psychology and Public Policy

'Home' Competencies

- Interdisciplinarity and mixed methods research
  - Public engagement
  - Critical data studies and biostatistics
  - Public health
  - Social policy

# COVID-19 has reminded us of the power of knowledge

WHO defines an **infodemic** as an "overabundance of information, both online and offline."

Misinformation is false information

Disinformation is purposefully false information to mislead for profit or harm

An overabundance of information

Number of pages of articles (10 articles per page)
posted on online preprint archive **medRxiv**
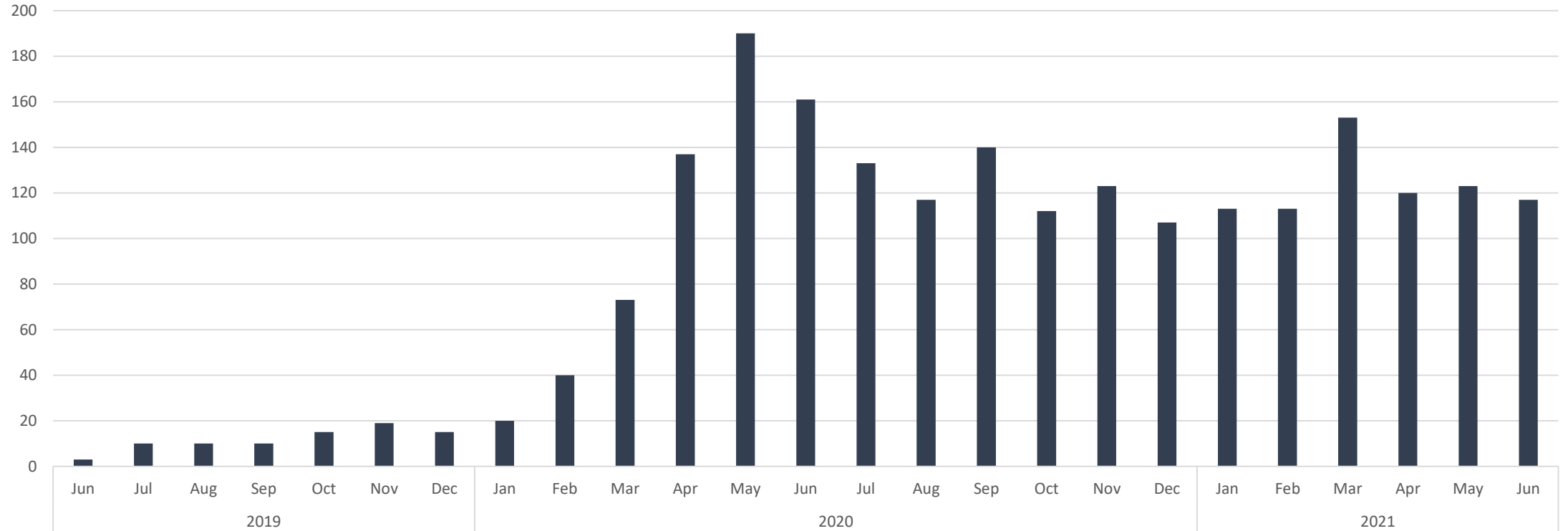
Knowledge Translation

- **Broadly:** Knowledge translation (KT) is the summary and application of best practice evidence in health policy, promotion, and care.

- **Government of Canada:** Knowledge translation (KT) is key to achieving, and sustaining, valuable health policy outcomes. KT aims to translate knowledge into action—action that will improve Canada's health care system and ultimately lead to healthier Canadians.

- **Canadian Institute Health Information:** KT is an active process that includes the synthesis, dissemination, exchange and implementation (application) of knowledge to improve the health of Canadians.
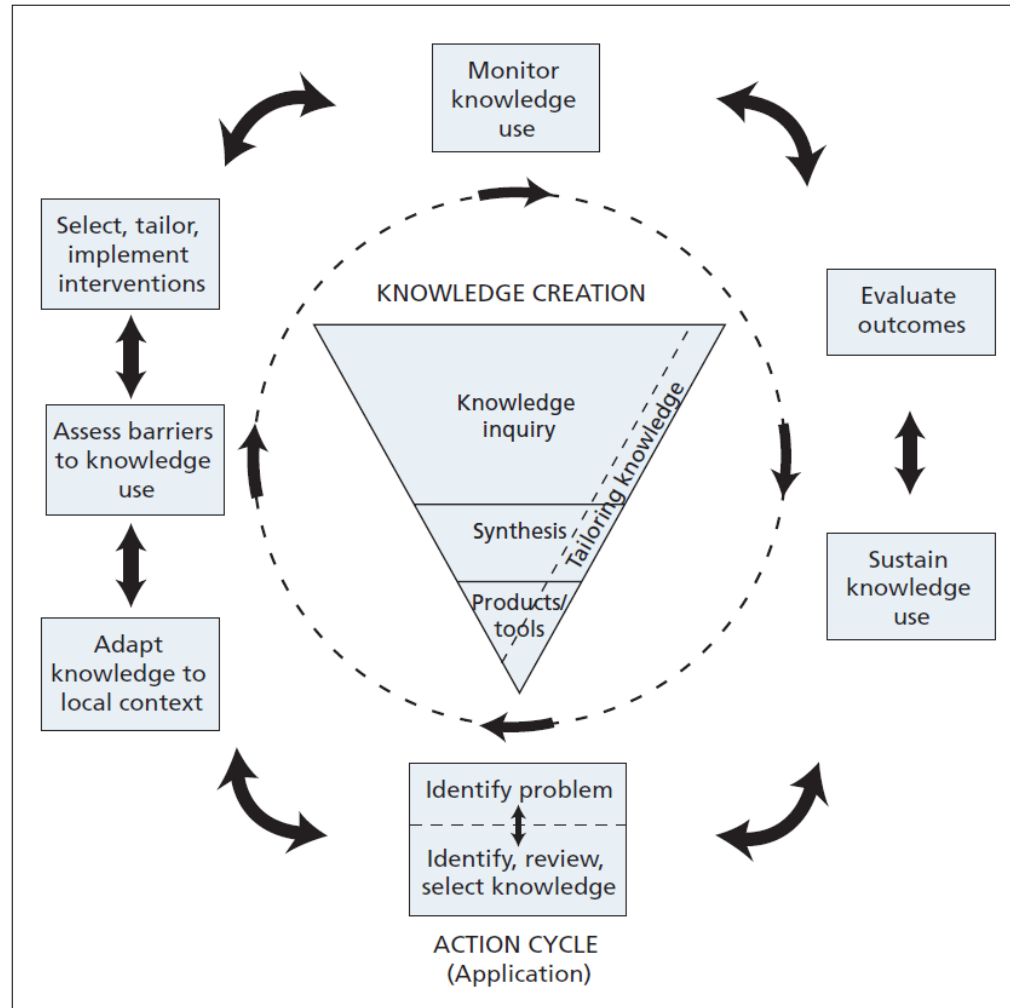
Figure 1: The knowledge-to-action framework.

Basic KT:
The knowledge-to-action framework

Graham ID, Logan J, Harrison MB, Straus SE, Tetroe J, Caswell W, Robinson N. Lost in knowledge translation: time for a map? J Contin Educ Health Prof. 2006 Winter;26(1):13-24. doi: 10.1002/chp.47. PMID: 16557505.
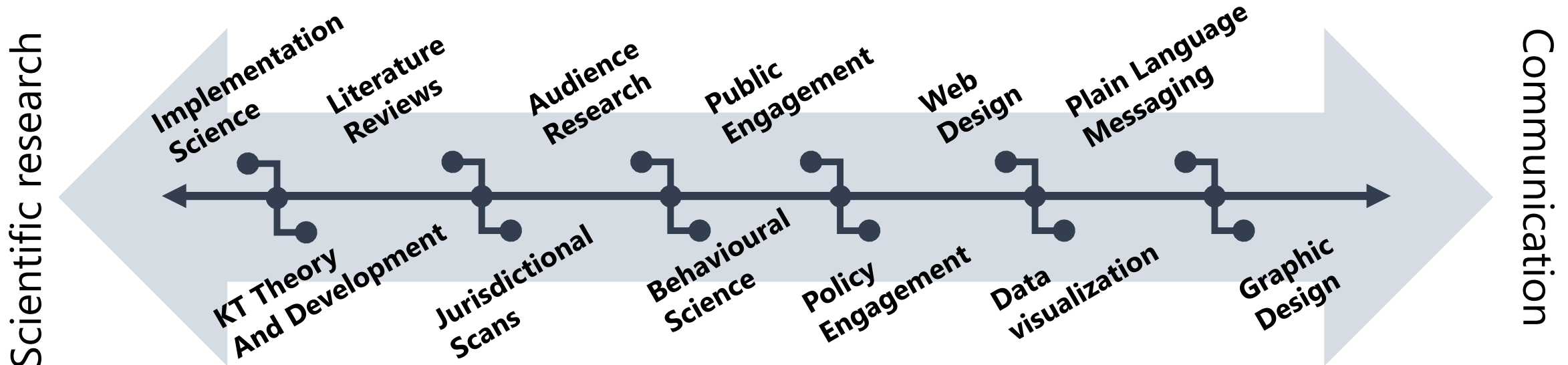
What is Knowledge Translation at BCCDC?

Knowledge translation is the **summary, synthesis and application** of best practice evidence in health **policy, promotion, and care**

In practice KT is a bridge between research and audience, between evidence and action
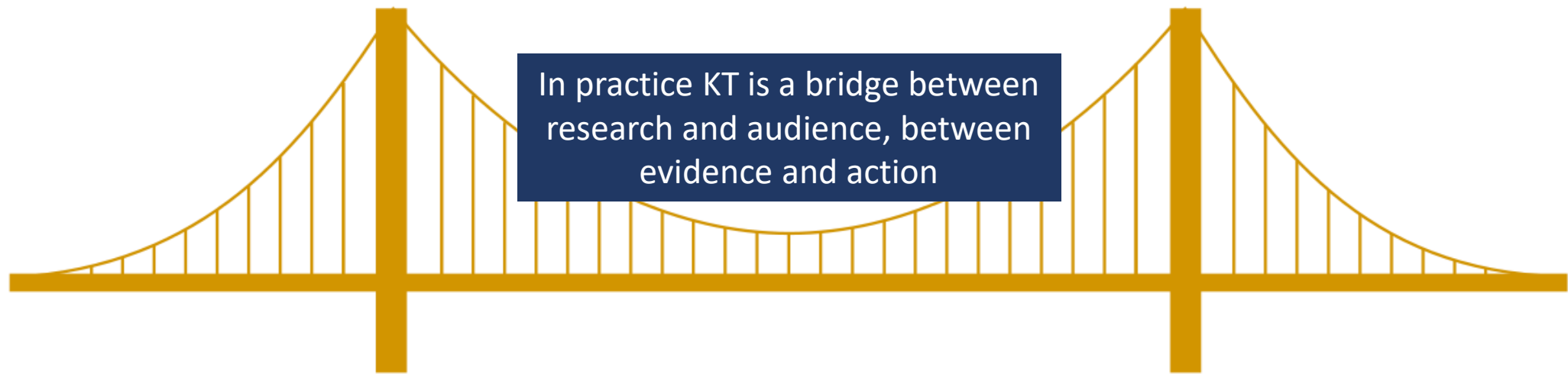
What is knowledge translation day-to-day?

KT is an umbrella term for tasks from research to communication that put health knowledge into action.

Scientific research → Communication

Implementation Science

KT Theory And Development

Literature Reviews

Jurisdictional Scans

Audience Research

Behavioural Science

Public Engagement

Policy Engagement

Web Design

Data visualization

Plain Language Messaging

Graphic Design

Making KT a little more complicated…

KT is not just a process or task but also a field of critical research.

1. What is knowledge?

2. Why do we translate and not exchange?

3. What other disciplines could we learn from? Behavioural science?

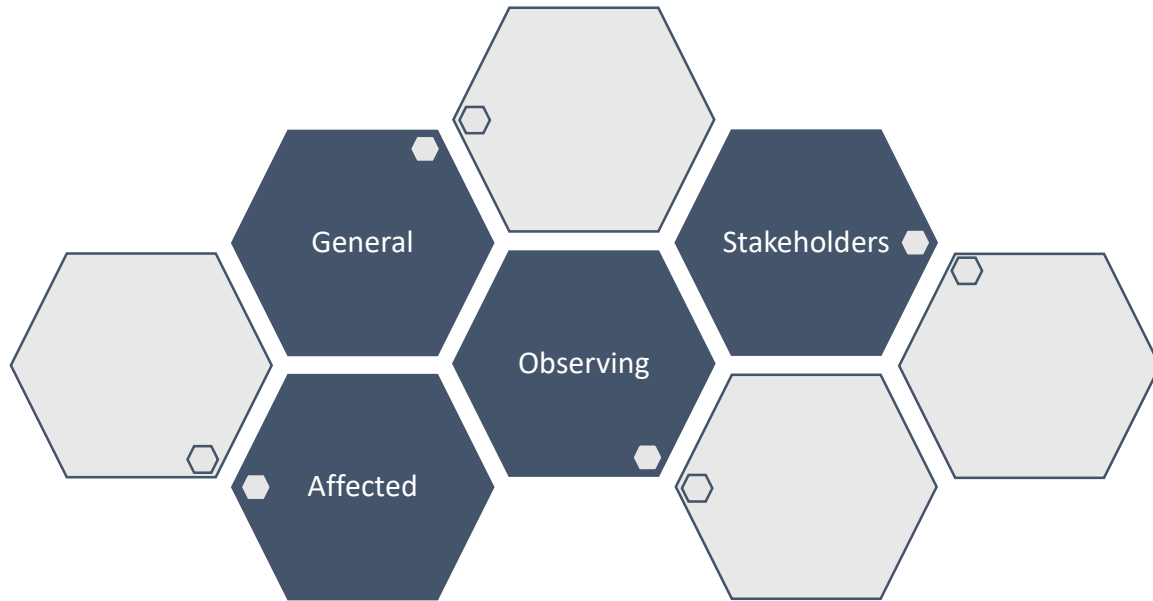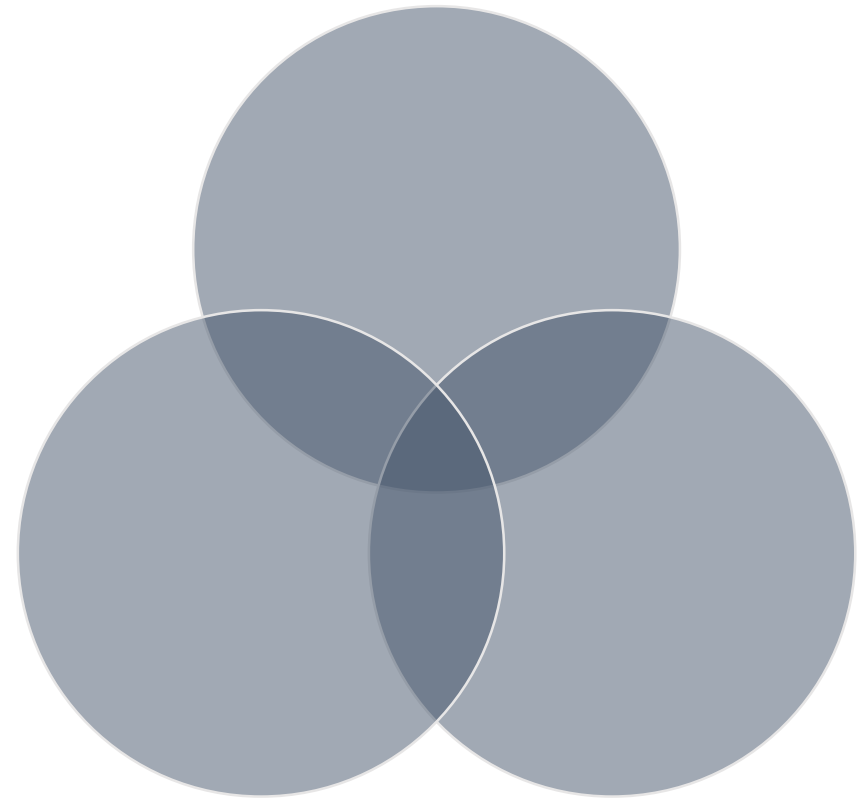4. How is it different from strategic communication?

Public Engagement

Who are the public?

Finite, pre-existing

Dynamic, issue-based

General

Stakeholders

Observing

Affected

Newman, 2011; Renn, 2008

Who are the public?

Changeable groups of people with shared characteristics that define or separate them from other groups.

- ✓Publics are many
- ✓Publics are never 'general'
- ✓Us

What is public engagement?

Broadly: The inclusion of publics in some aspect of the imagination, development or regulation of policy or technology

Instrumental

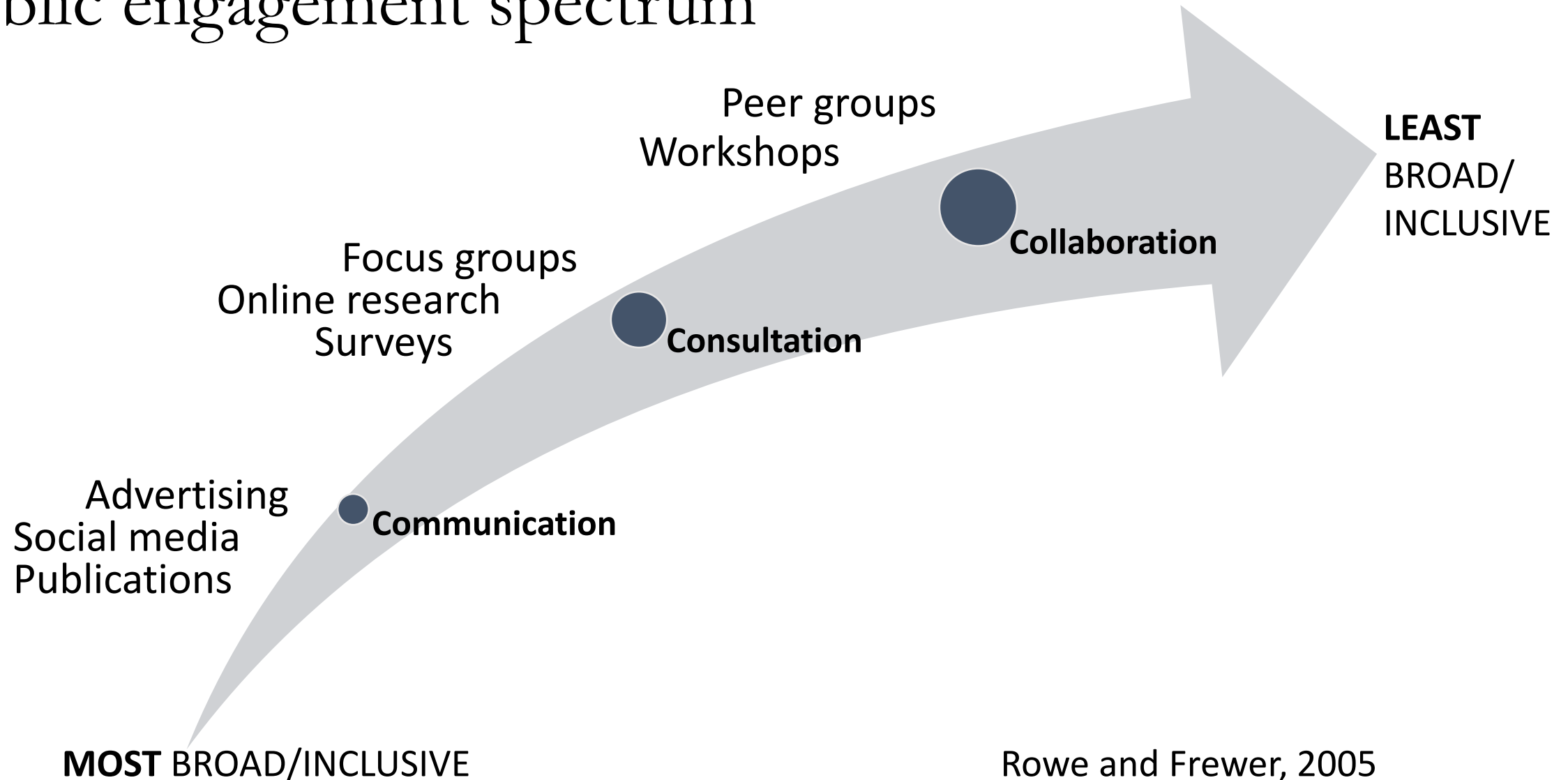Publics included as a means to an end

Normative

Publics included due to holding a right to involvement

Substantive

Publics included for their inherent value and for improvement

Barnett, Cooper, & Senior, 2007; Fiorino, 1990; Stirling, 2004

Public engagement spectrum

Peer groups
Workshops

LEAST
BROAD/
INCLUSIVE

Collaboration

Focus groups
Online research
Surveys

Consultation

Advertising
Social media
Publications

Communication

MOST BROAD/INCLUSIVE

Rowe and Frewer, 2005

Types of engagement

- No cost: social media, within-team service design events, literature reviews

- Less expensive: Online surveys, online focus groups, small focus groups, town halls, site visits

- More expensive: Multi-site focus groups, public engagement program (co-design, ongoing groups etc.)

"Just cause I think that, if you-if you want to get people involved then you have to be where the people are."

Rempel, E., Barnett, J. & Durrant, H. (2019). Contrasting views of public engagement on local government data use in the UK. Proceedings on the 12th International Conference on Theory and Practice of Electronic Governance, 118-128.

Public engagement is about power

COVID-19 Knowledge Translation (KT) Team at BCCDC

The KT team is a small, yet diverse group. Skill sets include KT science, graphic design, risk communication and public health expertise.
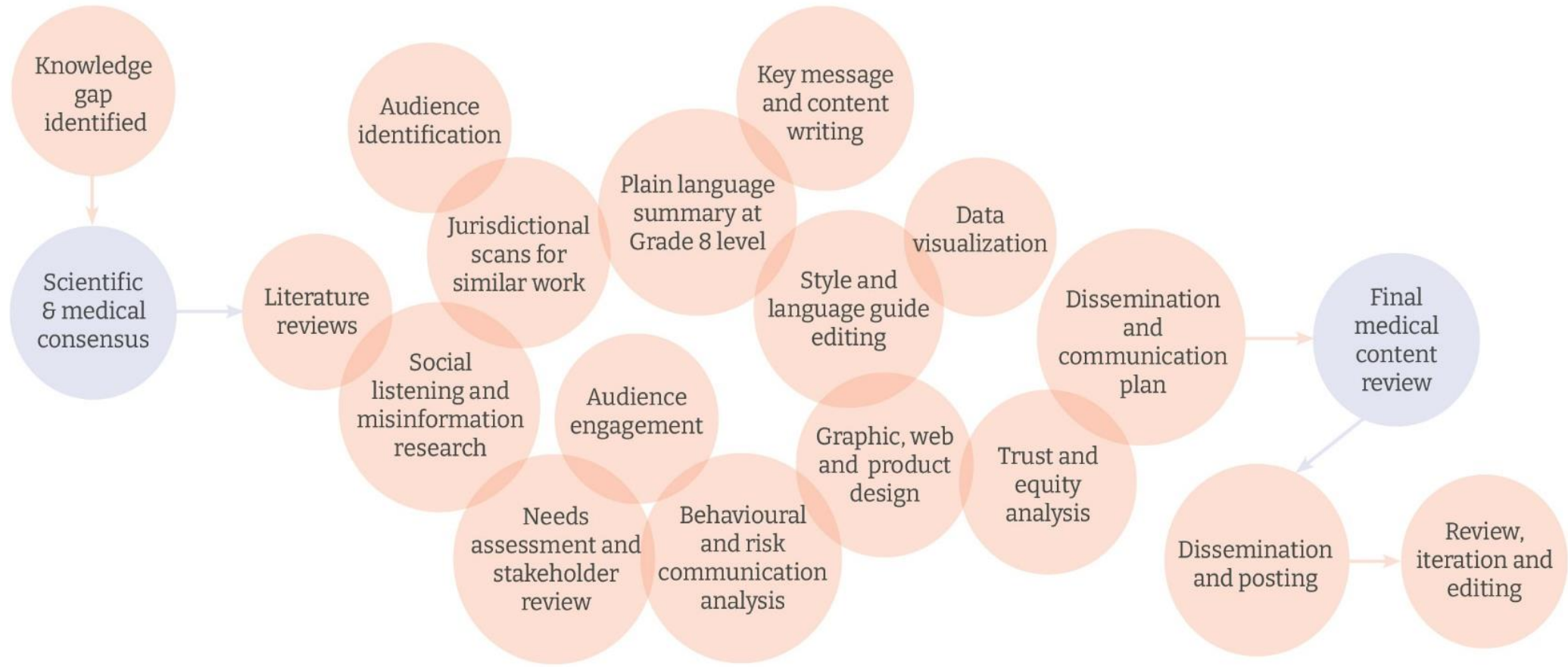
APPROACH

- KT work grounded in concepts of equity, health literacy and collaboration.
- Rapid response model to address new issues as they arise.
- Continuous engagement with multiple agencies and partners.

STRATEGY

- Take emerging evidence on COVID-19 and make it relevant and accessible to a wide range of stakeholders:
  - Industry
  - Government
  - Public health
  - Public audiences
- Work with networks of experts to ensure products reflect best evidence and practice.
- Work very closely with BCCDC Communications Officer

How we work

Knowledge gap identified

Scientific & medical consensus

Literature reviews

Audience identification

Jurisdictional scans for similar work

Key message and content writing

Plain language summary at Grade 8 level

Data visualization

Style and language guide editing

Social listening and misinformation research

Audience engagement

Needs assessment and stakeholder review

Behavioural and risk communication analysis

Graphic, web and product design

Trust and equity analysis

Dissemination and communication plan

Final medical content review

Dissemination and posting

Review, iteration and editing

Coronavirus COVID-19

Provincial Health Services Authority — Province-wide solutions. Better health.

BC Centre for Disease Control — Provincial Health Services Authority

Child care safety guidance for parents

Why are parents encouraged to return their child to child care settings?

✅ Child care settings have many benefits, including: spaces for healthy eating, exercise, social and emotional development and connecting with others.

✅ These benefits help with the physical and mental well-being of children.

✅ There are no extra risks in child cares than in other public spaces.

✅ Children are less likely than adults to catch or spread COVID-19

✅ Continuing child care operations gives access to child care for parents who need to work.

British Columbians are facing challenges due to COVID-19

47% Mental health worsening

33% Difficulty accessing healthcare

15% Worried about becoming food insecure

5% Likely have to move due to affordability

15% Not working due to COVID-19

69% Work impaired due to COVID-19

62% Concerned for vulnerable family member health

31% Increased difficulty meeting financial needs

BRITISH COLUMBIA

BC Centre for Disease Control — Provincial Health Services Authority

BCCDC Foundation for Public Health

YOUR STORY | OUR FUTURE

Guidance for clients of sex workers

Many sex workers continue to meet clients in-person. This guidance is intended to provide support using a harm reduction lens to help reduce the risks associated with in-person contact and to help keep workers and clients safe from COVID-19.

General recommendations

- Wash your hands regularly with soap and water.
- Do not see a sex worker if you have flu-like symptoms
- Use the BC COVID-19 Symptoms Self-Assessment Tool to determine if you may need further testing.
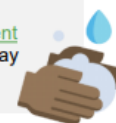
Before meeting

- If you have any symptoms, have traveled outside of the province or country in the last 14 days, or have had contact with sick individuals – DO NOT see a sex worker and DO NOT engage in physical sexual encounters in general.
- Take a shower and wash your hands and face thoroughly.
- Be respectful of a worker's health and safety requests: if they are meeting you in person, they are putting themselves at risk.

| REDUCE OR MINIMIZE…	INSTEAD TRY…
❌ Kissing, saliva exchange	✅ Web-based, phone-based or text-based services
❌ Mouth contact with skin (such as bareback blowjobs) and/or toys	✅ Positions that minimize face-to-face contact
❌ Direct contact with bodily fluids	✅ Condoms, dental dams and gloves
❌ Group sex	✅ Seeing only one sex worker during this period of time to minimize possible spread

After meeting

- Wash your hands and face.
- DO NOT shame a worker for not being willing to engage in sex acts which may increase risk of COVID-19.
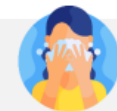
Additional resources

- Sex Work and COVID-19
- Navigating COVID-19 for Sex Workers & Allies: Info & Support Guide
- COVID-19 and Substance Use

STI testing

Use GetCheckedOnline for referral to LifeLabs locations for STI testing or contact the 12th Avenue Clinic.

Cluster 1

32% of respondents

A relaxed skeptic that does not trust any COVID-19 information.

Dr. Yanwen Wang, UBC

Less likely to follow COVID guidelines

Skeptic of all COVID-19 info

Understands COVID-19 symptoms

Born outside of Canada

Least stressed

Fewer years of education

Looks to news for info
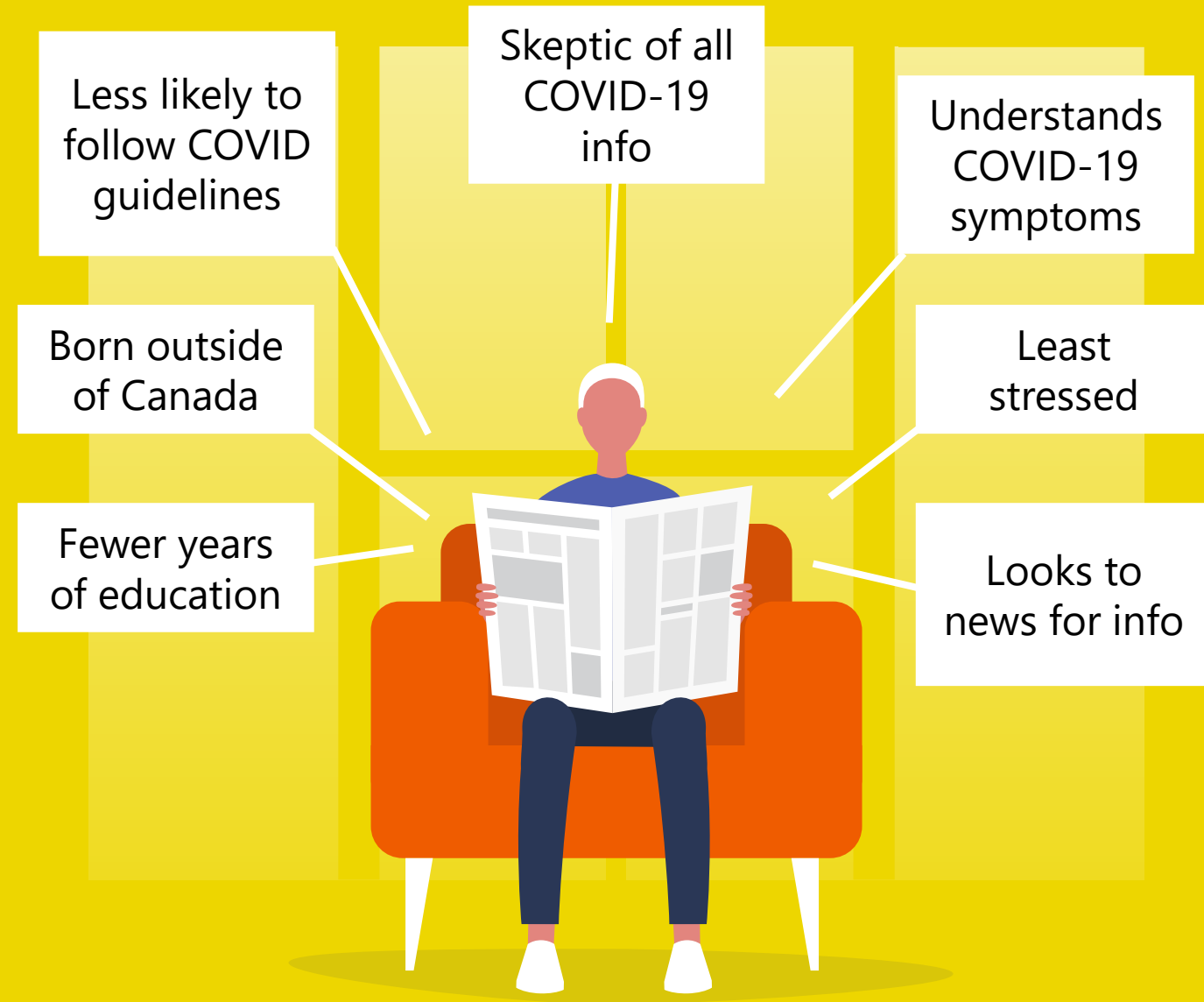
Cluster 2

39% of respondents

A firm believer in Dr. Bonnie Henry and political public figures like Justin Trudeau.

Dr. Yanwen Wang, UBC

Following COVID guidelines

Extremely trusting

COVID-19 has not impacted employment

Born in Canada

Straight

More likely to be white

More years of education

Cluster 3

29% of respondents

An anxious information seeker who heavily relies on social media and news sites and, nevertheless, is confused about the symptoms and prevention of COVID-19.
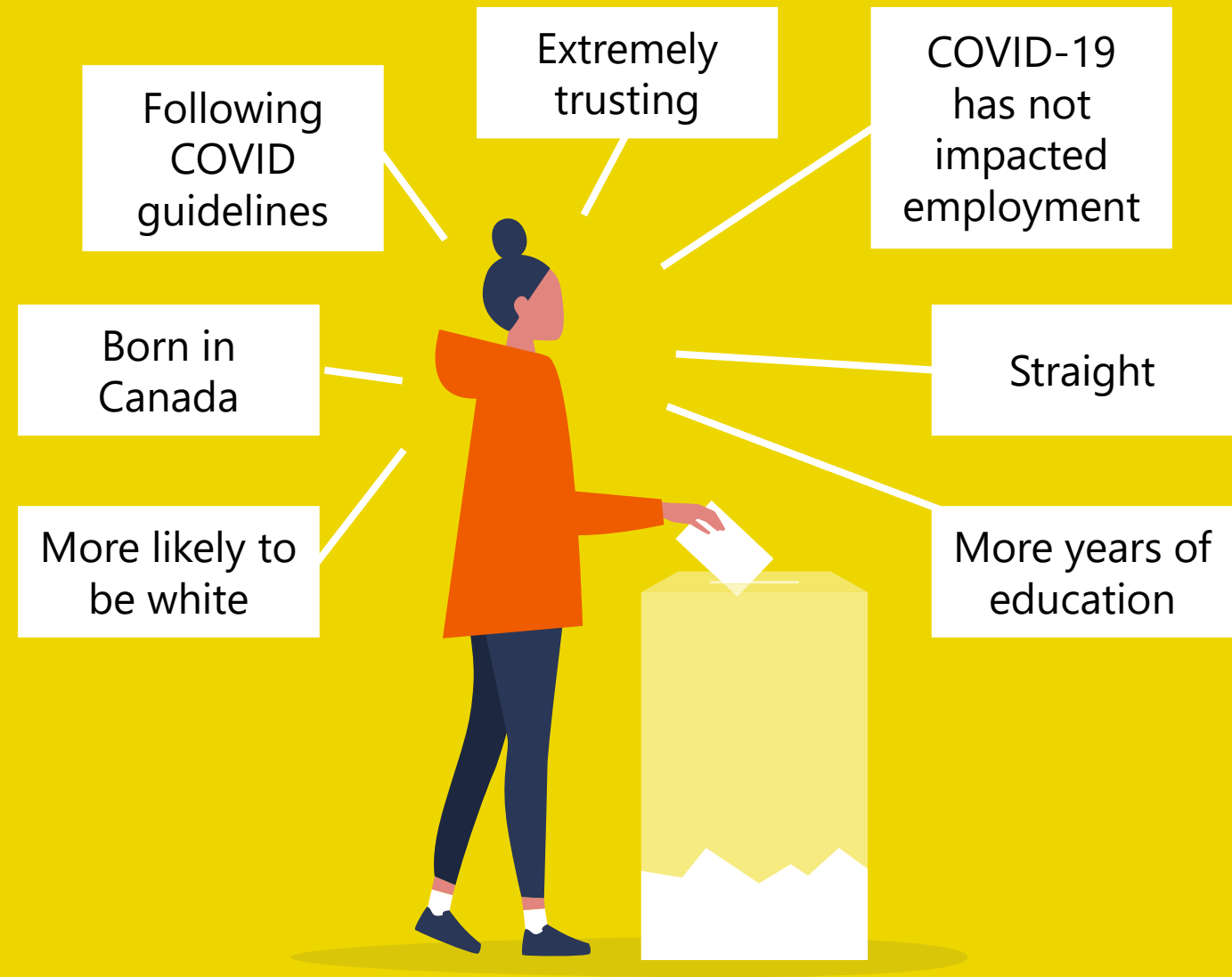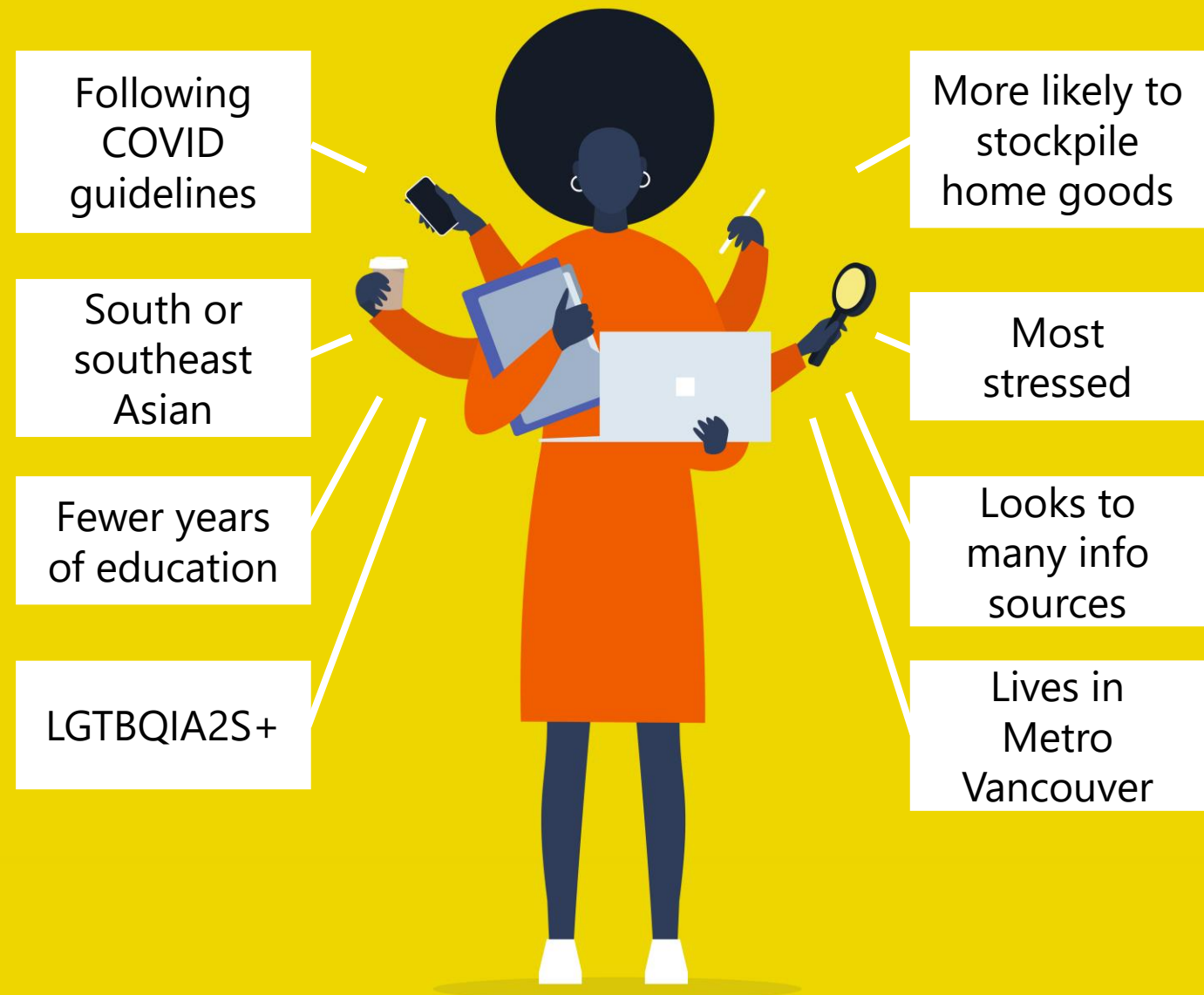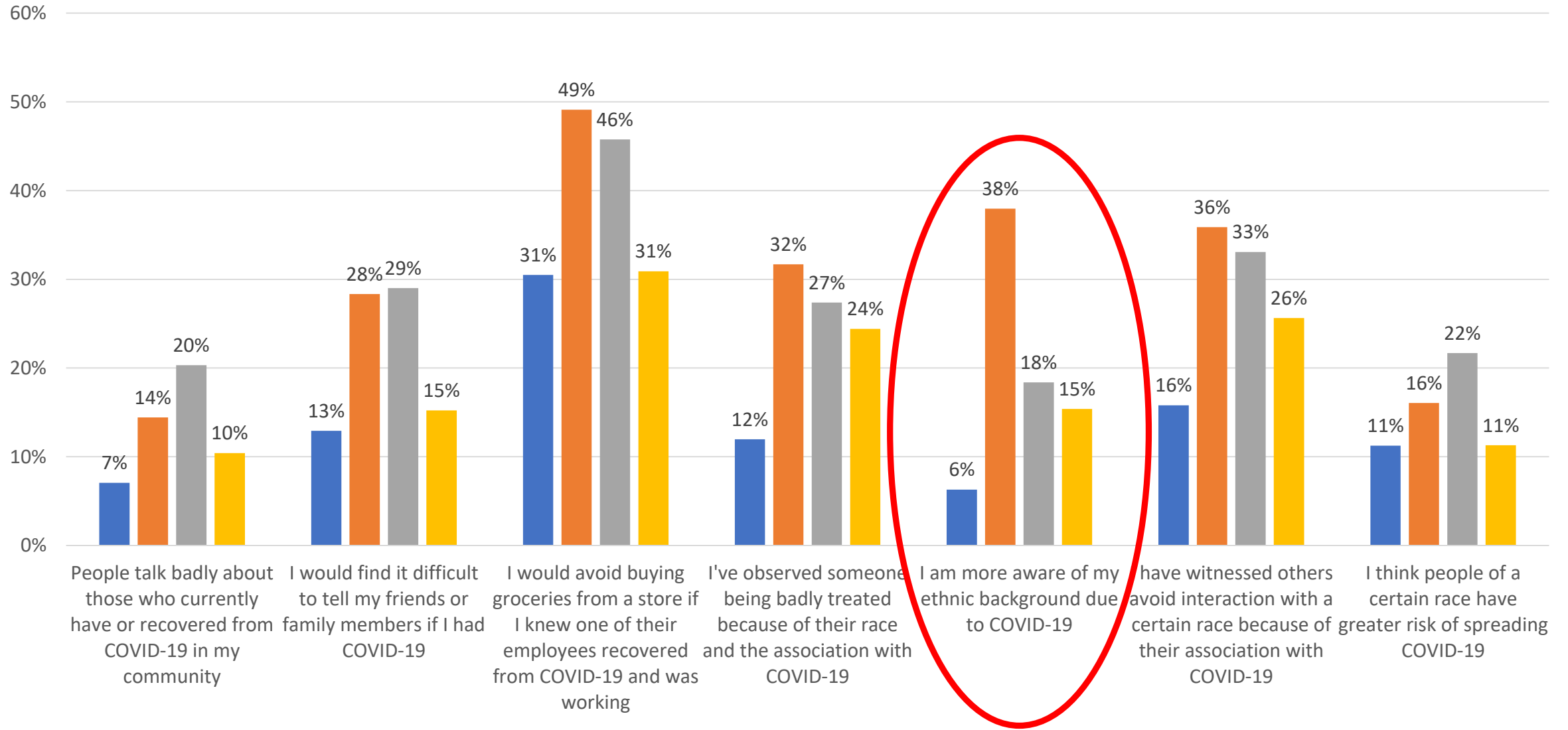
Dr. Yanwen Wang, UBC

Following COVID guidelines

South or southeast Asian

Fewer years of education

LGTBQIA2S+

More likely to stockpile home goods

Most stressed

Looks to many info sources

Lives in Metro Vancouver

Observed Stigma and Stigma Behaviours by Ethnicity
somewhat agree or strongly agree

Legend: White (blue), Chinese (orange), South Asian (grey), Indigenous (yellow)

Statement	White	Chinese	South Asian	Indigenous
People talk badly about those who currently have or recovered from COVID-19 in my community	7%	14%	20%	10%
I would find it difficult to tell my friends or family members if I had COVID-19	13%	28%	29%	15%
I would avoid buying groceries from a store if I knew one of their employees recovered from COVID-19 and was working	31%	49%	46%	31%
I've observed someone being badly treated because of their race and the association with COVID-19	12%	32%	27%	24%
I am more aware of my ethnic background due to COVID-19	6%	38%	18%	15%
have witnessed others avoid interaction with a certain race because of their association with COVID-19	16%	36%	33%	26%
I think people of a certain race have greater risk of spreading COVID-19	11%	16%	22%	11%

How do we create a more effective knowledge translation and public engagement response in crisis?
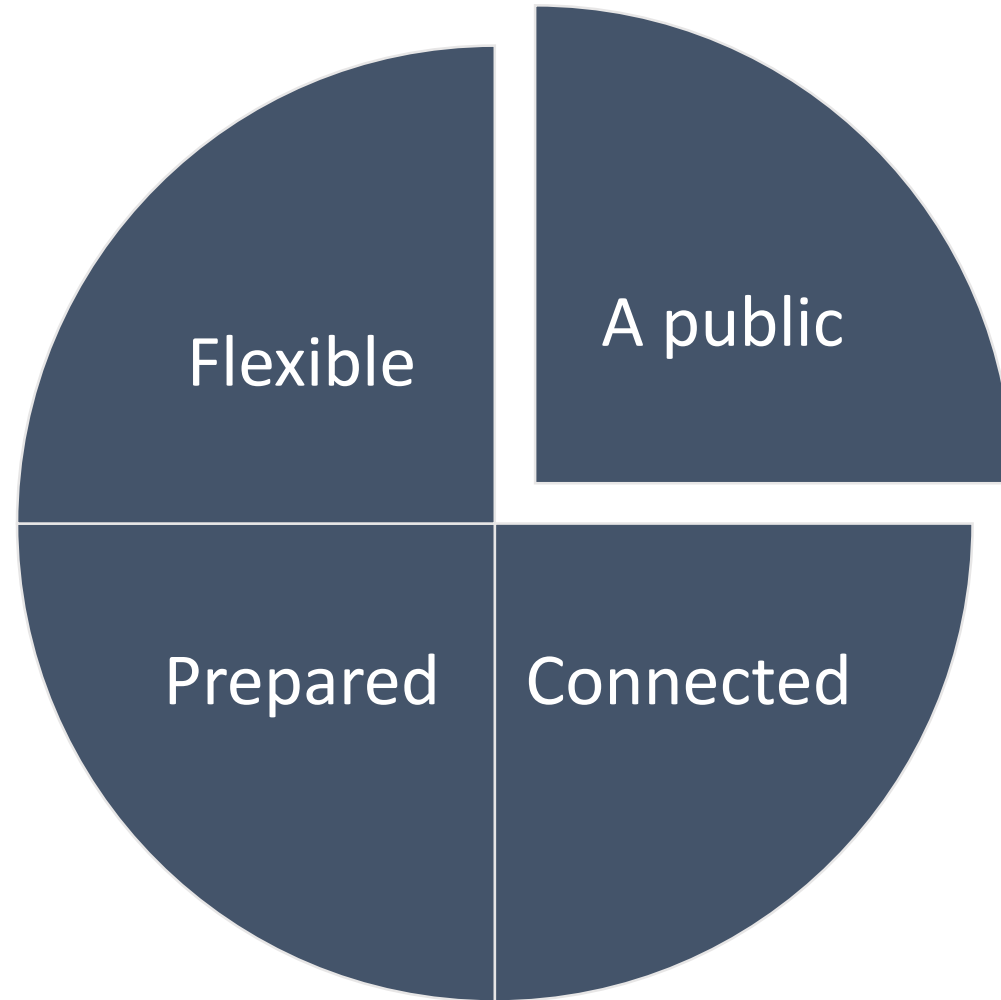
We no longer have the option *or the right* to make the same mistakes again

COVID-19 has fundamentally changed our expectations of and relationship to science, public health and each other