Leading article

Getting research into practice

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The need for effective application of research results for health development is greatest in the developing countries like Sri Lanka, where health resources are scarce. No amount of good health research will benefit the health development of any country, unless the results of research are put into practice. Unfortunately, in most developing countries, there are enormous barriers to effective utilization of research results. This article attempts at highlighting some of these barriers, and suggesting strategies to increase the probability of getting research results into practice. Some of the background issues for consideration are also discussed. It is by no means a complete exposition of all aspects related to health research.

1. Practical Issues for Consideration

In order to transform the results of research into practice, one may need to review the underlying reasons as to why it has not happened in most instances. By critically reviewing the status - quo in light of the overall research process one may be able to formulate practical and realistic strategies to promote the process of research utilization.

1. The recommendations made by the researchers are, at times, abstract and impractical or too complicated to be understood by policy makers and the implementers.

2. Very often, researchers prefer to work by themselves without involving all stakeholders in the research process, particularly the policy makers and policy implementers. The mere presentation of research findings and recommendations to policy makers and health administrators at the end of the research, will not bring about the expected results unless these top level persons are consulted and involved right from the commencement and throughout the research process.

3. At times, researchers tend to conduct research studies on issues, which are contrary to the national priorities for health research. Personal interest, academic requirements, convenience etc. override the national priorities. The national priorities for health research should be identified and disseminated to all concerned in health research.

4. Lack of a Research Policy has resulted in research activities being carried out independently of the planned activities of the Ministry of Health. These types of disjointed activities are not conducive to achieving the stated objectives.

5. Few countries have advisory or similar committees for putting research into practice and to specifically review recommendations of research projects with a view to incorporating them into the ongoing health care system.

6. Many decision-makers do not seem to perceive seriously that results from research could substantially contribute to improvements in the effectiveness and efficiency of the health care system. The fact that research is one of the important and practical tools to solve administrative and managerial problems is not reckoned with. There is also an unwillingness on the part of the decision-makers to initiate a change in the system or sometimes they

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themselves are unable to change the system because of the bureaucratic nature of the overall system.

2. Possible Strategies for Getting Research into Practice

A number of attempts have been made to increase the utilization of research findings by formulating an array of strategies. In developing these strategies, it is worthwhile to consider in depth, those factors and issues, which are directly as well as indirectly related to put the results of research into practice. The implementation process of each strategy may require a set of specific activities depending on the requirements of the local situation. The strategies outlined below may, to some extent, overlap with one another.

Strategies related to: -

2.1 Research Policy Planning

1. Identifying Health Research Policy within the framework of the National Health Development Programme.

2. Formulating a research agenda with the involvement of policy makers, health managers and health implementators.

3. Consulting the decision makers and programme implementors at the very outset of the research with a view to obtaining their guidance & cooperation.

4. Identifying the possible administrative/bureaucratic delays and developing procedures to minimize them.

5. Advocating and motivating policy makers and administrators in recognizing the role of research in solving health problems through informed decision-making.

2.2 Priority areas for Health Research

1. Identifying priority issues with focus on priority problem areas in relation to respective geographic or administrative boundaries (divisions, districts and provinces).

2. Involving not only the officials of the Health Ministries but also others from health related ministries in the prioritization process.

3. Dissemination of information regarding priority areas to interested researchers, different units of the Health Ministry, related Ministries, Universities and other research institutions/organizations including the non governmental sector.

4. Selection of research proposals based on set criteria, which will include priority areas, among others.

2.3 Quality and Conduct of Research

1. Ensuring high quality of research proposals through practical and sustainable means.

2. Providing technical and financial support to good quality research proposals.

3. Focusing on capacity building on specific issues related to health research,
   eg., research methodology, research management.

4. Monitoring and supervising the research to obtain the desired results.

5. Research findings and recommendations should be formulated in simple and understandable terms so that implementors and decision-makers will be positively influenced towards their implementation.

6. Research results and findings should be made available at the appropriate time for decisions to be made to solve health problems.

2.4 Dissemination of Research Findings

1. Availability of an uptodate, computerized information base with regard to health research can significantly increase the extent of utilization of research findings.

2. Research bulletins, journals, newsletters etc., will propagate the research information for all concerned especially for those responsible for the utilization of research results.

3. Conduct workshops, seminars, scientific sessions and research conferences where research findings are discussed and strategies for implementation of research recommendations are arrived at.

2.5 Translation of new knowledge into Practice

1. Establishing a permanent built-in mechanism to relay relevant findings to reach decision/policy makers, programme managers and health care providers.

2. Formation of active research utilization committees in the Ministry of Health.

3. Establishing mechanism for monitoring and assessing the extent of research utilization with a view to taking corrective measures if there are delays or inadequacies in the utilization process.

3. Conclusion

If the ultimate benefits of research are ever to reach the clients, research findings must be understood and implemented by health managers at all levels. The success of research utilization depends upon the interest and commitment of both researchers and end users. It cannot be achieved by any individual working in isolation.

Translating research into practice is neither easy nor quick. It takes time and effort. Research utilization is an organizational responsibility. It is best accomplished, if there is a commitment to do so at the organizational level. If a group of change agents can implement a well-planned process, research based practice can be effectively established. In conclusion, it can be stated that Getting Research into Practice is perhaps the biggest challenge facing all of us.

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