

What we can learn from trainees' experiences during the COVID-19 pandemic in terms of developing ability for integrated knowledge translation

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ABSTRACT

Due to physical barriers and the shift to virtual platforms, the application of collaborative health research methods, such as Integrated Knowledge Translation (IKT), was difficult during the COVID-19 pandemic. We faced various modifications and adaptations to our daily routines, work and research environments as IKT trainees (i.e. graduate students and postdoctoral scholars) within the Integrated Knowledge Translation Research Network (IKTRN) as a result of the quick switch to virtual platforms. The ability to interact on a local, national, and international scale has improved, but there are now gaps in how equally people may access training and cooperation possibilities at institutions and organizations. The first two years of the COVID-19 pandemic were examined in this article at the micro (individual), meso (organizational), and macro (system) levels by 16 IKTRN trainees. The micro level, or individual experiences, focuses on issues such as

maintaining research activities and productivity, leisure (social engagement and taking time for oneself), and self-care (taking care of one's physical and mental well-being) while performing IKT research during the pandemic. The function of programs and organizations at the meso level investigates if and how institutions were able to adapt and carry on with research and/or collaborations during the pandemic. We examine the consequences for IKT trainees and research during and after emergency events at the macro level. The following themes were found to be prevalent at all levels: (1) fair access to partnerships and training; (2) reflexivity; (3) accepting changing opportunities; and (4) fostering collaborative relationships. These interconnected themes indicate strategies for promoting equitable and long-lasting advancements in the development and upkeep of cooperative health research methodologies. This essay is a compilation of our combined experiences with the goal of making recommendations for how businesses and academic institutions can help aspiring researchers in the future. Informing more fair and long-lasting collaborative health research methodologies and training in the post-pandemic period is our goal.

Key Words: COVID-19; Integrated knowledge translation; Health; Pandemic

INTRODUCTION

Working with those who these systems, services, and outcomes directly affect as well as those who can implement evidence-based changes, collaborative health research approaches like Integrated Knowledge Translation (IKT) have the potential to improve healthcare systems, services, and outcomes globally. According to its definition, IKT is "a paradigm of collaborative research, where researchers work with knowledge users who identify a problem and have the authority to implement the research suggestions." During the first two years of the COVID-19 pandemic, the value of collaborative research became clear due to the urgent and significant requirement for knowledge to be contextualized for various knowledge users, settings, and research purposes [1].

To maintain effective partnerships with information users like policymakers, healthcare professionals, patients, and the general public, new approaches to relationship development and partnership maintenance were however required due to travel constraints and distance-reducing techniques. IKT trainees (undergraduates, graduate students, and postdoctoral scholars) engaged in collaborative health research also had to change the way they worked, learned, and thought about how their research fit into a quickly evolving health system. In order to develop the area of Integrated Knowledge Translation (IKT), a global network of researchers, knowledge users, and trainees known as the Integrated Knowledge Translation Research Network (IKTRN) was created in 2016. "To bring knowledge users and researchers together to promote the science and practice of IKT and teach the future generation of IKT researchers," is the mission statement of the IKTRN. A subsection of the IKTRN that participates in knowledge exchange, training, and networking opportunities is the IKT trainees, which includes graduate and postdoctoral scholars. For the purpose of exploring our individual experiences and reflections during the first two years of the COVID-19

epidemic, this group came together as part of a joint research endeavor [2].

Self-care, employment, and recreation at the micro Level

Graduate trainees are still being affected personally and professionally by the COVID-19 pandemic. During the COVID-19 epidemic, our experiences as IKT trainees performing IKT research were divided into three categories: self-care, productivity, and pleasure. We understand the need to be mindful of our own mental well-being, as well as the well-being of our family and colleagues, in order to be able to develop and maintain healthy relationships with our research partners because a large portion of our work in IKT involves developing relationships and co-creating knowledge. As they were for other trainees who were not participating in collaborative health research, anxiety, tension, fear of the unknown, emotions of being overwhelmed, and a loss of control were prevalent. Some IKT trainees, along with our coworkers, relatives, and acquaintances, received unforeseen front-line assignments. I felt the urge to leave my research behind and get involved in the medical field. Due to job loss, postponed graduation, or changes in work hours, some trainees faced financial difficulty and economic insecurity. The trainees made adjustments to their daily routines and made an effort to spend more time on self-care, leisure activities, and online social interaction in an effort to cope with some of these challenges. Some trainees went through a period of contemplation about their priorities, ambitions, and aspirations in their personal and professional lives. Some trainees were able to reset, realign, and reimagine new ways of working and forming connections during this crucial period of reflection.

Additionally, trainees used cutting-edge methods to connect, converse, and work together with coworkers, information users, and other stakeholders. These methods included using phones, video conferencing software like Zoom, email, Short Message Service, or texting (SMS), and online brainstorming tools (i.e. Mural). Students and information consumers asked their universities for hands-on instruction on using new tools. Some research

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operations have to be stopped despite efforts to engage online because of facility closures, a dearth of participant recruitment, or other problems. One student, for instance, spoke of a project that was co-lead by advisors with lived experience and that depended on the recruitment of doctors by the health system partner. Individually, IKT trainees talked about the need of going to training, getting mentorship, and learning how to work in a hybrid environment (virtual and physical) as the pandemic spreads and beyond [3]. When necessary, IKT trainees should use the resources at their disposal to support their overall wellness and, in particular, their mental health. The effectiveness of creating safe spaces, recognizing the importance of power dynamics, and building trust in online or hybrid meetings are all areas that require further study in order to increase IKT training in a hybrid context. Developing and maintaining research relationships during times of crisis also requires more study, including knowledge of facilitators and barriers from each partner's perspective [4].

DISCUSSION

The meso level is concerned with how we, as IKT trainees, operate inside our programs and institutions (such as universities, research institutes, and hospitals), as well as how we establish and preserve collaborations with coworkers and other stakeholders throughout our study. Organizations had to quickly adjust during the epidemic to shifting public health goals and regulations. Face-to-face meetings were cancelled as a result of physical distance measures. Only those with the ability to continue participating and access to resources could switch to virtual video format. Additionally, IKT trainees noted fewer chances to interact and build relationships with other trainees, peers, managers, or mentors. The unplanned, casual chats that frequently spark innovation, ideas, and new opportunities were restricted by virtual platforms. Some trainees stated that virtual meetings had significantly changed the dynamics of how we connect as people. This has important ramifications for trainees and collaborative research partnerships that are concerned with creating and maintaining trustworthy relationships. Despite these difficulties, many trainees received additional assistance from mentors and supervisors, including resources, flexible deadlines, and fresh chances for collaboration. As IKT trainees, we encourage supervisors and academic institutions to facilitate opportunities for casual "chats" in person and online to assist develop the unique relationships necessary for IKT while also promoting trainees' and partners' wellbeing. "Many of those in-between-formal-things times have been lost. Additionally, we advise organizations to take into consideration the extra time and modifications supervisors will require to make sure their own IKT research and that of their trainees continues to meet the needs of partners and the community while also assisting trainees in completing their degrees. Workflow and the capability of trainees were altered as a result of personnel redeployment and a smaller workforce [5].

The options for employment and training for IKT trainees were reduced as a result of decisions about whether research should be continued, put on hold, or altogether cancelled. For instance, numerous research programs across Canada unexpectedly stopped engaging with patients, while others altered their patient engagement strategies. In the end, there weren't enough funds and people to conduct joint and partnership research. One trainee who was working on a project with one of Canada's indigenous populations put it this way: "The First Nations were being hit quite hard by COVID, and no one wanted to be-not it's a priority to be engaged in research when people in your communities, and your family members, are sick and dying.

Research is not a priority, for example (FG1). While maintaining respecting project-specific collaborations that satisfy trainee needs, encouraging continuing collaboration rather than project-specific partnerships may create a foundation for longer lasting relationships and enable the work to adapt to health system demands.

Despite the difficulties the epidemic brought forth, fresh chances and places for joint research to develop appeared. With more potential for quick action and population-level effect during COVID-19, the necessity for research partnerships grew. Despite the fact that many new partnerships are formed, it is important to know how to maintain both new and current national and international relationships to make sure they remain at the forefront of research [6].

CONCLUSION

At the micro, meso, and macro levels, the COVID-19 pandemic had a tremendous influence on IKT trainees. In order to build and maintain equitable collaborative research partnerships that meet and adapt to the demands of knowledge users, IKT researchers must advocate for and promote training opportunities to IKT trainees and research partners. In order to adopt hybrid models of in-person and virtual collaboration and teamwork, trainees must be better prepared. We may collaborate with our managers, role models, and organizations to make it easier for our partners and ourselves to access resources and technology. The epidemic has made it even more important for us to respect our own health and wellbeing so that we can be flexible enough to meet the needs of our research partners. Organizations in the health system, such as universities, can adapt to shifting objectives while simultaneously promoting the health and wellbeing of those who work there, particularly trainees. We recognize the benefits of preserving and nurturing existing connections through both face-to-face and virtual formats, even though the epidemic has shown that collaborations with knowledge users can quickly flip to a virtual platform. IKT trainees are a crucial component of this sustainability because they help universities and organizations maintain partnerships that may make it easier for them to adapt to the changing needs of the health system.

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