Presenter:
Abisope Akintola

Can embedded research build bridges and break barriers between public health academia and practice? a systematic review

Abisope Akintola[1], Prof. Louisa Ells[1] , Prof. Dorothy Newbury-Birch[2], Dr Mandy Cheetham[1] and Dr Oladipo Idowu[1].
School of Health and Social Care, Teesside University[1] School of Social Sciences, Humanities and Law, Teesside University[2] | Email: A.Akintola@tees.ac.uk

Introduction

The gap between knowledge and practice in public health is globally recognised[1]. Embedded research is an approach adopted by researchers to co-produce knowledge with professionals, which involves working and building relationships between professionals across academia and policy/practice[2]. Embedded research is beneficial as there is evidence to demonstrate its role in facilitating research evidence utilisation[3], and facilitation of new knowledge production through collaborative working[4]. However, there is no systematic review on the role of embedded research in bridging the knowledge-practice gap.

PhD Aim

To investigate if embedded research would generate and enhance the creation and sharing of knowledge between practice and academia**.**

Review question/objective

What is the role of embedded researchers in co-producing public health knowledge in non-clinical settings, such as local authorities, schools and non-governmental organisations?

Methods

- CINAHL, Medline, AMED, Web of Science, PsycINFO, Psychology and behavioural science collection, PsycARTICLES, ASSIA, Embase and Scopus were searched. Google Scholar, Open Grey, Google, and organisational websites were also searched.

- Articles were reviewed by two independent reviewers

Studies were included if they:
(1) were qualitative studies
(2) investigated or reported the role of an embedded researcher,
(3) were conducted in non-clinical setting
(4) involved co-production of knowledge.

- Data were independently extracted by two independent reviewers. JBI SUMARI using the meta-aggregation approach was used to pool qualitative data.

- Systematic review protocol was registered on PROSPERO

Results

A total of 16 studies were included in the review (fig. 1).

Figure 1 Flow Diagram of the Systematic Review Method

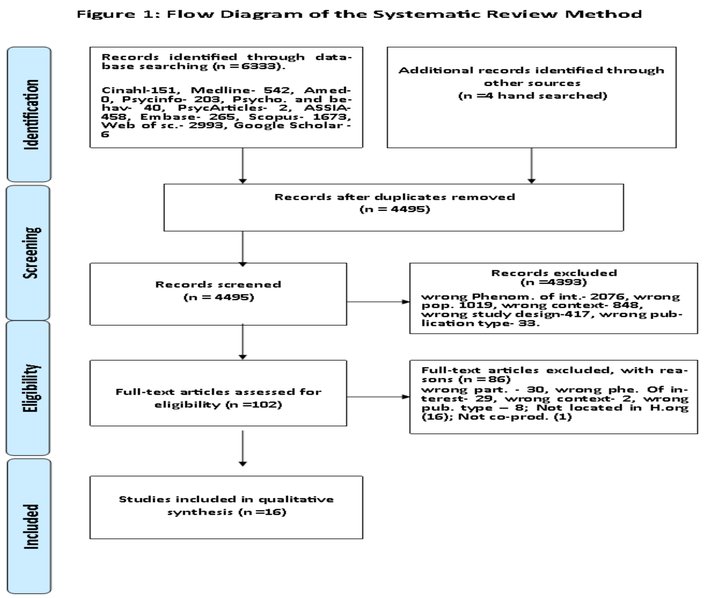

Table 1 Included studies and their synthesized findings

Articles	Terminology for embedded research	Synthesized Findings
Cheetham et al., (2017)	Embedded researcher	1,2,3
McGinity & Salokangas, (2014)	Embedded researcher	2
Brannick & Coghlan (2007)	Insider research	1, 4
Duggan, (2014)	Embedded researcher	2,4,5
Hope, (2016)	knowledge transfer associates	2, 3,4
Jenness, Valerie; (2008	Embedded researcher	2, 3,4 ,6
Langeveld et al., (2016)	Knowledge broker	1, 2, 4, 5
Lewis & Russell, (2011)	Embedded researcher	2, 4
Miszczak & Patel, (2018)	Academic embedded researcher	2, 3, 4
Rowley, Harriet; (2014)	Embedded researcher	1, 2, 3, 4
Scott & Bell, (2013	Embedded researcher	3
Smith & Wilkins, (2018)	Scholar-practitioner	1, 2, 3, 5
Steens et al., (2018)	Science-practitioner	2, 4
Wong, S. (2009)	Embedded researcher	3, 4, 6
Yost et al., (2014)	Knowledge broker	1, 2,3
Murdock et al., (2013)	Academic on placement; Knowledge broker	4

Figure 2 Diagram of the synthesized findings

The 6 synthesized findings from the 16 included studies were:

Conclusion

The systematic review results of the 16 included studies suggest that the role of an embedded researcher can bridge the knowledge-practice gap between academia and practice/policy in ways identified above. A consistent terminology for embedded research to enhance clarity of its use is needed.

Selected references

1.Di Ruggiero, E. et al., (2017) *Knowledge Utilization and Exchange*. Oxford: Oxford University Press—Oxford Bibliographies in Public Health.
2.McGinity R. and Salokangas M. (2014) Introduction: “Embedded research” as an approach into academia for emerging researchers. *Management in Education*, Vol. 28, pp.3-5.
3.Eyre, L. et al., (2015) Protocol for a process-oriented qualitative evaluation of the Waltham Forest and East London Collaborative (WELC) integrated care pioneer programme using the Researcher-in-Residence model*. British Medical Journal,* 5.
4.Marshall, M. N (2014) Bridging the ivory towers and the swampy lowlands; increasing the impact of health services research on quality improvement. *International Journal for Quality in Health Care, Vol.*26, pp.1–5.