



# GAMBLING RESEARCH REVEALS

## Knowledge Translation (KT): Questions and answers with Donna Angus, Manager of Knowledge Transfer Initiatives for Alberta Innovates—Health Solutions

*Donna Angus is Manager of Knowledge Transfer Initiatives for Alberta Innovates—Health Solutions. At the invitation of the Institute, she will be leading a discussion about KT concepts and planning at the Institute's April 2010 Stakeholder Meeting in Banff, Alberta. In preparation for the event, she graciously provided the following answers to a variety of knowledge translation-related questions:*

The Alberta Gaming Research Institute is a consortium of the Universities of Alberta, Calgary, and Lethbridge. Its primary purpose is to support and promote research into gaming and gambling in the province.\*

### OUR MISSION

To significantly improve Albertans' knowledge of how gambling affects society

### What is your background with respect to Knowledge Translation?

The short answer is that I've worked in and around health care all my working life despite having a degree in Education, first as a research assistant in government, and later as a communications person for various organizations. Because health care seemed to be where I was going with my career, I completed a Master's in Health Administration and pursued my accreditation as a medical writer. About ten years ago, I moved into health research. Initially, knowledge translation (KT) activities were an add-on to my communications role. Over time, the KT field itself evolved into its own separate discipline and I now work and teach knowledge translation full-time at *Alberta Innovates—Health Solutions* in Edmonton, Alberta.

"Knowledge translation works best when it is part and parcel of the research process..."

### What is KT and why has it received so much buzz?

You will see many definitions of KT and several terms used to describe the same thing. In essence, it is about using evidence and other knowledge to inform decisions. It is a two way process that involves both the creators and users of knowledge.

### What activities are associated with KT?

The cycle of evidence to policy and practice includes figuring out what the question is that you want to answer, generating knowledge (i.e., doing research), synthesizing research evidence (i.e., looking at all the research on a given subject), moving research findings out into the world (e.g., publication of an article, holding a research day with stakeholders, etc.), implementing the evidence (e.g., changing the way a program operates), and evaluating its impact.

For individuals interested in learning more about knowledge translation, Donna Angus recommends the following online resources:

**KT Canada Clearinghouse**  
<http://kctclearinghouse.ca/>

**Canadian Institutes of Health Research— Knowledge Translation & Commercialization**  
<http://www.cihr-irsc.gc.ca/e/29529.html>

**Research Transfer Network of Alberta**  
<http://www.ahfmr.ab.ca/rtna/>

### **Why is it important for research bodies, government policymakers and individual researchers to better understand KT?**

KT works best when it is part and parcel of the research process; that is, policy makers, practitioners, and researchers working together throughout the research process. The better everyone understands KT, the more meaningful the relationships between producers and users of research will be and the more relevant the outcomes.

### **How do we know when KT efforts are making a difference? Are there any metrics that have been developed for assessing success?**

Evaluation of KT is the least well developed part of the KT cycle for many reasons, not the least of which is the complexity of how decisions are made in health care and in fact any field of endeavor. How do you attribute your success or failure to a KT strategy alone? That said, some progress is being made and it centres on measuring the impact of research or, to put it another way, measuring the return on investment. The metrics vary depending on what it is you're trying to measure; for example, if you want to measure the research impact of an article, you'd look at bibliometrics (e.g., citation analysis). Measuring changes in behaviour would necessitate very different metrics and perhaps even a separate research project.

### **Are there distinctions between the utilization of KT by research granting organizations vs. individual researchers or grant holders?**

Most granting agencies require some indication of how the research results will be disseminated. By asking researchers for a KT plan in their application, it sets the expectation for that to happen. Making funding contingent on an approved plan is a great motivator.

### **What is Research Transfer?**

Imagine two mountains. On one mountain are the researchers who generate a staggering amount of research results every year. On the other mountain are the decision makers—policy-makers, administrators, health care providers, patients, and consumers.

There is a tremendous difference between the two and between what we know from research and what we do in health care. So, how can we bridge the gap between the two mountains so that research results can effectively inform decisionmaking in health care?

Research or knowledge transfer (KT) is a deliberate process of information exchange between producers and potential users of research that supports evidence-informed decision making and decision-informed research, ultimately for the betterment of peoples' lives.

KT activities at Alberta Innovates—Health Solutions include capacity building for knowledge transfer within the health system (training, mentoring, networking, and resources); facilitating linkage and exchange between researchers and decision makers; dissemination of research results; ethical oversight of all knowledge generating projects; support for the development of innovative products and services; and advancement of knowledge on knowledge transfer.

SOURCE: Health Research Transfer Network of Alberta

### **Do you feel that research relating to gambling poses any special challenges when it comes to KT?**

The players may be different and the context, but the process will be the same. KT is about establishing relationships between researchers and decision makers and developing processes together to get the most impact from research results.

### **In conclusion, if there was only one thing that you could tell people about KT... what would it be?**

It would be that no one thing will work. KT needs to be customized for each situation.

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## **Recently Initiated Institute—funded investigations**

### **Assessing the performance of a brief problem gambling screen in a clinically validated sample of at-risk, problem and pathological gamblers (#53)**

**Dr. Robert Williams** (Co-Principal Investigator)  
Faculty of Health Sciences, University of Lethbridge

**Dr. Rachel A. Volberg** (Co-Principal Investigator)  
Gemini Research, Northampton, MA

Screening for problem gambling takes place in both clinical settings and in population research. We propose to conduct secondary analyses to investigate the performance of a brief, three-item problem gambling screen in relation to clinically adjudicated at-risk, problem and pathological gamblers.

### **The determinants of problem and recreational gambling and the effect of gambling on health (#52)**

**Dr. Jane E. Ruseski** (Co-Principal Investigator)  
Department of Economics, University of Alberta

**Dr. Brad R. Humphreys** (Co-Principal Investigator)  
Department of Economics, University of Alberta

*Co-investigator:*

**Dr. John A. Nyman**  
School of Public Health, University of Minnesota

This project investigates the determinants of classes of gamblers, their health problems and health care utilization. The intent of the proposal is to investigate whether there is a difference between the characteristics that predict classes of gambling and to investigate the health problems and medical care utilization for different classes of gamblers.



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## Calling their bluff: Investigating the accuracy of skill assessment among poker players (#S23)

**Ms. Terri-Lynn MacKay** (Principal Investigator)  
Department of Psychology, University of Calgary

*Co-investigators:*

**Dr. Michael Bowling**  
Department of Computing Science, University of Alberta

**Dr. David Hodgins** (Grant Holder)  
Department of Psychology, University of Calgary

The purpose of the present study is to investigate the relationship between cognitive distortions and actual play using a poker interface with a low-variance analysis estimator of player skill. The proposed study will focus on each participant's assessment of his or her performance compared with that measured by empirical skill.

## Motivational interviewing and solution-focused counseling for problem gamblers: Prevalence and considerations for a mesh of clinical and administrative discourses in Alberta (#S24)

**Dr. Tom Strong** (Principal Investigator)  
Faculty of Education, University of Calgary

*Co-investigator:*

**Ms. Tanya Mudry**  
Faculty of Education, University of Calgary

The proposed pilot research will survey publicly funded Alberta counsellors regarding their use, and institutional experience of using, solution-focused and motivational interviewing approaches to counselling problem gamblers. It will also involve a comprehensive literature review pertaining to understanding use of such clinical discourses in institutional health settings.