Knowledge Translation, Linkage and Exchange

Transposition de connaissances, liens et échanges

The case study presented here is drawn from a publication of the Canadian Institutes of Health Research, *Knowledge to Action: A Knowledge Translation Casebook*, by CIHR's Knowledge Translation (KT) Portfolio. This KT casebook highlights original submissions from across Canada that focus on lessons learned from both successful, and less than successful, knowledge translation activities. Designed as a means for researchers and decision-makers to share and recognize their experiences, this casebook also demonstrates the impact that research can have in shaping policy, program, and practice changes.

The casebook was published in early 2009. Please visit CIHR's website at www.cihr-irsc.gc.ca for more details.

L'étude de cas présentée ici est tirée d'une publication des Instituts de recherche en santé du Canada intitulée *Des connaissances à la pratique : recueil de cas d'application des connaissances*, préparée par le portefeuille de l'application des connaissances (AC) des IRSC. Ce recueil présente les leçons tirées d'activités d'application des connaissances, réussies ou non, provenant de partout au Canada. Conçu pour permettre aux chercheurs et aux décideurs de connaître et de partager leurs expériences, le recueil illustre l'impact potentiel de la recherche dans l'élaboration de politiques ou de programmes et dans les changements touchant à la pratique.

Le recueil a été publié en janvier 2009. Pour plus de renseignements, veuillez visiter le site Web des IRSC, à www.cihr-irsc.gc.ca.

Research Illuminating Public Policy Debates: Private Sector Roles in Quebec Healthcare

Recherche pour éclairer le débat sur les politiques publiques : Les rôles du secteur privé dans l'administration des soins de santé au Québec.

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In June 2005, the Supreme Court of Canada ruled that the Quebec law preventing private insurers from providing coverage for publicly insured services was illegal in the *Chaoulli* case. This decision threw open the doors to widespread public debate about the place of private care in Canada's healthcare system – a debate characterized as much by polarization as by confusion.

The KT Challenge
Disseminating knowledge to inform public debate and policy making

The Quebec Population Health Research Network, which brings together researchers working in population health, health services and health policy, decided to weigh in on the debate. The network developed a partnership with leading Quebec

newspaper *Le Devoir* as well as the Institut du nouveau monde, an organization dedicated to citizen participation in public debates in Quebec. The goal was to disseminate knowledge on the various public policy issues raised by the *Chaoulli* decision. More specifically, the focus was on giving public policy makers, the media, professionals and the general public a sound interpretation of the ruling, and to help ensure that the ruling was interpreted based on research evidence.

The network's efforts have been reflected in the responses of both government and politicians to the Supreme Court's decision. These results underscore the important role that researchers can play in informing public debates on many different issues.

Disseminating Accurate Information in a Confusing Debate

The *Chaoulli* ruling had a substantial impact across Canada, but nowhere greater than in Quebec, where the court's ruling included a deadline for the province's compliance, prompting the network to get involved in the debate.

The network began by assembling a multidisciplinary working group made up of Quebec experts in health services organization from most of the major universities in Quebec (list of members available, in French only, at www.santepop.qc.ca/Chaoulli).

The first step was to ensure that accurate and detailed information was available in a special section on the network's website (http://www.santepop.qc.ca). This included:

- a summary of the court's decision and its background
- a literature review of Canada's popular and specialized press on the topic
- a summary of issues raised by the ruling
- in-depth analyses written in question/answer format on 10 issues raised by the ruling
- briefs presented before parliamentary committees
- the program and presentations made at the network's colloquium
- an exchange forum
- useful links on the ruling

The website was publicized through the network's newsletter (http://portail.santepop.qc.ca), which reaches more than 1,400 researchers, health system professionals and policy makers in Quebec.

Recognizing that it needed to extend its reach further, the network published a supplement in *Le Devoir* on February 18, 2006, entitled "L'Arrêt *Chaoulli* : un signal d'alarme – quelles sont les options du Québec ?" ("The *Chaoulli* Ruling Sounds the Alarm: What Are Quebec's Options?").

A week later, on February 24 and 25, 2006, the network held a colloquium enti-

Knowledge translation activities

- Crafting messages, interpreting research findings
- Synthesizing evidence
- Widespread dissemination of knowledge
- Publication in newspapers and journals
- Website postings
- Educational sessions and colloquia

tled *Le Privé dans la santé ? Après le jugement* Chaoulli*, quelles sont les options du Québec ? (The Private Sector in the Health Sphere? After the* Chaoulli *Ruling, What Are Quebec's Options?)* Organized jointly with the Institut du nouveau monde, the colloquium attracted more than 300 people from the political arena (including the minister of health and the representative of the Official Opposition for health), the health community (professionals and administrators), community organizations and concerned citizens.

In addition to these planned activities, the network and its working group also responded to issues related to the ruling as they arose. For instance, on February 16, 2006, the Quebec government issued its response to the *Chaoulli* ruling, a white paper entitled *Guaranteeing Access: Meeting the Challenges of Equity, Efficiency and Quality*. The network responded both in the press, with articles by working group members analyzing the government's proposal, and in the political arena, with submissions to the Committee on Social Affairs, which held hearings on the white paper from April 4 to June 6, 2006.

Following the committee's hearings, the government tabled a bill on June 15, 2006, reflecting the white paper's recommendations and the results of their consultations. The network continued its efforts to ensure that Quebeckers were aware of what this meant for their future healthcare. Working group members published an article in *Le Devoir* entitled "L'Avenir du système de santé du Québec en cause : un projet de loi qui n'a rien d'anodin" ("The Future of Quebec's Health System at Stake: This Bill Is No Trivial Matter"), as well as other articles in scientific journals and newspapers making clear the potential impacts of the bill. (All articles written by the network/working group members can be found on the network's website.)

Lastly, the working group, with its collaborators, began compiling a book on the theme *Le Privé dans la santé : les discours et les faits (The Private Sector in the Health Sphere: Arguments and Evidence)*, thus broadening the *Chaoulli* discussion. This book was published in 2008 by Les Presses Universitaires de Montréal.

How Did It Work?

The impact of the network's knowledge dissemination activities can be seen in the position taken by Quebec's Ministry of Health, as well as in the addresses made by

members of the National Assembly (MNA) to the committee, and briefs presented by other organizations and individuals in varied areas of healthcare. Public discussion and media coverage have also been influenced by these activities.

Impact

- Quebec Ministry of Health's position influenced by the network's interpretation of the ruling
- Views of the Minister of Health and Social Services changed regarding the public health system's sustainability

The working group's main message – calling on the government to avoid an interpretation of the ruling that would throw open the health system to the private sector, and instead to consider other ways to make services more accessible – may have also helped influence government reactions to the *Chaoulli* decision. The then Minister of Health and Social Services, Philippe Couillard, recognized that his views evolved on the public system's capacity to sustain its costs, following the brief presented by working group member François Béland to the committee, as noted in an article by Guillaume Bourgault-Côté in *Le Devoir*, September 23–24, 2006: "Financement du réseau de la santé – Couillard revendique le droit de changer d'idée" ("Financing the Health Network – Couillard Asserts His Right to Change His Mind").

The initiatives undertaken by the working group were the result of a process of collective reflection and were built on partnerships in a variety of milieux. As such, they represented a new, efficient and original avenue for feeding knowledge into political and policy processes. Researchers moved beyond their usual surroundings to assume public positions and help ensure that public debate and discussion were informed by research evidence. This approach can be considered a model for informing broad societal debate on a wide range of issues.