Alberta Family Wellness Initiative, Norlien Foundation

Describing an innovative approach to knowledge mobilisation, Chair Nancy Mannix explains the importance of closing the gap between science, policy and practice

Could you introduce the Norlien Foundation and outline its key objectives?

The Norlien Foundation is a private foundation that is financed by an endowment of around CAD $150 million. This funding affords us great flexibility in our aim to engage with partners and stakeholders in academia, health, human services, justice and education systems to make an impact on policy and practice that will improve health and wellness outcomes for children and families based on knowledge. We seek to identify how the Foundation can help facilitate more productive responses to some of the main challenges facing healthcare and society, and within particular areas of government investment, with a focus on children and families.

Looking at the big picture, from a very high conceptual level the Norlien Foundation, through the investment platform it created called the Alberta Family Wellness Initiative (AFWI), is interested in how to take scientific knowledge in the fields of early brain and biological development, and its links to the fields of addiction and mental health, that is being generated all over the world and synthesise and mobilise it so it can be integrated into large, government, delivery and community systems to improve policy and practice. We are also interested in effectively communicating this knowledge to public audiences to build understanding and potentially dispel long-held beliefs that are not consistent with what we know from gold standard, synthesised science and are potentially detrimental to progress and innovation in this area.

The organisation is particularly interested in exploring how this knowledge supports our goal to build understanding and innovation by connecting science, policy and practice to improve outcomes for children and prevent adverse childhood experiences and toxic stress. We’ve discovered huge gaps between what knowledge is generated, how it is generated and its utility. At the highest level, in terms of the size of the investment, society is not really deriving the appropriate value from global knowledge generation, primarily through government dollars. All of the information is available on the internet as we speak, but people are unable to access it in a meaningful way. We focus on how to facilitate that part of the process through our knowledge mobilisation efforts.
What are some of the strategies you employ in facilitating this knowledge mobilisation?

AFWI looks specifically at three key arenas: addiction, mental health and child development. We’ve found that even though these fields are inherently interconnected, they are disconnected from one another in terms of their knowledge bases, and that people conducting research in these areas do so in silos and tend to dance on the head of a pin, so to speak. A profound shift in foundational, interdisciplinary knowledge that affects all of these fields is needed. Having articulated interest in these areas, several years ago AFWI began working with the Center on the Developing Child at Harvard University, which has expertise in this arena.

The Center had created a series of working papers made up of incredibly well synthesised, well translated, interdisciplinary knowledge. This work was accomplished through their scientific council (the National Scientific Council on the Developing Child) and is key to unlocking the knowledge base from basic science and making it more useable to non-expert knowledge users. They brought their expert scientific council together with the secret ingredient; the FrameWorks Institute – a charitable not-for-profit virtual academy of researchers and academic institutions made up of social psychologists, political psychologists, anthropologists and linguists that ‘translate English to English’.

The FrameWorks Institute first sat down with the scientists to determine what the science was really trying to communicate in terms of findings and key concepts. They then asked the US public what they believe about some of the key concepts in the science, such as what defines a good or bad outcome for a child. Essentially, the FrameWorks Institute looks at the gap between what the science says and the public believes and then works with the scientists to create a story or narrative using metaphors that, when communicated to the public, shifts their frame of reference and closes the gap – that is the innovation. It’s incredibly powerful and has been having an impact throughout Alberta.

Can you discuss the most prevalent challenges associated with addiction, mental health and child development?

One of the biggest issues is how these fields are funded. In the US and Canada funding institutions are siloed, which in turn creates siloed knowledge. Despite funding in this way, governments somehow expect an integrated, impactful result, so it’s important for them to start thinking differently. Although some governments are moving in the right direction, this is not happening quickly enough for the changes that are coming to bear with the new synthesised knowledge base that is telling us we need to do things differently to achieve much better outcomes for children and families. More interdisciplinarity is required, in terms of both research and delivery. Governments need to buy the outcomes the evidence base is showing them they can achieve. They can catalyse the required outcomes by asking organisations to base their policies, programmes and service delivery on the synthesised, relevant knowledge. One key purpose of research is to help inform decision makers and practitioners to achieve better outcomes.
Why is knowledge mobilisation so important for improved healthcare provision?

A large portion of innovation dollars is allocated to technology transfer, rather than improving practice; it seems to be all about what new device or drug we can come up with. AFWI concentrates on practice and organisational management; areas of knowledge mobilisation that don’t receive much attention and are bereft of dollars. The necessary knowledge to drive practice would lead to a reorganisation in terms of how things are delivered that will improve outcomes and reduce the burden on the health and human service systems. It’s not about creating more products, it’s about reducing demand by ensuring people are healthier through delivering what they actually require in areas that are being missed such as addiction and mental health. This focus on prevention is something that practice and professionals within systems are often not set up to achieve.

Can you provide an overview of some of the national and international partnerships established by AFWI?

Our partnership with the Harvard Center on the Developing Child is extremely important. They are responsible for AFWI’s R&D and fulfill a crucial role. They’ve performed the translation and synthesis of the science extremely well and it’s therefore very valuable to the Foundation. The other very significant relationship we have is with Grand Challenges Canada – a national group funded by our federal government, who hosted their international conference in Calgary this time last year. This conference gave the Norlien Foundation an opportunity to share the AFWI model of change management with a global audience. It also goes without saying that our partnerships in Alberta with government, private sector, communities and academic institutions are fundamental to the Norlien Foundation’s work through AFWI.

How does AFWI intend to translate current research into practice and policy for the benefit of Alberta families?

AFWI’s first symposium took place four years ago. This contributed to a new policy in Alberta written by the Chief Medical Officer. In that policy document there was a direct and word-for-word reference to the Core Story of Brain Development, which contains elements such as brain architecture, and toxic stress. 18 months later we had a new addiction and mental health policy, in which elements of the brain story are embedded, and this is now one of the leading policy frames for mental health and addiction in the world. This core story forms the foundation for how we think about health and human services related policy in Alberta. The knowledge base is really starting to shift and change
practice on the ground and policy has to be there to support what the practitioners do.

**Could you highlight some of AFWI’s greatest achievements and outline its future plans?**

Our contribution to innovative policy directions in the province has been one of our main achievements, as well as catalysing relationships and connections across science, policy and practice spheres. Our work to support the creation and mobilisation of the Core Story of Brain Development has created a common understanding and language throughout the province. Also, the Foundation has recently conducted a large evaluation of AFWI to help reflect on and quantify what we’ve achieved. As an aside, I interview all of our participants at our symposia every year. We have a phone conversation in which I ask them about what they are doing, how they are using the core story, what evidence they have to demonstrate this and changes they have seen. We’ve been tracking that for four years now and have a large database of the change management process.

**Do you believe a new approach to the prevention of disease and promotion of health is needed?**

Absolutely! It’s a necessity that we have a change, because we cannot afford these systems. The burgeoning, ageing population poses a significant burden on our current system and there are finite resources. We are having trouble meeting the demand. It reduces productivity to have so much burden, irrespective of how you’re paying for it. Whether it’s a private system, like the business-based system in the US or it’s more publicly funded, these systems represent a high burden and cost for everyone.

We need to find a more effective mechanism for utilising this knowledge generation process of scientific research in more productive ways and this is what we’ve been trying to create in Alberta. There is a huge gap between what we know and what we do. We think we’ve figured out a way to close the gap, not necessarily the way, but a way. Governments have to be better at understanding what it is they want to buy, rather than what it is they want to spend. They need to realise that they can actually buy outcomes. People want to be more innovative and more creative on the ground, we see that in our province. However, they simply don’t have the incentive; nobody is paying for that, so it doesn’t happen. Through AFWI we aim to create incentives for engagement and collaboration that will lead to the application of innovative, knowledge-based approaches to achieving much better health and wellness outcomes for all children and families.

**How Brains are Built: The Core Story of Brain Development**

This short animated graphic was developed by the Alberta Family Wellness Initiative along with the Harvard Center on the Developing Child and the FrameWorks Institute. The purpose is to present the core story of brain development, how adults and communities help children build healthy brains, in an accessible and engaging format.

www.albertafamilywellness.org/resources/video/how-brains-are-built-core-story-brain-development

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