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THE KNOW-DO GAP

"There is a gap between today's scientific advances and their application: between what we know and what is actually being done "

"Action without knowledge and knowledge without action means wasted resources and missed opportunities"



WHO Knowledge Management Strategy
"Bridging the know-do gap in global health"



Dr J.W. Lee
WHO Director-General
2004 & 2005



The know-do gap & infant mortality

11 million children under-5 yrs old die every year-90% of them in the developing world

***2/3** of these deaths (7 m) can be prevented by available, effective and cheap interventions*

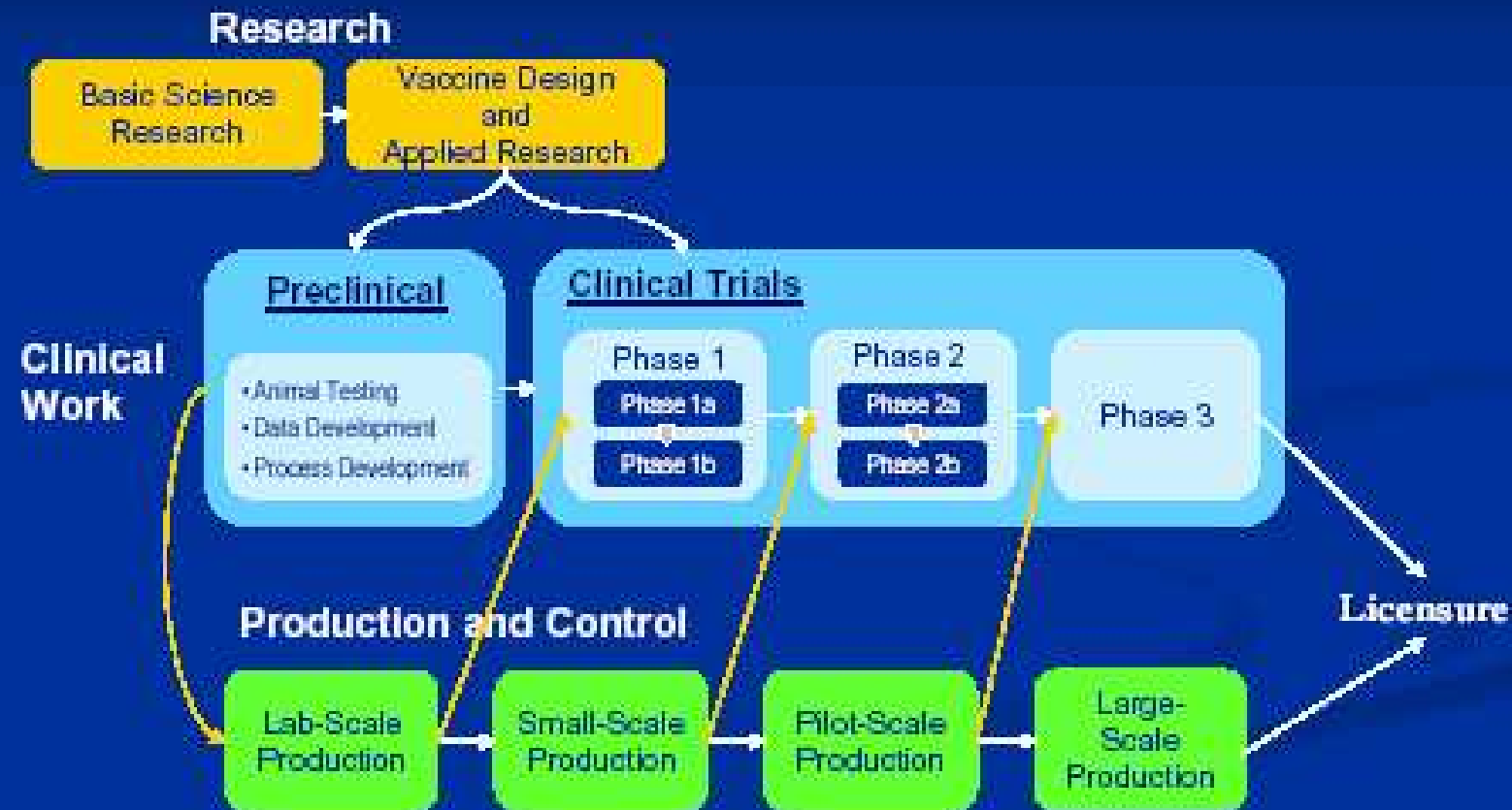
Source: Lancet 2005;365:1147



WHO Knowledge Management Strategy
"Bridging the know-do gap in global health"



Malaria Vaccine Development



Public Health Strategy Development – Malaria Vaccine Community

Vision

- Market, Social, Policy Factors
- Strategic Goals and Framework
- Major Scientific Challenges



Technology Roadmap

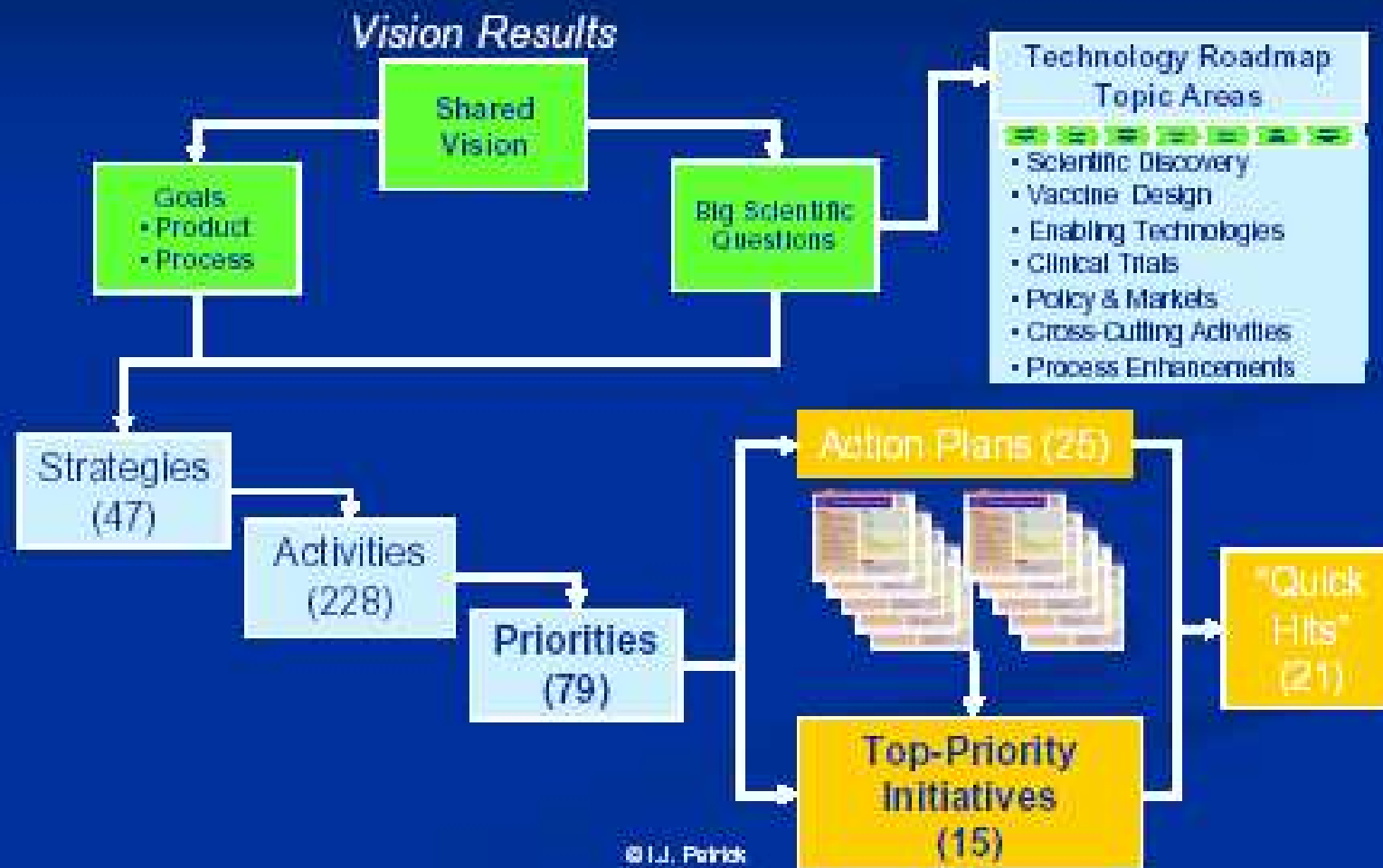
- Science, Technology, Engineering
- Critical Activities & R&D Priorities
- Activity Pathways and Action Plans



Problem Definition

Potential Solutions

From Vision to Initiatives

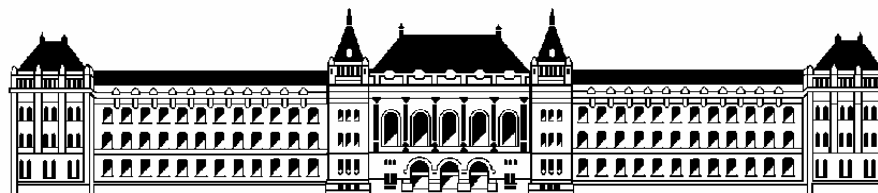




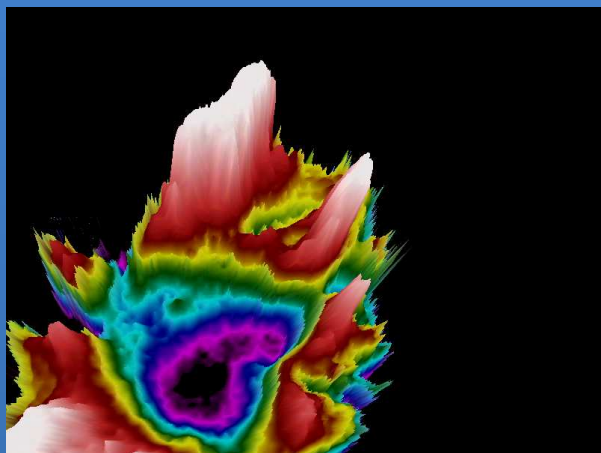




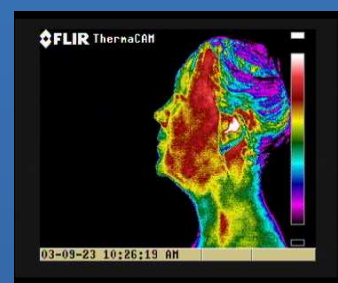
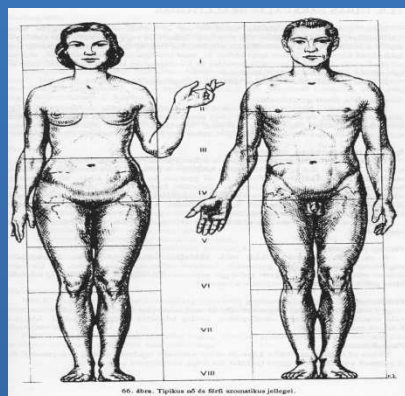
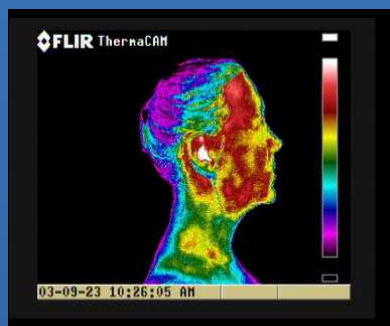
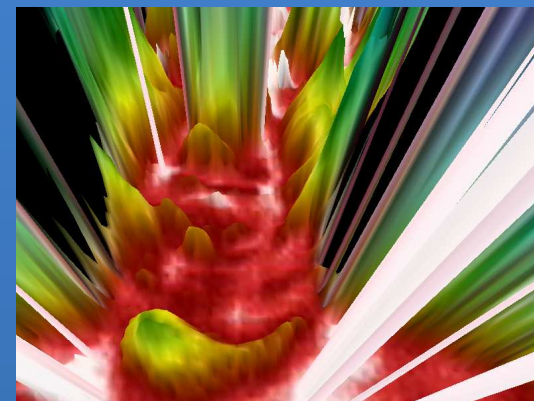


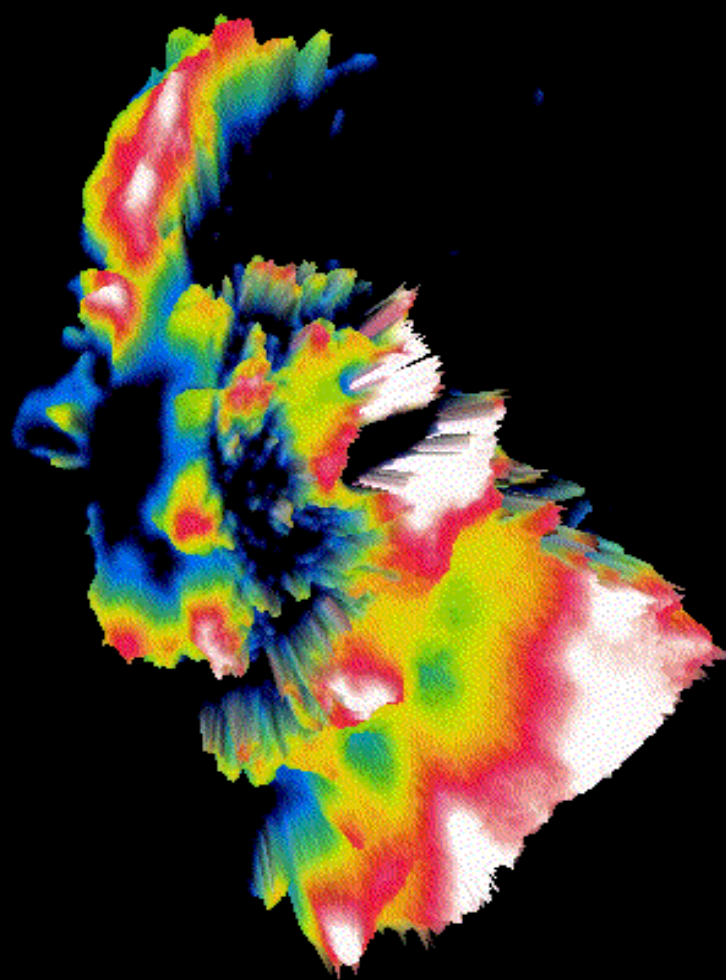


Somatologia

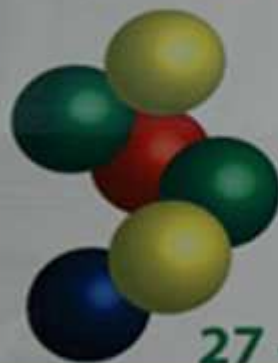


Biológiai antropológia
Humánbiológia
Somatoinfra®
Mellékletek





Welcome to



Pharmaceutical
And Biotechnology
Middle East

EXHIBITION &
CONFERENCE

27 - 29 April 2008





The Changing Global Environment

World Health Organization
Secretaría de Salud, Mexico

Publications to
address the health
burden in the South

Ministerial Summit on Health Research

Mexico City
16-20 November 2004

Ministerial Summit
on Health Research



www.who.int/ipq/minisummit/en/

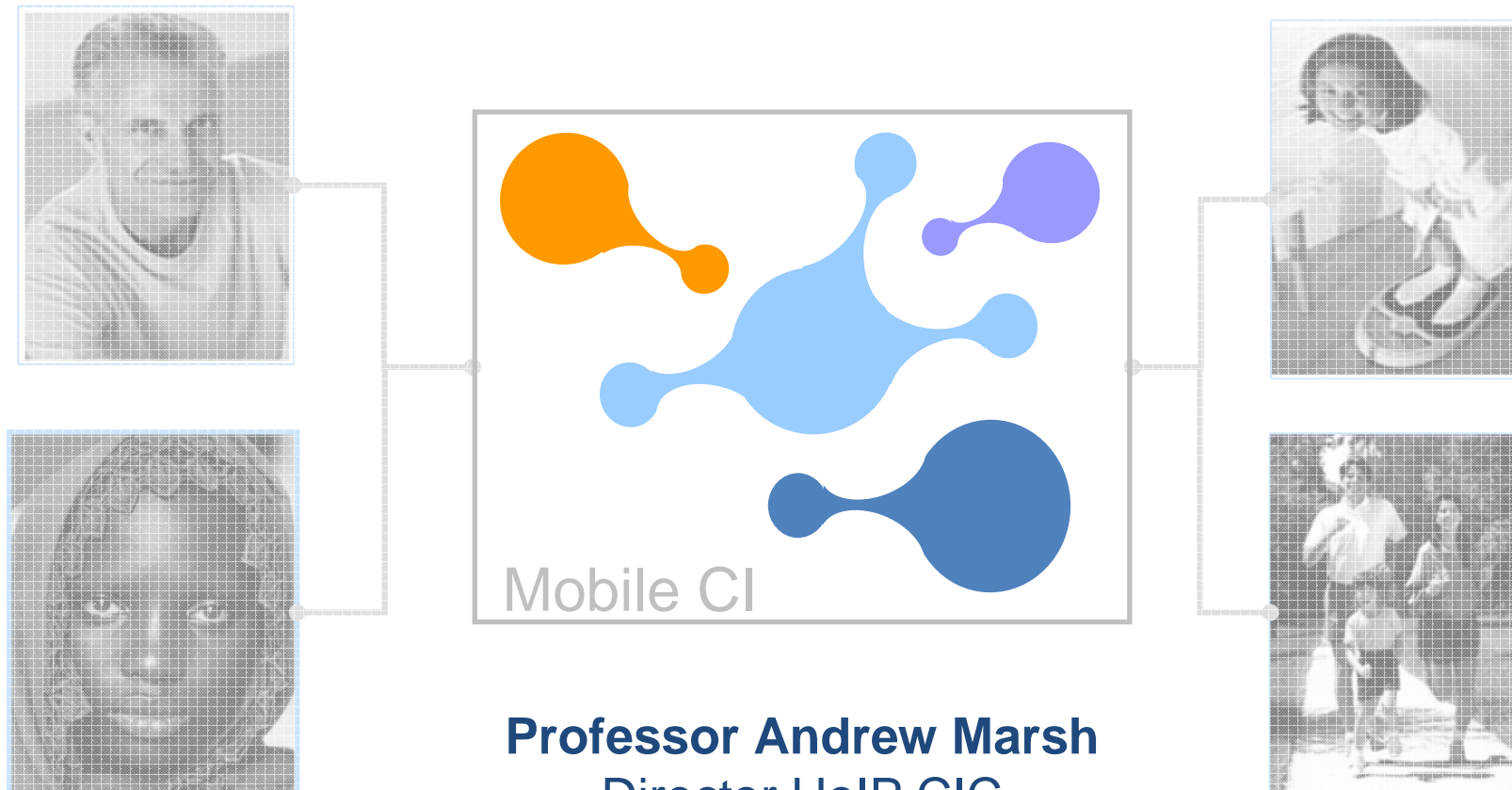
Bridging the know-do gap...



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"Bridging the know-do gap in global health"

Collective Intelligence



Professor Andrew Marsh
Director HoIP CIC

18th October 2008



HoIP and WABT to the WORLDCOMP 2009

WABT Organization invites his members and associated partners to join this world event and to contribute to the First Translational Track on Health and Health-Care over the Internet.



General Chair's Welcome
(Prof. Hamid R. Arabnia)

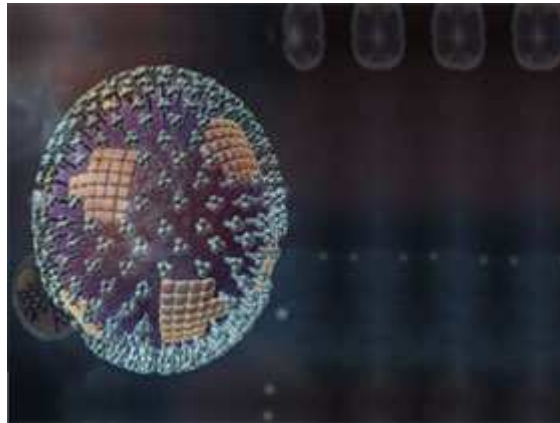
Welcome to The 2009 World Congress in Computer Science, Computer Engineering, and Applied Computing (WORLDCOMP'09) Website. WORLDCOMP'09 is the largest annual gathering of researchers in computer science, computer engineering and applied computing. It assembles a spectrum of affiliated research conferences, workshops, and symposiums into a coordinated research meeting held in a common place at a common time. This model facilitates communication among researchers in different fields of computer science and computer engineering. The last Joint Conferences ([WORLDCOMP'08](#)) attracted over 2,000 computer science and Engineering researchers from 82 countries. It is anticipated that The WORLDCOMP'09 will attract about 2500 participants.





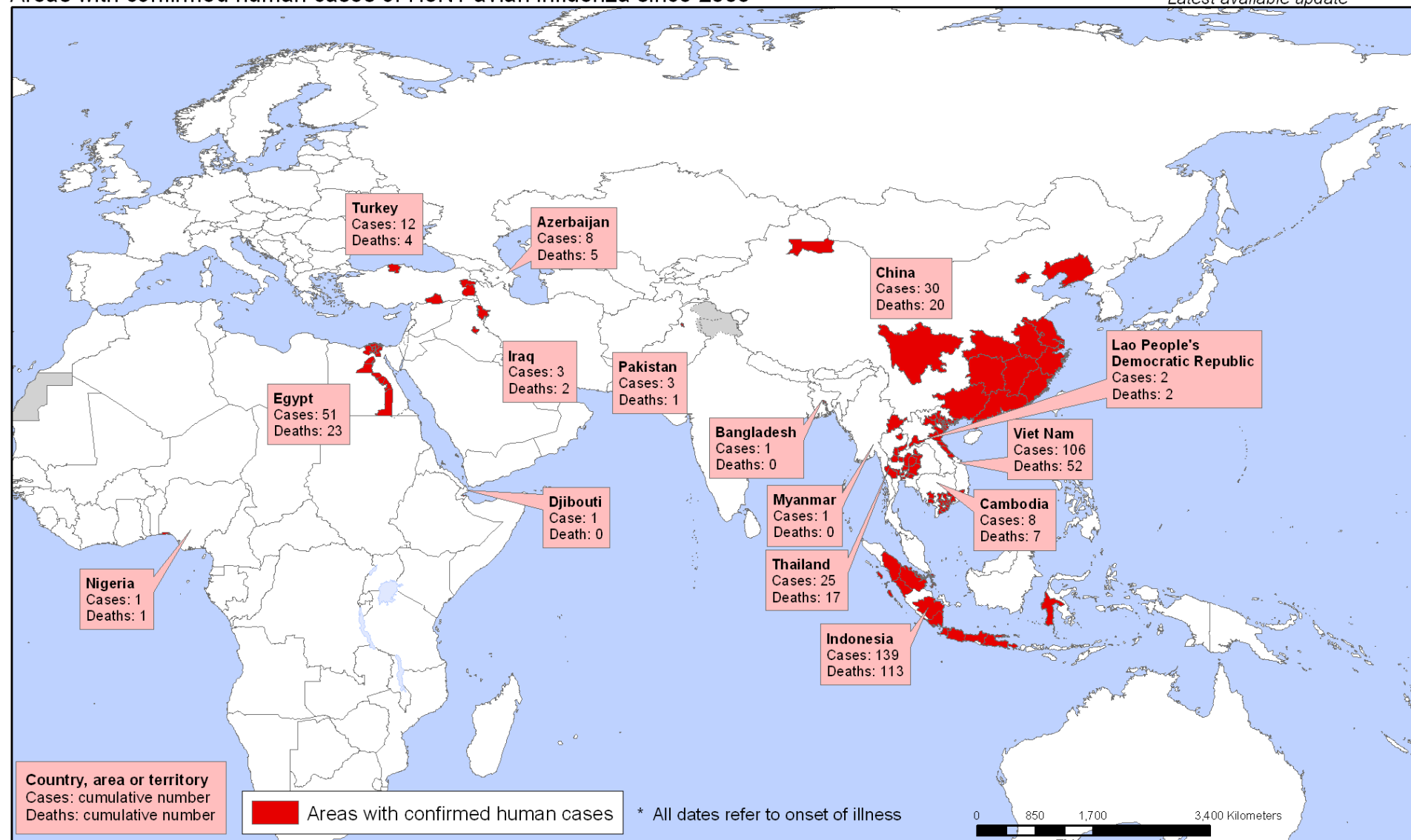






Areas with confirmed human cases of H5N1 avian influenza since 2003 *

Status as of 16 December 2008
Latest available update



The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement. © WHO 2008. All rights reserved

Data Source: WHO
Map Production: Public Health Information and Geographic Information System (GIS)
World Health Organization





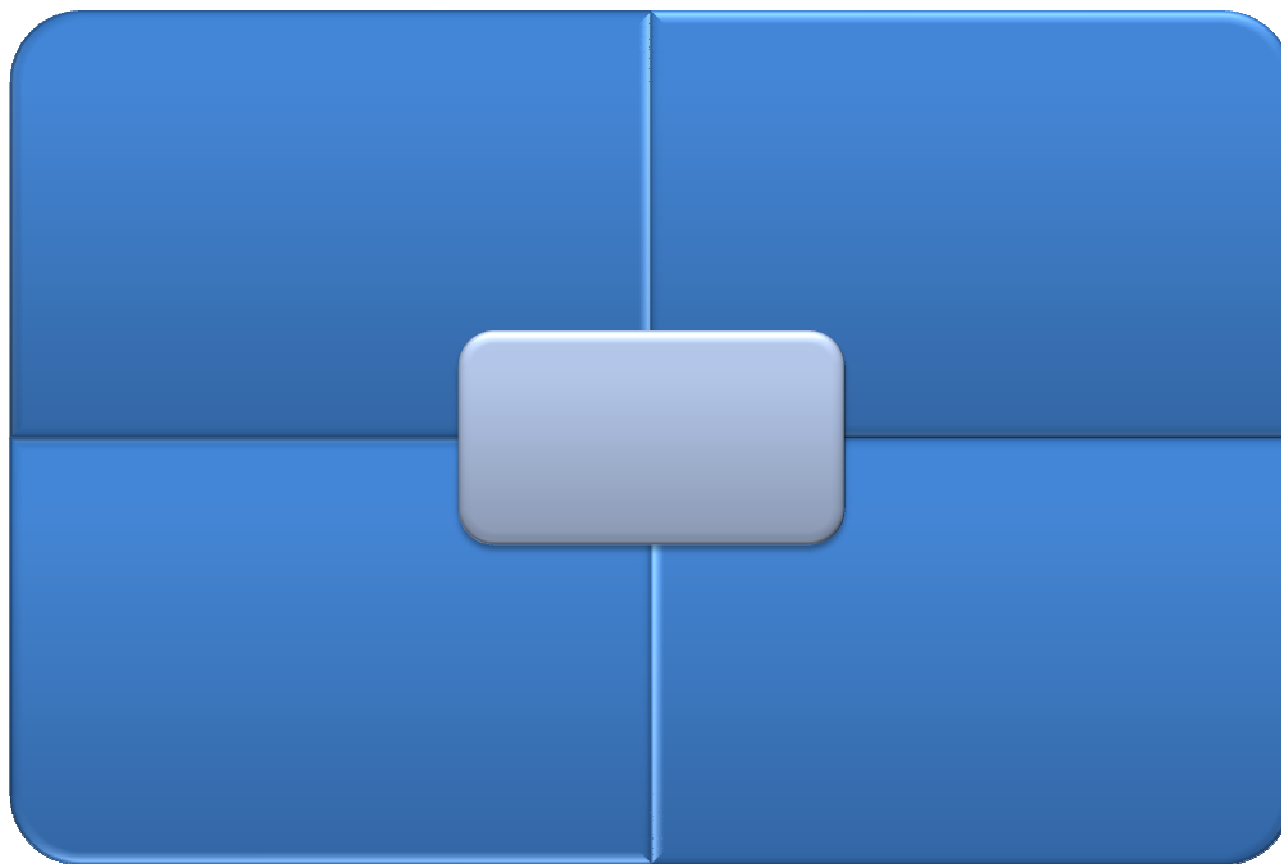












WHO Department of
Knowledge Management and Sharing

THE KNOW-DO GAP



KNOWLEDGE TRANSLATION IN GLOBAL HEALTH
Geneva - Oct 10-12, 2005



Overview

1. The Challenge

2. The Opportunities



WHO Knowledge Management Strategy
"Bridging the know-do gap in global health"



Know-Do Gap

The chasm between what is known and what gets done:

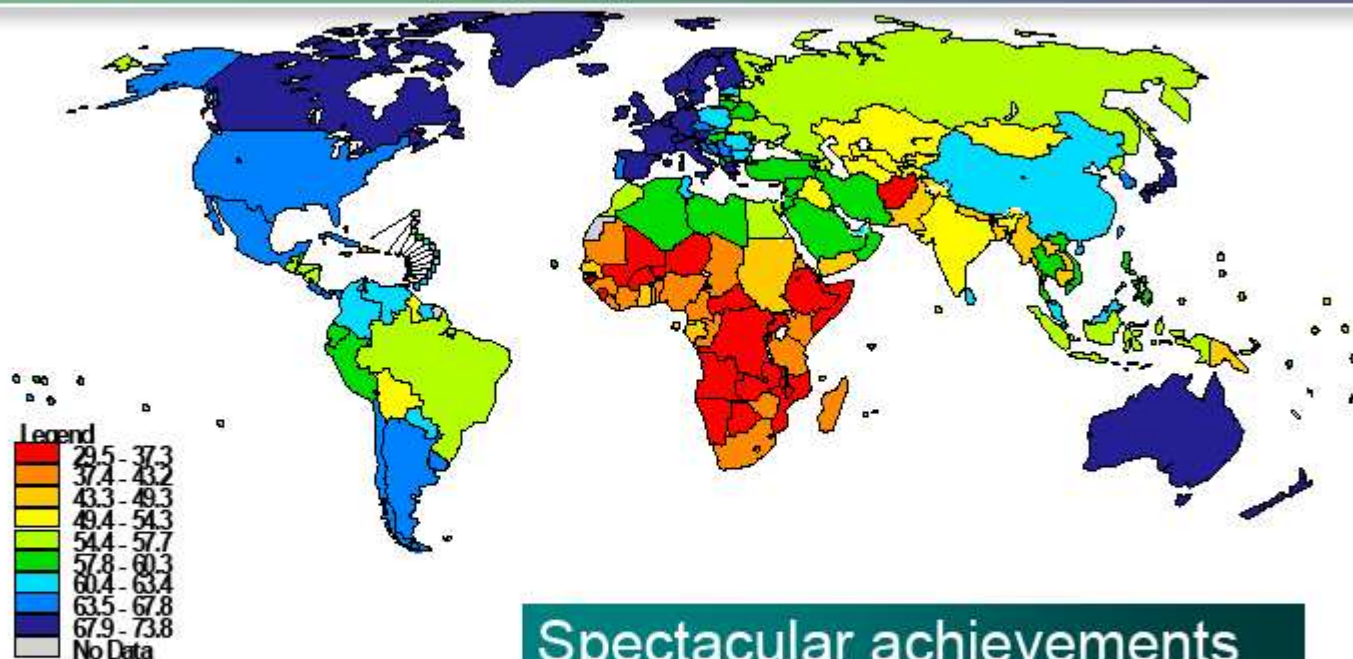
- the gap from research to policy and practice
- the gap from knowledge/awareness to action/behavior change



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"Bridging the know-do gap in global health"



Healthy life expectancy at birth, both sexes



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Spectacular achievements
- spectacular inequities

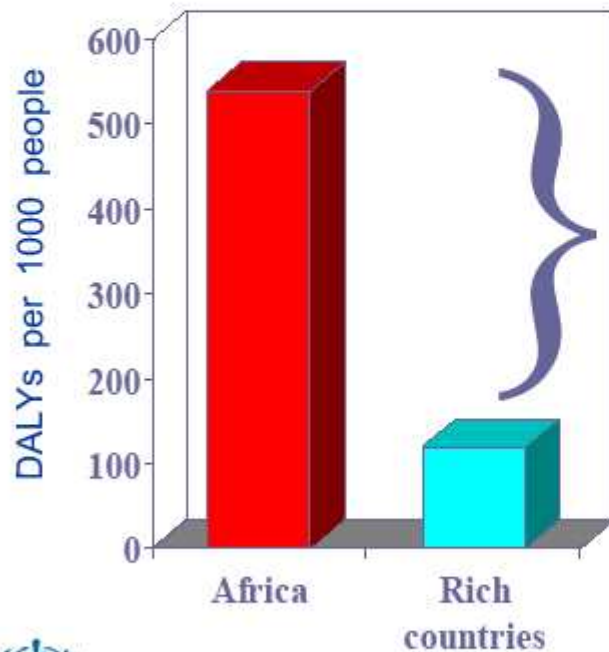


WHO Knowledge Management Strategy

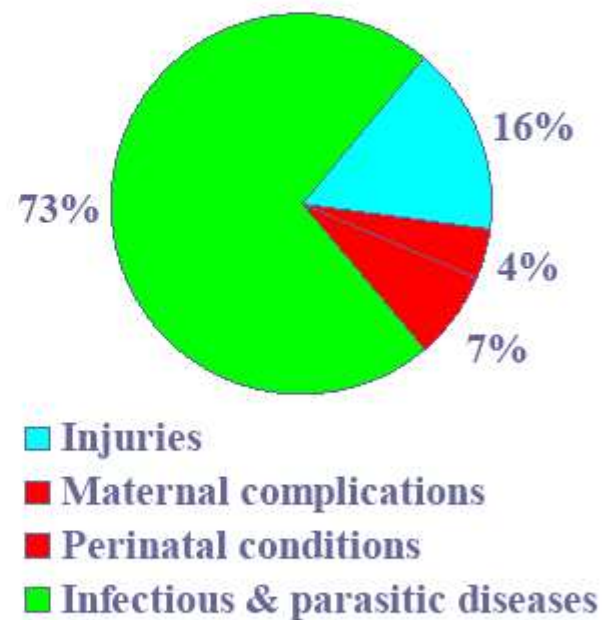
"Bridging the know-do gap in global health"



Disease Burden Differential



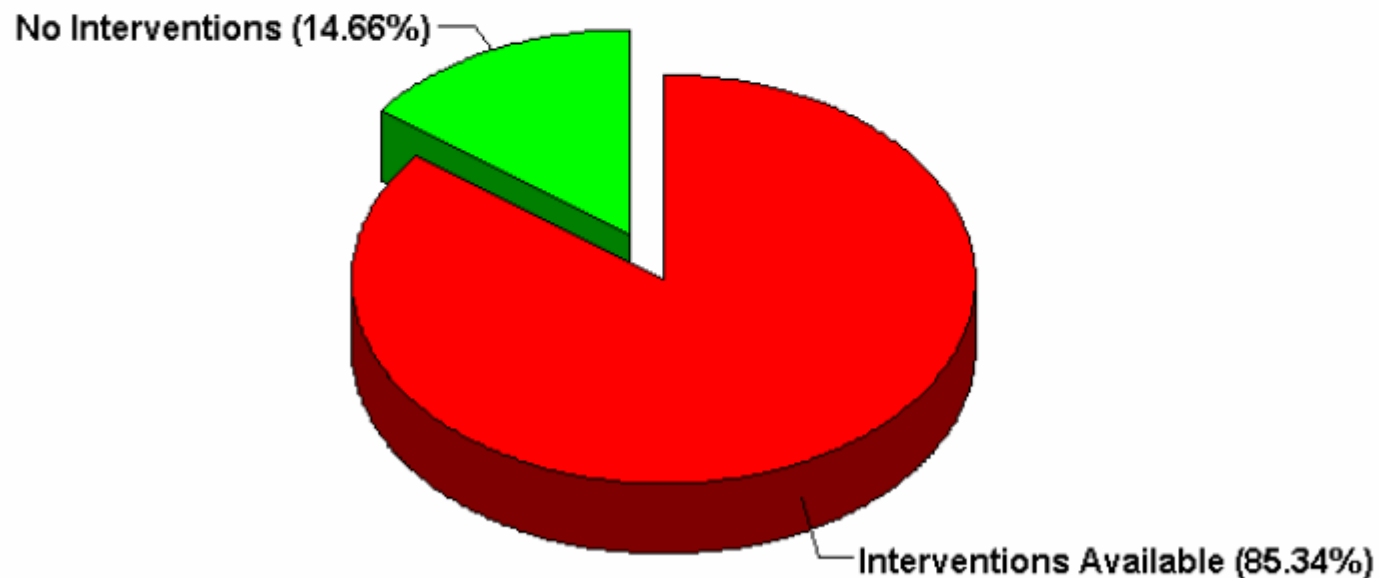
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Data source: The World Health Report

District Disease Burden Addressable by Available Cost Effective Interventions

Derived from TEHIP/AMMP Cause Specific Mortality Data (YLLs) for Rufiji Sentinel District, 2000





The Challenge is Universal & Complex



Pittet D.
J Hosp Infect. 2001



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"Laws of Improvement"

Every system is perfectly designed to
achieve exactly the results it gets

*All improvement is change, though
not all change is improvement*

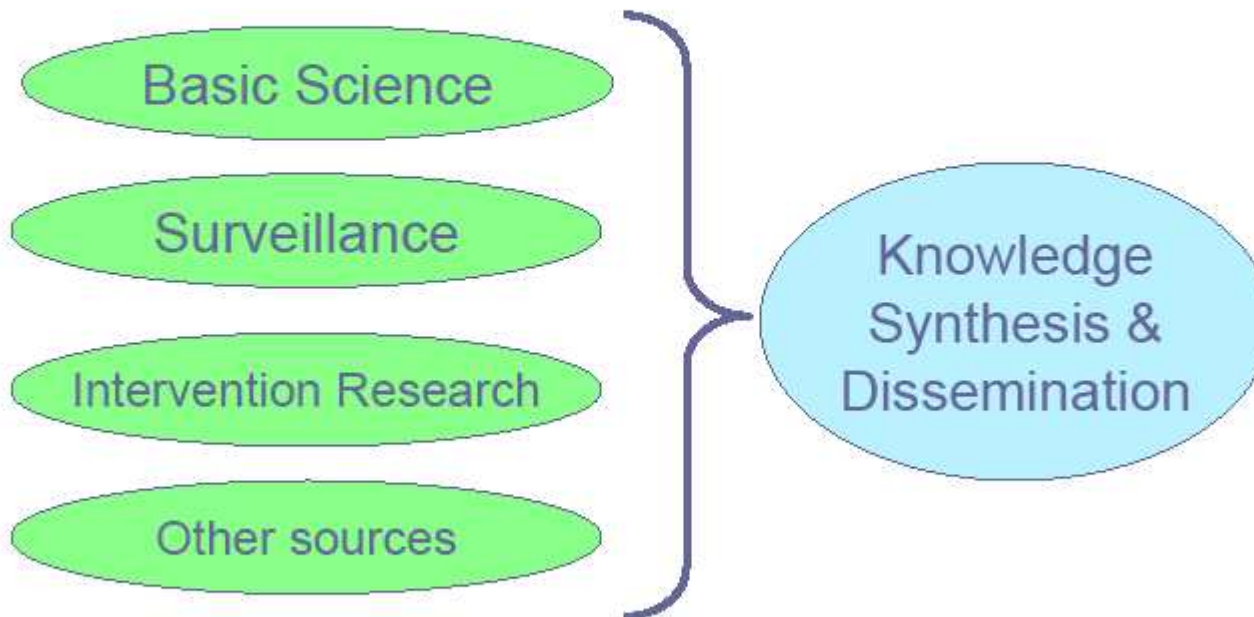


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Don Berwick (IHI) 2004



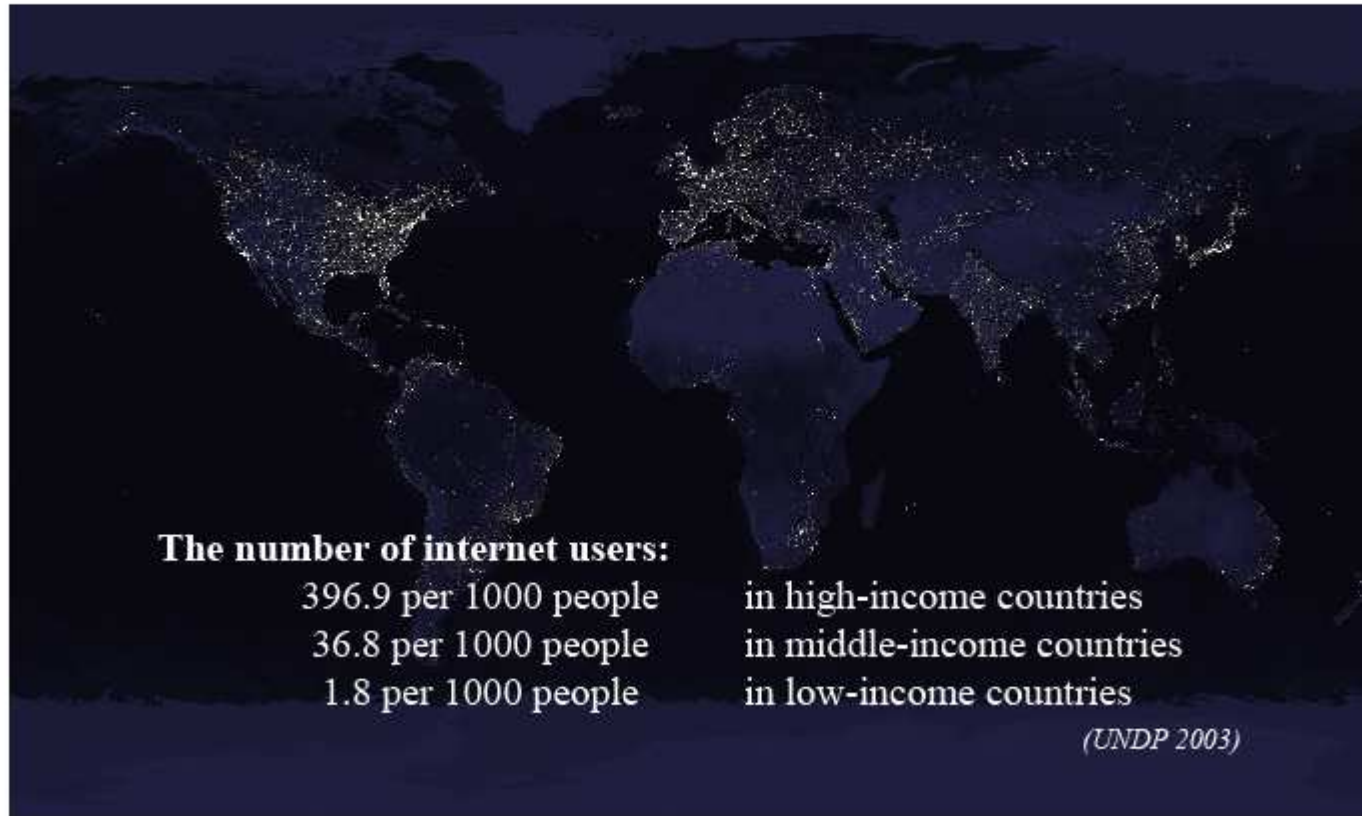
Traditional Knowledge Enterprise



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The Digital Divide





Drowning in data & information!



- Just too much of it and not always what you need
- Multiple parallel demands
- Information goes up and never comes down
- Key consumers of information not being served:
 - Policy makers
 - Health Managers
 - Service Providers
 - General public



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Diffusion of Innovation



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Roger 1962



Bridging the know-gap in public health

• Period	Era	Strategy
• Until 1960s	Passive	'Diffusion' via journals
• 1970s +	Push	'Dissemination', e.g. practice guidelines
• 1990s +	Push harder	Implementation, e.g. behavior change,
• 2000 +	Partner & Pull	Linkage & exchange



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Source: Jonathan Lomas, CHSRF/Mexico Summit 2004



After all these years...

“This review highlights the fact that despite 30 years of research in this area, we still lack a robust, generalisable, evidence base to inform decisions about strategies to promote the introduction of guidelines or other evidence-based measures into practice.”

Grimshaw et al. “Effectiveness and efficiency of guideline dissemination and implementation strategies” *Health Tech Assess* 2004; 8(6): 66



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"We don't know how"

- Figuring out a path to action (embedded in the complexity of a given social setting)
- Continuous improvement to make it easier and cheaper to achieve success
- Replicating model for scaling up (itself requiring adaptation and improvement)



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KT "Field" Challenges

- The literature on KT is still scarce and not systematic – we could learn from other sectors
- There is no agreed conceptual framework and even consensus on KT terminology
- Experiences abound but we lack a learning platform to develop and spread good practices
- KT cadres are still young, and most funding/promotion systems not very supportive
- Evaluation and accountability systems not always aligned



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Overview

1. The Challenge

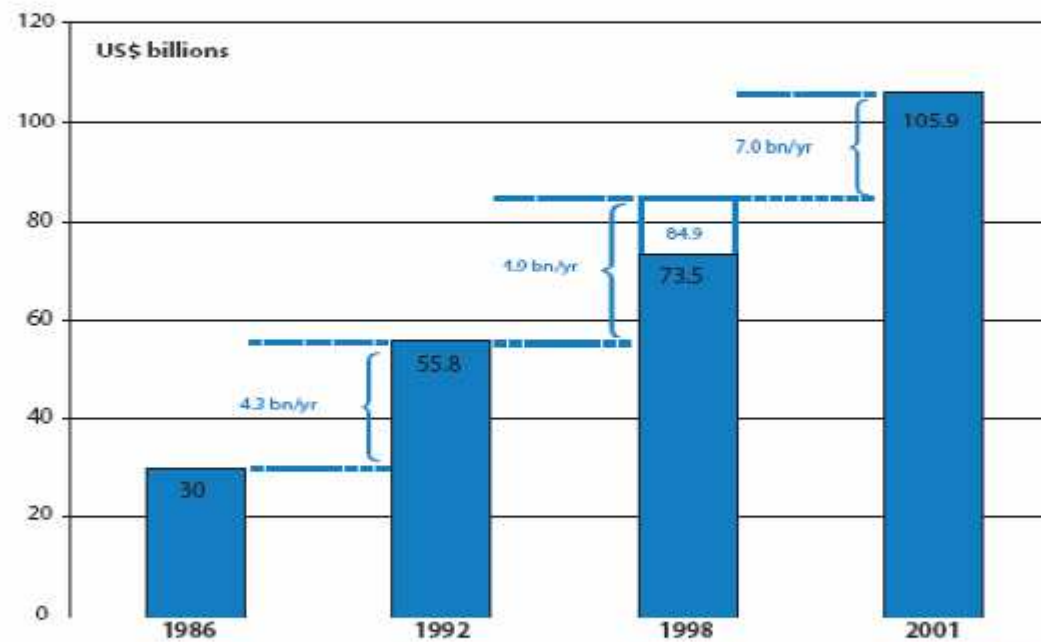
2. The Opportunities



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Global Investment in Health Research



GFHR 2004



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Knowledge Translation

"Knowledge Translation is the exchange, synthesis, and ethically sound application of knowledge within a complex set of interactions among researchers and users to accelerate the capture of benefits of research through improved health, more effective services and products, and a strengthened health care system.".

Adapted from the Canadian Institutes for Health Research, 2001.



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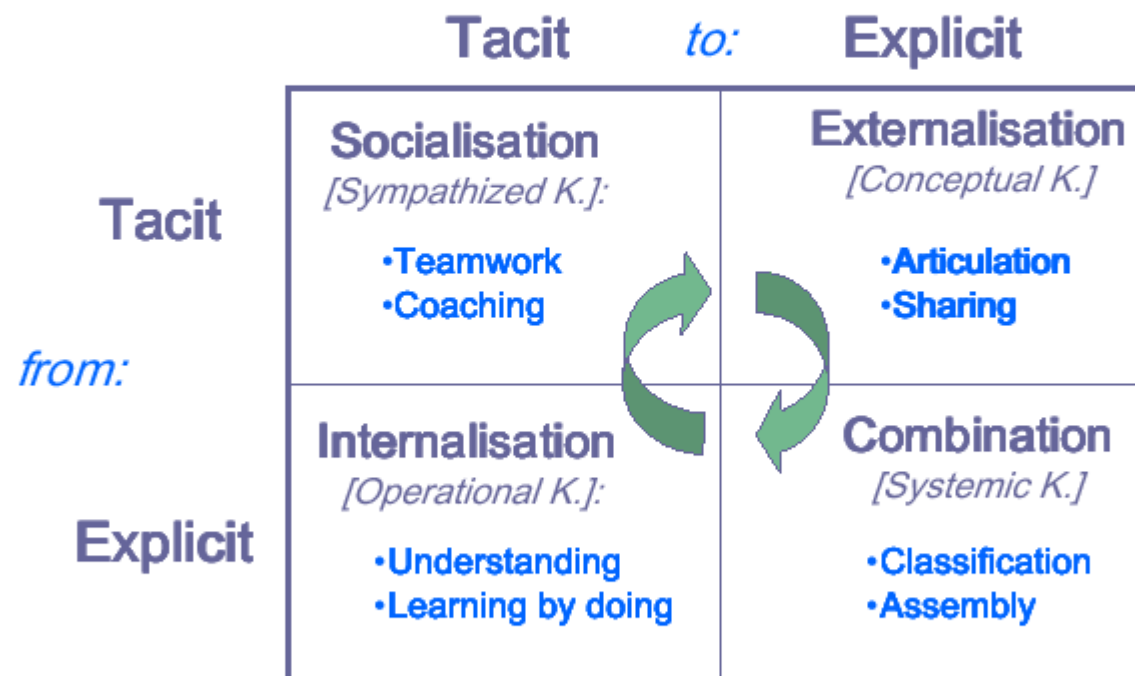


Bridging the Know-Do Gap





Tacit knowledge and social context



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Source: Nonaka and Takeuchi, 1995



Lots of activity in KT

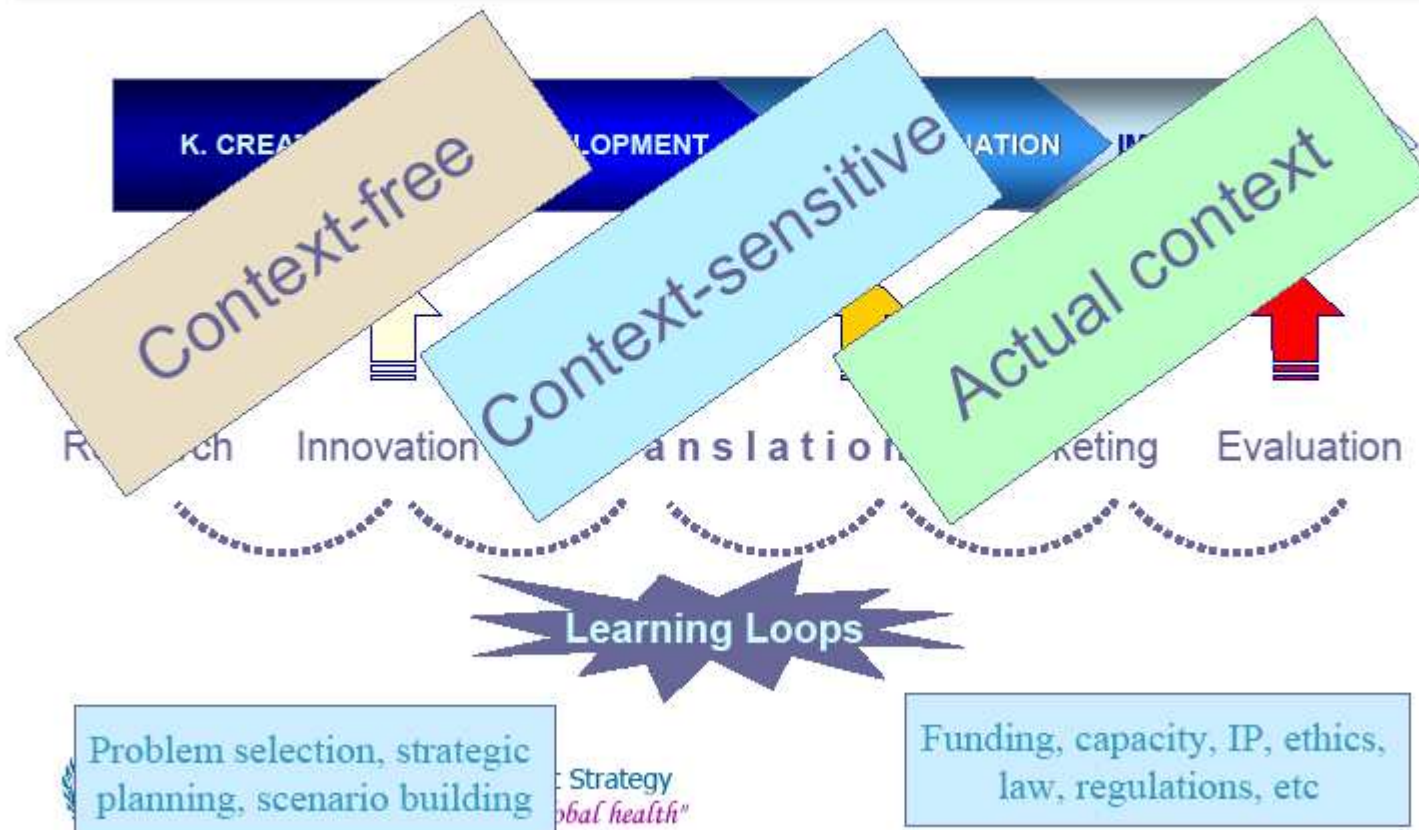
- PPPs addressing market failures in R&D for diseases of poverty
- BRAC scaling up essential health services
- TEHIP aligning district budgets with disease burden
- Demand-driven evidence provision (HEN EURO, UK CHAIN, WPRO EVIBNET)
- Social Franchising fostering access to essential health products in rural areas
- Continuous improvement work in clinical settings

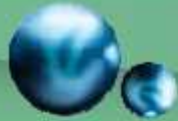


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Know-Do Value Chains





Several tracks & value chains

POLICY: formulation & implementation

COMMUNITY: social co-productions

BEHAVIORS: healthy lifestyle and adherence

PRACTICE: clinical or organizational

TECHNOLOGY: drugs, equipment, etc.



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KT Null Hypothesis

H_0 = Evidence cannot get into practice

H_0 = The problem cannot be solved

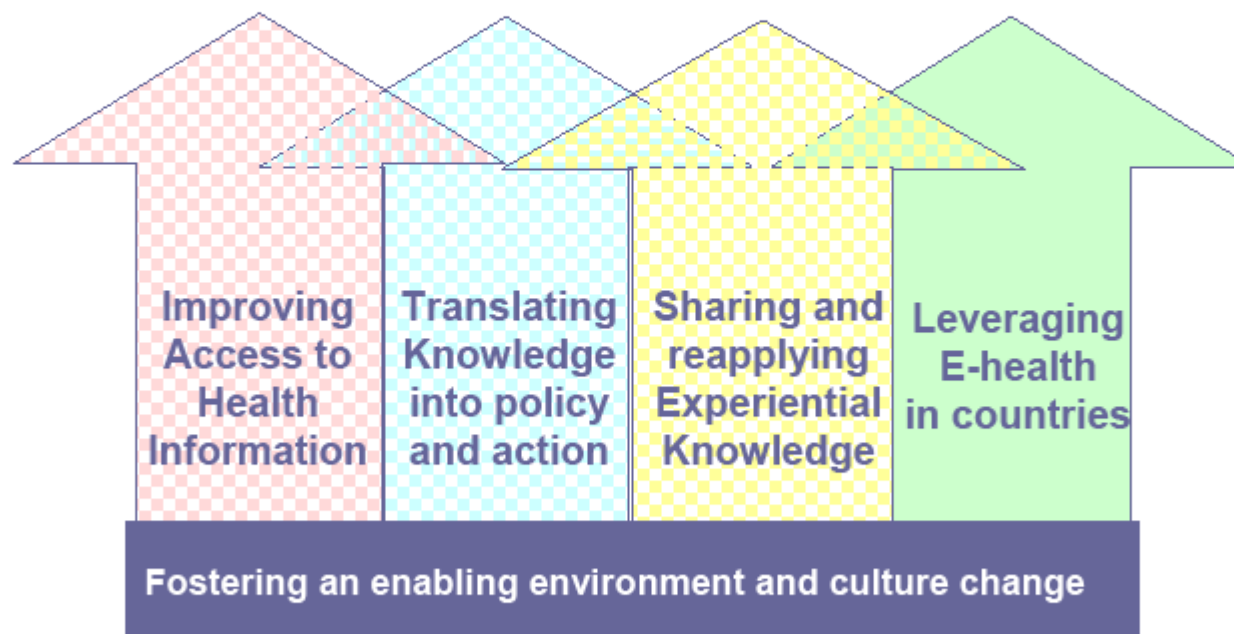
'At the moment of commitment, the entire universe conspires for our success' - Goethe



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BRIDGING THE KNOW-DO GAP IN GLOBAL HEALTH



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KT "Field" Opportunities

- A new focus on health systems and increasing investment in health and international aid
- Growing research over last decade – including Cochrane's initiatives in this arena
- ICT boosting knowledge access and sharing across the world
- Known successes and the emergence of regional KT networks
- Some donors stepping up the plate on KT
- Your leadership and experience



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