EDITORIAL

Translation science: transforming everything but changing nothing?

In the deep sea where ideas swim, “translation science” appears to be the latest philosophy to get caught up in the net, brought to the surface and swung into the boat as a shiny new discovery from the mysterious depths, but is it really moving us forward? Although some might believe we are simply playing semantics here, I would like to think that this new derivation of the evidence-based movement is in fact not all that mysterious and has the potential to drive us forward once more – at a time when we really need it.

Günter Grass once said that translation is “that which transforms everything so that nothing changes”.1 For decades we have been discussing the nature and role of evidence to inform the decisions that are made about patient care and to improve health outcomes and we have certainly come a long way. It seems timely, however, to sit back and take stock of where we are, how far we have come and, of course, to look to the future.

Central to this discussion is the need to broaden the scope of the translational trajectory. Already, new gaps have been identified, particularly in relation to the gap between knowledge needs (as identified by patients, the community, clinicians, governments and organisations) and the work undertaken by scientists and researchers during the discovery process. Additionally, of course, are those gaps between discovery and clinical research and between clinical research and public health action.2

An important consideration moving forward will be to break down disciplinary siloes at all levels and settings if a translational approach to care delivery is to ever really occur. This means starting at the level of undergraduate and postgraduate education in university settings, right through to partnering with government, industry and the general public in order to effectively leverage research to accelerate improvements in patient care.

There is significant movement occurring in the field already and we need to embrace the changes that are, I believe, just around the corner. Cross disciplinary education and partnership in agenda setting, research conduct and the identification of strategies to effectively and meaningfully implement the results of research in policy and practice will take considerable collective effort and mind shift. Only then will we be truly able to transform health care provision and make the necessary changes to improve health outcomes globally into the future.

Rather than waiting for serendipity to surreptitiously unite health professionals, researchers, policy makers and the general public, their understanding of the translational science trajectory and how to collectively work together to close translational gaps, it seems that a collective process that begins at an undergraduate level and is embraced throughout the key stakeholder groups responsible for translation might be a brave step forward. Translation science requires a united, cross-disciplinary, integrated and deliberate approach that exploits the strengths of multidisciplinary collaboration at all levels. Moving beyond siloed, repetitious programs and policies that fail to recognise the analogous skills required for knowledge translation across the health disciplines is an important, bold and necessary step towards improving health outcomes globally.

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References