

## **Abstract**

### **Do academic knowledge brokers exist? An exploration of research-to-policy networks of faculty from six Schools of Public Health in Kenya.**

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#### **Introduction:**

The potential for academic researchers to facilitate knowledge exchange and policy influence is advancing. Anecdotal evidence infers that faculty at Schools of Public Health (SPHs) have been recognized as playing a knowledge brokering (KB) role and serving as agencies of and for development. However, the empirical evidence for this role remains undocumented.

#### **Methods:**

Using a census approach, we administered sociometric surveys to academic faculty across six SPHs in Kenya. Academic KBs were identified using Social Network Analysis (SNA) in a two-step approach: First - by ranking individuals based on 1) Number of policymakers they know; 2) Number of peers who report seeking them out for advice on knowledge translation; and 3) Their position in the network as “connectors” between researchers and policymakers. Then - by triangulating the three scores and re-ranking individuals. Those scoring within the top decile across *all* three measures were considered KBs.

#### **Results:**

Using SNA, we identified 7 KBs out of 124 full time faculty who participated in the survey. They represented 4 SPHS, only 1 was female, and 3 held positions of leadership. Those scoring high on the first measure were not necessarily the same individuals scoring high on the second. Participants were also situated in a wide range along the “connector” measure.

#### **Conclusion**

Academic KBs do exist in Kenya and SNA is a valuable tool in identifying them. We propose that a combination of three scores, rather than reliance on the traditional use of “connector score,” captures the nuances of these roles. Varying scores on each metric within faculty indicate varying strengths in their individual networks – with some more established than others. This has implications for Kenyan SPHs interested in building capacity for KBs, leveraging existing KBs, and building coalitions so as to contribute to evidence-informed health policies and ultimately people-centered health systems.