

Perspectives: Key Articles on the Praxis of Advising

Academic advisors exist at the center of institutions of higher education and provide unique and multifaceted services to their communities. While advising models vary considerably between institutions, they often include front-line student support inclusive of course scheduling, degree planning, career support, and the facilitation of relationships between students and members of the broader campus community. Consequently, advisors are in a unique position to impact student success and institutional effectiveness. By engaging in research and adopting proven advising practices, advisors can positively impact development and academic outcomes among their students and drive innovative change within their institutions. This article provides a model of knowledge translation that directly ties research to practice.

The article: Pronovost, P., Berenholtz, S., & Needham, D. (2008). Translating evidence into practice: A model for large scale knowledge translation. *The British Medical Journal*, 337, 963–965.

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Translating Evidence into Practice: A Review of Pronovost, Berenholtz, and Needham (2008) and its Relevance to Academic Advising

Patrick Corr, The George Washington University School of Medicine & Health Sciences

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Academic advisors exist at the center of institutions of higher education and provide unique and multifaceted services to students in their communities. Though the organizational structure of academic advising varies greatly across institutions, the responsibilities of an advisor typically include course scheduling, degree planning, career support, and facilitating relationships between individual students and diverse campus resources. Given the unique nature of this work and the relationship development it entails, advisors are uniquely placed to impact both individual student success and overall campus effectiveness. They can achieve this by engaging in emerging research related to the practice of academic advising and adapting established practices to their campuses.

Research in academic advising is a relatively new field of study. However, it aligns well with the long-established field of translational health sciences. Academic advisors and health care administrators work in environments comprised of complex systems and interprofessional stakeholders. They both address issues that require

human-centered solutions. This perspective piece reviews the model of knowledge translation proposed by Pronovost et al. (2008) and adapts it from use in a health care system to use in an institution of higher education. This model encourages advisors to identify a particular concept or advising issue, review existing research, identify barriers or facilitators to the implementation of a specific initiative, measure performance, and ensure equitable access to the initiative across the community.

The Role of Research in Academic Advising

The importance of research and the impact that empirical evidence can have on the profession of academic advising has long been discussed. Smith and Troxel (2008) advocated for an increased infusion of research into advising practice, arguing that the profession will advance by using relevant research and the creation of new knowledge. Hurt and McLaughlin (2012) noted that research can assist in identifying and addressing macrolevel issues that impact students

on a specific campus or within a specific context. More broadly, advisors can use the knowledge gained from critical scholarship at other institutions and adapt specific advising interventions to support their populations of students. Furthermore, Hurt and McLaughlin (2012) believed that adopting a scholarly approach to advising can help legitimize its professional nature and encourage advising offices to move beyond prescriptive models of advising to more dynamic and student-centric models of support.

There exists a persistent misconception that rigorous scholarship requires an advanced-level education and that primary-role advisors cannot conduct research without first pursuing graduate training (Hurt & McLaughlin, 2008; Troxel, 2019). Rather, Troxel (2019) noted that the greatest impediment to practitioners' engagement with research is a lack of confidence in their understanding of research design and the time demands of advising a large load of students. In summary, many academic advisors do not feel they have the time or training to conduct research in the way that faculty members of other higher education communities do. One way to alleviate these concerns and address feasibility for practitioners with full-time caseloads is to encourage collaborative research work with colleagues across the institution (Hagen, 2010; Robbins, 2012; Troxel, 2019). Interprofessional research can advance the theoretical understanding of student development by providing a holistic view of a student's on-campus experiences and share the responsibility for engaging in rigorous research.

As a professional organization, NACADA has embraced the importance of research regarding academic advising. The NACADA global organization includes a Research Committee, whose job is to promote these interests, as well as a dedicated Center for Research. The overarching goals of the NACADA Research Committee (2014) include the advancement of the body of knowledge related to academic advising, the promotion of the importance of applying this knowledge to practice, and the empowerment of academic advisors to engage in critical reflection of their practice to contribute further to this body of knowledge. The Center for Research at Kansas State University is "the first global think tank dedicated to research in academic advising and student success and serves as a resource for advancing the scholarly practice and applied research related to academic advising"

(NACADA, 2021, p. 1). Importantly, the goals of the NACADA Center for Research highlight the importance of practitioner involvement in the creation and dissemination of scholarship in academic advising.

In short, NACADA's view of research is that it must be systematic, intentional, and collaborative. Research must be planned, must have a clear goal, and must include a diverse population of stakeholders inclusive of primary-role advisors, faculty advisors, and others directly involved in advising students. In addition to these strategic goals, the Research Committee and Center for Research also provide grant funding and research awards to recognize the scholarly inquiry driven by members of the association. The support available through NACADA's Research Committee and the Center for Research specifically encourages primary-role advisors to increase their engagement in and consideration of research, as well as to actively participate in knowledge generation.

Ultimately, the work of NACADA and the organization's growing focus on applied research is perfectly aligned with the tenets of translational science and the Model of Translating Knowledge to Practice.

Translating Knowledge to Practice; Translational Science in Health Care Systems

Before discussing how knowledge in academic advising can be translated to practice through the lens of translational science, it is first important to understand the core concepts of this science. According to the National Institutes for Health's National Center for Advancing Translational Sciences (2021),

Translation is the process by which research conducted in laboratories, clinics, and communities is turned into specific interventions designed to improve the health of individuals and communities. Translational science is the specific field of research that focuses on "understanding the scientific and operational principles underlying each step of the translational process. (p. 2)

Essentially, translational science is a comprehensive field of study that considers research along a continuum from basic laboratory science to wide implementation and policy development. In short, translation is the process of moving research to

local practice and, ultimately, scaled implementation of a particular initiative. Translational science appreciates the complexity of systems as large as health settings, stresses the inclusion of diverse voices from varied stakeholders, and encourages a team approach to change-making. This review considers how research is applied to a specific institution.

Translating Knowledge to Practice

In 2008, Pronovost et al. proposed a model for translating evidence into practice in a health care setting. This model encourages clinicians and health care system administrators to:

- 1) Identify a local issue impacting patient outcomes.
- 2) Systemically review evidence related to this issue, identify initiatives associated with improved patient outcomes, and adopt the interventions with the largest benefits and fewest barriers to implementation.
- 3) Review the intervention in a local context to identify impediments to patient improvements (i.e., asking stakeholders and administrators involved in the intervention to share concerns, discuss gains and losses related to intervention, and determine how the local context can adjust to these new initiatives).
- 4) Measure the performance of a chosen intervention within the local context (i.e., measure baseline performance before adopting an intervention and conducting post-assessments).
- 5) Scale the intervention to all patients within a clinical setting by engaging major stakeholders and explaining the importance of the new intervention, sharing evidence related to the intervention, designing tool kits to help front-line providers to deliver the intervention, and conducting regular assessments to ensure performance measures are met and unintended consequences are remediated.

In addition to recognizing the need for knowledge dissemination and implementation, Pronovost et al. (2008) discussed the important role of including multidisciplinary stakeholders in the process of introducing evidence-based practice into patient care. The authors argued that

while a particular intervention may have been developed by a team of physician scientists, the process of translating research to practice requires a multidisciplinary team reflective of the clinical environment. These stakeholders include clinical providers, administrators, patients, and caregivers. This model provides a clear road map for consuming research and using it in practice.

For example, a local translational issue might consider disparate health outcomes between cisgender and transgender cancer patients completing chemotherapy and feedback from transgender patients who feel discriminated against by other patients at a particular hospital. A translational team might include oncologists, nurses, psychologists, public health educators, and patients. As part of their practice, this group would review literature on identity-sensitive care and appropriate oncological care for transgender individuals. Through this research, this team determines that all cancer patients, regardless of gender identity, should be provided a private room wherein they can receive chemotherapy. The team receives support from the clinical administrators and introduces screened-off areas of the cancer treatment center, thus allowing patients to receive transfusions in private. Over time, the team will review patient feedback to determine whether satisfaction with the overall clinical experience has improved and, if so, the team will determine how to scale this practice to other centers within the network.

Relevance of Knowledge Translation to Academic Advising

Though the model of knowledge translation as designed by Pronovost et al. (2008) specifically relates to implementing research to health care practice, the primary characteristics can easily be applied to institutions of higher education. Though the focus is on improved patient outcomes, the model more broadly explains how to apply research in a systemic and measurable way by involving a multidisciplinary team of stakeholders and assessing how research can translate to local practice. In fact, Pronovost et al. initially developed their model in response to their concerns that “research often neglects how to deliver therapies to patients [and] consequently, errors of omission are prevalent and cause substantial preventative harm” (2008, p. 963). The authors argued that medical research fails to discuss how therapy can be provided to patients

and largely focuses on lab research and knowledge generation, not implementation at a local level. The same can be said for the research occurring at institutions of higher education; scholar-practitioners often identify issues and generate theory-driven interventions for a local context, but rarely are these practices applied broadly or scaled such that they may be applied to institutions with diverse characteristics. The model developed by Pronovost et al. can be adjusted to reflect these needs at an institution of higher education. In this situation, multidisciplinary stakeholders would include academic advisors, financial aid counselors, residential life staff, faculty members, and any other professional who has a role in supporting student success.

Higher education, like a large health care system, is a complex and intersecting collection of offices, individuals, and cultures. While the model of knowledge translation will look different depending on institutional contexts, consider the case of advising law students at a small private institution during a curriculum redesign as an example for its adaptability. In this example, the institution's faculty members have introduced a redesigned course of study for the 3-year Juris Doctor (JD) degree. Current students will continue with the previous curriculum. The newly admitted cohort will follow the new course of study. A translational team seeking to provide accurate advising to students would include academic advisors, faculty members, and the institution's website management team. To best explain these changes and keep students in the correct curriculum, this interprofessional team will review existing material in student handbooks, on the website, and in other printed advising materials. The team might update these materials to provide visual representations of the two curriculum maps, adjust advising methods to explain the nature of the changed curriculum, and work with faculty members to ensure that information is accurately shared within the classroom. Building an interprofessional team to address the updated curriculum allows institutions to ensure adequate dissemination of information and to identify where incorrect information is originating.

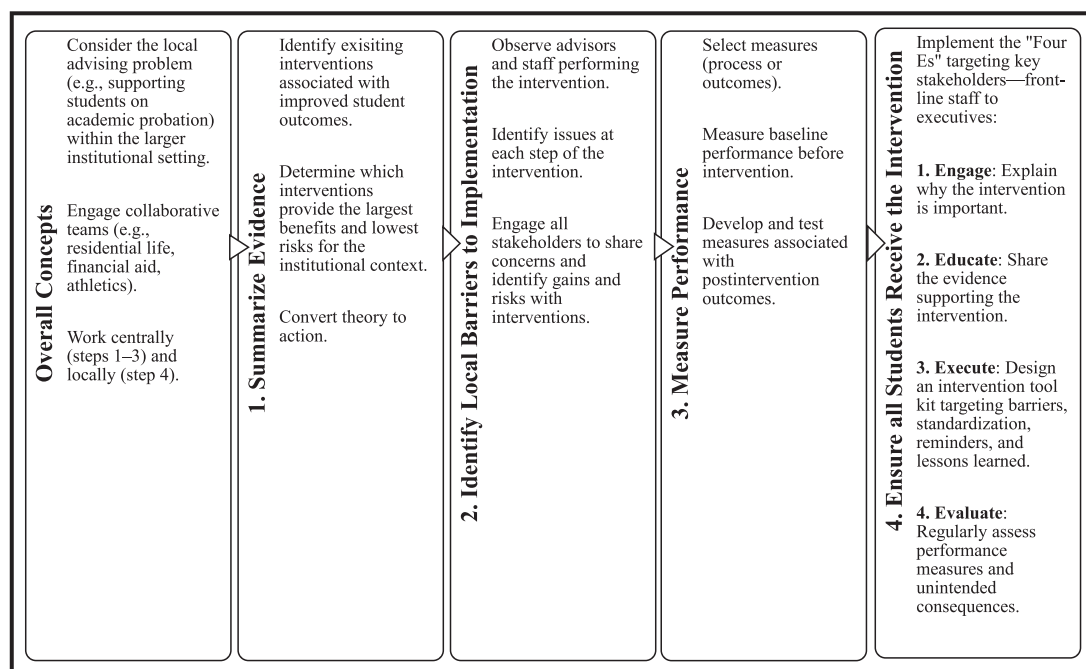
Praxis in Academic Advising

In the context of academic advising specifically, Hagen (2010) notes that scholarly inquiry must include traditional, research-designed knowledge generation, and it also must consider

the important role of knowledge dissemination and scholarship applied to practice. Robbins (2012) agreed with this assessment and further noted that evaluation and assessment must be a cornerstone to adopting new approaches to academic advising. These considerations, along with the model of knowledge translation developed by Pronovost et al., align with the idea of praxis as defined by the NACADA Review, "where theory and practice come together, resulting in a discipline of research and a profession of scholarly practitioners with the goal of promoting and supporting student success" (2021, p. 2).

In response to NACADA's focus on encouraging scholarship in academic advising, Pronovost et al.'s (2008) model was adapted to specifically address knowledge translation—or praxis—in higher education (see Figure 1). Importantly, the adapted model contains the same steps and considerations as health care systems, given the similar structural elements at play and the complexities inherent in both systems. The model represented in Figure 1 encourages academic advisors and institutional stakeholders to:

- 1) Identify a local advising issue impacting a population of students.
- 2) Systematically review research associated with the local issue or anticipated student outcome (e.g., improved retention rates) to identify an initiative that can be brought to campus. At this point, implementation teams should consider risk factors and benefits associated with adopting new practices.
- 3) Review the initiative at the local level to identify continued barriers to implementation in academic advising and student success. Engage with offices across campus to understand how a new initiative may impact other functional areas. For example, does introducing a new supportive intervention for students on academic probation positively or negatively impact satisfactory academic progress and, consequently, student financial aid?
- 4) Measure the performance of a chosen intervention within the local context (i.e., measure baseline performance before adopting an intervention and conducting post-assessments).

Figure 1. A Conceptual Model for Translating Knowledge to Practice in Academic Advising

Note. From "Translating Evidence into Practice: A Model for Large Scale Knowledge Translation," by Pronovost et al., 2008, *The British Medical Journal*, 337, 963. Copyright 2008 by Pronovost et al. Adapted with permission.

- 5) Scale the intervention to all students within an institution by engaging major stakeholders, explaining the importance of the new intervention, sharing evidence related to the intervention's success, designing tool kits to help front-line providers deliver the intervention, and conducting regular assessments so that the initiative remains effective.

As with the model for knowledge translation in health care systems, it is critical to include an interprofessional group of stakeholders in all significant decisions related to implementation. In the context of academic advising, relevant stakeholders may include representatives from financial aid, counseling, residential life, athletics, and the student body.

In summary, the model proposed in Figure 1 provides a sequential process by which advisors can engage with research in student support, partner with various campus stakeholders, and evaluate specific student-support interventions within their local contexts. This is a process that translates knowledge generated through research

to practical application. This can, in turn, inform future research. Through praxis, academic advisors can actively assess research, measure performance, and develop and refine interventions, thus improving practice for practitioners at other institutions.

The model proposed for translating knowledge to practice in academic advising also supports Troxel's 2019 article discussing the scholarship of advising and the four-step Research Involvement Framework. The first level of the framework calls for advisors to commit to consuming and critically analyzing research to improve the practice of advising. The second level encourages active involvement in research through collaboration. The third level calls for advisors to lead research projects. Finally, the fourth level encourages supervision over the research of others. This framework provides an iterative model that advisors can follow to build their research competency and grow as independent investigators. The model for knowledge translation presented in this article is well situated between the first two levels of the Research Involvement Framework by providing an illustrative map that

primary-role advisors can follow to understand the relationship between research consumption and knowledge generation. Ultimately, the focus of these two models is on improving praxis, or the intersection between research and practice.

Limitations of the Model

The most significant limitation of the model for Translating Knowledge to Practice in Academic Advising is an assumption that advisors are working in collaborative institutions and have regular relationships with members of the larger school community. It can be difficult for advisors to form interprofessional teams if their institution does not believe that this effort represents an efficient use of time and human resources. While no single approach addresses this limitation, academic advisors can begin to shift culture at their home institution by pointing to the robust body of research that discusses the effective nature of team-based interventions in education (Montag et al., 2012) and specifically the positive impact that multidisciplinary teams have on student retention (Hossler et al., 2009). Ultimately, building an interprofessional culture across campus may present a significant culture shift for institutions. In this case, primary-role advisors can begin to effect change by discussing the immediate benefits of collaborative student care.

Looking Ahead

As our institutions become more diverse and adapt to new modalities of education, such as hybrid programming and online degrees, it is crucial that academic advisors engage in critical scholarship and adopt evidence-based initiatives to support students. NACADA considers research as scholarly inquiry on all aspects of the advising relationship and considers it the responsibility of all members of the advising community to consume and produce research on advising to further advance the profession (2008). By understanding translational science—the process by which research is analyzed, brought to practice, and continuously evaluated—academic advisors can rise to meet the diverse needs of our students.

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Author's Notes

Patrick Corr is the director of dual enrollment programs at The George Washington University

(GW) School of Medicine & Health Sciences (SMHS) and an assistant professor in the Department of Clinical Research and Leadership at GW SMHS. Corr teaches qualitative research methods, academic writing, and health equity. His research interests are in subjective well-being, whole body health, and

addressing inequities to improve health outcomes. Corr earned his doctorate in education at The George Washington University, his master's in education at Salem State University, and his bachelor's in English and gender studies at Pace University. He can be reached at pcorr@gwu.edu.