

## **Telling the whole story: a case study on three knowledge exchange systems**

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**Background:** As part of the "Youth Health Collaborative: Excelsior Evidence-Informed Action" (a Canadian Partnership Against Cancer-funded Coalition Linking Action and Science for Prevention), Manitoba (Youth Health Survey), New Brunswick (N.B.) (Student Wellness Survey) and Prince Edward Island (P.E.I.) (School Health Action, Planning and Evaluation System—P.E.I.) each conducted province-wide case studies on their youth health surveillance and knowledge exchange (KE) initiatives.

**Purpose:** To share our experiences in trying to improve youth health outcomes through building KE capacity across research, policy and practice.

**Study/Intervention Design:** We used a multiple case study design to explore KE systems in Manitoba, N.B. and P.E.I. A case study approach provides in-depth understanding of people, events and relationships that are firmly situated within specific but complex contexts.

**Methods:** Using interviews, focus groups, surveys and document review allowed for exploration of diverse perspectives within and across local and provincial contexts. For each case study, we performed thematic analysis to examine, categorize and tabulate data from multiple sources, resulting in emerging evidence. Each participating province then conducted cross-case comparisons using "clusters" and themes, identifying commonalities, differences and realistic outcomes from KE networks.

**Results:** By using a multisite approach, a cross-case comparison between Manitoba, N.B. and P.E.I. identified generalizable lessons. We will explore stakeholder perceptions in three areas: the challenges and successes of partnerships, knowledge development and KE mobilization.

**Conclusion:** Each provincial context provides lessons that are applicable to other local, provincial, national and international surveillance systems to improve outcomes in knowledge use and youth health.

**Keywords:** youth health, knowledge exchange systems, knowledge mobilization, evidence to action, capacity