2024 KT Online Conference

Taking Knowledge to the Stage and the Board Room

Presenters:
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Steve Mantis: My name is Steve Mantis. I'm an old white guy wearing a blue shirt, and I'm missing my

left arm. I lost my left arm in an industrial accident in 1978, so it's 46 years ago.

Marion Endicott: Good afternoon, Marion Endicott. I am a woman in my seventies with shoulder length

straight blonde hair. I'm wearing reading glasses, and I'm wearing a blue shirt, and I'm

speaking to you from the east coast of Canada. I'm very glad to be here.

Steve Mantis: Alright, next slide please. Alright, so we wanted to just provide some background

information before we start talking about our knowledge transfer knowledge mobilization activities. And these really come out of a project, which was our Research Action Alliance on the consequences of work injury that took place between 2004 and 2012. It was funded by the federal government in Canada, a program that's no longer in place. We had partnerships with six universities in Ontario, the one of the larger provinces in Canada, along with the Ontario Network of Injured Workers Groups, which is my home spot, as well as community legal clinics where Marion spent most of her career. We had 26 specific research studies as part of the project, and training for the community was a real big part of it because the idea that disabled workers were equal with university professors, it doesn't come naturally. And so we had to develop our programs around that. Next slide please.

In order for us to kind of say, "Hey, we thought this really worked, but what are some of those indicators that this initiative really worked?" And one was really that sustained relationship between the community and the academy. Even though this project ended 12 years ago, we're still working with a number of the academics and the community members that were involved up to 20 years ago. We've also seen a real increase in terms of interest from the academic community and really an appreciation of the knowledge that the community brings to the table and the strengthening of our community, which we see as advocates, as people with lived experience. We'll be the ones there when the project is over, we'll still be there. We'll still be facing the barriers we face and are working to try to overcome those barriers on a systemic way. And another big achievement was all these research studies that really documented what happens in terms of the actual experience of workers when they become disabled. And we've been able to use that in our advocacy efforts. And we did just lots of knowledge

mobilization initiatives. So next slide. That's really our focus today is that knowledge mobilization, but some of those measures of success as well were injured workers speaking up, the strengthening of our local groups, the creation of an Injured Workers Speaker School to train new leaders. It was one of the highlights of our initiative. The shift in the research world to look at the actual experiences, and the academics in the project became experts in the field. Next slide please.

We really started from a strong place, a strong pre-existing community. Like I mentioned myself, it's 40 plus years, and Marion's kind of in the same boat. We had a nucleus of academics that we had worked with before who were now committed to this issue, and a funding source that saw the community as the equal partner, and a patient attention to process. And the next slide, please. Marion and I were the ones that really focused a lot on that issue of process. This idea that were all equal isn't reinforced in most of where we live. So we tried to make sure that there was an atmosphere where we could all listen and learn from each other. We wanted to make sure that our plans were made and monitored, adjusted, evaluated. We wanted action. That's what this was about. It's a Research Action Alliance. We wanted things to change. We wanted to make sure always that injured workers voices and participation was there and that the research was understood and put to use. Now we'll move into one of our knowledge mobilization initiatives. Next slide please, and I'll pass it over to Marion.

Marion Endicott: Thank you, Steve. So RAAC, we did many things during its years of working together, and today Steve and I want to focus on two particular projects of moving research into action. So I'm going to be talking about taking knowledge to the stage in the form of a theater piece called Easy Money. Next slide, please. We had various versions of performance to highlight the issues faced by injured workers and related research results. We had role plays which were regular opportunities to convey ideas and to practice using lived experience and research combined in presentations. We had skits which were brief and often humorous, which were often satirical looks at the system and were written by people in the project with that talent. And of course, they're not always lucky enough to have such people, but what we were, and those skits were performed by many participants in the project.

> We had verbatim performances. One of the professors studied and transcribed words from the original hearings that established our workers' compensation system. And from there, a 20 minute performance was created to bring that history to life. And then of course afterwards, we would have discussion to explore its current relevance in our lives. And then finally we had theater. We had a full-blown play, and it had the beguiling title, easy Money. Next slide please. Easy Money opened at the Mayworks Workers Arts and Heritage Festival in Toronto. And from there it was performed in whole or in part a number of other times and in various locations around the province. The dream of it was to have a tour, but we really didn't have enough funds for that. As it turns out, theater is very expensive, and the Workers' Compensation Board itself expressed interest in the theater piece for its own internal education.

> And for that actually didn't come to pass in the end. And we found that their interest alone was significant, because often we were kind of in an adversarial relationship with the board, unfortunately. Now, this theater piece, Easy Money, its journey began with a

research piece by Professor Joan Ekin. She was a professor at the University of Toronto, various locations, but in particular in the public health area. She wrote a paper and presented it to a number of us in a special gathering called The Discourse of Abuse in Return to Work, a Hidden Epidemic of Suffering. And at this public presentation of the paper, members of the injured worker community who were there listening to Joan's description of this discourse of abuse that was revealed in her investigation were really astonished. And they thought, well, this is what I'm experiencing. And some of us in the crowd also kind of wondered, well, could this be the basis of a theater piece?

So we went and we talked to Joan about this, and she was interested. And so this was very exciting. Next slide, please. So we went about assembling this. We found a director, we did some extra fundraising, and we formed the Injured Worker Theater Collective to begin to dream a play. Next slide. Yeah, next slide, thank you. As the play came together, more professionals were brought in - stage designers and musicians, professional actors, actors. The use of professional actors was a debated point. Should it be professionals or should the community members, the injured workers themselves, be the performers? And in the end, the injured workers, they didn't really think that they were capable of reliably performing, nor did they think that actors could authentically replace them. So there's a bit of a conundrum there. But ultimately it was decided to use the professionals, injured workers had other misgivings as well. How could a play portray their real life situation? What was the point of a play, anyway? Many of them hadn't actually been to the theater, hadn't seen a play. But anyway, they continued to engage in the effort. Next slide please. Now we're going to have just a couple of photos from the opening night of Easy Money. There's the stage and the next slide, please.

That's the deeming fairy, but that's a whole other story. Next slide please. So when the curtain fell on the production at the Mayworks Festival, the excitement was really beyond what many of us could have imagined was possible. Some of the many, in fact, of the injured workers felt the power of theater for the very first time that evening. And they were amazed that actors could so realistically portray the feelings of those like themselves who were caught up in the compensation maze. Next slide, please. Oh, actually it's the same slide, but it's okay. Injured workers often ask the question, "Can you see me?" And one of the remarkable results of this collaborative process of creating the play and its ultimate production is that injured workers felt that they had become visible, and they were surprised at this themselves. In a way, the performance returned to the injured workers in the audience some sense of a portion of the sense of legitimacy and dignity that had been stripped away from them in the years of dealing with the injured workers with their injury and with the workers' compensation system.

Now, Joan Ekin, the professor who wrote the paper, she wrote another paper for academic publication after the performance. The name of this paper is Staging a Study of Work-Related Injury and Return to Work Knowledge Transfer through Research-based Theater. And this paper included a number of reflections from her as an academic. In part she asks, what happens to scientific knowledge when it is transformed into art and into vehicles of advocacy and change? Is science enriched? Is it dumbed down? Is it invalidated? And she goes on to reflect, "In our case, the play had an astonishing capacity to generate generalizable abstract knowledge from empirical findings about individual worker's experiences in the play through techniques of

metaphor, dialogue and fiction. The characterization of experience and material circumstance was both personal and generic, individual and collective particular, and trans-situational. Art frees up knowledge in ways not typically allowed within the practice of science."

So that's what Joan Ekin had to say. And just to conclude, this part that I'm speaking of on the next slide. My sense is that Easy Money, the theater piece, by bringing together scientific social research and the lived experience of injured workers produced through that, that bringing together something that was able to tell a bigger story and really in a way, and almost a truer story than either of those could do on their own. So thank you. And now I'll pass the mic to Steve, who is going to move us from the stage to the boardroom.

Steve Mantis:

Yeah, thanks so much, Marion. When we first applied for funding for this project, one of the things we did was spend a lot of time on knowledge translation, knowledge mobilization, there's lots of different words. And we developed a plan that identified our target audiences, who we wanted to engage with the research, and what were the strategies we might use to do that and move forward? And really, we're looking at how does change happen? How do people change their minds and then their attitudes and then their behaviors, and then eventually policies and practices. As Marion talked about, theater was one of those ways we used it, whether it was a sophisticated theater piece like Easy Money or skits and the role play that we were talking about. We use personal stories a lot, because people can really get it when you have that personal experience. And we use the method that we call the Talking Stick, which we learned from our indigenous cousins where everyone has a chance to speak.

When we're coming together, we try to sit ourselves more or less in a circle, and everyone has a chance to speak with no interruptions. They have the time that they need to say what they need to say. And while that took a lot of time, and we could see frustration sometimes in our various partners, it was an important component that people could get. What really happens to workers when they become injured and disabled. The next slide, please. One of our main audiences was the Workers' Compensation Board of Ontario. Folks that aren't involved may not understand all the challenges that here's this public institution. As Marion mentioned, it's our oldest public institution in Canada that is part of a social safety net, but that many of the workers who end up with a permanent impairment or permanent injury suffer greatly. Half those folks end up with mental illness, with chronic pain, oftentimes addiction to drugs and alcohol as a way to try to deal with the challenges they're facing.

So we said, okay, well we want to develop a relationship with the WSIB, which is the Workplace Safety and Insurance Board, commonly known as the workers' compensation system because they're the ones that workers interact with by necessity. So our relationships with them have not always been that cordial or collaborative, but we thought regardless, we need to work together here to improve things. And when we met in 2007 with them, we developed a four point plan or agreement that engaged us together in this initiative. And the one that we're really focusing on today is that we would have half day sessions together to focus on specific issues. The next slide please. So the first issue that we brought forward was the issue of stigma - that many workers

feel like they're being thought of as scammers, as pretenders, as looking for easy money. And that the system itself tends to promote this stigma. So we developed a team, and as we did in almost all of our activities, we had representatives from the university, from injured workers lived experience, and two legal case workers who do these kind of as their appeals and representation on a daily basis. And from the institution, we had senior managers in a number of areas - staff training, communications, policy and research. So there, there's like six of us from our RAACWI initiative, and I think there was 10 senior management folks from the WSIB. The next slide please.

We talked about how compensation sometimes is seen as easy money. And when we had our first meeting with the senior management, Marion and I performed a skit. We used a lot of our community development community adult education techniques, and we did a skit, which was on the ideal system - what could it look like between an injured worker and the case manager at the WSIB? We've documented as well, there's all kinds of problems with stigma, how it can have negative impacts in terms of health and recovery. And that this blue sky initiative, as we call them, was an opportunity to have fresh eyes to look at this without advocating for any particular outcome. Let's just try to understand this together. Next slide please. So along the way we kind of went, okay, where does this come from? And Marion, in fact, in one of our meetings started drawing up a little schema here.

We then were able to turn it over to an organization with 4,000 staff and people that do these kind of lovely drawings to put it into a nice framework that kind of showed, okay, this stigma happens both at the workers' compensation system, in the workplace, in healthcare, as well as society at large. And we formed an agreement that said, okay, we're going to focus on the one on the left, which is the workers' compensation system, as we meet together. Next slide please. We met together over a period of almost two years and developed a nine point program that would address the stigma that was caused within the compensation system itself. One of the concrete tools was the WSIB. The Workplace Safety and Insurance Board developed a flyer. It's still there on their website sometimes you have to search a little bit to find it - where we document a little bit about stigma and what are some of the steps forward that could be taken? As part of the nine point program was a fair amount of staff training as the recruitment. A new staff developed a lens screening for stigma to be able to kind of go, wait a second here, new staff are coming on already with this preconceived notion that injured workers may be scammers, and how do we deal with that? Communications were amended and changed, again to try to ensure that the system was not really then promoting that stigma in a negative way.

The next slide, please. In my 40 plus years of working with, advocating for workers with disabilities, and being involved in a number of different ways with the workers' compensation system, this was a real highlight for me. We created an atmosphere where we felt like we were all working for the betterment of workers who the system is there to support and help. From reflections that happened afterwards, the senior vice president at the Workplace Safety and Insurance Board, she talked about how a collaboration arose as a result of the RAAC. We supported research into frontline case management practices in the small business sector. Social scientist, Dr. Joan Ekin was

given unprecedented access to observe and interview frontline staff. While not directly studying stigma, Dr. Egan uncovered the systemic stigmatization of injured workers by the WSIB service delivery staff, exemplified by disrespectful language, disrespect for injured workers, input and policy interpretation and practices that favored employer wants over those of injured workers.

And from Joan, who we heard from earlier as well around the Easy money. Joan mentioned as an academic research partner with Rack we, one of my most memorable experiences was my participation in the Blue Sky Project, A rack we initiated Endeavor aimed at reducing the segmentation of injured workers at improving the workers' compensation seeking experience more generally. This really relates back to a couple of the other presentations we talked about how as academics, sometimes being able to see change happen because of your research is unusual and exciting and really motivating going forward. Next slide please. And we tried to capture a lot of this in our book. And Marion, over to you.

Marion Endicott: Thank you, Steve. So well, this brings us to the end of our presentation and we hope that we've sort of captured a couple of moments of the translation of research to action and that whole idea of bringing together the lived experience, the stories that the community itself has in combination with research for really great results. Steve and I have just finished writing a book. It took us a while to put together. We wrote it it together and he lives a thousand miles away from me. But we just wanted to mention this book because it's about this community university research alliance that we were a part of and that has a chapter on that blue sky process that Steve was just talking about and many other things. Steve, what else do you want to add to conclude?

Steve Mantis:

Yeah, we wrote the book really because we thought that there was a great amount of success initiative and what we've seen in the previous two presentations as well, that people with disabilities, whether they're children or adults, people with language barriers, people with other intersectional issues are not really represented effectively in our society. Their voices are oftentimes not heard. Programs are developed for them oftentimes without them. And all three of us in our presentations today are talking about how do we ensure that the voices of people who live it, who live it day in and day out are heard and the is really looking at exactly how we did that. So it's like a case study of the tools we use, the techniques, agendas for meetings, the knowledge mobilization initiatives, the outcomes, the voices of many of the participants that are in there, some of the theater pieces and skits that we developed.

We want it to be able to be available for others to continue that learning process. And you can get it for under 10 bucks as the eBook. So it's reasonably priced as well. The next slide is our contact information. The email for Marion and myself, we selfpublished with Freeze and Press. And the last is a link to injured workers online where they did a review of the book. That's also a website that has tons of amazing information. As we heard in the last session around the home usability. Having the resources available for people who are new to these challenges can really make a big difference in their lives. So Injured Workers Online is a website that has lots of that information. We encourage you to investigate that and check it out further. And now we want to turn it over to the question and answer time. We normally feel like this may be

the most important time in a conference where we get to hear from you and your own thoughts, your own experiences, and we welcome any of your questions going forward. Thank you so much.