

Translational Health Communication Research: From Knowledge to Social Impact

Shao Hai Jiang¹

¹ Department of Communications and New Media, National University of Singapore, Singapore

Health communication research has traditionally focused on producing knowledge, such as developing theories, testing hypotheses, and publishing findings in academic journals. These contributions remain essential. However, as health challenges become increasingly complex, an important question deserves greater attention: What happens after the paper is published? If our health communication research is ultimately intended to improve health and well-being, we need to think about how knowledge moves from scholarship into practice. This is where translational health communication research becomes important.

From knowledge production to knowledge application

A conventional model of academic research might focus on theory, research, publication, and academic impact. Translational research adds another set of steps: practice, stakeholder engagement, and ultimately policy, community, or industry impact. The difference is not that one model values theory while the other does not. Rather, translational research asks us to consider what theory and empirical evidence can do in the world.

For health communication scholars, this means engaging with the people and institutions who encounter health problems directly. Policymakers, healthcare professionals, NGOs, industry partners, community organizations, and members of the public can all play important roles in informing research questions. Such engagement can also change the research itself. A problem that appears straightforward in an academic article may look quite different when examined from the perspective of a community member, healthcare provider, or policymaker. Translational research therefore should not be understood simply as “communicating research findings to the public”. It is a process of connecting scholarship with real-world problems, collaborating with stakeholders, designing interventions or solutions, and assessing whether those efforts make a meaningful difference.

¹ **Corresponding author:** Shaohai Jiang, Department of Communications and New Media, National University of Singapore, Blk AS6, #03-41, 11 Computing Drive, Singapore 117416. Email: cnmjs@nus.edu.sg © The Author(s), 2026. Published under the Creative Commons Attribution 4.0 International License (CC BY 4.0; <https://creativecommons.org/licenses/by/4.0/>), which permits use, distribution, adaptation, and reproduction in any medium, provided the original work is properly cited.

Health communication as a natural setting for translation

Health communication provides many opportunities for this kind of work. For example, identifying the factors associated with health misinformation exposure or belief is important, but it is only one part of the problem. Research can also inform the design of communication campaigns, educational materials, or interventions that help people recognize and respond to misleading information. The same applies to health technology adoption. Understanding why people adopt, or do not adopt, can inform the design of more accessible and inclusive technologies. Research on patient-provider communication can similarly move beyond identifying communication barriers toward developing practices that improve interactions and experiences within healthcare settings. Campaign research can contribute not only to theoretical understanding but also to more effective public health messaging.

Impact requires more than publications

Translational research also requires us to reconsider what counts as a meaningful research output. Journal articles and books remain central to scholarly communication, but they are not the only ways research can create value. Policy briefs, public workshops, communication campaigns, media interviews, podcasts, exhibitions, open-source tools, and public engagement events can all connect research with audiences beyond academia. This does not mean that every study needs to produce a campaign or a policy brief. Nor should impact become a justification for sacrificing theoretical or methodological rigor. Instead, researchers should consider the appropriate pathway through which a particular body of research might create value. Importantly, impact should also be assessed rather than assumed. Relevant indicators may include the reach of an intervention, stakeholder engagement, media visibility, changes in attitudes or behaviors, policy influence, and community outcomes. The appropriate measure will depend on the research question and the context in which the work is conducted.

Taking social impact seriously

A meaningful social impact agenda begins with the choice of problem. Research is more likely to matter when it addresses issues that are significant to communities and recognized as important by relevant stakeholders. Social impact can be local, regional, national, or global; what matters is that the research responds to a problem that people actually experience and care about. This also means that researchers need to be willing to engage with communities rather than simply study them. Partnerships with government agencies, nonprofits, healthcare organizations, industry, and community groups can help ensure that research is relevant and that findings have pathways into practice. In this sense, researchers can contribute not only evidence but also expertise to processes of reflection, decision-making, and action.

There are, of course, significant barriers. Academic evaluation systems continue to place considerable weight on publications. Social change is difficult to measure and often takes years to emerge. Emerging technologies such as AI create new ethical responsibilities, while real-world problems can evolve much faster than academic research cycles. These challenges should not discourage translational research. Rather, they suggest that the field needs a broader

understanding of scholarly contribution. The future of health communication research should not be defined only by how many papers we publish or how often those papers are cited. We should also ask whether our research helps communities address meaningful health problems, whether it informs policy and practice, and whether it contributes to healthier and more inclusive societies. Translation is not the final step after research. It can be part of the research process itself. By bringing scholarship into sustained conversation with practitioners, policymakers, organizations, and communities, health communication research can move beyond knowledge production toward something equally important: knowledge that makes a difference.