

Indigenization and Authentication of Knowledge Transfer in a Mental Health Intervention Program

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Knowledge Transfer (KT) in the global context has obtained more and more attention. Despite its impacts on both knowledge production and application, how this concept is evaluated in global mental health services is still limited in the literature. This presentation adopted the frameworks of indigenization and authentication and evaluated how a mental health intervention developed in Canada, ACE-LYNX, is implemented in China whose cultural context is vastly different. Specifically, indigenization is used to understand how recipient countries tailor knowledge especially those imported from Western developed countries to fit in their own contexts. As indigenization still emphasizes the reliance on imported knowledge and cannot solve the ultimate mismatch between imported knowledge and local contexts, authentication is further introduced to discuss how recipient countries can fundamentally create knowledge from their perspectives. In this study, four individual interviews and two focus groups, with stakeholders who play different roles in transferring ACE-LYNX into the Chinese context, were conducted and analyzed. Guided by grounded theory, three emerged themes were found. The first one is limitations of indigenization for implementing ACE-LYNX, as participants reflected upon difficulties they encountered when implementing this program; the second one is emerging authentication in the implementation, as participants suggested how this intervention can be sustainable in China and benefit the Chinese audience; the third one is future directions for improvements in ACE-LYNX, as participants envisioned how this program should be developed in the future. Based on these themes, a conceptual model that integrates different stakeholders, researchers and service users is put forward to dynamically reflect upon indigenization and authentication and continuously improve KT in mental health interventions. Overall, this study found how KT in a mental health intervention looks like in the cross-cultural context and inspired us to rethink about global KT when considering decolonization and cultural sensitivity. It can have important implications of further guiding future empirical and theoretical research.