Knowledge Translation
A ‘Research Matters’ Toolkit

Bridging the ‘know-do’ gap
A resource for researchers
# TABLE OF CONTENTS

## ENGLISH

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Title</th>
<th>Subtitle</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Chapter 1 –</td>
<td>Knowledge Translation: An Introduction</td>
</tr>
<tr>
<td>2</td>
<td>Chapter 2 –</td>
<td>Bringing in the Demand: Towards the Harmony of Push and Pull</td>
</tr>
<tr>
<td>3</td>
<td>Chapter 3 –</td>
<td>Knowledge Management</td>
</tr>
<tr>
<td>4</td>
<td>Chapter 4 –</td>
<td>Context Mapping</td>
</tr>
<tr>
<td>5</td>
<td>Chapter 5 –</td>
<td>Evaluative Thinking</td>
</tr>
<tr>
<td>6</td>
<td>Chapter 6 –</td>
<td>Designing a Communications Strategy</td>
</tr>
<tr>
<td>7</td>
<td>Chapter 7 –</td>
<td>Communicating Research: Print Media</td>
</tr>
<tr>
<td>8</td>
<td>Chapter 8 –</td>
<td>The Two-Pager: Writing a Policy Brief</td>
</tr>
<tr>
<td>9</td>
<td>Chapter 9 –</td>
<td>Systematic Reviews</td>
</tr>
<tr>
<td>10</td>
<td>Chapter 10 –</td>
<td>Open Access</td>
</tr>
<tr>
<td>11</td>
<td>Chapter 11 –</td>
<td>The Conference 2.0: Better Presentations, Better Conferences</td>
</tr>
<tr>
<td>12</td>
<td>Chapter 12 –</td>
<td>Tapping Technology: Integrating Applications</td>
</tr>
</tbody>
</table>

## FRANÇAIS

<table>
<thead>
<tr>
<th>Chapitre</th>
<th>Titre</th>
<th>Sous-titre</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Chapitre 1 –</td>
<td>Application des connaissances: Une introduction</td>
</tr>
</tbody>
</table>
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All 12 chapters of the Toolkit may be found at www.research-matters.net

Comments? Questions? Criticisms?

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Research Matters (RM) is a collaboration of the International Development Research Centre (IDRC) and the Swiss Agency for Development and Cooperation (SDC). RM was launched in 2003 to examine and enhance the specific KT dynamics within the field of health systems research. From these founding connections with both a research funder and a bilateral donor, RM has occupied a unique vantage among health researchers and research-users. By working directly with both the producers of research and with its consumers, RM has developed a range of activities and modalities designed to hasten the movement of research results to the policy arena, to database and access those results, to communicate them, and to expand an appreciation of research itself. RM builds capacity among researchers to perform their own KT; RM responds to the priorities of major research-users; and RM actively brokers both research results and research processes. As an active, ground-level embodiment of KT, RM has helped to shape how health research is demanded, created, supplied, and ultimately used.
As this Toolkit goes to press, Ministers of Health, Education, Science and Technology and Finance are preparing to meet in Bamako, Mali, at a Ministerial Forum on Research for Health. The context is sobering. Despite significant increases in investment and some notable successes, HIV/AIDS, malaria, tuberculosis and other infectious diseases continue to exert a heavy toll on many countries, particularly in sub-Saharan Africa, while the burden of chronic and non-communicable diseases is rising – including in the poorest countries of Africa, Asia and Latin America and the Caribbean. Climate change and emerging infectious diseases are increasingly recognized as a global threat. Many countries are far from being on track to achieve the Millennium Development Goals. Simultaneously, the world is facing its most serious financial crisis in many decades.

When resources are scarce, it is particularly important to ensure that they are used wisely: the health problems causing suffering and millions of premature deaths every year cannot afford wasted time or money. Policies and interventions must reflect the best possible current knowledge. New research is needed, both implementation research and basic social and natural science research. But in addition, there is a huge “know-do gap” that needs closing, by applying to policy and practice what is already known from research and analysis. Both researchers and decision makers can do better in helping to make sure that this happens. The Research Matters KT Toolkit is a modest but practical, interesting, and – we hope – effective contribution to this effort.

Over the past several years, Canada’s International Development Research Centre (IDRC) and the Swiss Agency for Development and Cooperation (SDC) have been
working together to link research and evidence more closely with policy and practice in health development. IDRC’s *Governance, Equity and Health* (GEH) programme initiative aims to contribute to a shift in thinking and practice so that political and governance challenges, equity concerns, and health policy and systems questions are increasingly addressed together. Moving beyond description and measurement, GEH supports research efforts that seek to better understand and redress the health inequities facing the populations of low and middle-income countries. Linking research with action in an ongoing, two-way dialogue is crucial to this endeavour. The SDC-IDRC collaboration in *Research Matters*, a team working closely with researchers and decision makers to help foster this action-oriented dialogue we call “knowledge translation”, has yielded a wealth of ideas and practical experience. In this *Toolkit*, the RM team shares some of these ideas and practical tips with you, inviting you to try them out, share them, comment, and join with us in helping to achieve our shared goals of health and social equity.

This *Toolkit* is offered primarily to researchers working on health policy and systems issues in low and middle income countries, but it will be of interest to many other audiences as well. It is not a book of recipes. Rather, the *Research Matters KT Toolkit* aims to open doors into new worlds of understanding, provoking debate and encouraging researchers to think broadly and develop skills in asking and beginning to answer the many new questions that today’s complex health challenges force us to address. Readers will not become experts in the topics of each of its 12 chapters, nor is success guaranteed. However, readers *will* come away with new ideas and practical tips to get started right now, along with thoughts about who else might need to join the team, how and where to learn more, and renewed commitment and confidence to try something challenging, new, and important.

The *Research Matters KT Toolkit* is a unique contribution for researchers and to the KT field more broadly. It is shaped by the *Research Matters* team’s direct, on-the-ground and sustained work and ongoing dialogue with researchers, particularly in Africa, and reflects the creativity, courage, and commitment of these researchers – many of whom work under difficult and risky conditions. We hope that this contribution will help these researchers, and others such as yourself, to become stronger and more effective champions for health and social equity by truly “making research matter”.

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October 30, 2008
Knowledge Translation: An Introduction

What is Knowledge Translation? Known by a host of names, knowledge translation (KT) is such a tangle of actors, ideas and approaches as to defy a single definition. There are academic explanations of KT, there is KT in action, to some it means communications, to others linkage and exchange. Reduced to its essence, though, KT is the middle, meeting ground between two fundamentally different processes: those of research and those of action.

KT works, above all, to knit these two processes together. An intensely social process, KT depends upon relationships. With no golden formula for decision-making – where every policy weighs up all the evidence and arrives at the best, most rational solution – KT relies upon vibrant partnerships, collaborations and, above all, personal contact between researchers and research-users. In connecting the purity of science with the pragmatism of policy, the intangibles of trust, rapport and even friendship can be more potent than logic and more compelling than evidence.

Though the concept of KT has existed for decades, the Mexico City Ministerial Summit of Health Ministers in 2004 put the first real focus on the world’s “know-do” gap. In an age where we know so many things, why are we applying so little of it? The Summit made this problem a priority, and a solution imperative. Summiteers called for the increased involvement of the demand side in the research process, emphasizing knowledge
brokering and other mechanisms for “involving the potential users of research in setting research priorities”.¹ Health policy, the Summit declared, should ultimately be “based on reliable evidence derived from high-quality research”.

Though the declaration was made with enthusiasm – and echoed in many follow-up meetings and papers – there was little guidance on how to actually bring together research and research-users. How, in practice, might we open these novel pathways connecting all these pivotal actors?

In the years since the Summit, our exploration of this particular question has led us to three core KT principles, which we illustrate on every page of this Toolkit:

- **Knowledge.** KT efforts at any level depend upon a robust, accessible and contextualized knowledge base.
- **Dialogue.** The relationships at the heart of KT can only be sustained through regular, two-way dialogue and exchange.
- **Capacity.** Researchers, decision-makers and other research-users require a strengthened skill-base to create and respond to KT opportunities.

**The Four Models of KT**

The voluminous academic literature on KT offers many perspectives on the above three principles. Especially useful are the four different “models” of KT as discussed by Lavis et al (2006) – push, pull, exchange and integrated.²

The central actor in the **push model** is the researcher, whose knowledge is the principal catalyst for change. Push techniques include developing attractively-packaged tools (e.g. syntheses, policy briefs, videos) that make research processes and findings more accessible to decision-makers and other research-users. These techniques may understand the context and needs of decision-makers – and may even involve decision-makers in their design – but the involvement of decision-makers in the push model is typically as a receiver or target of information. “Push” efforts are ideal for situations where decision-makers may need (or be convinced to need) information on a particular topic.

The **pull model** concentrates on research-users, with their desire for more information or skills being the main driver of action. In this model, decision-makers may seek evidence on a particular topic, conduct a review of programs or services to determine whether new evidence warrants changes, or participate in a training course on how to critically appraise evidence or on understanding how and where to use research evidence in decision-making.

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² For more on these models, please see Lavis J, Lomas J, Hamid M, Sewankambo N. 2006. “Assessing country-level efforts to link research to action”. Bulletin of the World Health Organization. 84: 620-628.
The exchange model (often called linkage and exchange) rests upon partnerships, with both researchers and research-users collaborating for mutual benefit. Such partnerships may be short- or long-term, may occur at any point in the research or policy process, and may include such activities as priority-setting exercises, collaborative research projects, and creating knowledge systems (e.g. databases). Knowledge brokers may play a crucial role in establishing these strategies.

Finally, the integrated model is best represented by the emerging idea of the Knowledge Translation Platform (KTP), a national- or regional-level institution committed to fostering linkage and exchange across a health system. The institutional equivalent of a knowledge broker, they are an intermediary between research and policy working to connect the needs of the policy process with the tools of research, and to infuse public dialogue with an appreciation and understanding of research processes and evidence. KTPs may contribute to the creation of a user-friendly knowledge base; convene dialogues and meetings; and offer routine capacity building courses.

While we will explore all four of these models throughout these twelve chapters, this Toolkit is a particular contribution to the “push” side of KT. It was inspired by researchers who want to improve their ability to inform, influence and engage with policy and practice. Strengthening the capacity of researchers to become better KTers is the
spirit running throughout these pages, and we draw on many years of IDRC’s and Research Matters’ experience in working with researchers in low- and middle-income countries.

As such, the primary audience for this Toolkit is researchers in health systems and policy research, seeking to strengthen their capacity on the individual and the organizational level, from particular research projects to larger issues of organizational development. It draws from academic sources but does not dwell upon or create new models or theories. Each chapter explains a key KT concept and then makes it operational through practical examples, with suggestions for finding further resources.

**Knowledge Translation at Work: Bringing Research Alive**

These cartoons are outstanding examples of KT in action, telling the story of a study into corruption in the Senegalese health system. At a glance, they reduce complex research findings into something easily understood by the study’s target groups – doctors and other healthcare workers, ministry officials, and health-seeking citizens. These cartoons do not present any findings, they do not discuss methodology or research design. All they do is provoke – **what do you mean midwives are extorting payment!** – knowing that a provoked audience will want more information. In KT terminology, these cartoons are a “push” tool as their focus is purely on creating further demand for their findings. They aren’t trying to link and exchange, they’re not trying to facilitate pull or integrate efforts: very simply, they’re pushing an aspect of their findings in a *What are you going to do*

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Though this push tool was used at the end of a research project, we might also use such tools at the beginning or mid-point of our project. Cartoons may not have been necessary had the researchers been working with medical groups and the government from the outset – if their audience didn’t need to be shocked into action – using, for instance, research as an on-going policy and planning tool, as constant feedback on the progress of a programme or a policy. This may not always be possible, and is indeed unlikely for any study that, for instance, investigates an issue like corruption. For that reason, the cartoons highlight another aspect central to KT – understanding the overarching context. Corruption is not an issue that can be discussed or dealt with over a friendly lunch with a government official. The researchers understood that the “powers that be” would likely be hostile to their results because their issue was highly politicized and might even name names. Printing them in newspapers, papering cartoons on the walls of clinics – these aggressive tactics forced many different audiences to respond. They couldn’t afford not to.

Of course, every researcher, project and organization is different, so the choice of “push” tools will differ, as will the opportunities for facilitating pull and creating linkage and exchange partnerships. A study on competing health financing modalities in rural Tanzanian communities may not lend itself to cartoons – but may present strong opportunities for partnering with local government and convening an eventual “national policy dialogue” to discuss the range of available options. A study on ARVs in South Africa may become a cutting-edge “best practice” model whose experiences and knowledge are packaged not only for local and national audiences (of decision-makers, the media, communities, practitioners and researchers), but international and global audiences too. After all, researchers are not only agents of change in their own contexts: every researcher is an audience as well. Linkage and exchange between researchers in different contexts and geographies can be some of the best and strongest KT strategies available: we have so much to share and learn from each other.

**Overview of this Toolkit**

This toolkit is dedicated to that sharing and learning spirit. Its twelve chapters are all integrally connected and may be read together or considered individually.

In *Chapter Two*, we continue this big-picture discussion of KT in *Bringing in the Demand: Towards the Harmony of Push and Pull*. Here we attempt to demystify the “demand side” of research, journeying into the theory behind the policy process (how are decisions made?) and the nature of evidence itself (what do we mean by “evidence”?). We discuss some useful approaches and strategies for promoting linkage and exchange, and provide some examples that have successfully brought in the demand side. We conclude with a discussion of knowledge brokering and the emergence of

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4 With these cartoons, some well-written media releases, and a dose of good luck and timing, the Senegalese researchers created a media storm that put their findings front-and-centre (in August 2005). This ultimately resulted in the President of Senegal issuing a letter congratulating the researchers and promising a full investigation into their results. The government has taken several steps since then to weigh and implement the study’s findings.
Knowledge Translation Platforms dedicated to the core KT principles of knowledge, dialogue and capacity.

Chapter Three examines Knowledge Management (KM). Though defined and presented in many different ways, KM is about identifying, capturing and sharing knowledge, allowing us to access the knowledge we need when we need it. This chapter is a starter’s kit to KM, examining the people, processes and technology that can maximize the utility and impact of both tacit and explicit knowledge. We outline the steps in devising an overarching KM strategy (where are we, where do we want to be, and how do we get there?), and then dissect a variety of different KM tools in theory and in action, including after action reviews, knowledge audits, storytelling, and the peer assist.

In Chapter Four, we examine the art of Context Mapping. Who might support our work? Who might hinder it? Who must know about its policy implications? How do policies in our field become formulated? Who and what are we trying to influence? Also known as political mapping and situational analysis, context mapping is a process of understanding and adapting to the needs, politics and “realities” of our environment so we might more effectively interact with it. We’ll examine some of the mapping theory, and illustrate it through practical tools and a particular, fictitious example where the evidence is not definitive and on which scientists, institutions and even countries sharply disagree.

Chapter Five explores the relatively new concept of Evaluative Thinking. Evaluative Thinking (ET) makes evaluation a full-time, built-in mind-set; its practitioners constantly reflect upon their work, learning valuable lessons that work to influence and modify their activities. What are we learning and how can we use those lessons to improve our performance? We’ll discuss some key concepts, review some critical ET tools, and conclude with four suggestions for developing effective ET strategies. A full annex to this chapter on Monitoring & Evaluation (in a Frequently Asked Questions format) follows.

Chapter Six walks us through Developing a Communications Strategy. In this chapter, we discuss the theory and outline ten Essential Elements that any strategy must answer to get a better picture of where we are, what we have to say to the world, and how we intend to go about saying that. We emphasize throughout the need to focus less on tools – a video documentary, for instance, or a policy brief – and more on how communications will help us achieve our core goals. How will communications support everything we do?

Chapter Seven is the first of several examining specific “push” communications tools. In the context of an overall communications strategy, Communicating Research Findings: Print Media discusses a range of print tools for reaching specific audiences. Though print media is only one of the many outlets for our work, print tools remain the “industry-standard” and are extremely important. Discussed tools include peer-reviewed articles, newspaper articles, press releases, policy briefs, and newsletters. While print media tools are typically employed at the end of the research cycle (when we have results we want to share), this chapter stresses how they might be used during the course of any research project.

In Chapter Eight we reduce a complex paper and issue into an action-oriented brief. In The Two Pager: Writing a Policy Brief, we take the contested issue of male
circumcision and HIV-prevention and watch, step-by-step, as purely scientific findings are reduced, discussed, operationalized, and distilled into a two-pager that concludes with a set of viable policy options. We’ll discuss and use the problems-possibilities-policies format so effective in conceptualizing policy briefs, briefing notes, and even press releases.

Chapter Nine is dedicated to the Systematic Review, a unique and powerful KT tool that assesses – fairly and objectively – all relevant knowledge on a question at hand. Using a Frequently Asked Questions format, we’ll discuss the basic components of a systematic review – with an overview on its form and use to a discussion of where to access them – and conclude with observations on the future of systematic reviews as a more integrated, contextualized and even demand-driven KT tool.

Chapter Ten offers a window into Open Access, explaining what it is and how we can contribute to it, first in giving our work a higher profile, and second in deepening global bodies of knowledge. This chapter outlines the logic behind Open Access (OA), the history, the various “routes” to OA, and then explains how researchers can both access and contribute to open access repositories and journals. The chapter concludes with a myth-debunking Frequently Asked Questions section and a Glossary of key terms.

In Chapter Eleven, we discuss the art of the presentation and creating the “next wave” of conferences. The Conference 2.0: better presentations, better conferences seeks to turn every conference into a dynamic learning environment, where strong oral and poster presentations easily flow into proceedings that capture the conference’s key messages and action points. We’ll discuss oral presentations (making speeches more memorable, and using technology as a responsible support), poster presentations (choosing the right content, look and size), and conference presentations (how to better involve rapporteurs and chairs in capturing main messages and creating a dynamic and used conference record).

Our final chapter, Chapter Twelve’s Tapping Technology: Integrating Applications focuses on the three major applications that we all use every day – email, the internet, and word processing. We’ll review some tips, tricks and techniques for using each (from effective email strategies to developing a web presence to desktop publishing) and see how to start using these applications in a more integrated and ultimately more intelligent fashion.
Like KT itself, this toolkit is iterative and exploratory – it is a starting point, an introduction, not a treatise or a definitive analysis. And its success depends upon your active comments, questions and criticisms. Is there anything we’ve missed? Anything you disagree with? Topics we should devote chapters to in the future?

Email the Research Matters Programme Officers:
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Research Matters (RM) is a collaboration of the International Development Research Centre (IDRC) and the Swiss Agency for Development and Cooperation (SDC). RM was launched in 2003 to examine and enhance the specific KT dynamics within the field of health systems research. From these founding connections with both a research funder and a bilateral donor, RM has occupied a unique vantage among health researchers and research-users. By working directly with both the producers of research and with its consumers, RM has developed a range of activities and modalities designed to hasten the movement of research results to the policy arena, to database and access those results, to communicate them, and to expand an appreciation of research itself. RM builds capacity among researchers to perform their own KT; RM responds to the priorities of major research-users; and RM actively brokers both research results and research processes. As an active, ground-level embodiment of KT, RM has helped to shape how health research is demanded, created, supplied, and ultimately used.
# Table of Contents

I. The Theory behind the Harmony
   - “The Enchantment with Rationality”  
   - The “Casual Empiricism” of the Policy Process  
   - What We Talk About When We Talk About Evidence  
   - The Policy Pie  

II. Integrating Research and Policy
   - Towards Linkage and Exchange  
   - Knowledge Brokering  
   - Knowledge Translation Platforms  
     - The Knowledge Base  
     - Deliberative Dialoguing  
     - Safe Harbours and Chatham Houses  
     - Capacity Strengthening  
   - Some Concluding Thoughts  

Six Key Resources  

Endnotes
Bringing in the Demand:  
Towards the Harmony of Push and Pull

“There is nothing a government hates more than to be well-informed; for it makes the process of arriving at decisions much more complicated and difficult”.

John Maynard Keynes

The Mexico City Ministerial Summit of Health Ministers in 2004 stressed partnership between researchers and policymakers, and called for increased involvement of “the demand side” in the research process. Greater involvement of decision-makers in research would axiomatically increase the influence of research and policy. New partnerships and innovative collaborations would explore such things as “knowledge brokering” and modalities for “involving the potential users of research in setting research priorities”.

Beyond a doubt, the Mexico Summit was a watershed event for KT. The “know-do” gap became part of the popular lexicon, decision-makers were promoted from their typically passive role as receivers of research, and a promising era of linked knowledge and action seemed upon us. However, missing from the Summit’s excitement was exactly how we might go about forging these new partnerships and collaborations.
Fortunately, there has been serious academic inquiry into the phenomenon of “bringing in the demand”. Unfortunately, it is easy to lose the good ideas and the “what works” strategies within the towering scholarship on the issue. This chapter aims to do two things: first, we demystify the “demand side,” which requires a brief journey into some of the theory behind both the policy process and the nature of evidence. Second, we explore some approaches and strategies that have proven effective. In particular, we focus on effective “linkage and exchange” strategies, on the concept of “knowledge brokering,” and on the development of national-level Knowledge Translation Platforms.

I. The Theory behind the Harmony

“The Enchantment with Rationality”

Most would agree with Caplan (1979) that researchers and decision-makers are two very separate communities. But what does this “separation” really look like? Perhaps the first step in deciphering the demand side is for researchers to understand that their own approach to problem-solving is radically different from a decision-maker’s. Lomas (1997) coined the indicative “enchantment with rationality” to describe the researcher’s typical mindset. Researchers are indeed besotted by rationality for compelling reasons – good science is a logical, rational affair. Good science creates knowledge that is explicit, systemic and replicable.

If there is a problem, then a series of experiments – guided by sound methodology – will describe the problem in replicable ways so that what is true today is true tomorrow. Of course there are variations from that ideal model, but the point holds. Researchers find solutions to problems in an ordered, reproducible and logical fashion, and always under the eye of their peers.

Decision-makers take a starkly different approach to solving problems. Whereas science solves problems to know, policy solves problems to satisfy. Policy must often appeal to an electorate, accommodate a pressure group, conform to an ideology. The motivations and metrics of decision-making are tethered to other poles. If researchers are rationalists, decision-makers are realists. They act in a world coloured by compromise.

How to account for this opposed style of problem solving? Can science thrive in a world governed by compromise? Many commentators have posited that a “research-attuned culture” must grow in the policy world, and a “decision-relevant culture” must start to influence researchers. One way or another, both require deeper insight into the processes that dominate the other’s world. Researchers need to appreciate that policy is

“Researchers search for truth by using a rational model... Policymakers search for compromise, by using an intuitive model.”

not an event: it is a process. Like research, policy evolves against a complex and shifting backdrop. Policy does not suddenly “happen”; it unfolds over time under the pressure of many different forces. Researchers must understand that these forces all compete for influence and that scientific evidence is only one kind of “evidence”. It has a particular – and often circumscribed – place within the policy process.

“The two things one should never watch being made are sausages and public policy.”


For their part, decision-makers must appreciate that research is not a product: it too is a process. As Lomas (1997) observes, there is no “local research supermarket” where research evidence might satisfy sudden policy hungers. While indeed there are some useful “clearinghouses” of research information, decision-makers must understand that knowledge or evidence can take years to design and develop: in science, there are usually no “quick fixes”. Second, decision-makers must understand that knowledge needs to be contextualized for applicability and utility, and the more they can participate in this process of contextualization, the greater their processes will benefit from science.

As Ginsburg et al (2007) helpfully observe, knowledge translation is a meeting of complex processes within a social environment. Its foundations are relationships.

Facilitators and Barriers to Research Utilization

In 24 studies, the most commonly mentioned facilitators of the use of research evidence in policy-making were:

• personal contact between researchers and policy-makers (13/24);
• timeliness and relevance of the research (13/24);
• research that included a summary with clear recommendations (11/24);
• good quality research (6/24);
• research that confirmed current policy or endorsed self-interest (6/24);
• community pressure or client demand for research (4/24);
• research that included effectiveness data (3/24).

The most commonly mentioned barriers were:

• absence of personal contact between researchers and policy-makers (11/24);
• lack of timeliness or relevance of research (9/24);
• mutual mistrust, including perceived political naivety of researchers and scientific naivety of policy-makers (8/24);
• power and budget struggles (7/24);
• poor quality of research (6/24);
• political instability or high turnover of policy-making staff (5/24).


Evaluations of research utilization have shown that relationships – personal contact – between researchers and policy makers is crucial, and easily the best predictor of research processes influencing policy. No matter the setting – be it in a household or between
countries – good relationships break down walls, they create understanding and trust, and are the great facilitator at bringing radically different processes peacefully together.

The “Casual Empiricism” of the Policy Process

The more we explore the policy process, the more we understand that it is far from a monolith. There are generally three different levels, with different types of policies set at each level. The first is legislative, which typically provides the “broad organizational policies” that govern the overall health system and its services. Legislative decision-makers are generally held to be non-experts who are interested in ideas, and keen to understand impacts – of both future and prior policies. The second is administrative, and here we find policies that dictate how services are run and resources allocated. These decision-makers tend to have strong specialist knowledge and may well use evidence to assist in programme planning. The third is clinical, concerned primarily with policies around therapies and corresponding strategies. These clinical decision-makers are typically the greatest users of research evidence, and are receptive to “data on safety, clinical effectiveness, cost-effectiveness, and patient acceptance” – perhaps not simply because they are more attuned to research, but because research is more attuned to them.

Regardless of decision level, “policymaking is not a series of decision nodes into which evidence, however robust, can be ‘fed,’ but the messy unfolding of collective action, achieved mostly through dialogue, argument, influence and conflict”. In a like vein, Stone (1997) concludes that “much of the policy process involves debates about values masquerading as debates about fact and data”. Understanding this “debate about values” is crucial because, when it comes to science, we trust the findings that most agree with our own values. The more aligned any knowledge is with our existing value system, the more likely we are to accept it: some may accept abstinence as an evidence-informed AIDS-prevention strategy, while others might brand this approach right-wing, no-Christian dogma. It all depends upon user perspective. The more challenging or opposing a piece of knowledge is to our value system, the more we will contest and even disregard it – no matter its strength or relevance. Research that challenges decision-maker values, ideas and ethics, will have a much harder time in proving its validity.

But what exactly do we mean by “values”? A decision-maker may have her own set of values and ethics (e.g. the spread of disease should be contained), but these can be further complicated by the values of culture (e.g. male circumcision should always be performed) and by the values captured in political ideologies (e.g. the state should provide free male circumcision to all who want it). Any argument researchers might present to decision-makers must take these “value layers” into account. Respecting the immutable power of values and ideologies and focusing instead on changing decision-maker beliefs (e.g. believing that the African potato will cure AIDS) may well be a more promising approach. As opposed to values, beliefs tend to be much more flexible and fleeting – the facts we’re sure of today can change tomorrow because we all understand that knowledge – whether our own or the general “pool” – is fluid and always evolving.
Scholars have tried to visualize this tangle of science, values and beliefs with different metaphors and images. The policy process has “garbage cans,” it’s a “swampy world,” it’s a delta capturing the run-off of problem streams, policy streams, and political streams. There are numerous studies on where decision-makers get their information, and the characteristics necessary for that information to infiltrate and influence their decision-making (see the text box below). There are descriptions and studies and systematic reviews of the actors involved within policy circles and the many competing strains of evidence competing to inform the policy process. Despite all of this, policy-making remains inscrutable, but these many efforts do reveal one certainty: research evidence is just one type of “evidence”. It must compete with all other types of “evidence” a decision-maker may find relevant, from common sense to “casual empiricism” to expert opinion and analysis.

What We Talk About When We Talk About Evidence

“Evidence” means one thing to a researcher (what is proven to be true), quite another to a lawyer (what is said to be true), and something completely different to decision-makers. While all of this seems self-evident and obvious, we have an intriguing puzzle on our hands when we consider the term “evidence-based”. If there are different degrees and different meanings to the word “evidence,” what does the term “evidence-based” actually mean?

Lomas et al (2005) have distilled “evidence” into three different types. The first is context-free evidence, which is what works in general, or knowledge about the overall “potential” of something. This is typically medical-effectiveness or biomedical research (e.g. male circumcision can be a strong preventative measure to HIV-acquisition in men). The second is context-sensitive evidence, which puts evidence into a context that makes it operational or relevant to a particular setting (e.g. male circumcision in LMICs may fail as an intervention due to health system weakness and underlying poverty issues). In ways, context-sensitive research can be thought of as where the biomedical meets the social science, or where the quantitative meets the qualitative. Where the
theory meets the reality. Both of these types of “evidence” are captured in systematic reviews (see Chapter Nine’s discussion), in other syntheses (e.g. a policy brief – see Chapters Seven and Eight), in single studies, and in pilot or case studies.

The third category of evidence is, from our perspective, often the most troublesome – colloquial evidence. Roughly defined as any kind of evidence “that establishes a fact or gives reason for believing in something,” it is typically comprised of expertise, opinions, and first-hand experience and realities (e.g. most experts agree that implementing a universal male circumcision policy is impossible because of the current cultural and political environment). Some commentators have suggested that colloquial evidence is useful for plugging the holes that the other types of evidence do not address; it may indeed be critical where the evidence is inconclusive, lacking, or non-existent.

If these three degrees of “evidence” typically inform the policy process, how do we give weight to each piece of evidence when making a decision? Are all pieces equal, or some more equal than others? The CHSRF (2006) has suggested that weighing up the evidence – assigning a value to each “piece” of evidence – is likely impossible. After all, where is the scale that will allow us to weigh and assess the relative worth and applicability of experience (apples), expert opinion (oranges) and a systematic review (bananas)? While each “piece” in this evidential spectrum deserves careful consideration, even in the absence of a scale we clearly need some sort of mechanism that can weigh the various pieces. Until the creation of a “policy machine,” the only mechanism that seems to work is finding consensus through a “deliberative dialogue” that involves all relevant stakeholders and allows the group to collectively assess the evidence at hand. Naturally there are some important and contested issues here such as “what is consensus?”, “who is a relevant stakeholder?” and “what is a participatory methodology?” that every deliberative process will have to answer. We’ll return to this important idea in the “Knowledge Translation Platform” section that concludes this chapter.

**“Evidence” to Researchers...**

- *Impact evidence* = effectiveness of interventions;
- *Implementation evidence* = effectiveness of the implementation and delivery of policies, programmes, projects;
- *Descriptive analytical evidence* = surveys and administrative data about the nature, size and dynamics of a problem, a population, subgroups or social activities;
- *Public attitudes and understanding* = research evidence on the attitudes, values and understanding of ordinary citizens;
- *Statistical modelling*;
- *Economic evidence* = economic appraisal and evaluation methods, including econometric analysis and modeling;
- *Ethical evidence* = withdrawing a programme from one group in order to provide a more cost-beneficial programme for another.

**Source:** Davies P. 2004.
The Policy Pie

Clearly, different stakeholders have different notions of evidence, and assign different weights to each piece. And no matter how compelling, scientific evidence (either context-free or -sensitive) is only one ingredient in the policy pie. Of course, the more we know this, and the more we work to integrate our “piece” of evidence into the fuller pie (and situate it relative to others), the greater the odds of our evidence exerting influence.

So this, then, frames everything we talk about when we talk about “evidence”:

1. The audience always defines the meaning of “evidence”.
2. Evidence depends upon context to become useful or operational. In other words, it usually requires meaning and interpretation before it can be used.
3. No one “piece” of evidence can possibly address every point a decision-maker must consider in setting policy.
4. Evidence is fluid and evidence is fallible. What is true today is not always true tomorrow because context is ever-shifting and science is ever-evolving. There are flaws in the peer-review process, context can defeat replicability, and the underlying nature of knowledge is to question and improve upon itself. Because research findings must be contextualized to become operational, they become subject to interpretation and as such cannot be free from possible error. Nothing, we come to realize, is ever 100% true. So why would we ask decision-makers to base an important policy on something we can’t guarantee will always be true? Politics and decision-making may seem like irrational sports, but the fact is that they, like science, have evolved over centuries, and have equally strong and compelling reasons for considering a wide range of “evidence” in their decision-making processes.

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| The RM Knowledge Translation Toolkit: A Resource for Researchers | www.research-matters.net |

Chapter 2: Bringing in the Demand

With an emphasis on creating and maintaining personal relationships, **deliberative dialogues** can take any number of forms and formats. They can involve any set of researchers, decision-makers, the media, civil society groups, and donors; can be officially “off-the-record” in that the “Chatham House Rule” prevails and no notes are taken, no quotations attributed; can focus on specific policies; can work to set a research agenda; and on...
With all things considered, perhaps pressing for “evidence-based policy” or even “evidence-based culture” might seem increasingly naive. Our discussions of “policy” and “evidence” show both are so slippery as to elude any sort of categorization, let alone a base for action. A growing chorus of authors is underlining this point, emphasizing that “there will never be a generalizable evidence base on which managers and policy makers will be able to draw unambiguously and to universal agreement” and that the idea of evidence-based policy “overlooks or plays down the role of power, uncertainty and chance”. One scholar adds that “the evidential base in support of the proposition that evidence-informed decision-making is, in broadest terms, a ‘good thing’ is itself distressingly thin”.

“**It is worth heeding the caution ‘evidence-based policy: proceed with care’. For instance, while there may be extensive research on the effectiveness of health-care interventions, there is often less evidence on their cost-effectiveness, implementation, cultural appropriateness and effects on health inequalities, all of which are important considerations for policy-making.”**

**Source:** Haines et al. 2004.
While there might be such a thing as “evidence-based practice” (e.g. incorporating context-free evidence into clinical practice and procedure), the compromise imperative of decision-making all but disqualifies “evidence-based policy”. “Evidence-influenced” or “evidence-informed” seem more realistic targets: they still aim to increase decision-makers’ use of evidence, though in a more humble and context-appreciative way.

\[(\text{Context-free + context-sensitive + colloquial evidence}) \quad \text{= Policy \ ?} \]

\[(\text{Debate + negotiation + compromise) experience}) \]

The more that research evidence can understand the workings of this policy formula – not fitting our evidence into their context, but instead creating evidence that understands and respects the policy process from the very beginning – the more savvy and influential our work might be. As Davies (2007) puts it, we “need to encourage ownership of the evidence, not just the policy”.

As we’ll discuss below, linkage and exchange becomes a primary model in achieving this type of ownership, with the creation of demand-based evidence reflecting the needed integration of demand and supply. Far more than creating a viable evidence-base or trying to translate research results directly into practice, pursuing partnerships and creating robust linkages seems to offer the best set of choices in moving our KT agenda ahead.

II. Integrating Research and Policy

Towards Linkage and Exchange

Just as researchers may wish to co-produce policy, they must also encourage decision-makers to co-produce research. There are multiple ways of bringing decision-makers into the world of research – from identifying priorities to designing research to utilizing research findings – with each illustrating how we might move past researcher-driven processes into “co-production processes”. In this section, we’ll look at linkage and exchange efforts through the researcher’s lens.

When it comes to “bringing in the demand,” the literature identifies such important variables as: how they’re involved in the research process; when they’re involved; and why they might choose to be involved. Are they working behind the scenes, sitting in the front row, or are they actors on stage? Ross et al (2003) outline how decision-makers might become involved in research processes:

- as formal supporters, they likely don’t have direct involvement in the research, but do welcome and support it. Beyond a receptivity to the research findings, this support can have other important consequences: it can confer an important air of legitimacy
on the research process, and it can open doors to further resources, information and even other decision-makers.
• as a **responsive audience**, their participation rises, though it remains in response to actions initiated by researchers. This can involve helping to craft the research design, becoming a member of the research advisory team, giving advice on tactics and information, and perhaps becoming involved in collecting data, interpreting results and even creating KT strategies.
• as an **integral partner**, the levels of participation increase dramatically. Here, we see decision-makers as a significant partner often initiating many activities and shaping (even leading) key parts of the process. Critical here is the distinction between observing and executing: integral partners are key team members with a role in executing core strategy.

A fourth (and the “usual”) category would be as “passive audience” – where decision-makers do not participate in the research process and instead passively receive findings and syntheses. They may even actively request these findings, but the point is that they play no role in the research itself. While this is clearly not as desirable as any of the other categories, finding the right decision-maker audiences and getting their ear is vital and could well be the precursor to their more formalized support.

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**Public Sector Anti-Retroviral Treatment in the Free State, South Africa**

This multi-phased research programme is a cutting-edge collaboration between the Free State Department of Health and several different research teams (one studying and training nurses, another the provincial health system, a third the impact of ART on communities). Initially the **audience** of research findings on lung health (the Practical Approach to Lung Health South Africa (PALSA) project), the FS Department of Health approached the PALSA team requesting its assistance in the development and implementation of training activities as well as an overall monitoring and evaluation program for the Free State anti-retroviral therapy rollout. Through discussions with other researchers, the programme was expanded to examine in more detail the effects on clients of health services, possible “system leakage,” and the presenting policy context.

Close personal relationships, open lines of communication, and a decision-maker unafraid to receive “snapshots” of the health system are essential to this programme. Over two phases, it aims to:

1. Support the government’s effort to strengthen the primary health care system to deal with the HIV/AIDS burden in the Free State.
2. Build accountability and improve the effectiveness of the service offer to citizens through evaluating training of health workers and documenting the impact of the rollout at the institutional and community levels.
3. Inform and strengthen public health sector capacity to implement an effective, accountable and equitable ART rollout in the FS and potentially other provinces and other parts of Southern Africa.


*When* decision-makers become involved – i.e. at what stage in the research process – helps to determine the nature of their involvement, as supporter, responsive audience or partner. Clearly, inviting a decision-maker to participate in the design of a research
project is one smart, logical move, and in fact several current Calls for Proposals have this type of requirement for any funding application.\textsuperscript{35} While specific projects (and the attendant funding) may make participation attractive to decision-makers, as researchers there are a few ideas we might use to increase the chances of a decision-maker choosing to participate in a research project – or even approaching us to create one.\textsuperscript{36}

<table>
<thead>
<tr>
<th>A decision-maker’s potential role in the research process is often dictated by:</th>
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<td>• the stage of the research process their participation is wanted;</td>
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<td>• the time commitment required;</td>
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<tr>
<td>• the alignment between decision-maker expertise and the research programme;</td>
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<td>• the presence of an already existing relationship.</td>
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At the different stages of the research process, strong linkage and exchange strategies we might employ include:

• **conceptualization stage:** holding priority-setting exercises. Though there are different types of exercise, these are typically fora that “translate priority issues into priority research themes” or research questions.\textsuperscript{37} Priority-setting exercises typically involve a wide set of stakeholders and are guided by criteria for determining the priority of an issue, theme or question – e.g. assessing the urgency and durability of a priority; determining the existing stock of research on the priority; and examining variables such as research capacity to study the priority and decision-maker capacity to participate in the research and uptake possible findings. Convening priority-setting exercises can be a way of cementing researcher-decision-maker partnerships, yet need not be restricted only to decision-makers and researchers.

• **production stage:** designing collaborative research projects. While it is indeed possible that not enough decision-makers know what collaborative research is or could be, designing a collaborative research project has clear benefits.\textsuperscript{38} Denis and Lomas (2003) outline how collaborative research often works to blur the lines between scientists and non-scientists, a true “cooperative endeavour” producing knowledge that is fundamentally usable.\textsuperscript{39} Collaborative research can bring the investigator into the policy and the policy into the investigation. As opposed to the more traditional “client-contractor relationship where each partner respects the expertise and skills of the other,” collaborative research envisions a true partnership: designing research that will present solutions to health services problems; creating mechanisms to share issues and results; and designing broader KT strategies.\textsuperscript{40} Collaborative research, at bottom, must be characterized by a spirit of give-and-take, with fora and practices enabling collaborators to access and share their knowledge.\textsuperscript{41}

• **dissemination stage:** creating knowledge translation strategies. This goes beyond syntheses and summaries, and into precise road-maps for how research findings can move into practice. This capitalizes on the core strengths of decision-makers – they know the context around the policy and they know how the system works. If researchers provide the science, decision-makers can provide the know-how: how information flows, who needs to see it, and what kind of consensus is needed to push action in a place as
shifting as a Ministry of Health. Attention here might be on the “products” needed to capture relevant knowledge (e.g. a policy brief), and the channels through which they might be disseminated.

- **utilization stage**: creating knowledge systems that can use, re-use and demand knowledge. Beyond a framework for the uptake of any particular project’s results, this could include such things as creating robust knowledge management systems that can search, find, capture, extract and even appraise knowledge and evidence. Convening deliberative fora could be a way of ensuring that the vital tacit knowledge on any project or issue is shared.

- **stewardship**: inviting decision-makers to participate in the governance of research processes. This can include serving on a research organization’s governing board or on a research grant-selection panel.42

- **funding**: inviting decision-makers to make a financial contribution to a research project. This reflects the belief that real ownership comes only at an expense, with the CHSRF [no date] advising that funding arrangements should be one of the “first items to discuss” with decision-makers, establishing clear requirements and expectations up front.43 This gets at the point that decision-makers need not always be an active partner but, as in the business world, can be a silent partner with a strong financial stake in any project's success. Designing joint-funding arrangements indicates mutual commitment.

Beyond the how and the when, is also vital to understand why decision-makers may want to be involved in a research process, as this can play a strong role in “selling” participation to them. What are some other incentives for decision-makers to link and exchange with our research processes? One of the strongest pitches here rests on the question of impact – often the variable of primary interest to decision-makers. Why decision-makers may choose to become involved include:

- the ability to create evidence that aligns with their policy needs. Particularly if the policy environment is highly politicized, evidence may well provide the necessary ammunition to push through a particular policy option.
- the ability to create and implement policy and programmes that have already been subjected to scientific (or “expert”) scrutiny. This could include synthesis work highlighting “best practice” or examples from other relevant contexts.
- the ability to evaluate existing policies. In many cases, this is one of the strongest arguments for linkage and exchange, as research can often provide a “moving snapshot” of policies as they unfold, allowing decision-makers to make necessary “mid-course” corrections. For a pre-eminent example of this, see the Free State’s Public Sector ART text box above.

Though not discussed here, Chapter Four’s examination of Context Mapping may help us think through the many actors within the decision-making process, and who or what department would be the most likely or appropriate to connect with our own processes. Careful understanding of the different “levels” of the decision-making process – from legislative to administrative to clinical; from global to national to provincial/state to local – can again only aid us in our efforts to link and exchange. We must pay attention to the skills and abilities of any decision-maker interested in partnering with us – those with the
free time to work with researchers are sometimes those “out of favour” in the Ministry or career civil servants lacking the needed panache to be a real partner. As with anyone with whom we’d consider “partnering” – from business to sports to marriage – let’s be clear and cautious up front, outlining expectations, needs, abilities and time before we begin. Linking and exchanging with the wrong person or wrong department can be a tremendous time-waster, a squandering of resources, and can even tarnish reputations and careers.

**Knowledge Brokering**

In an ideal world, a web of vibrant linkages connect researchers and decision-makers. In practice, there is often a disconnection between the two that good intentions or theoretical understandings just can’t bridge. Enter the knowledge broker, either an individual or institution who become “the links between different entities or individuals that otherwise would not have a relationship. Their core function is connecting people to share and exchange knowledge”. They are an intermediary or “middle man” between the research and policy worlds.

As an intermediary, the broker can play a variety of roles. Most commentators agree that the primary task of any broker is to network – using strong mediation and communication skills to put (and keep) people together. They are not “just selling some solution” but instead work to understand the critical variables of politics, power, and actors. While the home of a broker may be in research, her terrain is politics and power dynamics.

Among the essential knowledge-brokering characteristics that Jackson-Bowers et al (2006) identify are trustworthiness, credibility, political neutrality, and subject expertise, with issues like seniority, background (academics, policy officers, communication specialists), and location typically differing across contexts. Beyond networking, the role of the broker can also include:

- synthesizing research (through the creation of policy briefs, systematic reviews, briefing notes). The broker must have basic research skills and an ability to gather, appraise, analyze, synthesize and package knowledge and evidence.
- creating “partnerships around single studies, programmes of research, or systematic reviews to enable them to collectively ask and answer locally relevant questions”.
- facilitating access to data and evidence.
- helping to convene meetings (e.g. providing the space and neutrality for priority setting exercises or national policy dialogues).
If we return to the issue of “when” decision-makers might intersect with research processes, we can clearly see some specific entry-points for brokers. As one of their principal roles is encouraging a “continuous exchange on many levels – from sharing experiences and searching out existing knowledge to turning management problems into workable questions for researchers to study,” we can imagine the work of brokers including:

- **priority-setting exercises**: brokers may have the necessary neutrality (in both politics and in geography – i.e. possessing a neutral physical space) to convene this meeting, and to chair it successfully, mediating different needs and interests;
- **collaborative research**: brokers may be able to help define the terms for fusing the strengths of research and policy, and provide the needed neutrality for negotiating partnerships;
- **KT strategies**: as one of the core skills of any broker may well be evidence retrieval, appraisal and dissemination – as well as knowing the policy process – this could be a central domain for any broker. Successful broker institutions may well have searchable databases, clearinghouses, and may also provide “rapid response” services that can provide policy-ready responses (see below);
- **funding**: due to their networking and personal contacts, brokers tend to know of funding opportunities, and may well help researchers and decision-makers mediate the terms of funding, especially if there are plans for co-funding arrangements.

**Knowledge Translation Platforms**

The concept of “Knowledge Translation Platforms” (KTPs) is a logical continuation of knowledge brokering. KTPs are, quite simply, institutions committed to the arts of knowledge brokering. Contexts and shapes may differ, but at heart they aim to nurture and formalize the spirit of linkage and exchange. They exist to serve researchers, decision-makers and other research-users – such as practitioners, the media, and civil society.
As knowledge brokers, KTPs are intermediaries between research and policy. Their overall goals are to smooth the movement of research to the policy level; to connect the needs of the policy process with research and researchers; and to infuse public dialogue with an appreciation and understanding of research processes and research evidence. KTPs may find, present and synthesize information; convene meetings; and work to bring actors and processes together. If KT is indeed a series of social processes, then KTPs are the meeting places, the umbrella trees under which ideas can be discussed and debated.

As with any new national or regional actor, setting-up a KTP requires skillful political manoeuvering and a broad acceptance of its role among key stakeholders. This was done in both Zambia and the EAC through deliberative dialogues involving an array of different (and at times opposed) stakeholders. These dialogues are crucial. They not only discuss the terms of stakeholder buy-in, but also refine the technique of dialogue itself. Every country and context will have different dialogue methods; if these can be understood and incorporated into a KTP from the outset, then the role of the KTP as dialogue convener will already be well established.

To be this convener of dialogues, it is important – though not essential – for a KTP to be an actual, physical space. Consider the different political overtones in dialogues occurring at a Ministry or a national newspaper or the offices of civil society: the backdrop matters. To that end, KTPs need to have a room large enough for deliberative dialogues, and probably also space for a resource centre. We’ll explore these ideas in our consideration of the three connected thematics that wind through a KTP: the knowledge base, deliberative dialoguing, and capacity strengthening. Each of these is at the heart of knowledge translation, and the cornerstones of any KTP.

**knowledge dialogue capacity**

**The Knowledge Base**
The knowledge base describes the role of a KTP in defining and identifying knowledge, and then harvesting, preparing and synthesizing it. We use the term “knowledge” broadly, as it can include any kind of data or information that a KTP deems relevant. If a KTP is to be a trusted source or clearinghouse of the knowledge that stakeholders want, it must have that knowledge on hand. Creating a dynamic knowledge base can see a KTP:

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In Africa, there have been several noteworthy, embryonic attempts at creating KTPs. One is the Regional East African Community Health Policy Initiative (REACH-Policy), currently based in Kampala, Uganda. Another is the Zambia Forum for Health Research (ZAMFOHR), based in Lusaka, Zambia. It is expected, however, that more and more KTPs will arise, particularly with continuing strong support from entities like EVIPNet, the Alliance for Health Policy and Systems Research, and IDRC.
• determining, perhaps through a deliberative dialogue, the type of knowledge it wants to capture – e.g. single studies, systematic reviews, grey literature, project profiles and reports. This could also take a more targeted approach – e.g. capturing all research on malaria prevention and treatment.

• scanning the environment to determine the knowledge other institutions already possess, both electronically and in hard copy. This could include university libraries, UN agencies (e.g. UNAIDS), government parastatals (e.g. National AIDS Committees), and NGOs (both domestic and international).

• collecting all relevant knowledge (including research evidence, syntheses, reports, project profiles, etc). This could include site visits to the organizations or individuals who possess the needed information.

• creating systems that allow users to search and access it (e.g. databases, websites, and dialogues for sharing tacit knowledge) in the understanding that the KTP need not duplicate other systems but rather find ways of tapping into or adding value to them.

Once a strong knowledge base has been established, KTPs may then progress to the next step and add value to this store of knowledge. This could include:

• synthesizing research: typically systematic reviews, meta-analyses and policy briefs. It could also include conducting (user-demanded) searches for relevant studies and reviews, and providing this “information service” for other research-users. The KTP may go further and assess the quality and local applicability of such evidence. It may also contract out the production and regular updating of syntheses, especially where none exist or the quality is questionable.

• creating rapid response units: accessible by telephone, email or website, these units can provide fast, up-to-date information for research-users who may wish to know, quickly, the evidence supporting position x or y, or who may want an expert’s opinion on a particular issue. A rapid response unit’s core functions are to search for syntheses, conduct assessments of their quality and local applicability, or commission them where none exist. Rapid response units may also conduct briefings with decision-makers based on the material they find in response to particular questions.

Connected to the issue of “synthesizing” research is the broader aspect of packaging and communicating key messages in attractive, user-friendly formats. Working from their strong knowledge base, KTPs may focus some of their energies on:

• developing “friendly front-ends” that provide “graded entry” for decision-makers. According to the CHSRF’s formula, a “graded entry” reduces a complex issue (or paper or body of evidence) into one-page of central “take-home messages” and a more detailed three-page executive summary which would highlight any issue’s benefits, harms/risks, costs of policy alternatives, and factors that might influence local applicability. This is often called the 1:3:25 approach, with the “25” representing the full paper or synthesis. Clearly, each 1:3:25 product has a different research-user audience in mind.
• producing a “Who’s Who” Directory that documents all of key health research (or even health) stakeholders domestically, including details of institutional affiliation, papers, grants, etc. and contact information.
• developing **annual reports or newsletters** that discuss a range of issues, including gaps in research, “orphaned” research issues, features on successful instances of research and policy collaboration, and bringing in pertinent evidence-to-policy examples and personalities from other sectors or countries.

**Deliberative Dialoguing**

There is a mountain of literature on deliberative processes, with a predictable variety of necessary dialoguing ingredients in every article, journal and book. Ultimately, if KTPs aim to be a neutral and trusted space for dialogue, incorporating sound deliberative processes is essential. A deliberative dialogue is more than a meeting. As its purpose is to provide contextualized “decision support,” the methodologies guiding a deliberative dialogue need to be taken very seriously – dialogues are almost always politicized, with supporters on either side of an issue.⁵⁰ A KTP must decide whether it wishes to take a position on certain issues, understanding that such advocacy may impair its neutrality, which in turn may weaken its overall credibility and stature.

Most deliberative dialogues tend to be issue-specific – a dialogue on “health research” would likely be too unwieldy, whereas one on “malaria treatment” may well provide the needed focus. Deliberative dialogues discuss “evidence,” which can naturally mean all kinds of different things depending on the audience involved. The CHSRF (2005) stresses that deliberative dialogues should include “criteria for the sources of evidence and their weight, and a mechanism for eliciting colloquial evidence,” in the end taking the prescriptive stance that deliberative dialoguing is “to ensure scientific forms of evidence take priority over colloquial evidence”.⁵¹ With the core issue of neutrality in mind, we might do better to think of deliberative dialoguing as a a guarantor of this priority – as a chance for scientific evidence to be heard and assessed.

For any of these issue-specific dialogues, KTPs need to think through a range of essential issues. These include:

- **participation**: who’s invited? What institutions do they represent? What degree of inclusion do we need? Have we included civil society? Practitioners? Will we include more than one expert discipline?
- **“evidence”**: what evidence on the issue is out there? How can the dialogue weigh up the competing forms of evidence? How can the KTP work to combine the evidence? How will the KTP (or the dialogue itself) resolve conflict over evidence (and/or over other values)?
- **facilitation**: who will chair the meeting? Should an outside facilitator be brought in?
- **logistics**: is there material every attendee must read in advance? How to ensure that there is time for questions and space for dissenting or minority views?
Safe Harbours and Chatham Houses
A “safe harbour” is literally a place one can take refuge in, and find safety from bad weather or attack. A Safe Harbour meeting could thus be an informal meeting where there are no “stupid questions” – or, rather, no record of stupid questions – and thus a key way for science to become understood, and for decision-makers to interact with it. Given our discussion of all the competing evidence jockeying for inclusion on the policy pie, if decision-makers don’t understand scientific evidence, they won’t use it. They have plenty of “evidential” alternatives.

Often critical to these meetings is the “Chatham House Rule,” which dictates that the meeting may be discussed in the “outside world” but only on the condition that there is no attribution, no record of “who said what”. As Wikipedia relates, “the Chatham House Rule evolved to facilitate frank and honest discussion on controversial or unpopular issues by speakers who may not have otherwise had the appropriate forum to speak freely”. While clearly this would not be an appropriate methodology for all meetings, it may have particular utility where decision-makers may feel intimidated or confused by the scientific evidence, or where they wish to discuss political pressures.

Capacity Strengthening
As our final “triad” in this discussion of KTPs, capacity strengthening represents a vital “cross-cutting” activity crucial to the functionings of any KTP. While the knowledge base creates a critical mass of information and resources, and deliberative dialoguing creates an open space to discuss and contextualize that knowledge, a capacity strengthening approach can knit the two together.

Though a KTP can contribute directly to capacity strengthening through its knowledge base (good knowledge management systems and user-friendly content = accessible and understandable science), and through its deliberative dialogue support (open spaces and multilevel networking = increased opportunities for learning), it can make its strongest contributions to capacity strengthening through regular and consistent training courses. These can be offered through the KTP or be advertised by the KTP. Additionally, the KTP can, on behalf of institutions like the Cochrane Collaboration or the CHSRF, usefully identify individuals who would benefit from existing training opportunities elsewhere.
As with all other KTP core functions, deliberative dialogues may identify the training needs of specific researchers and research-users the KTP serves. This may include offering training to:

- **decision-makers**: in acquiring, assessing, adapting and applying research. Critical appraisal skills have been routinely identified as an element decision-makers want to learn more about. They may also want skills in organizational change theory and knowledge brokering.\(^5\)
- **researchers**: in methodology, resource mobilization, knowledge translation, literature retrieval, and the policy process itself. Much more so than decision-makers, researchers tend to be very frank and upfront about what their training needs are, and how best a KTP might serve them.
- **the media**: in identifying subject experts, acquiring and assessing research, and in knowledge translation.
- **civil society**: in the research cycle, and, like decision-makers, in acquiring, assessing, adapting and applying research.

<table>
<thead>
<tr>
<th>Process</th>
<th>Activities</th>
<th>Outputs</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Deliberative Dialoguing</strong></td>
<td>hold priority-setting exercises; convene safe haven and national policy dialogue meetings.</td>
<td>Policy and research priorities aligned. Consensus on priorities. Policy-driven research syntheses. Evidence-informed policies created.</td>
</tr>
<tr>
<td><strong>Capacity Strengthening</strong></td>
<td>Provide policymaker training in how to acquire, assess, adapt, apply research. Provide training for researchers in the policy context; how to create syntheses; how to lead or participate in KT activities.</td>
<td>Training workshops. Briefings for high-level decision-makers.</td>
</tr>
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Some Concluding Thoughts

We have covered a tremendous amount of ground in this chapter, by necessity glossing over some key concepts, even ignoring some central ones altogether. It should be stressed once more that “bringing in the demand” is still far from an art or science, and that any discussion of it invariably misses key aspects or fails to draw on some essential examples.

With that caveat, here is a list of the “take-home” messages and arguments from this chapter:

1. Context is king, queen and court. The more we know about any context (using, for instance, some approaches from Chapter Four’s discussion of Context Mapping), the greater our chances of influencing decisions.
2. Knowledge is fallible and fluid. What is true today is not always true tomorrow because context is ever-shifting and science is ever-evolving.
3. Researchers rationalize and decision-makers compromise.
4. “Evidence” is slippery, elusive and always user-defined. The challenge in KT is to bring context-free and context-sensitive evidence to the level of colloquial evidence so that all can be discussed and weighed in turn.
5. All kinds of “evidence” compete for a place in the policy pie. If science cannot make itself understood within the policy context, decision-makers will rely upon other kinds of “evidence”.
6. The policy process has sharply different levels and actors of different capabilities.
7. Researchers need to focus more on changing beliefs and less on challenging values.
8. KT practitioners need to encourage ownership of the evidence, not just the policy. Let’s move past old terms and start talking about demand-based evidence or even demand-based practice.

The Zambia Forum for Health Research (ZAMFOHR): Resource Centre Plans

In February 2008, ZAMFOHR held a deliberative dialogue over its plans to launch a Resource Centre that would serve the many different research-users in Zambia, with a particular focus on capacity strengthening. With representatives from academia, civil society, the government, the media, and international donors, a facilitator from Tanzania guided the group through:

- a discussion of Resource Centre examples in Africa and beyond; and
- a review of existing Resource Centres in Zambia itself.

Then the delegates discussed the core duties for the ZAMFOHR RC and decided that its priority service categories were to:

1. Harvest, filter, and synthesize research and evidence;
2. Disseminate and communicate research and evidence;
3. Build capacity at the interface connecting research with research users;
4. Provide reference information (collect, store, manage, make accessible).

For more, see www.zamfohr.org
9. KT is a meeting of processes within a social environment. If research is not a product but a process, and policy is not an event but a process, KT works to bring those processes together, finding solutions by adding context and dialogue.
10. “Linkage and exchange” depends upon how, where and why decision-makers are involved in the research process.
11. Knowledge brokers are neutral actors on a stage of politics and power. They are trusted and instrumental resources for bringing together the worlds of research and policy.
12. Knowledge Translation Platforms are built upon knowledge bases, deliberative dialogues, and capacity strengthening.
13. Deliberative dialoguing creates contextualized decision support for national research priorities and national policies. They can also determine the functions of a KTP; the nature of a KTP’s knowledge base; and the capacity-strengthening courses offered through a KTP.
14. Capacity strengthening can expand the appreciation of research processes and scientific “evidence” among a range of research-users.
Six Key Resources


As the former CEO of the CHSRF, Lomas investigated KT, the know-do gap and the demand side as much as anyone. Though he has written numerous excellent articles, this 1997 work remains an undeniable masterpiece.

The CHSRF website.
Reflecting the work of its former CEO, the CHSRF’s website is loaded with papers, approaches and projects that show the many different facets of linking supply with demand.

Davies does a remarkable job here of discussing and analyzing the different types of evidence jockeying to influence decision-makers.

Innvaer et al use a synthesis tool to look back on how synthesis – among other things – have influenced, or not, decision-makers.

While there are a number of texts challenging conventional wisdom of “evidence-based practice,” Hammersley does a fine job of summarizing the argument for caution in assembling and relying upon an evidence base.

This paper has an excellent break-down of the different “models” of knowledge translation – push, pull, linkage and exchange, and knowledge translation platforms.
Email the *Research Matters* Programme Officers:
Nasreen Jessani at njessani@idrc.or.ke
Graham Reid at greid@idrc.or.ke.

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**Comments? Questions? Criticisms?**

Research Matters (RM) is a collaboration of the International Development Research Centre (IDRC) and the Swiss Agency for Development and Cooperation (SDC). RM was launched in 2003 to examine and enhance the specific KT dynamics within the field of health systems research. From these founding connections with both a research funder and a bilateral donor, RM has occupied a unique vantage among health researchers and research-users. By working directly with both the producers of research and with its consumers, RM has developed a range of activities and modalities designed to hasten the movement of research results to the policy arena, to database and access those results, to communicate them, and to expand an appreciation of research itself. RM builds capacity among researchers to perform their own KT; RM responds to the priorities of major research-users; and RM actively brokers both research results and research processes. As an active, ground-level embodiment of KT, RM has helped to shape how health research is demanded, created, supplied, and ultimately used.
Endnotes


7 Lomas (1997)


12 Lomas (1997), for a breakdown and discussion of the respective decision-making “levels”. Also see Dobbins (2007).


16 For more on this, see Black (2001).

17 For a recent discussion of Kingdon’s various policy models, see Fafard P. 2008. “Evidence and healthy public policy: insights from health and political sciences”. National Collaborating Centre for Healthy Public Policy. See also Lawrence (2006) and Hanney et al 2003.

18 Hanney et al 2003, and citing Lindblom and Cohen in same.


23 Lomas (2005)


25 Lomas (2005)

26 Hammersley (2006)


29 See Hammersley (2005) for an excellent discussion of this.


31 Cuyler [no date]

32 Davies (2007)

Chapter 2: Bringing in the Demand


35 See, for instance, the periodic Calls for Proposals from the Alliance for Health Policy and Systems Research at [http://www.who.int/alliance-hpsr/callsforproposals/en/](http://www.who.int/alliance-hpsr/callsforproposals/en/)

36 Beyond any particular research project, we might do well to keep the big picture and the long-term in mind by trying to cultivate *system-level partnerships* that can reap benefits for years to come


38 CHSRF [no date]. “How to be a good research partner. A guide for health-system managers and policy makers”. At [http://www.chsrf.ca/other_documents/partner_e.php](http://www.chsrf.ca/other_documents/partner_e.php)


40 See CHSRF “How to be a good research partner…”

41 See Golden-Biddle (2003).


52 For more, see [http://en.wikipedia.org/wiki/Chatham_house](http://en.wikipedia.org/wiki/Chatham_house)

# Table of Contents

I. Towards a Knowledge Management Strategy

1. Tacit vs Explicit: what do we mean by knowledge? 2
2. What is a KM Strategy? 3

II. The Components of a KM Strategy 4

1. The Knowledge Audit 5
2. Knowledge Harvesting 6
3. The After Action Review 8
4. Best Practice 9
5. Storytelling 9
6. Communities of Practice 11
7. Peer Assist 12

Key KM Resources 14

Endnotes 16
Knowledge Management

“The scaling up of knowledge management efforts in public health will be important for translating research and evidence into policy, practice and social transformation.”

A quick web search on knowledge management brings up “Knowledge Management and Learning Styles: prescriptions for the future,” “Business Technology Management and Knowledge Management Research,” and “The Nonsense of Knowledge Management”. We see that Knowledge Management (KM) has infiltrated intellectual capital movements and certain “complexity approaches” and that it permeates everything from a filing cabinet to expensive computer software.

KM is one of those terms comprised of very slippery components. What is knowledge, after all? And what is management? How can we hope to manage something that’s fluid and ever-changing? While there is some merit to these epistemological questions, fortunately a host of authors and practitioners has reduced KM into very digestible bits. If we think of knowledge as what we can write down and what we know in our heads, we can at least visualize what it is we need to start managing. While “what we can write down” has attracted all kinds of funding and attention (e.g. naming conventions, databases), the “what we know in our heads” part has not. And, as the trick to successful knowledge management is in developing ways to knit together both types of knowledge, this chapter will focus on a few straightforward and practical KM tools and techniques designed to help us, as organizations and individuals, to know what we know.
To do that we must ask ourselves basic questions like: do we know where to locate a particular file or output? Do we know whom to contact if we require a specific piece of information? Do we know what our colleagues know? And if not, how can we tap their experience and expertise? At its core, KM is about creating, identifying, capturing and sharing knowledge. It is about getting “the right knowledge, in the right place, at the right time,” particularly in influencing an action or a decision. KM is an intrinsic component of knowledge translation: without a good KM strategy in place, we might lose track of crucial knowledge – we might not know what we do know or even need to know – and miss golden opportunities to influence policy decisions. Knowledge is, after all, a society’s, an organization’s, and an individual’s most valuable resource. As researchers, taking this truth to heart will involve rethinking the way we do things, even simple every day tasks.

This chapter will examine two types of knowledge – tacit and explicit – and ways in which we can understand and capture these and maximize their impact. We’ll discuss how to formulate a KM strategy and then offer a suite of tools that can help organizations become fluent knowledge managers. These include: after-action reviews; knowledge audits; identifying and sharing best practice; knowledge harvesting; storytelling; communities of practice; and the peer assist.

I. Towards a Knowledge Management Strategy

Tacit vs Explicit: what do we mean by knowledge?

Knowledge and information – or “data arranged in meaningful patterns” – are not synonymous. While information is a type of knowledge, its value comes from its interpretation within a context. As Davenport and Prusak (1998) explain, transforming information into knowledge involves making comparisons, thinking about consequences and connections, and engaging in conversations with others. According to Wikipedia, “knowledge” can be defined as “awareness or familiarity gained by experience of a fact or situation”; Plato formulated it as “justified true belief.” Put differently, we might best describe knowledge as “know-how” or “applied action.”

Here, knowledge can be divided into two categories: explicit or tacit. Explicit knowledge is something that we can put our hands on, capture and document – knowledge that can be recorded. This includes research findings, lessons learned, toolkits, and so on. We can easily resort to computers and other information technologies to organize our explicit knowledge. Tacit knowledge cannot be documented as easily; it is subconscious – we are generally not even aware that we possess it. Tacit knowledge is context-specific and includes, among other things, insights, intuitions and experiences. Capturing this is more difficult and involves the key ingredients of time and personal interaction.
Imagine receiving a Call for Proposals from an established funding organization. Our explicit knowledge would help us with the mechanics of writing the application – making the case for our proposal by presenting our previous research findings, highlighting relevant publications, an external review on our policy influence, and so on. Our tacit knowledge, however, would help us shape the application for our particular audience, recalling that a previous collaborator is now on the organization’s board, that they tend to favour proposals in certain formats, cherish Log Frame Analyses and so on. We may also contact a colleague asking for any “inside track” information on the funding organization and what it’s really looking for. Whatever the case, and whatever our decisions, many of our actions are guided by both explicit and tacit knowledge. The trick is learning how to knit the two together.

What is a KM Strategy?
There is no “one size fits all” or “ready to use” prescription for KM. While it might be tempting to simply copy a strategy that was successfully used by others, this could be a costly mistake. As with any sound strategy, our KM practices should be closely linked to our own assets, needs, mandate, mission, and goals, taking into account our own values and ways of working. In fact, understanding these elements must be the starting point for any KM strategy.

In its most reduced form, a KM strategy (like any other strategy) must answer three questions: where are we now, where do we want to be, and how do we get there?8

• Where are we now? What kinds of knowledge do we produce (or gather or store)? What outputs have we created? How do we currently manage our knowledge? How do our organization’s culture and systems either serve or hinder sound KM practices?

• Where do we want to be? In five years’ time, how will a sound KM strategy change our organization? How will we know when we have a sound KM system? How will we measure the value of our efforts?

• How do we get there? We need an action plan outlining the three resources of people, processes and technology. What specific tools and practices will we use? How will we motivate people to change their practices?

In a slightly different formulation, Denning advises that our KM strategy should ask: What knowledge do we want to share (type and quality)? With whom do we want to share it (audience)? How will our knowledge actually be shared (channels)? And why will this knowledge be shared (motivations and objectives)?9

A useful way to conceptualize our KM strategy is through people, processes, and technology – memorably visualized as “the legs of a three-legged stool – if one is missing then the stool will collapse.”10 While there is some argument as to which leg is the most important, consensus is emerging in favour of the first – people. After all, it is people –
human resources – who are the ones that create, share and use knowledge. Without taking into account the role people play in generating and sharing knowledge, KM strategies are likely to fail.

It follows that a successful KM strategy requires a change in an organization’s culture and behaviour. At the heart of this change would be recognizing the centrality of knowledge, and how the organization must improve its means for creating, capturing, sharing and using it.

Note: Although it is often tempting to see technology as the “knowledge saviour,” its proper role is more as an enabler of KM. Technology is a method, not a strategy. The right technological tools can indeed help us organize, store and access our explicit knowledge as well as helping to connect people and furthering their abilities to share their tacit knowledge. However, technology alone cannot be the beginning and end of a KM strategy. The challenge is finding the right technological tools that will serve our broader KM system.

II. The Components of a KM Strategy

In designing a KM strategy, there are quite a few different approaches and tools depending on the resources (human, financial, technological) we have at hand and the type of knowledge we want to capture and share.

We’ll discuss here some of the below tools in more detail, with a focus on those that capture our tacit knowledge. If knowledge “lives within the minds of our organization” – with around eighty percent of any organization’s knowledge tacit – we clearly need good and sounds ways to capture and share it.
1. The Knowledge Audit

Often referred to as a knowledge inventory, a knowledge audit assesses and lists an organization’s knowledge resources, assets and flows. It is a critical component of any KM strategy, and often the first step in designing one. If we do not know what knowledge we already have, what our knowledge gaps are and how that knowledge flows within our organization, how can we devise an effective KM strategy? Knowledge audits “reveal the organization’s knowledge management needs, strengths, weaknesses, opportunities, threats and risks.” These indicate what steps are needed to improve current practices. What do we have, what do we need, and what are the gaps?

A Selection of KM Tools and Techniques

After Action Reviews: A tool now widely used by many organizations to capture lessons learned both during and after an activity or project.

Communities of Practice: Widely regarded as “the killer KM application,” communities of practice link people together to develop and share knowledge around specific themes.

Knowledge Audits: A systematic process to identify an organization’s knowledge needs, resources and flows, as a basis for understanding where and how better knowledge management can add value. Also called “Knowledge Inventories”.

Exit Interviews: A tool used to capture the knowledge of departing employees.

Best Practices: Approaches to capturing best practices discovered in one part of the organization and sharing them for the benefit of all.

Knowledge Centres: Similar to libraries but with a broader remit including connecting people with each other as well as with information in documents and databases.

Knowledge Harvesting: A tool used to capture the knowledge of “experts,” making it widely available to others.

Peer Assists: A tool to learn from the experiences of others, especially within an organization, before embarking on an activity or project.

Social Network Analysis: Mapping relationships between people, groups and organizations to understand how these relationships either facilitate or impede knowledge flows.

Storytelling: Using the ancient art of storytelling to share knowledge in a more meaningful and interesting way.

White Pages: A step-up from the usual staff directory, this is an online resource that allows people to find colleagues with specific knowledge and expertise.


Note: Further information on any and all of these tools and techniques can be found in the Resources section at the end of this chapter.
What does a knowledge audit involve?

While different approaches can be taken to carry out a knowledge audit, the methodology adopted by the NHS National Library for Health is briefly presented here.13

1) **Identify knowledge needs.** Tools including questionnaires, interviews and/or facilitated group discussions are required to answer the central question of: *to be successful, what knowledge does our organization need?*

2) **Conduct a knowledge inventory.** Within an organization, knowledge assets – tacit and explicit – must be identified and located. For tacit knowledge, that means identifying the people we employ, where they are located, what they do, what they know, and what they may be learning. In the case of explicit knowledge, it means quantifying in-house knowledge (papers, reports, databases, etc.) by locating it, understanding how it is organized and accessed, analyzing how appropriate it is, and finally determining whether the resources available are in fact being used. Compared against our needs, this inventory will reveal critical knowledge gaps.

3) **Analyze knowledge flows.** Understanding how knowledge moves within an organization – “from where it is to where it is needed” – is crucial.14 How do people find the knowledge they need to execute their tasks? This type of analysis will include both tacit and explicit knowledge, and cover people, processes and technologies.

4) **Create a knowledge map.** Though slightly abstract, a visual representation of an organization’s knowledge can help show how it moves, how it’s accessed, where it’s created and how it’s shared. This can be done by mapping knowledge resources and assets or, more comprehensively, by adding the details of how it flows from one point to the next.

An audit should ideally lead to some important conclusions. It should trigger recommendations for addressing knowledge gaps, in terms of both content and flow.

2. **Knowledge Harvesting**

How can we truly capitalize on the knowledge of our organization’s experts? How do we capture what is in their heads and then share it with others in an accessible and understandable format? How do we make tacit knowledge explicit? Knowledge harvesting is not a catch-all solution, but it is one way to capture, document and subsequently use the knowledge of experts and other top performers. As Eisenhart (2001) explains, “the ultimate goal of knowledge harvesting is to capture an individual’s
decision-making process with enough clarity that someone else guided by it could repeat the steps of the process and achieve the same result.”

**What does knowledge harvesting involve?**

Most approaches to knowledge harvesting follow a set of careful steps. Here, we adapt an eight-step process as presented by Knowledge Harvesting Inc.16

1) **Focus.** What specific knowledge and expertise are we looking for? The answer to this question will affect the overall strategy for capturing that information.

2) **Find.** Locate the experts whose knowledge we want to harvest. We can go through a staff directory, look at key documents and find out who authored them, or simply ask around.

3) **Elicit.** Harvesters, or interviewers, can get experts to talk about their knowledge – even when they are not aware that they possess it. It is important for skilled harvesters to get the dialogue started.

4) **Organize.** Once the knowledge has been gathered, it must be arranged in a coherent and systematic form that is easy to access.

5) **Package.** As discussed in several other chapters of this Toolkit, we must think about our audience and its needs. Which format will best serve our audience with the knowledge we’ve elicited?

6) **Share.** Connected to 5) is the question of: what is the ultimate purpose of sharing this knowledge? Why and for whom have we packaged what we know? Again, the exact means for doing all of this will depend on a careful appreciation of the audience. Generally, we start by making our knowledge available in an on-line repository.

7) **Apply.** This will be done by members of an organization in their every-day work. It is important to keep track of whether, and how, that knowledge is being applied and to record any feedback.

8) **Evaluate and adapt.** Based on the feedback of users, the effectiveness of our efforts must be evaluated and adapted to the changing needs of an organization.

### Sample of Expert Questions

- Describe a time when...?
- What’s the first thing you do?
- How do you know to do that?
- How do you know when to do it?
- What do you do next? Why?
- What usually happens?
- What happens if something else is done?
- What would happen if...?
- Who else is involved?
- What are some common mistakes or misconceptions?

- What is the most important thing to remember when you’re doing this?
- Can you describe how you help others learn how to do this?
- What are the main obstacles that prevent them from achieving the same results as you?
- What would make this process easier to understand?
- What would make this process easier to achieve?

**Source:** *ABC of Knowledge Management*. 2005.
3. The After Action Review

Originally designed and developed by the U.S. military, the After Action Review (AAR) is a flexible approach for assessing a past event, project or process. As an open and participatory process, an AAR helps us understand “what happened, why it happened, and how it can be done better”. Group discussion gives a comprehensive snapshot of the many technical and human factors at play, resulting in a set of key lessons learned. These lessons can identify failures, with the group discussing ways to modify or improve sub-standard performance; they can also highlight successes, with the group making recommendations on how to sustain or expand upon them.

An AAR brings teams together in a spirit of evaluative thinking. By working to promote accountability – of individuals and the organization – an AAR brings events into an organization’s “learning cycle,” providing evidence and experience for modifying future practice and goals. As USAID (2006) summarizes, an AAR tends to provide:

- candid insights into specific strengths and weaknesses from various perspectives;
- feedback and insight critical to improved performance; and
- details often lacking in evaluation reports alone.

In general, there are two types of AAR. One is formal – typically with a facilitator and strong logistical support – and the other informal – usually occurring on the same day as the event or program under review. Each type tends to answer four different sets of questions: what was planned? what really happened? why did it happen? and what can we do better next time? Subjects discussed can include technical performance, techniques, communications, lessons learned, roles and responsibilities, organizational issues, stress impacts, and so on.

### The Formal AAR Process

<table>
<thead>
<tr>
<th>I. Planning the AAR</th>
<th>2. Preparing for the AAR</th>
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<tbody>
<tr>
<td>- Identify <strong>what</strong> will be reviewed (event, activity);</td>
<td>- Select a neutral and trusted <strong>facilitator</strong> (either project staff or outside consultant);</td>
</tr>
<tr>
<td>- Identify <strong>when</strong> it will occur, <strong>who</strong> will attend and <strong>where</strong> it will be held;</td>
<td>- Create necessary materials that will provide <strong>background</strong> as well as an understanding of how dialogue will influence programming;</td>
</tr>
<tr>
<td>- Determine <strong>how</strong> its results will feed into core programming.</td>
<td>- Obtain input from beyond the “core team”.</td>
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<tr>
<th>4. Following up the AAR</th>
<th>3. Conducting the AAR</th>
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<tr>
<td>- Convene senior management meeting to discuss AAR findings;</td>
<td>- Achieve maximum <strong>participation</strong>;</td>
</tr>
<tr>
<td>- <strong>Implement</strong> recommendations;</td>
<td>- Ensure honest, candid and professional <strong>dialogue</strong> that focuses on <strong>learning</strong>;</td>
</tr>
<tr>
<td>- Determine follow-up schedule;</td>
<td>- Understand what happened with the goal of improving the organization;</td>
</tr>
<tr>
<td>- Document and learn lessons <strong>about the AAR process itself</strong>, to improve it for next time.</td>
<td>- Maintain a record of the discussion. This may be <strong>confidential</strong>;</td>
</tr>
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</table>

**Source:** adapted from USAID, 2006.
4. Best Practice

The term “best practice” need not be too literal: it does not declare a champion nor reign supreme over a competition of practices. Rather, best practice indicates a strong or useful case study, and describes an approach that, in a certain context, has had some success and may helpfully inform future activities. Identifying, capturing and sharing best practice generally involves both tacit and explicit knowledge: explicit knowledge about the practice captured in such “sharing” tools as databases, and tacit knowledge that can be disseminated via, for instance, communities of practice.\(^{21}\)

One useful way of identifying and sharing best practice has been developed by Skyrme:\(^{22}\)

1) **Identify user requirements.** Do we need a database of best practices or should we instead be sharing select aspects of this knowledge through storytelling and face-to-face interactions?

2) **Discover best practices.** Tools to do this include: identifying individuals who are performing well and understanding how they work; communities of practice; after action reviews; knowledge harvesting and exit interviews.

3) **Create a dossier of good practices.** Databases are typically used to store best practices in a standard format. Items to be entered in the database include: title; profile; context; resources; description; improvement measures; lessons learned; and links to resources.

4) **Validate best practices.** Review identified best practices to reaffirm their validity. This can be done by a panel of subject experts and peers.

5) **Disseminate and apply.** We must go beyond the database to ensure face-to-face dissemination of best practices. Ways include: communities of practice; peer assists; improvement groups or quality circles; visits to other departments or organizations with good performance; organized learning events; job secondments or exchanges, etc.

5. Storytelling

The ancient art of storytelling has much to tell us. The importance of storytelling as a tool to share knowledge within organizations is increasingly being recognized and deliberately used – especially when attempting to share *tacit* knowledge.

For years now, Steven Denning – a renowned KM expert – has used stories as a KM tool, and more specifically as a way to effect change within organizations. Specifically, he uses what he calls *springboard stories* that enable “a leap in understanding by the audience so as to grasp how an organization or community or complex system may change.” Beyond the important target of spurring change, storytelling can also work to capture tacit knowledge; embody and transfer knowledge; innovate; build community; enhance technology; and contribute to individual growth.\(^{23}\)
### Stories and Tacit Knowledge...

**Version A**

In our evaluation of a project in Bangladesh we noted a wide variance in the competence of individual villages to develop sustainable and effective solutions to problems encountered, for example in replacing broken parts or developing low cost products such as new latrines. The lessons to be learned from this evaluation are that we should:

- work against over-dependence on donors;
- note and encourage entrepreneurial approaches to problems;
- identify existing and repeatable good practices;
- build and strengthen communication between villages to assist cross-fertilization of ideas at the grassroots level.

**Version B**

Bangladesh is a really impressive place... in a positive sense. I was in a village last year working in water and sanitation. We were trying to promote the use of improved latrines, but could not produce concrete slabs and rings locally for a low cost. Somebody told me to visit the latrines of a lady in the village, so I went along and said, “Can I see your latrines?” She had made a latrine out of a clay pot with the bottom cut off. Then with a potter from the area she developed a small local production of bottomless pots, and they became the latrines. Ingenious.

A few weeks later I was in another village and saw a hand pump; it was broken, just a small piece missing. So I said to the villagers, “Why don’t you repair your pump?” And they said, “oh, we just wait for another donor to bring a new pump.” So I said, “Why don’t you visit the lady in the village over there? She finds ways of getting things done for herself.”


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**A good story**

According to Prusak, a good story should possess the following attributes:

- **Endurance.** While stories are likely to change over time, the lessons they are meant to convey should stay the same.
- **Saliency.** Good stories should appeal to their audience, be witty, pithy and touch an emotional chord. The story must be short enough for people to remember it.
- **Coherence.** Stories should explain something and make sense. They must also be believable – avoid exaggeration.
- **Character.** Stories tend to hinge around the values and actions of characters the audience can easily identify with.

In addition, stories should be simple and concise but with sufficient background information; be plausible, lively and exciting; be told with conviction; and, always end on a positive note.
6. Communities of Practice

All of us have learned how to solve a particular problem or perform a specific task, not from a manual or text book, but from talking to a colleague. Face-to-face discussions are not only effective ways to share existing knowledge, but can also lead to innovation and the creation of more knowledge. Communities of practice (CoP) – “groups of practitioners who share a common interest or passion in an area of competence and are willing to share the experiences of their practice” – are ways of formalizing such exchanges.

They are based on the assumption that the acquisition of knowledge is a social process, and that knowledge and information can best be shared and learned within communities. As opposed to working groups or task forces, CoP are not formed around a specific assignment and are not time-bound: they exist “indefinitely for the promotion of the issue or issues around which the community is formed.” They are based on the assumption that the acquisition of knowledge is a social process, and that knowledge and information can best be shared and learned within communities.26 As opposed to working groups or task forces, CoP are not formed around a specific assignment and are not time-bound: they exist “indefinitely for the promotion of the issue or issues around which the community is formed.”26

In addition, membership in a CoP is entirely voluntary and the group’s composition and mission are meant to be fluid, flexible and informal. Their mandate can include stimulating interaction, fostering learning, creating new knowledge, and identifying and sharing best practices.29 They can be an extremely useful way of capturing and sharing the elusive but essential tacit knowledge of our colleagues.

How do we get started?

We can form a CoP within our own organization – if it’s large enough – or we can form one across organizations, and even continents. Whatever the case, a CoP must focus on a single issue or area of expertise around which people are willing to share ideas, find solutions, and innovate. Their exact format and modes of operation will depend upon what kind of knowledge people need to share, how tightly bonded the community is, and how closely new knowledge needs to be linked with people’s everyday work.30 The first questions when setting up a CoP include: what is the knowledge focus? who can

---

The Strengths of Storytelling

- Storytelling allows us to communicate: quickly; naturally, clearly; truthfully; collaboratively; persuasively; accurately; intuitively; entertainingly; movingly; feelingly; and interactively.1
- Stores are funny, interesting and memorable. Their language is real and personal. Stories simplify complex events. Stories are concrete and accessible. The audience readily identifies with the story. Stories inspire us to take action. Stories foster a sense of community. They promote the development of human relationships.2
- “In providing the broader context in which knowledge arises, storytelling can increase the potential for meaningful knowledge sharing. By grounding facts in a narrative structure, learning is more likely to take place, and be passed on.”3
- Stories communicate ideas holistically, conveying a rich yet clear message, and so they are an excellent way of communicating complicated ideas and concepts in an easy-to-understand form. Stories therefore allow people to convey tacit knowledge that might otherwise be difficult to articulate; in addition, because stories are told with feeling, they can allow people to communicate more than they realize they know”.4

Sources:
1 Groh K. What are the potential benefits of storytelling? www.creating21stcentury.org
contribute? what are the common needs and interests of the group? and what is the group’s ultimate purpose? In his CoP start-up kit, Nickols (2003) provides a very useful step-by-step view of the process:

**Steps in Starting up a Community of Practice**

**Preliminaries**
- Identify the champion and sponsor;
- Pick a focal point:
  - Problem
  - Practice
  - Process
- Prepare a business case;
- Present a proposal (where resources or support will be needed):
  - Value/benefits
  - Sponsorship/support
  - Interactions
  - Outcomes
- Select/enlist members;
- Get organized.

**Start-Up**
- Set the agenda:
  - issues/interests
  - problems
  - goals/outcomes
- Devise interaction modes:
  - email
  - face-to-face meetings (scheduled/unscheduled)
  - virtual meetings
  - telephone/conference call
  - videoconferencing
- Confirm and secure support requirements:
  - technology
  - resources
- Get underway.

**Behaviours & Activities**
- Share experience and know-how;
- Discuss common issues and interests;
- Collaborate in solving problems;
- Analyze causes and contributing factors;
- Experiment with new ideas and novel approaches;
- Capture/codify new know-how;
- Evaluate actions and effects;
- Learning.

**Source:** Nickols F. 2003. *Communities of Practice: A Start-Up Kit*. Distance Consulting.

7. **Peer Assist**

We often struggle to find solutions to what we think are new problems. But in most cases, somebody, somewhere – likely within our own organization – has had to deal with similar issues in the past. By turning to them for assistance and advice, we can often find solutions, or at least good starting points. Pioneered by BP Amoco in 1994, the Peer Assist technique – tapping into our peers’ experience and expertise – saw the company save US$750 million over its first three years of use.

**When is Peer Assist useful?**

- You are starting a new assignment. You want to benefit from the advice of more experienced people.
- You face a problem that another group has faced in the past.
- You have not had to deal with a given situation for a long time. You are no longer sure what procedures to follow.
- You are planning a project that is similar to a project another group has completed.

**Source:** CIDA. 2003. *Knowledge Sharing: Methods, Meetings and Tools*.

**What does a Peer Assist involve?**

A Peer Assist takes the form of a half-day to two-day meeting where a group of peers comes together to discuss a particular problem. The meeting should take place prior to the launch of a new project, though it may also prove useful throughout the project’s lifecycle. The project leaders are typically the ones to convene the meeting, carefully
selecting the participants whose advice and knowledge is particularly sought. The project leaders must manage the entire meeting (or set of meetings).  

<table>
<thead>
<tr>
<th>Steps in conducting a Peer Assist</th>
</tr>
</thead>
</table>
| **1)** **Purpose:** Clearly define the problem we’re seeking assistance with and ensure that our aim is to learn something.  
| **2)** **Background research:** Find out whether others have previously tackled a similar problem.  
| **3)** **Facilitator:** Getting someone from outside the team often helps ensure the process runs smoothly.  
| **4)** **Timing:** Make sure the results of the Peer Assist will be available in time and on time.  
| **5)** **Participants:** Invite four to eight people who have the relevant knowledge, skills and experience. Avoid hierarchies and ensure people feel free to share their views.  
| **6)** **Deliverables:** Know what’s wanted and plan accordingly. Deliverables should be options and insights as opposed to “answers”.  
| **7)** **Socializing:** People will work better together if there is time to get to know each other before and during the meeting.  
| **8)** **Ground rules:** At the start of the meeting, make sure that everyone is on the same footing and is clear about the purpose and individual roles.  
| **9)** **Context:** The host team should present the context, history and future plans with regard to the problem being presented.  
| **10)** **Questions and feedback:** At this point, the host team should take a back seat and allow the visitors to discuss what they have heard and share ideas.  
| **11)** **Analysis:** The visiting team should now analyze and reflect on what they have learned and look at different options.  
| **12)** **Actions:** The visitors present their feedback to the host team. Time should be allowed for questions and clarifications. The host team should agree on a timeline for implementation.  

**Source:** Adapted from *ABC of Knowledge Management*. 2005.
Key KM Resources

- Nepal RB. *Knowledge Management: Concept, Elements and Process*. www.km4dev.org/?module=articles&func=display&ptid=1&aid=725
  - www.stevedenning.com
  - www.knowledgeharvesting.com
  - www.creatingthe21stcentury.org
- McDermott R. 1999. “Nurturing Three Dimensional Communities of Practice: How to get the most out of human networks.” *Knowledge Management Review*.
- Welch N. “Peer Assist Overview”. www.welch-consulting.com/PeerAssist.htm
Comments? Questions? Criticisms?

Email the Research Matters Programme Officers:
Nastreen Jessani at njessani@idrc.or.ke
Graham Reid at greid@idrc.or.ke.

Research Matters (RM) is a collaboration of the International Development Research Centre (IDRC) and the Swiss Agency for Development and Cooperation (SDC). RM was launched in 2003 to examine and enhance the specific KT dynamics within the field of health systems research. From these founding connections with both a research funder and a bilateral donor, RM has occupied a unique vantage among health researchers and research-users. By working directly with both the producers of research and with its consumers, RM has developed a range of activities and modalities designed to hasten the movement of research results to the policy arena, to database and access those results, to communicate them, and to expand an appreciation of research itself. RM builds capacity among researchers to perform their own KT; RM responds to the priorities of major research-users; and RM actively brokers both research results and research processes. As an active, ground-level embodiment of KT, RM has helped to shape how health research is demanded, created, supplied, and ultimately used.
Endnotes


3 Denning S. What is knowledge? Definitions of knowledge. www.stevendenning.com


6 ABC of Knowledge Management. 2005.

7 Nepal RB. Knowledge Management: Concept, Elements and Process.

8 ABC of Knowledge Management. 2005.


10 ABC of Knowledge Management. 2005.

11 ABC of Knowledge Management. 2005.

12 ABC of Knowledge Management. 2005.


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17 ABC of Knowledge Management. 2005.


20 See “Guidelines for the AAR”. Mission-Centered Solutions, Inc. 2008

21 ABC of Knowledge Management. 2005.


23 Denning S. Where to use storytelling – Practical uses of ancient art – Business uses of storytelling. www.stevendenning.com


26 Denning S. “Communities for knowledge management.” www.stevendenning.com

28 Denning S. “Communities for knowledge management.” www.stevedenning.com

29 Nickols F. *Communities of Practice: An Overview*. Distance Consulting, 2003.

30 McDermott R. “Nurturing Three Dimensional Communities of Practice: How to get the most out of human networks.” *Knowledge Management Review*, Fall 1999.

31 Ramalingam B. 2006.

32 Welch N. *Peer Assist Overview*.

Table of Contents

I. The Dynamics of the Policy Environment
   What are we trying to achieve? 2
   Who, precisely, is our target audience? 2
   Who are the important actors within our target group? 3
   What level are we trying to influence? 5
   How politicized is the issue? 5
   What are the information needs of our target audience? 6

II. Context Mapping Tools
   1. Stakeholder Analysis 7
   2. Force-Field Analysis 8
   3. Policy Network Mapping 10
   4. Influence Mapping 11

III. The Policy Cycle and Policy-Making Theories: An Overview
   The policy making process 12
   1. Agenda-setting 13
   2. Identification of Alternatives and Policy Formulation 14
   3. Policy Implementation 15
   4. Monitoring & Evaluation 15

Endnotes 17
Context Mapping

Context Mapping. Political Mapping. Power Mapping. Stakeholder Analysis. Whatever the term, the idea connecting each is an appreciation of the setting that surrounds research. Every issue, from malaria to health financing, unfolds against its own spectrum of actors, from supporters to detractors to fence-sitters. As research is generally not a neutral input, the more we know about our context, the greater the chance our ideas and findings might influence it. Who might welcome our work? Who might oppose it? Would any decision-makers want to participate in our project? At a more meta-level, how are policies in our field formulated? What is the current policy environment? Which global actors might be involved?

Context cannot be over-emphasized: context is everywhere, context tinges everything. Context is King, Queen and Court. When it comes to KT, an appreciation of context must resound in everything we do. The simple and self-evident truth is that if we wish to be influential, we must know who and what we’re trying to influence. And the more comprehensive our knowledge of this – the more we can dovetail research with its context – the better the chance of plugging our processes and findings into the policy process.

“Context Mapping” is our preferred, politically-neutral term for this process of understanding and adaptation, and in this chapter we’ll examine some of the theory and illustrate it through practical tools and examples. To this end, we’ve chosen a case where the evidence is not definitive and on which scientists, institutions and even countries sharply disagree. While completely fictional, the example of a researcher working on malaria vector control allows us to explore the many different approaches to understanding “context”.
I. The Dynamics of the Policy Environment

What are we trying to achieve?

At the end of the day, what are we hoping our research will actually do? What will it contribute towards? What change do we wish to bring about? For instance, do we hope to cause a policy shift within the Ministry of Health? Are we trying to influence the behavior of a certain segment of the population? Or are we simply trying to raise awareness?

The more specific we can be with our objective, the easier it becomes to understand our context and our target audience. Our overall objective affects, in every sense, the actors we want to reach; a well-expressed objective helps to clarify a target audience. And once we have a good – if rough – idea of that, then we can work to define and dissect that audience further, eventually choosing the relevant messages, tools and channels to reach with precision and impact.

The target audience is by no means a side-bar – it is an essential part of our research from the very outset. The more we can pair objectives with audience in our design, the more likely we’ll link both in practice. If, for instance, our work hopes to effect a change in behavior, we’ll be more likely to target the end-users of our research – for example local communities. If we can spend time sketching out these local communities – what their current “behaviour” is, how they absorb messages, and how we can involve them and reach them – it follows that our research (now context-savvy) stands a much greater chance of influencing them. If we’re aiming to influence public policy, then we’ll need to understand our decision-maker audience – where these actors stand on our particular issue, and how decisions are typically made within the broader policy environment.

Who, precisely, is our target audience?

In some cases, the answer will be straightforward, particularly when there is only one group of actors we’re seeking to address. In most cases, though, there will be a broad spectrum of individuals or groups who might be affected or have an interest in (or be convinced to have an interest in) our processes, findings and proposed policy changes.1

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Indoor residual spraying of DDT for malaria vector control

In November 2006, Dr. Bight concluded a two-year research study in M----- which assessed the cost-effectiveness of DDT when used for malaria control. Specifically, his research team compared the cost – in terms of money spent and lives saved – of indoor residual spraying of DDT with the costs associated with insecticide-treated bed nets (ITNs), two alternative insecticides, and a combination treatment based on artemisinin. The study concentrated on 15 villages in three districts of M----- where malaria transmission rates were high and had remained constant for the past decade. The three districts were in highland areas and were also characterized by marked transmission peaks and epidemic disease outbreaks. The study found that, in light of the specific geographical location, the type and habits of the mosquitoes found there, as well as the habits of the populations, DDT residual spraying was the most cost-effective malaria-control strategy. The government’s current policy, however, focused on the use of ITNs subsidized through the distribution of vouchers in antenatal clinics.
Not all of them, however, hold the same importance and influence: therefore, we must begin by desegregating our audience. Who is better placed to act on our findings or recommendations? Which group is in a position to influence others? If our answer is “decision-makers,” let’s try to narrow that down. “Decision-maker” or “policy-maker” are terms as big and vague as “communities” and “practitioners” – the more we can desegregate them, the better.

When prioritizing audiences, it might be useful to divide them into three categories: 1) those we MUST interact/communicate with; 2) those we SHOULD interact/communicate with; 3) and those we would LIKE to interact/communicate with. Let’s imagine this as a three-ring circle. Focus first on the group forming the inner ring; we can then move on to other groups as time and resources permit.

Who are the important actors within our target group?

Broad target groups must be broken down as much as possible. On our particular issue, exactly who makes the decisions? If one of our targets is the national Ministry of Health, should we try to inform the Permanent Secretary, a Director, a mid-level official, or perhaps outsiders who have the ear of any one of those important players?

The Ministry is often the easy and logical target for health research: after all, it sets most aspects of health policy. But of course no Ministry exists in a vacuum. For instance, on any HIV/AIDS issue, the Ministry may receive much of its budget from bilateral and multilateral donors, who are interested in seeing certain policies and programmes followed. The country may also have a semi-autonomous National AIDS Council (NAC). How many actors are setting policy here? Who has the last word – the MoH, the NAC or foreign donors? Are they harmonized or do they act separately? Are there advisory committees of researchers and NGOs that work with the Ministry on policy issues? In sum: who has the final say is not always clear.
Policymaking is a complex enterprise. Not only must researchers determine the many different levels and actors within and outside of government, we must also identify our likely supporters and opponents. As Start and Hovland (2004) suggest: “Where are the supporters, entry points and policy hooks and opportunities [we] can hang [our] proposal on in a timely and focused manner? Where are [our] detractors?”

Following some careful analysis, we can now group these actors into categories that reflect their position: supporters, detractors and fence-sitters.4

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### Influencing policy, changing behavior

Dr. Bight has two clear objectives. First, he wants to change public policy by convincing the government to promote and subsidize indoor residual spraying in the three districts under study. He recognizes that one study in three districts is not the final word, and that an integrated IRS-ITN strategy might be a useful response. Either way, public policy needs to change, and putting IRS on the agenda is one of his goals. Second, he wishes to influence the behavior of local communities to increase their acceptance of and compliance with the use of IRS.

To influence public policy, Dr. Bight might target voters, key constituents, and decision-makers at various levels of government. In effect, however, he decides that he MUST, above all, concentrate his efforts the Ministry of Health. To influence the behaviour of communities – and especially in light of his limited time and resources – he decides to focus principally on community leaders and women’s associations which, he hopes, will effectively transmit the message to other members of the community.

Dr. Bight would also like to engage the local media in the three targeted districts and, if time and resources permit, the national media. Engaging with the latter might raise awareness around his issues and pressure the government into adopting any proposed policy change, but at this point he believes that his energies would be better spent elsewhere.

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### DDT’s Friends and Foes

To identify his supporters and opponents, Dr. Bight carried out some intensive groundwork that included desk research, informal meetings and interviews. This process created a nuanced view of supporters, detractors and fence-sitters:

**Supporters:** Having met various staff members and policy advisers, Dr. Bight was delighted to discover that the Ministry’s Director of Research was highly receptive to his proposal and might be willing to champion it within government. Similarly, various public health NGOs, academics and select members of the press were prepared to support publicly the proposed policy change. At the international level, he was further encouraged by the fact that, in September 2006, the World Health Organization (WHO) had announced that it would promote indoor spraying as one of three main interventions to fight malaria. Soon thereafter, the United States Agency for International Development (USAID) announced that it would fund the use of DDT in specific cases.

**Detractors:** The main detractors were environmental groups, home and abroad. The latter included, among others, Greenpeace, World Wildlife Fund, and Physicians for Social [cont’d]
What level are we trying to influence?
There is a marked difference between proposing changes to national health policies and suggesting changes in the way services are implemented at a local level. Each level has its own challenges and opportunities, so it is essential to conceptualize all of this – which level of government/district/NGO/donor – to target in order to achieve our stated objective.

How politicized is the issue?
Assessing the political climate framing our issue is essential. No matter how sound or pressing our research is, if the political climate means that our findings are extremely unlikely to be implemented, then we might want to reconsider our research project – or commit ourselves to spending a huge part of our budget and time in advocacy work in an effort to change the climate. However, by a savvy understanding of the climate, we might not need to discard a badly timed or contentious topic: there might be ways to refocus and approach it from a less sensitive angle.

Fence-sitters: Thanks to data collected by his field researchers, Dr. Bight realized that while most community members were not opposed to indoor spraying, the majority were apprehensive about its possibly harmful effects.

Responsibility. Some foreign donors rejected DDT and IRS outright, arguing in favour of expanded ITN programmes. Though detractors now, they might be convinced to support a combination of IRS-ITN.

The History of DDT spraying
When Dr. Bight first initiated his research in November 2004, he was well aware of the high level of politicization – and tumultuous history – surrounding DDT. In 1955, the WHO championed DDT’s use in disease vector control when it launched a program to eradicate malaria. While it was at the time highly effective in reducing mortality rates, doubts began to emerge as to the negative environmental consequences of its use and the risk that mosquitoes would develop resistance to the chemical. During the 1970s and 1980s, its agricultural use was banned in most countries. Even when using it for public health purposes, countries often came under heavy criticism from international health and environmental agencies and were not always able to secure funding. In 2001, 98 countries signed the Stockholm Convention which came into effect in 2004 and called for the total elimination of DDT and other persistent organic pollutants. Although the use of DDT for public health purposes is currently exempt from the ban, the treaty nonetheless aims to completely phase out its use on a global scale.

Having done his background research, Dr. Bight knew what opposition he was likely to face. At the same time, he also knew that countries such as South Africa (in KwaZulu Natal), Uganda, Mozambique, Swaziland and Ecuador, among others, had successfully reduced malaria infection rates using DDT. He therefore knew that while this was a complicated issue, the adoption of a pro-DDT policy in M—— was not impossible. Dr. Bight’s position was further reinforced by the support given to DDT by the WHO and USAID in late 2006, just before his own results were made available.
What are the information needs of our target audience?

The ways in which target audiences receive and absorb information is shaped by many factors, including their personal preferences and habits, literacy and education levels, degree of access to various media formats, and their level of understanding of the issue at hand. To communicate with any audience, we must consider their needs – and not our abilities or desires. How does our target usually absorb information? Will they be receptive to our message? As we discuss elsewhere in this Toolkit, there are a number of tools at our disposal to ‘package’ information in a format well suited for any particular audience. These include policy briefs, systematic reviews, newspaper articles, newsletters, brochures, emails, radio spots, short video clips, and more.

To each her own...

Having decided to target individuals within the Ministry of Health, community members, and the media, Dr. Bight then had to think about how best to share his results and recommendations with these three distinct groups.

From previous interactions with officials at the Ministry of Health, Dr. Bight knew they were already aware of the potential benefits of DDT for malaria control. He also discovered, however, that they were reluctant to endorse its use for fear of being attacked by environmental groups and of losing the support of some international donors. They were also concerned about the potential costs of such a policy. Dr. Bight and his team therefore devised a **two-page policy brief**, weighing the pros and cons of alternative policies. To make a case in favour of DDT, the document outlined the cost-effectiveness of the strategy as well as emphasizing the backing that it had recently received from WHO and USAID. It also highlighted the experience of neighbouring African countries that had successfully used DDT without facing negative consequences. Dr. Bight’s team knew the message had to be clear, concise, well-structured and with digestible scientific jargon and acronyms. This policy brief was distributed by courier to key officials and their staff; Dr. Bight and his team then followed-up with personal visits to explain further its ideas.

The team adopted a markedly different strategy towards community leaders and women’s associations. Their main fear was that indoor residual spraying of DDT would be dangerous to their own health and that of their family. Dr. Bight and his team decided on a three-pronged strategy to address this. First, they would organize village-level meetings with community leaders and women’s associations to discuss DDT’s health risks and concerns, as well as ways of integrating DDT spraying with ITNs. Second, they would assist local supporters in organizing “town-hall” meetings and provide them with lively posters that could be used to support their claims and reassure the public on safety issues. And, finally, they created radio spots that would be aired on a regular basis on local radio stations.

For the media, Dr. Bight and his team used the pre-existing contacts they had with specific journalists to generate discussion of their findings in community and national newspapers. They successfully published a feature story in **M**’s leading newspaper and, by preparing and distributing a concise press release, their story was carried in a number of community newspapers, all discussing the many positive aspects of DDT, and the possibilities of a combined IRS-ITN approach in preventing malaria.
II. Context Mapping Tools

Beyond common sense and other empirical approaches to assessing the overall research and policy environment, different techniques have evolved to help us map our context. While there is no magic formula, these can be extremely useful where the context is confused or where there is an array of competing actors. Such techniques can facilitate:

- an analysis of the different political actors in any given policy environment;
- an assessment of the power, position and interests of those actors;
- an analysis of the degree of any actor’s support;
- a graphic of the pressures for and against change; and
- an understanding of policy networks and policy influencers.

The following brief section gives an overview of some of the major mapping techniques. More information is contained in the links provided.

1. Stakeholder Analysis

Qualitative data is needed to determine the interests, behaviour, intentions, agenda, inter-relations, and influence of different actors in relation to a particular issue. The “Stakeholder Analysis” tool is one way of collecting and arranging this data. It arose from a “recognition among managers, policy makers and researchers of the central role of stakeholders (individuals, groups and organizations) who have an interest (stake) and the potential to influence the actions and aims of an organization, project or policy direction.”

Stakeholder Analysis is particularly useful in determining whose support should be sought throughout the project's life cycle in order to ensure its eventual impact. Once results are available, as Start and Hovland (2004) explain, this tool can be used to determine “who needs to know about the research, what their positions and interests are and how the research should be presented and framed to appeal to them.”

What is actually being mapped?

- The nature of stakeholders’ interests;
- The extent to which stakeholders’ interests converge or overlap;
- The stakeholders’ importance with regard to the issue/policy/reform at hand;
- The stakeholders’ influence with regard to the issue/policy/reform at hand.

What are the steps in a Stakeholder Analysis?

- Creating a stakeholder table. This step identifies all relevant stakeholders, often separating them into primary and secondary. Within these categories, there can be different levels such as user/occupational groups, income groups, or by gender (potentially using a gender analysis to identify and dissect different levels of gender). The table will help to sketch out competing or hidden interests, and the impact of the project on those interests (typically as positive, negative or unknown). On the table we can also indicate the priority we should give to each stakeholder (1 = high priority, 4 = low).
• **Assessing each stakeholder’s importance and influence.** If we define “importance” as a stakeholder’s relevance to the project and “influence” as the power the stakeholder has over the project’s success, we can classify stakeholders accordingly. A graph where x = importance and y = influence can help us to visualize the combination of both variables within our stakeholders.

• **Identifying risks and assumptions.** As any project depends on the strength and validity of core assumptions, sketching these out in advance can help us to visualize the stakeholder dynamics that may affect the project’s success. This includes relationships between stakeholders, potential conflicts of interest, and the appropriate level of stakeholder participation in the project.

### Stakeholder Table

<table>
<thead>
<tr>
<th>Primary Stakeholders</th>
<th>Interests</th>
<th>Potential project impact</th>
<th>Relative priorities of interest</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ministry of Health</td>
<td>Implements project; provides funding; employs project staff</td>
<td>+</td>
<td>1</td>
</tr>
<tr>
<td>Communities</td>
<td>Receive intervention</td>
<td>+</td>
<td>2</td>
</tr>
<tr>
<td>Secondary Stakeholders</td>
<td>...</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Further Resources

- The World Bank’s Poverty and Social Impact Analysis (PSIA) Source Book provides an overview of various Stakeholder Analysis Tools. Available at: [http://go.worldbank.org/GZ9TK1W7R0](http://go.worldbank.org/GZ9TK1W7R0)

#### 2. Force-Field Analysis

This tool looks beyond actors to identify the different forces influencing a particular issue. Specifically, it seeks to identify the pressures for and against a proposed change in policy, or a proposed new project, programme or service. The required data comes from interviews, literature reviews and stakeholder workshops. This tool is particularly useful
before a project to determine whether or not the initiative is in fact feasible. If the analysis indicates the “forces for change” are many, our odds of success are high; conversely, if the balance favours those that are opposed to any change, it is perhaps advisable to reconsider our objectives – or commit ourselves to long and indepth advocacy work. Once the project is underway, this technique can help improve our chances of success by understanding who our supporters and opponents are likely to be.

Steps to undertaking a Force-Field Analysis

• in graphical format, place the plan, project or proposed change in the middle
• on either side list the forces for and against the change
• assign a numerical score for each force. 1 = weak, 5 = strong

<table>
<thead>
<tr>
<th>Forces for Change</th>
<th>Forces against Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Demand for synthesized products, access to databases</td>
<td>Too expensive</td>
</tr>
<tr>
<td>Evidence moving, informing the health system</td>
<td>Too difficult</td>
</tr>
<tr>
<td>Greater volume of relevant, user-friendly information</td>
<td>Environment too politicized for another actor</td>
</tr>
<tr>
<td>Economy of scale: centralized functions, expertise = greater production</td>
<td>Not enough qualified staff</td>
</tr>
</tbody>
</table>

Plan: Create a Knowledge Translation Institute

Total: 15

Total: 13


Further Resources

- The Mind Tools website provides a good overview of the tool and provides a free worksheet to assist you in carrying out your own analysis. See “Force Field Analysis: Understanding the Pressures For and Against Change,” available at: http://www.mindtools.com/pages/article/newTED_06.htm
- The Eureka Program of the Ohio Literacy Resource Center provides a concise 2-page brief on the topic. Available at: http://literacy.kent.edu/eureka/strategies/force_field_analysis.pdf


### 3. Policy Network Mapping

This can be quite useful in bypassing unimportant or less relevant actors and focusing on those who are really concerned by, or can influence, our projects and proposals. Like Stakeholder Analysis, Policy Network Mapping can help us in mapping the relationships between ourselves – and members of our team – and individuals who wield political influence.

![Policy Network Map: HIV/AIDS in M-----](chart)


**Elements to consider include:**

- What are the different points through which a project or policy passes to become approved and implemented?
- Who are the actors in charge of each step?
• How can officials gain access to these actors?
• Are there other actors – not officially part of the process – who have substantial influence over those who decide?
• In which ways can officials exercise influence over this process? Do they have particular skills or contacts that might help in this process?

As in our discussion of the muddy decision-making process around complex, multi-actor issues such as HIV/AIDS, a policy network can sketch out relationships between players, while also showing elements like degrees of access and lines of authority. This allows us to see how our advocacy or evidence may need to move in order to achieve the desired influence.

Further Resources

4. Influence Mapping
This tool, also known as Stakeholder Influence Mapping, Power Mapping or Arena of Influence, identifies “the individuals and groups with the power to effect a key decision.” It also helps to investigate “the position and motive of each player and the best channels to communicate with them.”

Influence Mapping is particularly useful in differentiating between decision-makers and those who can influence them (e.g. opinion leaders). The influencers are often more accessible, opening a channel to those who are not.

III. The Policy Cycle and Policy-Making Theories: An Overview

Many different scholars have studied the policy-making cycle, hoping to understand its functionings in order to have a firmer grasp on how to influence the process. While it is important to recognize that policy making does not perfectly comply with the models that have been developed to explain it, such models are nonetheless useful in separating the process into different stages and understanding the influences that act upon each stage. For simplicity, five main stages are identified and discussed below. More discussion on this issue (including the role of evidence within the policy cycle) can be found in Chapter Two.

The policy making process

Separating the decision-making process into component parts can better target our attempts to influence policy. The hour-glass figure is used here to illustrate the potential degree of influence that we might have on each stage, from greatest at the agenda-setting and evaluation stages to least at the policy formulation stage. While many stakeholders are involved in and can influence the agenda-setting stage, only a select group are usually involved in policy formulation. This is not to say that researchers do not have a potential...
role to play at each one of these stages, merely that we should be aware of the challenges involved in doing so.

1. **Agenda-setting**
Not all problems will successfully catch the attention of decision-makers. The importance of properly presenting information to convince them that our ideas and our proposals warrant immediate consideration cannot be overstated. As control of the agenda wields tremendous power over eventual policy outcomes, governments will often command what is placed on the agenda. As a result, the general public or individuals frequently have little influence over the decision-making process, unless they are highly organized into cause groups, lobby groups, networks, etc., which can indeed play a significant role in placing issues on the agenda – if they play their cards right. The media can be a very useful tool to publicize an issue, rally larger public support, and effectively put pressure on government.

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**Tobacco legislation in Thailand**

In the 1990s, the Folk Doctor Foundation and the Thailand Health Research Institute (THRI) were successful in bringing forward an antismoking policy that led to an increase in the tobacco excise tax. Scientifically, they based their efforts on a study which showed that, in light of the price elasticity of tobacco consumption, a tax increase of 8% – around US$0.10 per cigarette – would dissuade a significant number of teenagers (320,000) from smoking. The research alone, however, would not have sufficed if the two organizations hadn't shared it widely with NGOs and the media as well as professional medical organizations that came on board with the campaign and lobbied the government. As such, “this case study illustrates that even stakeholders with low political power (here: the THRI and the Folk Doctor Association) can influence the policy-making process by sending the data to stronger stakeholders (here: the media, NGOs, professional organizations).”

---

Typical tools that can be used to raise the profile of a given issue include public education and outreach, media campaigns, coalition building, and stakeholder meetings.

2. Identification of Alternatives and Policy Formulation

Decision-makers typically examine a variety of possible solutions before selecting one, leading either to the formulation of a new policy or, more often, the amendment of an existing one. According to a purely rational model of decision-making, actors are expected to identify alternatives, gather information on each, analyze this information against a predefined set of criteria, and select the most efficient and effective option (for more on this, see Chapter Two). However, decision-making processes are rarely so straightforward and a variety of factors can interfere with this idealized model. These include time-constraints, the personal interests of decision-makers, lobby-group pressures, the introduction of “colloquial evidence,” and more. Decision-makers might not always consider all the possible options or weigh all the information provided to them.

Notwithstanding these obstacles, researchers can play a pivotal role in pushing a preferred solution forward, especially in helping decision-makers understand and use very specialized knowledge. Among other things, this requires packaging the right information in the right format (for more on ways in which to best communicate our research findings, please refer to Chapters Six, Seven, Eight and Nine of this toolkit).
3. Policy Implementation
Policy is only as effective as its implementation. As Anderson (1972) explains, the administrative bodies charged with implementation typically “constitute a governmental habitat in which expertise finds a wealth of opportunity to exert itself and influence policy…Technical considerations and professional advice play an important part in most administrative decision making.” Specifically, as experts we can assist administrative agents in setting standards and criteria that will be used to increase the chances of policy implementation. In addition, regulatory and issue advocacy as well as litigation can be used to ensure that what is implemented complies with the policy decision that was made in the previous stage.

Beyond policy formulation
Having studied DDT and its applications at length, Dr. Bight and his team were well aware of the technical resources and expertise needed for any indoor spraying program. They knew that unless the policy was coupled with the training and hiring of staff, the purchase of the proper equipment, the proper financial resources, good management, and more, any new malaria-control policy would be ineffective.

As experts in their field, they therefore offered their advisory services to the government to help them implement the program. They worked closely with officials within the Ministry of Health and supervised the hiring and training of technicians as well as ensuring that all understood the local context. Finally, Dr. Bight and his team monitored the implementation of the program throughout its first-year to ensure it was successful and to attend to any problems or unfolding considerations.

4. Monitoring & Evaluation
Once a policy has been implemented, monitoring and evaluation can determine its effectiveness and capture the lessons learned that will inform future policy decisions and their implementation. Research is highly useful in evaluating the extent to which the policy has attained its objectives and whether the desired outcomes were reached. Researchers further benefit from a certain degree of autonomy from decision-makers, allowing an objective assessment of the degree of success or failure of a given policy. For
an indepth discussion of different M&E techniques, please refer to the M&E Frequently Asked Questions, an annex to Chapter Five of this Toolkit.

\begin{center}
\textbf{Mapping the policy context in Zambia}
\end{center}

As discussed throughout this chapter, often a number of different steps are required to get a full sense of the context. Sometimes, more ad hoc and informal methods can be quite useful. In Zambia, for example, a group of researchers and practitioners — under the coordination of the Zambia Forum for Health Research (ZAMFOHR) — recently conducted a number of context mapping exercises to better understand the overall context of health research, specifically focusing on who was producing it, and how it had or had not been utilized. Several documents were commissioned to explore specific research, policy and political dynamics, including: who is researching what? Who is funding what? How does research move to the policy arena? Who are the key actors within that arena? And, how could a Knowledge Translation Institute such as ZAMFOHR help to fill the gaps separating knowledge production, management, translation and utilization?

Today, these documents are available as a resource to any interested party, and are specifically targeted at Zambian researchers who are carrying out, or are planning to carry out, research in the country.

For more information on the mapping exercise and on ZAMFOHR, visit: www.zamfohr.org

\begin{center}
\textbf{Comments? Questions? Criticisms?}
\end{center}

Email the Research Matters Programme Officers:
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Research Matters (RM) is a collaboration of the International Development Research Centre (IDRC) and the Swiss Agency for Development and Cooperation (SDC). RM was launched in 2003 to examine and enhance the specific KT dynamics within the field of health systems research. From these founding connections with both a research funder and a bilateral donor, RM has occupied a unique vantage among health researchers and research-users. By working directly with both the producers of research and with its consumers, RM has developed a range of activities and modalities designed to hasten the movement of research results to the policy arena, to database and access those results, to communicate them, and to expand an appreciation of research itself. RM builds capacity among researchers to perform their own KT; RM responds to the priorities of major research-users; and RM actively brokers both research results and research processes. As an active, ground-level embodiment of KT, RM has helped to shape how health research is demanded, created, supplied, and ultimately used.
Endnotes


8 Adapted from “Notes on how to do a stakeholder analysis”.


Table of Contents

I. Key Concepts 2
  The Learning Organization 3

II. Evaluative Thinking Tools 4
  1. Most Significant Change 4
  2. Appreciative Inquiry 6
  3. After-Action Review 7
  4. Horizontal Evaluation 8
  5. Impact Logs 9
  6. Formal Surveys 9
  7. Rapid Appraisal Methods 10
  8. Performance Indicators 12

III. Creating an ET Strategy 12
  1. The Self-Assessment Survey and Fora 13
  2. Progress Review 14
  3. Supportive ET Environment 16
  4. Budget 17

IV. Institutionalizing Evaluative Thinking 18

Evaluative Thinking

We are all familiar with the concept of evaluation. We use it to assess the performance of a project or a person at the end of a task. We ask: what was done? How did we do it? How might we assess and reflect upon the results? Evaluations systematically collect and analyze information with the goal of enhancing knowledge about performance. They ask and answer questions with the aim of creating ultimately useful information.

Evaluative thinking (ET), on the other hand, is a means of thinking, of viewing the world, an ongoing process of questioning, reflecting, learning and modifying. What are we learning and how can we use those lessons to improve our performance? Both the lesson and the act of learning are at the heart of ET: learn to extend what’s working well and learn to fix what’s working poorly.

Evaluative thinking is an inherently reflective process, a means of resolving the “creative tension” between our current and desired levels of performance. It allows us to define the lessons we want to learn, to determine the means for capturing those lessons, and to design systems to apply them in improving our performance. By going beyond the more time- and activity-bound processes of monitoring and evaluation (M&E), ET is learning for change. It is learning to inform and shape action.
In this chapter, we'll examine the theory behind ET, discuss practical ET tools, and conclude with four suggestions for developing effective ET strategies. A full annex to this chapter on M&E (in a Frequently Asked Questions format) follows.

I. Key Concepts

As the above triangles show, learning unites creating with managing. Each stage within the triangles, from planning to re-imagining, progressively informs the next through an open ethos of adapting and improving. The more we cycle through these stages, the more experienced and attuned our actions become. Learning is at both the heart of the diagram and our every activity, be it running a research project or a large institution: an ability to recognize failure and success allows us to take steps to correct, modify or amplify our actions. Learning allows for mid-course correction, in the understanding that goals will shift as activities progress and knowledge deepens. We learn more from failure than from success: for any individual or organization, the only failure is not to learn.\(^3\)

ET, like Patton’s (2006) concept of “developmental evaluation,” aims to create context-specific knowledge to shape our work. ET:

- creates “feedback loops” that inform, energize and modify our current direction;
- allows goals to evolve and emerge;
- infuses the spirit of evaluation – reflection, learning, change – into everything we do.\(^4\)
In Roper and Pettit’s (2002) useful conception, learning – particularly at an organizational level – can be divided into three different types of loops. “Single-loop learning” works to identify and correct inefficiencies, while “double-loop learning” involves a routine testing of assumptions and a reimagining of core strategy. “Triple-loop learning,” on the other hand, asks individuals to question and probe the organization’s very core, casting an introspective eye on its vision, mission and guiding fictions.

The Learning Organization

Often seen as the principal actor embracing ET is the “learning organization”. Agarwal (2005) has defined a learning organization (LO) as any organization dedicated to generating lessons and then using these new insights to modify core operations. LOs are entities that create learning environments for the purpose of continuous transformation. Senge (1990, 2006) adds that LOs nurture new ways of thinking among its staff, “where people are continually learning to see the whole together”. An LO creates and supports robust learning systems that align core with evolving goals.

To Agarwal (2005), the five key activities of an LO include:

- **systematic problem solving**: thinking with systems theory; insisting on data rather than assumptions; using statistical tools.
- **experimentation with new approaches**: ensuring a steady flow of new ideas; providing incentives for risk taking; undertaking demonstration projects.
- **learning from its own experiences and past history**: recognizing the value of productive failure instead of unproductive success.
- **learning from the experiences and best practices of others**: borrowing enthusiastically.
- **transferring knowledge quickly and efficiently throughout the organization**: emphasizing reports; tours; personnel rotation programmes; and training programmes.

In sum, LOs provide continuous learning opportunities for all staff; link individual performance with organized performance; foster an atmosphere of inquiry and creativity, making it safe for staff to share openly and to take risks; and embrace Davidson’s spirit of “creative tension”. They are a web of “feedback loops” – mechanisms that ensure a
continual process of feedback on inputs, actions and outputs. To Roper and Pettit (2002), LOs also have a “flatter organizational structure,” that works to nurture “the leadership potential in all staff” and strives for “closer connection with and greater accountability to clients, better internal communication, [and] the efficacy of teamwork”.10

“How many of us work in organizations where we are rewarded for reflecting on our work, for reading and listening to what others have to say, for systematizing and sharing our experiences so others can critique our work, both within our institutions and in the broader development community?”


Further Resources

II. Evaluative Thinking Tools

Many of the excellent tools to encourage and solidify ET practice borrow from M&E and can be used on a daily basis. Below we discuss a range of these tools, some quantitative, most qualitative. Our concluding section will discuss ways of blending some of them together into an effective and comprehensive ET strategy.

How do we become evaluative thinkers? How do we make the ET abstract a reality? In this section, we’ll review and discuss:

• Most Significant Change
• Appreciative Inquiry
• After Action Review
• Horizontal Evaluation
• Impact Logs
• Formal Surveys
• Rapid Appraisal Methods
• Performance Indicators

1. Most Significant Change

This is one of the pre-eminent approaches to learning at an organizational, project and individual level. Its simplicity is its strength: most significant change (MSC) asks stakeholders to reflect upon the past and describe the strongest aspects of change or impact – “who did what, when and why – and the reasons why the event was important”.11 Stakeholders can then read these stories aloud, and discuss the value of the reported changes; an expert “panel” can also select the most significant change stories for group discussion.

As Davies and Dart (2005) explain, without using formal or pre-defined indicators, MSC focuses on monitoring intermediate impact and outcomes. It is especially useful at
capturing the ever-changing trends and impacts of projects and programmes, and shows concrete changes in specific time-frames. While MSC stories can certainly be used as a public relations tool – positive testimonials, for instance – they are particularly useful at giving an organization’s staff a fuller sense of the impact and influence their work has had, and often in the words of non-professionals. Best of all, MSC requires no special skills to be done effectively.

1. As a result of your work over the past year, what was the most significant change you observed?
2. As we look at all these stories of most significant change, which do we think is the most significant of all?

A “full” implementation of MSC typically involves ten steps:

1. **Raising interest:** explaining to stakeholders what MSC is and how it can be useful.
2. **Defining the domains of change and reporting period:** what kinds of “change” are we interested in? Over weeks, months, years?
3. **Defining the stakeholders to write MSCs:** will they be internal, external, and/or those who receive the organization’s services or intervention?
4. **Collecting MSC stories:** giving stakeholders the key question we want answered, and collecting hard copies or other forms (email, audio interviews, video…)
5. **Selecting the most significant stories:** this is not always done, but they can be filtered up within an organization, reviewed and collated.
6. **Feeding back the results of the selection process:** criteria selecting stories is recorded and fed back to the stakeholders to refine the MSC selection process over time. As Davies and Dart (2005) put it, “The organization is effectively recording and adjusting the direction of its attention – and the criteria it uses for valuing the events it sees there”.
7. **Verification of stories:** to check on the veracity of stories, and to gather further information, especially on those stories deemed particularly significant.
8. **Quantification:** can we quantify the extent of MSC in various locations over time?
9. **Secondary analysis and meta-monitoring:** who participated in the exercise and did that affect the results? What types of changes were reported?
10. **Revising the system:** in true ET fashion, how can we use our lessons learned to modify the MSC process itself for future use?

Some may wish to discard some of the more rigorous aspects of MSC and simply initiate the process of story-telling that underlies MSC. By focusing on learning – as opposed to accountability – MSC allows us to take a superb snapshot of our actions. What changes have they effected? Were these positive? How could these changes be amplified or modified for the future?

**Further Resources**

- Davies R and Dart J. 2005. “The Most Significant Change (MSC) Technique: A Guide to its Use”. Available at: [www.mande.co.uk/docs/MSCGuide.htm](http://www.mande.co.uk/docs/MSCGuide.htm). This is the definitive place to start.
- The news group website [http://groups.yahoo.com/group/MostSignificantChanges/](http://groups.yahoo.com/group/MostSignificantChanges/) has an excellent repository of groups around the world that have implemented MSC approaches.
- For more on storytelling as a knowledge management tool, please see Chapter Three.
2. Appreciative Inquiry

Much like MSC, Appreciative Inquiry (AI) looks to past performance and uses storytelling to capture and deliver key moments. With a slightly different spin than MSC, AI asks stakeholders to remember a time when the project, programme or organization was at its best. When were people most proud to be part of the work? What made that highpoint even possible? What would the organization look like if that high point were an every-day event?\textsuperscript{15}

AI is an ET technique that, in addition to capturing lessons, is an excellent motivator: if we can understand the conditions and context of a previous excellent performance, not only can we replicate it, we can \textit{institutionalize} it. With this kind of mindset, we can effectively shift perceptions from one that dwells on problems to one that chases excellence. AI’s addition to the suite of ET tools is a movement past the maxim that we only learn from studying past failures. AI declares that we can also prosper by understanding the roots of prior success and letting them grow into our everyday reality. AI reveals the conditions, context and factors crucial to success, and allows stakeholders to imagine how those elements can be further nurtured and implemented.\textsuperscript{16}

AI is typically broken into five stages, and is often done in a combination of small groups and a plenary session:

1. \textbf{Definition}: what will we focus on and who will we involve? How can we reframe problem statements as desired outcomes? How can we then work to operationalize these desired outcomes? As Acosta and Douthwaite (2005) phrase it, “asking questions begins a process of change, so it is important to get the questions right”.

\begin{quote}
\textbf{Appreciative Inquiry: the Definition Stage}

\textbf{Problem statement:} there is too much conflict among staff members.

\textbf{Desired state:} a sense of shared purpose and support among staff.

\textbf{Inquiry topics to pursue:} a time of compelling/unifying purpose; a time of strong team performance and support systems.

\end{quote}

2. \textbf{Discovery}: staff conduct interviews comprising four open-ended questions that will capture highpoint experiences – when the project/programme/organization was at its best. The emphasis here is on stories more than opinions, as these provide better detail around the context, circumstances, participants, and outcomes. Common themes and insights can be shared among interviewers and with all stakeholders.

3. \textbf{Dream}: what if those highpoint experiences were to become an everyday reality? What would we be doing differently?

4. \textbf{Design}: what steps do we need to take to make that dream come true? How should we change our vision? structure? leadership? systems?
5. Destiny: how do we start implementing those steps? Some AI users have assembled an “implementation team” charged with an organization’s AI strategy and approach, in some cases taking groups through the discovery-dream-design phases over and over until the destiny phase has clear and achievable steps and milestones.

Further Resources

- Acosta and Douthwaite (2005) at www.cgiar-ilac.org/downloads/Briefs/Brief6Proof2.pdf is an excellent place to start.
- Appreciate Inquiry Commons (AI Central): http://appreciativeinquiry.cwru.edu has a number of good stories around implementing the AI technique

3. After-Action Review

Originally designed and developed by the U.S. military, the After Action Review (AAR) is a flexible approach for assessing a past event, project or process. As an open and participatory process, an AAR helps us understand “what happened, why it happened, and how it can be done better”. Group discussion gives a comprehensive snapshot of the many technical and human factors at play, resulting in a set of key lessons learned. These lessons can identify failures, with the group discussing ways to modify or improve sub-standard performance; they can also highlight successes, with the group making recommendations on how to sustain or expand upon them.

An AAR brings teams together in a spirit of evaluative thinking. By working to promote accountability – of individuals and the organization – an AAR brings events into an organization’s “learning cycle,” providing evidence and experience for modifying future practice and goals. As USAID (2006) summarizes, an AAR tends to provide:

- candid insights into specific strengths and weaknesses from various perspectives;
- feedback and insight critical to improved performance; and
- details often lacking in evaluation reports alone.

In general, there are two types of AAR. One is formal – typically with a facilitator and strong logistical support – and the other informal – usually occurring on the same day as the event or program under review. Each type tends to answer four different sets of questions: what was planned? what really happened? why did it happen? and what can we do better next time? Subjects discussed can include technical performance, techniques, communications, lessons learned, roles and responsibilities, organizational issues, stress impacts, and so on.
4. Horizontal Evaluation

This ET tool takes the spirit of “linkage and exchange” to heart and can be a superb learning tool. As opposed to the more traditional approach of hiring evaluation experts to conduct an external evaluation, horizontal evaluation (HE) is based upon a peer visit. In HE, we will invite selected colleagues to contribute towards our self-assessment both as experts and as like-minded peers familiar with the context and terrain. They will likely have very informed opinions, and may have an additional motivation for participating – taking this learning and reflection back to their own organization.21

While this is an extremely adaptable ET method, the experience of ILAC (2006) has found a participatory workshop essential to an HE’s success. This workshop is usually three days in duration, with an equal mix of local participants and visitors. The local participants typically present their experience on a particular project, with the visitors providing some critical assessments, as well as observations from their own context. As Thiele et al (2006) explain, the workshop should be professionally facilitated, with Day One dedicated to discussing the project’s methodology as well as suitable criteria for evaluating its progress. Day Two usually comprises field visits, where visitors can see the methodology in action and discuss its progress with staff and participants. Day Three sees plenary discussion and an identification of strengths, weaknesses, and the creation of a roadmap to implement possible changes arising from the HE findings.22
Critical advantages of HE over more traditional external evaluations include: adaptability; enhanced learning opportunities in a fluid but tightly structured environment; the ability to receive feedback from peers as opposed to external experts; and it can be used with more formal M&E systems.

**Further Resources**

5. **Impact Logs**
An Impact Log is, as Hovland (2007) explains, a simple and informal record of impacts or influence that a project or organization has had. “Impacts” and “influence” can be self-defined, or may be markers or indicators in a formal M&E design. The log itself can comprise stakeholder feedback; a list of media references (articles, Internet, TV, emails); anecdotes; speeches citing our work, and so on. This is qualitative and non-systematic, but at the same time it can be an excellent way to gauge where we are, what we’re doing well, and what we might do better. “The cumulative effect,” as Hovland (2007) states, “can be valuable in assessing where and how the project or programme is triggering the most direct responses, and in informing future choices”.

For an organization running several different projects, an impact log can be a powerful (yet inexpensive and skill-light) way to chart which of its projects is commanding the most attention, and if other ET tools might be used to better nuance existing perceptions and important lessons.

We could also incorporate the principles of citation analysis into our Impact Log, as both work to gauge the popularity of specific outputs. Much like libraries use citation analyses to determine what they should buy, discontinue or discard, we can use a citation analysis to gauge not only our achievements but also those of other like-minded projects, programmes and organizations. An “expanded” form of citation measurement can combine academic analysis (eg peer-reviewed papers) with new measurements, such as those listed below. Both impact logs and citation analyses could regularly trawl and track the following sources:

- Government policy documents.
- Operational guidelines issued by government bodies, professional associations or NGOs.
- Training manuals and textbooks.
- Newspaper articles.
- Websites.

**Further Resources**

6. **Formal Surveys**
Formal surveys are a useful tool for collecting data when we require information from a large number of people. We might use this to learn about the influence and reach of our...
projects and programmes, and as a review of how effective our ET practices have been from an external perspective. With a formal survey, we should carefully and purposefully select a sample of people that could provide us with the type of information we need. This might involve targeting stakeholders directly affected by our activities, and it might also mean sending it to a control group that was not affected by our project activities. It might involve targeting those specific individuals that we identified as potentially benefiting from our work. We can distribute a formal survey at any point in an activity cycle, so long as we have a clear idea of how we will code the data and ultimately use it.

Surveys use either open-ended or closed-ended (e.g., multiple-choice) questions. In the case of the former, respondents may answer in a “free flowing narrative form.” Using this type of question has the advantage of allowing us to gather unexpected information. However, analysis of the data is much more time-consuming and the codification of the results more complicated. Closed-ended questions, on the other hand, ask respondents to select from a range of answers that we’ve composed when designing the survey. The analysis of such data is simpler, but we run the risk of missing some key information by having overlooked particular answers.

Further Resources
- Survey Monkey: at www.surveymonkey.com allows anyone to create professional online surveys, both free and, with more features, for a fee.
- Zoomerang: at www.zoomerang.com allows users to create online surveys. Also free and for a fee.

7. Rapid Appraisal Methods
Rapid Appraisal Methods are quick, simple and low-cost ways of gathering information that we can then convert into snapshots and lessons. They can provide crucial data letting us draw lessons from particular experiences; while ideally our specific ET activities fall into an existing ET strategy, Rapid Appraisal Methods recognize that we can still learn from the unexpected or unplanned-for. These methods often require fewer skills than more formal tools, and take less time – helpful when we need information as quickly as possible. The choice of method depends on: specific objectives; the subject matter under discussion; and available personnel, time and funding. We may also use different tools for a rapid appraisal – we could voice record an interview, for instance, and later produce a radio spot or podcast, or just use the quotations in a synthesis report.

Key informant interviews
Key informants are selected for their particular experience and knowledge – especially useful when time, funding, and/or personnel are limited, and in-depth information is required about a small number of topics (which may be sensitive). They only yield qualitative data and are susceptible to bias, on the part of both the informant and the interviewer.
Depending on the size of our project, we will select somewhere between 15 and 35 such individuals and conduct qualitative, in-depth and semi-structured interviews – a “conversation” between the informant and the evaluator when ideas and information are allowed to flow freely. Topic lists or open-ended questions typically guide the interview process.

Further Resources


Focus groups

A group of eight to twelve people with similar backgrounds and characteristics are selected and collectively ‘interviewed’ in a setting where they are expected to freely exchange ideas, issues and experiences. These groups typically have a facilitator, who keeps the dialogue going with a prepared discussion guide. As focus groups take place within a social context, “the technique inherently allows observation of group dynamics, discussion, and first-hand insights into the respondents’ behaviors, attitudes, language, etc.”

Like key-informant interviews, focus groups only deliver qualitative data and are susceptible to bias. Another challenge for the facilitator is to ensure that one or two individuals do not dominate the conversation.

Further Resources


Community group interviews

These also take place in a group setting, but use a prepared questionnaire. In addition, the discussion primarily takes place between the participants and the interviewer, as opposed to between the participants themselves. The interview takes place in a public meeting and is typically open to all interested participants. It is particularly useful when attempting to gather data about community needs, concerns and perceptions, and to gauge the project’s progress and impact.

Direct observations

With a detailed check-list in hand, an observer (e.g. a consultant) visits a project site to collect (by observing and listening to) information about ongoing activities, processes, social interactions, and observable results. This method allows for a better understanding of the context within which the project is evolving. In addition, it allows the observer “to learn about issues the participants or staff may be unaware of or that they are unwilling or unable to discuss candidly in an interview or focus group.”

Further Resources
Mini-surveys
While these serve similar purposes as formal surveys, mini-surveys are much shorter in terms of the number of questions being asked, and they only make use of multiple-choice questions. In addition, they are usually administered to no more than 50 to 75 individuals, selected either purposely or randomly. The major difference between this and other rapid appraisal methods is that it renders quantitative data. It also has the advantage of allowing us to collect and analyze information within a select period of days.

Further Resources

8. Performance Indicators
These indicators measure quantitative performance and focus on tangible results; they can be used to assess progress against predetermined benchmarks. Performance indicators can sometimes be framed against objectives that are SMART (Specific, Measurable, Achievable, Realistic, Time-bound), though others prefer objectives that are results-oriented, reasonable, and verifiable. If, for example, we are assessing the effectiveness of introducing ITNs in a particular community, a 10% yearly reduction in under-five mortality rates for the next three years could be identified as a performance indicator.

In most cases, performance indicators are derived from the goals and targets of the project itself. In some cases, however, projects “may be assessed against policy-level goals and principles, or they may be evaluated against standards derived from comparisons with similar interventions elsewhere or from models of best practice.”27

Further Resources

III. Creating an ET Strategy
There are many different ET tools, and many ways to blend them together. Unfortunately, there is no magic ET bullet: every organization, project and individual will need to spend time thinking about what ET can and cannot do in any particular context. Before we begin sketching out an ET strategy, let’s review some core ideas:
the purpose of integrating ET into our daily activities is to learn and adapt. That is the end goal, and we need to find the structures and processes that will create this type of “evolving” environment.

An ET strategy must incorporate the voice of the stakeholders we serve. How can they participate in our feedback loops?

If an M&E framework exists, ET practices must borrow from it, add to it, “repurpose” some of the M&E funds, and impose ET inputs and logic.

Time and resources must be available for ET.

Organizational policies to create and sustain an ET environment must be identified. They could include policies around staff development (training needs), executing ET and M&E practices, and creating flexible and responsive technology environments.

once we have an ET strategy – a document or report spelling out our approach – stakeholders and donors (if relevant) should get a copy and comment on it.

Four ET Strategies

1. The Self-Assessment Survey and Fora
Any attempt to institutionalize ET should ideally start with a self-assessment. Where are we, what lessons are important to us, and how can we use those lessons to shape our actions? One easy method for organizations to self-assess is through the Bruner Foundation’s ET Self-Assessment Tool:

Excerpts from the Bruner Foundation Evaluative Thinking Self-Assessment Tool

| Note: “Assessment” = 1 if the indicator is present, 0 if not. A high score indicates strong ET practice. “Priority” = High, Medium or Low. This is a qualitative measure of the weight placed on select indicators and need not always be filled in. |
|---|---|---|
| I. Organization Mission | Assessment | Priority |
| a. The mission statement is reviewed and revised on a scheduled basis with input from key stakeholders as appropriate | 0 | High |
| b. The organization regularly assesses compatibility between programs and mission | 1 | |
| c. The organization acts on the findings of compatibility assessments (e.g., if a program is not compatible with the mission, it is changed or discontinued) | 0 | Low |
Excerpts from the Bruner Foundation Evaluative Thinking Self-Assessment Tool

<table>
<thead>
<tr>
<th>2. Finance</th>
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</thead>
<tbody>
<tr>
<td>a. Financial status of organization is assessed regularly (at least quarterly) by board and leadership</td>
</tr>
<tr>
<td>b. The organization has established a plan identifying actions to take in the event of a reduction or loss in funding</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. Leadership</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Executive leaders support and value program evaluation and ET</td>
</tr>
<tr>
<td>b. Executive leaders use evaluation findings in decision-making for the organization</td>
</tr>
<tr>
<td>c. Executive leaders motivate staff to regularly use specific evaluation strategies</td>
</tr>
<tr>
<td>d. Executive leaders foster use of technology to support evaluation and ET</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4. Human Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Organization has an established personnel performance review process</td>
</tr>
<tr>
<td>b. The organization uses results of data collected regarding staff credentials, training and cultural competencies to recruit, hire and train culturally competent staff</td>
</tr>
<tr>
<td>c. Results of staff satisfaction surveys are used to inform modification of policies and procedures at the agency</td>
</tr>
</tbody>
</table>


Following the administration of this tool, we could convene an organization- or project-wide forum to discuss the results and design practical ways for further incorporating or developing ET tools – both on an internal and a programmatic level. We may wish to turn this forum into a “safe harbour” meeting whereby there will be no attributions given to any comments, and no official record or transcript (for more on safe harbours, see Chapter Two).

Further Resources
• See also their spreadsheet version of the Evaluative Thinking Assessment Tool at http://brunerfoundation.org/ei/docs/evaluativethinking.assessment.v4.xls

2. Progress Review
One very common ET approach is to hire an outsider (e.g. a consultant) with strong M&E or ET experience to conduct a progress review. Outsiders are particularly well-suited as they carry no inherent bias and can be both objective and outspoken (and additionally are not dependent on the organization for job security). Such a task need not have the rigour of an external evaluation; after all, its purpose is not to evaluate. Its
fundamental purpose is to find vital lessons, analyze them, and determine how the organization might use them to modify existing practices. The outsider may also help an organization understand its learning environment: what organizational practices are necessary for the continued definition, creation, analysis and utilization of its lessons?

This approach may see outsiders conducting *key-informant interviews* (with staff and stakeholders), using some *direct observation* techniques, reviewing *impact logs*, reviewing and assessing any previous M&E reports or frameworks, and reading project reports and other documents. The consultant may wish to conduct a *Most Significant Change* workshop or an *Appreciative Inquiry* to get a more nuanced sense of where a project or organization has been and where it wants to go. As most projects have specific and important events during their life cycle, a consultant may be hired on a long-term retainer to capture the lessons of those particular events. For instance, if a project has two scheduled “all-stakeholder” meetings per year, then a consultant may attend those meetings and then conduct an *after-action review*, a *most significant change* analysis, or *key-informant interviews* to dissect the key events that have happened since the last meeting.

This strategy does, however, have some built-in and significant shortcomings. Consultants may leave a project before its completion, and their knowledge may be lost. Secondly, all too often a consultancy ends with a thick and unfriendly Progress Report, which few see and even fewer understand. In true ET spirit, we should see this type of externally-driven activity as an opportunity to:

- **create action-oriented learning documents.** We don’t want a final progress report. We want an action-oriented document or list that details what key lessons are emerging, how we might respond to those lessons, and possible steps for incorporating them into our overall approach and every-day activities. The emphasis here is obviously on action and thus the consultant must become very familiar with our staff and our *modus operandi* to diagnose how our actions might be modified or improved. This is an on-going treatment, not a post-mortem.

- **create a synthesis paper outlining our progress, lessons, achievements and shortcomings.** This can be used as a public relations or communications tool; can be framed by a theoretical analysis and thus peer-reviewed and published; and of course can be seen as a “snapshot,” with further syntheses adding more snapshots that can ultimately be collated into a dynamic album that reflects our year-by-year progress. Let us not discount the value of having strong, analytical documents in hand that we can disseminate to our core stakeholders. Such analyses are particularly attractive to donors, and may assist fundraising efforts down the road.

- **conduct a horizontal evaluation to feed into the consultant’s analysis.** Projects and organizations do not happen in a vacuum, and the greater our perspective (especially in understanding our achievements next to those of a like-minded organization) the better we can understand what we do well and what we must improve. The consultant may be able to convert his/her outsider status into that of a facilitator for the horizontal evaluation.

- **show our commitment to capacity building.** Let’s assign someone from the organization to shadow the consultant and learn from his/her techniques and approaches.

Hiring a consultant demands due diligence. What kind of experience do they have in M&E or ET? Have they worked with us or a like-minded institution before? Do they understand exactly *what we want*? Do they have a strong substantive knowledge of the work our organization does? And perhaps most importantly, does their personal style fit
our organization’s? As we would with an external evaluator, we’ll obviously need to discuss with them the kinds of criteria, questions and logic we want to see underpinning their analysis, as well as timelines, deliverables and fees. Never assume that a consultant knows what we want: let’s spell it out as clearly and as loudly as we can. A task-specific budget with good notes specifying a breakdown of time, travel and other direct/indirect costs can help to clarify expectations and roles.

This type of progress review need not be conducted by an outsider. While an external consultant does confer strong advantages, such work can be assigned internally. This is clearly a delicate assignment and the person must be chosen with care as, in Patton’s (1997) words, “it takes clear conviction, subtle diplomacy, and an astute understanding of how to help superiors appreciate evaluation”.

3. Supportive ET Environment

Connected to the results of our self-assessment test are some changes that will ideally foster deeper ET practice at the individual, project and organizational level.

The first is a commitment to capacity strengthening. What do we need to become effective ETers? What kinds of workshops, fora and training courses can we implement that will institutionalize ET practices? Second, ET practices themselves are good opportunities for building strengthening not only within our organization or project but also among our key stakeholders. As Patton (1999) remarks, “training stakeholders in evaluation methods and processes attends to both short-term and long-term evaluation uses. Making decision-makers more sophisticated about evaluation can contribute to greater use of evaluation over time”.

Third is the creation of a supportive technology environment. For the Bruner Foundation (2005), this represents the degree to which a project or organization asks routine questions about how hardware and software contribute to effectiveness, conducts regular surveys to ensure the supportiveness of technology systems, and of course acts upon its collected data. Flowing from this is a Technology System Assessment Tool, which is another good way of understanding exactly how technology contributes to an organization’s core goals and to its ET approaches. Technology is so often misunderstood – organizations tend to overvalue and overemphasize it, while at the same time failing to recruit the requisite skillbase to use it well.

For their Technology System Assessment Tool, please see:
http://www.brunerfoundation.org/ei/sub_page.php?page=tools
4. Budget

Lastly, and importantly, we need to keep in mind that ET has a cost, in terms of time, finances, and human resources. When it comes to finances, some ideas include:

- submitting project proposals with a section on ET (e.g., how we propose to implement ET activities within a particular project). We must be sure to have the expenses for this well spelled-out in our budget. Instead of guessing or applying a specific percentage to ET, let’s be as specific as possible. If we want to hire a consultant to conduct a progress review, let’s imagine specific costs for creation of a synthesis document, a horizontal evaluation, and key-informant interviews, budgeting not only for the consultant’s time and expenses, but for those particular activities as well.
design and submit a project purely on ET. Many donors do have budgetary envelopes exclusively for evaluation or capacity strengthening, which could obviously be disbursed to a deserving and well-elaborated ET strategy.

IV. Institutionalizing Evaluative Thinking

ET is still very much in its conceptual infancy. Many individuals, projects and organizations have created and operated in strong ET environments for years, and there is much to be learned from ET experiences around the world: ET not only fosters learning, but absorbs it too. Learning, after all, is at the heart of evaluative thinking. An ET strategy does little more than create an environment that nourishes learning at multiple levels. This type of supportive environment allows us to explore what we’re learning, to define what we want to learn more of, and to use that learning to improve our performance. ET is not learning for learning’s sake. It is learning for change. It is learning to inform and shape action.

Though ET draws upon established M&E techniques to support and institutionalize a culture of learning, ET should not be seen as a replacement for M&E. As a broader, overarching approach, ET supports M&E by complementing its more time- and activity-bound lens with a comprehensive, institutionalized focus. To understand more fully particular M&E approaches, an Annex to this chapter contains a Frequently Asked Questions about M&E, discussing core concepts in both quantitative and qualitative M&E.

1. What’s the difference between “monitoring” and “evaluation”? 19
2. What are the usual steps in carrying out an evaluation? 19
3. What is evaluation criteria? 23
4. What is a participatory evaluation? 25
5. What is the difference between a formative and a summative evaluation? 25
7. What is baseline data? 26
8. How can we determine causality? 26
9. Which evaluation approach is right for my project? 27
10. What is a Logical Framework Approach? 27
11. What are Modular Matrices? 28
12. What is a RAPID Outcome Assessment (ROA)? 29
13. What is Outcome Mapping? 30
15. Where can I get more information on M&E? 32

Endnotes 34

1. What’s the difference between “monitoring” and “evaluation”?

While monitoring and evaluation are often seen together, they are two distinct, albeit complimentary, processes. Monitoring is on-going and gauges if activities and results are in line with pre-determined targets and objectives. It assesses progress against specific benchmarks and keeps track of activities and results without probing very deeply into any cause and effect relationships. It is usually carried out internally. 33

Evaluation, on the other hand, is a systematic assessment of a project, programme, policy or organization, and is typically carried out at the end of a project cycle. 34 Carefully selected questions guide evaluation, arising from predetermined criteria (i.e. what stakeholders want to evaluate). Evaluations typically examine not only what happened, but also how it happened, why it happened that way, and what might be done to improve performance. 35 As Patton (2002) and others stress, evaluations must be conducted with end-users and end-use in mind: the best evaluations are action-oriented. 36

2. What are the usual steps in carrying out an evaluation?
The seven major steps are:

1. Define the purpose and parameters of the evaluation;
2. Identify key stakeholders;
3. Define the evaluation questions;
4. Select appropriate methods;
5. Collect data;
6. Analyze and interpret data;
7. Use and communicate results.

These steps are very similar to those involved in research design and protocols. Note that steps 5 and 6 need to be repeated often as monitoring requirements of a project, as well as for learning and evaluative thinking – they are covered in more detail in the preceding chapter’s discussion of *Evaluative Thinking*. Step 7 is also explored in further detail in Chapters Six and Seven on *Designing a Communications Strategy* and understanding *Print Media*.

**Step One: Purpose and Parameters**

The purpose of evaluation should always be an action – one which the evaluation makes possible. According to Chelimsky and Shadish (1997), the benefits of evaluation can be divided into three key areas: evaluation for *accountability*, evaluation for *development*, and evaluation for *knowledge*. Everything else is just a subcategory.

**Accountability:** to demonstrate that a project has made efficient use of its resources, “to account for the use of resources to funders, such as the funding agencies themselves, the parliament and taxpayers who vote their funds and the beneficiaries in whose name the funds are raised and used”.

**Development:** to gather lessons learned – or an understanding of successes and failures – about a specific project that will then be used to improve it, replicate positive experiences, and/or help ensure that mistakes will not be repeated.

**Knowledge:** to deepen our pool of knowledge on a particular subject. What works? What doesn’t? And how do these lessons and experiences contribute to our knowledge on Topic X?

**Step Two: Stakeholders**

Successful evaluations serve their *primary users*. It is often easy to lose sight of this, but if an evaluation has been properly targeted and carried out, its users should be able to draw on the results to improve upon, or make adjustments to, their current or future work. In many cases, the research team itself will be the primary user, while a funding agency may be a *secondary user*. To identify the range of potential users, we can use a tool such as a *Stakeholder Analysis*, discussed in Chapter Four of this toolkit.

**Step Three: Questions**

Once we’ve identified our users, what are their information needs? Is the evaluation’s information relevant? How can we involve the users in determining the eventual evaluands? This type of analysis will help determine what questions should guide the evaluation.
Striking a balance in how many questions an evaluation should ask is easier said than done. We can start by brainstorming and writing down all possibly relevant questions, then combing the list for the most important. Any question, however, must be framed so it can be answered on the basis of empirical evidence.\textsuperscript{42} We should be able to use measurable outcomes to arrive at our answers.

For Patton (2002), the starting point of any evaluation should be intended use by intended users. As he explains, “evaluations should be judged by their utility and actual use; therefore, evaluators should facilitate the evaluation process and design any evaluation with careful consideration of how everything that is done, from beginning to end, will affect use.”\textsuperscript{43}

For a more in-depth discussion of users, see:


\begin{center}
\begin{tabular}{|l|l|}
\hline
\textbf{What?} & Did we do what we said we would do? \\
\textbf{Why?} & What did we learn about what worked and what didn’t work? \\
\textbf{So What?} & What difference did it make that we did this work? \\
\textbf{Now what?} & What could we do differently? \\
\textbf{Then what?} & How do we plan to use evaluation findings for continuous learning? \\
\hline
\end{tabular}
\end{center}

\textit{Source: Guide to Project Evaluation: A Participatory Approach}, Population Health Directorate, Health Canada, August 1996. The approach is based on work done by Ron Labonte and Joan Feather of the Prairie Region Health Promotion Research Centre.

\textit{Steps Four and Five: Methods and Collection}

The ways we collect data will depend on the exact evaluation methods and tools selected. At the very least, however, “evaluations should always be based on empirical evidence and follow a systematic procedure for gathering and analyzing data – whether it’s quantitative or qualitative – to maximize credibility and reduce possible sources of bias.”\textsuperscript{44} Issues to consider in this step include the selection of: data collection methods; data collection instruments; units of analysis; sampling techniques; and timing, frequency and cost of data collection. The timing, for example, will in large part be determined by the type of evaluation being carried out, i.e. formative or summative.

The various methods that can be employed for data collection are similar to those for research projects. Namely:

- **Performance Indicators**
- **Formal Surveys**
- **Rapid Appraisal Methods**: Key Informant Interviews; Focus Groups; Community Group Interviews; Direct Observations; and, Mini-surveys.
The ideal design for an evaluation is often limited by what Bamberger (2006) calls “real world constraints”. These typically include time, budget, human resources, political and data constraints. As we plan our evaluations, we need to take into consideration what our limitations are and therefore plan accordingly. This will help us to limit the surprises or potential disappointments we could face if we weren’t realistic. These constraints need to be mentioned in the design as well as in the reports so as to alert the user of the context within which the evaluation was conducted.

**Step Six: Analyze and interpret data**

We must transform raw data into “usable, accessible summaries and reports that add to the body of knowledge about project success and promote change in attitudes, skills and behaviour.” Discussing data analysis in the abstract is tricky, as the exact techniques depend on the evaluation tools and methods we’ve used. Analysis of quantitative data is often straightforward – figures that can be analyzed through averages, ranges, percentages and proportions. Today, various computer programs can assist this task. Qualitative data, on the other hand, refers to perceptions, ideas and events, and its analysis is therefore more difficult. Various methods can still be used to carry out the analysis, including descriptive analysis, thematic coding and content analysis.

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**Words vs Numbers**

“All research ultimately has a qualitative grounding”

- Donald Campbell

“There’s no such thing as qualitative data. Everything is one or zero.”

- Fred Kerlinger

For years now, proponents of qualitative and quantitative data have locked horns, with each side arguing superiority.

Most distinctively, qualitative data is expressed words, while quantitative data takes the form of numbers. More specifically, while quantitative data can be “measured,” qualitative data can only be “described”. While the former is “inductive” – no hypothesis is required before data collection is carried out – the latter is “deductive”. Qualitative data provides us with rich description and takes the context or environment into account. Quantitative data can be analyzed using rigorous statistical methods that then allow results to be generalized to a larger population group.

In recent years, scholars and researchers have begun to realize that neither is unconditionally better, and that the two are not mutually exclusive. As Patton (1999) observes, “Quantitative data gives us the large patterns and points to areas where we need more detailed information and understanding; qualitative in-depth thinking then helps us to get additional indicators to understand the big picture and to generate surveys to look at generalizable patterns.”

The value of combining both quantitative and qualitative methods is no longer in dispute. The challenge now is to find the right balance on a case-by-case basis.

For more information on this topic, see:

- **The Qualitative-Quantitative Debate**, Research Methods Knowledge Base. Available at: www.socialresearchmethods.net/kb/qualdeb.php
- **The Qualitative versus Quantitative Debate: Writing Guides, Generalizability & Transferability. Colorado State University**. http://writing.colostate.edu/guides/research/gentrans/pop2f.cfm

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Step Seven: Use and communication of results

Results must be acted upon. While one of the most common ways of capturing these results is the use of an evaluation report, this should not be the only tool. There are many different ways to package and deliver evaluation findings, depending on the target audience. A rural community group will have different abilities, wants and needs from the Ministry’s Permanent Secretary in understanding and using our findings. The more attention we can pay to this, the more our users will be able to understand and ultimately act upon the findings.

The following outline reflects the structure typically used when writing an evaluation report. Bear in mind the many tools we can use to support this report, and appeal to different audiences (e.g. the “graded entry” approach (1:3:25) of 1. take-home messages: 3. executive summary: 25. full report as specified in Chapters Two, Six, Seven and Eight), and let’s also pay strong attention to the dissemination channels. If nobody can read our report, nobody can act upon it. As with any print tool, our evaluation report is only as good as the channel that can distribute it.

Typical Evaluation Report Structure:

1. Executive Summary: No longer than three pages, summarizing the findings, conclusions and recommendations.
2. Introduction and background information: the purpose of the evaluation, the questions it asked, and the main findings.
3. Description of the evaluated intervention: Without going into unnecessary detail, we present an overview of the “purpose, logic, history, organization and stakeholders” of the project under study.
4. Findings: This section presents the data collected and their analysis. This should be structured around the evaluation questions.
5. Conclusions and recommendations: Findings are placed within their wider context and the applicability of the results to other situations is discussed. Finally, recommendations can be made that are either aimed at informing policy or at improving future similar projects.
6. Annexes

Some alternative ways of communicating results include: “meetings, seminars, workshops, conferences, media presentations” as well as press releases, audio-visual materials (e.g. video or radio spots), websites, policy briefs, networks and more. A mix of strategies ensures maximum impact and uptake.

3. What is evaluation criteria?

How do we know what “good” or “bad” is? How do we recognize “success”? As Scriven (2007) remarks, “given that the path of righteousness for evaluators is the path of criteria, not indicators, how do we identify true criteria for the evaluand X? The key question to ask is: What properties are parts of the concept (the meaning) of “a good X,” for someone who is an expert on Xs?”

This logic begs the bigger question: exactly what is it we’re evaluating? What do we want to find out? Against what criteria should we assess our project? How do we determine whether resources have been properly used? The OECD’s Development Assistance
Committee has agreed upon five international criteria used to evaluate development assistance: **effectiveness; impact; relevance; sustainability; and efficiency**.

**Five Evaluation Criteria**

| Effectiveness: The extent to which a development intervention has achieved its objectives, taking their relative importance into account. |
| Impact: The totality of the effects of a [project], positive and negative, intended and unintended. |
| Relevance: The extent to which a [project] conforms to the needs and priorities of target groups and the policies of recipient countries and donors. |
| Sustainability: The continuation or longevity of benefits from a [project] after the cessation of development assistance. |
| Efficiency: The extent to which the costs of a [project] can be justified by its results, taking alternatives into account (in other words a comparison of inputs against outputs). |


While we typically use these criteria in combination, we may decide to focus on those most relevant to our project. In the early phases of a project, for example, it's probably premature to assess its impact and sustainability. For each criterion we use, we'll need to come up with a list of questions that will then allow us to assess the extent to which the objectives are being met.

**Some typical questions:**

**Effectiveness:**
- To what extent have the agreed objectives been met?
- Are the successfully achieved activities sufficient to realize agreed outputs?
- To what extent is the identified outcome the result of the intervention rather than external factors?
- What are the reasons for the achievement or non-achievement of outputs or outcomes?
- What could be done to make the intervention more effective?

**Impact:**
- How has the intervention affected the well-being of different groups of stakeholders?
- What would have happened without the intervention?
- What are the positive and negative effects? Do the former outweigh the latter?
- What do the beneficiaries and other stakeholders perceive to be the effects of the intervention on themselves?

**Relevance:**
- Is the intervention in line with the livelihood strategies and cultural conditions of the beneficiaries?
- Is the design of the intervention relevant to the context?
- Is the timing of the intervention relevant from the beneficiaries’ point of view?
- Do the proposed interventions have potential for replication?

**Sustainability:**
- To what extent does the positive impact justify continued investments?
- Are the stakeholders willing and able to continue activities on their own?
- Is there local ownership?
• Did local stakeholders participate in the planning and implementation of the intervention to ensure local engagement from the start?
• Is the technology used in the intervention appropriate to the prevailing economic, social and cultural conditions?

**Efficiency:**
• What measures have been taken during the planning and implementation phase to ensure that resources are efficiently used?
• Could the intervention have been done better, more cheaply or more quickly?
• Could an altogether different type of intervention have solved the same problem at a lower cost?

4. What is a participatory evaluation?

In a participatory evaluation, the entire process – from planning to implementation – involves the project’s stakeholders. Instead of project staff alone conceiving the evaluation plan and then consulting those who have a stake in the project, a participatory evaluation involves multiple stakeholders in the planning process and, through the use of a facilitator, throughout the evaluation. Participatory evaluations “seek to be practical, useful, formative and empowering: practical in that they respond to the needs, interests and concerns of their primary users; useful because findings are disseminated in ways in which primary users can use them; and formative because they seek to improve programme outcomes.”

<table>
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<tr>
<th>Characteristics of Participatory Evaluations</th>
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<tr>
<td><strong>Focus and ownership:</strong> These evaluations are primarily oriented to the information needs of stakeholders (and not, for instance, a donor).</td>
</tr>
<tr>
<td><strong>Scope:</strong> The range of participants and their roles in the process may vary. For example, some evaluations may target only program providers or beneficiaries, while others may include the full array of stakeholders.</td>
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<tr>
<td><strong>Participant negotiations:</strong> Participant groups meet to communicate and negotiate to reach a consensus on evaluation findings, solve problems, and make plans to improve performance.</td>
</tr>
<tr>
<td><strong>Diversity of views:</strong> Views of all participants are sought and recognized. More powerful stakeholders allow participation of the less powerful.</td>
</tr>
<tr>
<td><strong>Learning process:</strong> The process is a learning experience for participants.</td>
</tr>
<tr>
<td><strong>Flexible design:</strong> Design issues are decided (as much as possible) in the participatory process. Generally, evaluation questions, data collection and analysis methods are determined by the participants, not by outside evaluators.</td>
</tr>
<tr>
<td><strong>Empirical orientation:</strong> Good participatory evaluations are based on empirical data. Typically, rapid appraisal techniques are used to determine what happened and why.</td>
</tr>
<tr>
<td><strong>Use of facilitators:</strong> While participants actually conduct the evaluation, one or more outside experts serve as facilitators.</td>
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*Source:* Adapted from USAID Center for Development Information and Evaluation, 1996. “Conducting a Participatory Evaluation”. *Performance Monitoring and Evaluation TIPS, Number 1.*

5. What is the difference between a formative and a summative evaluation?

**Formative** (or interim) evaluations take place while activities are still underway. **Summative** evaluations occur when all activities have ended. As evaluation theorist Bob
Stake explains, “When the cook tastes the soup, that’s formative; When the guests taste the soup, that’s summative.”

Formative evaluations serve to assess a project’s progress to correct any flaws or unintended consequences or to capitalize upon and extend positive developments. This should not be seen as a one-time exercise, but rather something we could repeat at various intervals until our project is completed. Summative evaluations, on the other hand, are carried out when it is too late to make any changes. A summative evaluation is used to assess whether or not initial goals have been met and to collect data about outcomes and strategies, and the activities leading to them. This type of evaluation typically assesses merit and captures lessons that could be vital for a second phase or for a similar project elsewhere.

6. What is a process evaluation? Progress evaluation? An impact evaluation?

A process evaluation focuses on the ways in which activities have been planned and carried out in addition to studying outputs and other relevant results. This type of evaluation does not assess the effects of our project, but rather examines the process leading to those effects. The logic here is that one must assess the blueprint before studying the completed house – to understand the original idea and that all activities have indeed followed it.

A progress evaluation seeks to assess the extent to which a project is in fact meeting its goals. Evaluators collect information to compare it against progress benchmarks to determine whether or not they are being met.

Finally, an impact evaluation examines a project’s total effects, including the positive and the negative, the intended and the unintended. An impact evaluation can also assess long-term effects, and may gauge effects “at the scale of societies, communities or systems.” Consequently, we would carry out impact evaluations only when all our project activities are completed. As is a constant caution in many evaluations, the main challenge with measuring impact lies in the difficult task of attributing causality. How do we know that X created Y?

Further Resources


7. What is baseline data?

Effectiveness and impact assessments are only possible if we have benchmarks against which we can measure change and progress. Here, baseline data, obtained through a baseline study can provide us with such benchmarks – a portrait of the situation that prevailed before any activities or interventions were carried out. Baseline studies should be carried out at the start of our project, before any interventions. While that same information can sometimes be collected after the fact, it is unlikely to be as accurate.

8. How can we determine causality?
Recording change is one thing. Attributing cause is another. Did the project itself cause the observed changes? Or were there other factors, none, some or a bit of both? The difficulty lies in determining whether the changes would have taken place if the project had never existed.

To navigate these tricky waters, we can use what is referred to as a counterfactual – a hypothetical example against which we can compare those actual, real-world changes. A non-exposed control group can give us a decent idea of how the target group might have fared without the intervention. In many cases, it will not be possible to determine whether our activities are solely responsible for the changes that took place. We may have to satisfy ourselves with the knowledge that our actions interacted with a number of others and therefore contributed to, rather than caused, the observed changes.

9. Which evaluation approach is right for my project?

Each project, programme and organization needs to select the approach best suited to its own context. There is no rule that determines which approach to use, and research teams often find different aspects of various approaches best serve particular parts of the project. If our project is externally funded, one logical question is: what kind of evaluation framework or report would our donors want to see?

In M&E, we can most certainly mix and match our approaches – though of course we’ll need to have strong knowledge about the choices. Different evaluation methods can indeed complement each other – if used correctly. The remainder of this FAQ is dedicated to discussing particular M&E approaches, and suggests ways of blending certain quantitative and qualitative strategies.

10. What is a Logical Framework Approach?

A Logical Framework Approach (often called a logframe) is an application of Results-Based Monitoring (RBM). Logframes assess the causal relationship – the links between cause and effect – between inputs, processes, outputs, outcomes and impacts. Such frameworks are usually developed by project planners to clarify objectives and guide the eventual implementation of their work. Evaluators use logframes to understand a project’s guiding assumptions and to assess achievements against performance indicators. The logframe method can be particularly useful when carrying out a formative evaluation and/or a progress evaluation, especially in rectifying shortcomings.

Many believe the logframe too often assumes a linear relationship between inputs and outcomes and therefore attributes causality without taking into consideration other external factors. Despite routine and long-standing criticism, logframes remain a favoured M&E approach among many international funders. Even if we do not want a logframe, we would do well to understand the idea behind them in case a potential donor requests one.

As Hovland (2007) explains, a logframe approach should involve: a problem analysis; an objectives tree; an objectives hierarchy; a stakeholder analysis; and a preferred strategy that includes all activities and outputs. Once these steps have been taken, project designers can proceed to the Logframe Matrix, which is essentially a tabular summary of
the preceding steps and shows what the project intends to do, what its key assumptions are, and a plan for conducting M&E.66

Logframe Outline (adapted from Hovland (2007))

<table>
<thead>
<tr>
<th>Goal – overall goal project contributes towards</th>
<th>Narrative Summary</th>
<th>Indicators</th>
<th>Means of Verification (M&amp;E)</th>
<th>Assumptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Descriptive statements</td>
<td>Measurable changes: quantity, quality, timing.</td>
<td>Tools to determine if changes have occurred – MSC, AI, AARs, etc.</td>
<td>Other events/conditions that help activities lead to outputs to purposes to goals.</td>
<td></td>
</tr>
<tr>
<td>Purpose – observable changes in behaviour</td>
<td>May relate to processes, products and impacts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Output (1) – tangible goods and services to achieve Purpose</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Output (2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Output (3)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Activities – what project does to produce outputs</td>
<td>Inputs – all HR, financial, technical resources needed to do Activities</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Further Resources:

11. What are Modular Matrices?

This self-assessment tool designed by Rick Davies is intended to describe the internal linkages of a project or programme. It is a descriptive process that blends key elements in a project – e.g. presenting outputs with impacts or stakeholders with outputs. Its particular utility arises from its at-a-glance simplicity, and sometimes glaring juxtaposition between elements that should or should not be aligned. These matrices help evaluators judge “to what extent their outputs (past, current or planned) contributed to their desired
impacts; to what extent their outputs were geared towards their target audiences; and to what extent their outputs were aligned with significant events (e.g. policy events or key meetings)”. The project may then be redesigned accordingly.

Hovland (2007) explains: “For each output, crosses are distributed across the output row depending on where the output’s desired impact lies. The matrix can then be compared to the project’s actual distribution of effort across different groups of actors, in order to assess whether any resources need to be reallocated”.

**Example of a Modular Matrix (Outputs x Impacts)**

<table>
<thead>
<tr>
<th>Outputs</th>
<th>Impacts</th>
<th>Strengthen local research capacity on topic</th>
<th>Increase awareness about topic among policymakers and in media</th>
<th>Build relationships between research partners and civil society organisations</th>
<th>Influence change towards more pro-poor policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project launch</td>
<td>XXX</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Website</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>One-on-one meetings with policymakers</td>
<td>XXX</td>
<td>XX</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Public meeting series</td>
<td>X</td>
<td>X</td>
<td>XXX</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Network building</td>
<td>XX</td>
<td>X</td>
<td>XXX</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Research reports</td>
<td>XXX</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Policy briefs</td>
<td>XX</td>
<td>XXX</td>
<td>X</td>
<td>XX</td>
<td></td>
</tr>
</tbody>
</table>

**Source:** reproduced from Hovland (2007)

**Further Resources:**
- Davies, R. 2005. “Moving from Logical to Network Frameworks: A modular matrix approach to representing and evaluating complex programs”. Available at: www.mande.co.uk/docs/MMA.htm

**12. What is a RAPID Outcome Assessment (ROA)?**

Developed by the Overseas Development Institute’s Research & Policy in Development (RAPID) programme, ROA draws on elements from three M&E methodologies:

1. Episode studies of specific policy changes – tracking back from policy changes to identify key actors, events, influences – assessing their relative importance.
2. Case study analysis of specific research projects – tracking forward from specific research and related activities to assess their impact.
3. Outcome Mapping approaches (see question 13 below) – identifying changes in behaviour of key actors and analyzing what influenced these changes.

The ROA was designed as a learning methodology to assess the contribution of a project’s actions and research on a particular change in policy or the policy environment. The ROA cannot be used to capture economic impact of research through policy change.

**Further Resources:**
- ILRI and ODI website: “Process and Partnership for Pro-Poor Policy Change Project”. http://www.pppppc.org/Project/Methodology.asp
13. What is Outcome Mapping?

Outcome Mapping (OM) was developed by the International Development Research Center’s (IDRC) Evaluation Unit as an alternative approach to evaluation. The rationale was recognition that causality and impact for any project are extremely difficult to assess. How can we isolate for x when all of x,y and z influenced various parts of a, b and c over a five-year period? Overwhelmingly, long term impacts – such as improvements in the livelihoods of local populations – are not due to a single project, but to a number of inputs over a significant amount of time. In light of this, OM examines one particular category of results: outcomes. Here, outcomes are defined as “changes in the behavior, relationships, activities, or actions of the people, groups, and organizations with whom a program works directly.”

As shown above, OM is typically divided into three different stages. The “Intentional Design” stage is especially strong at helping projects and programmes reach consensus on the macro-level changes they would like to contribute to. This stage typically answers four questions: why? (overall, “in a perfect world” vision statement); how? (mission, strategy maps, organizational practices); who? (the “boundary partners” the project/programme seeks to influence); and what? (outcome challenges and progress markers). For some projects, the “intentional design” stage represents their only significant use of OM, with other tools providing further monitoring and evaluation.

The second stage, “Outcome and Performance Monitoring” outlines the means by which a project/programme will monitor its actions, especially in support of boundary partners and the identified outcomes. The last stage, “Evaluation Planning” helps to determine evaluation priorities to better align resources with end-use.
When used in its entirety, OM is meant to be “an integrated planning, monitoring, and evaluation approach that is best used at the beginning of a program once the main focus of the program has been decided.” 69 Once we become familiar with the approach, however, it is possible to use some of its elements and tools in isolation and in combination with others.

Further Resources:
- The Outcome Mapping Learning Community (available at www.outcomemapping.ca) is an excellent online resource – a virtual hub created by users of OM from around the world.

14. How can I blend Outcome Mapping and a Logical Framework Approach?

Note: the answer to this question has been adapted from the IDRC Evaluation Unit publication, “Draft Version: Outcome Mapping Highlights. Can OM and LFA share a space?”. For more on this, see www.outcomemapping.ca.

Within the community of Outcome Mapping users, there is the inevitable question of how well Outcome Mapping fits with other M&E approaches, methodologies and tools. Particularly when projects may wish to blend quantitative and qualitative approaches, how well do OM and a popular approach like LFA mesh in practice?

The short answer is that there really is no formula of how best to create a shared “space” for both, as any M&E approach depends upon the nature and complexity of the work to be undertaken, the reporting obligations to donors and other required uses of the monitoring and evaluation data, as well as a project’s M&E resources.

<table>
<thead>
<tr>
<th>What questions does an LFA ask?</th>
<th>What questions does OM ask?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Goal:</strong> what is the ideal situation that will serve as our reference point for guiding the program?</td>
<td>What is our ideal world? How will we ideally contribute to it?</td>
</tr>
<tr>
<td><strong>Inputs:</strong> what ingredients do we need to create the desired changes?</td>
<td>Whom can we influence? What are the attitudes, activities and relationships that will best contribute to the vision?</td>
</tr>
<tr>
<td><strong>Activities:</strong> what is the project doing with its inputs/ingredients?</td>
<td>What is the transformative story that will best describe the change we want?</td>
</tr>
<tr>
<td><strong>Outputs:</strong> what are the results directly related to our activities? What are the immediate changes we can see?</td>
<td>How will we support that change?</td>
</tr>
<tr>
<td><strong>Outcomes:</strong> what are the changes that flow from our outputs?</td>
<td>What do we need to do to remain healthy and best contribute to change?</td>
</tr>
<tr>
<td><strong>Impact:</strong> how has the big picture been affected by our contributions?</td>
<td>As impact is complex and difficult to measure, how can progress markers show us what we’re really contributing to?</td>
</tr>
</tbody>
</table>

OM and LFA may be useful at different levels, for diverse types of interventions or for information in different contexts. Rather than pitting LFA and OM against each other,
we need to understand what kinds of information and uses each has, as well as their advantages and disadvantages, and find ways for them to add value to each other.

By bringing LFA and OM (and indeed all tools) into a shared space, we must be prepared for possibly higher resource investment (personnel, time, capacity building, money) as well as an investment in creating the trust needed to drive participatory and collaborative planning, monitoring and evaluation.

On what variables can we blend them?

- **Enabling participation and social learning**
  - Using the LFA and/or the Intentional Design as a visual aid and tool for discussion, learning and consensus among stakeholders, to inspire and guide the actions of the programme and partners.
  - Building in multiple logic integration and equitable collaboration into the planning, monitoring and evaluation process.

- **Recognizing and systematizing complexity**
  - Drawing on the LFA to guide stakeholder understanding about the sequence of changes to which the programme expects to contribute through its influence on the boundary partners.
  - Focusing not just on the end development results, but also on an understanding of the processes that leads to them.

- **Prioritizing learning and multiple accountabilities**
  - Planning structured and systematic learning process, which the stakeholders can use to guide their decisions and actions.
  - Modifying the LFA based on analysis and changing circumstances.
  - Shifting from attribution to contribution, inviting the constant reconstruction and analysis of what is taking place in the programme’s sphere of influence.
  - Offering donors an opportunity to learn more about how results were – or were not – achieved.

- **Improving organizational learning**
  - Strengthening the capacity of the program team for reflection and adapting to changing conditions to maintain relevance.
  - Readyng the program to be an agent of change and subject to change.

- **Promoting evaluative thinking and utilization-focused evaluation**
  - Advocating greater understanding by implementing organizations and boundary partners about the links between the programme actions, the boundary partners’ actions and development changes.
  - Interpreting and using the data obtained on the indicators.

15. Where can I get more information on M&E?

There are many different authors and information sources on M&E. A select list includes:


Comments? Questions? Criticisms?

Email the Research Matters Programme Officers:
Nasreen Jessani at njessani@idrc.or.ke
Graham Reid at greid@idrc.or.ke.

Research Matters (RM) is a collaboration of the International Development Research Centre (IDRC) and the Swiss Agency for Development and Cooperation (SDC). RM was launched in 2003 to examine and enhance the specific KT dynamics within the field of health systems research. From these founding connections with both a research funder and a bilateral donor, RM has occupied a unique vantage among health researchers and research-users. By working directly with both the producers of research and with its consumers, RM has developed a range of activities and modalities designed to hasten the movement of research results to the policy arena, to database and access those results, to communicate them, and to expand an appreciation of research itself. RM builds capacity among researchers to perform their own KT; RM responds to the priorities of major research-users; and RM actively brokers both research results and research processes. As an active, ground-level embodiment of KT, RM has helped to shape how health research is demanded, created, supplied, and ultimately used.
Endnotes


2 Our definition draws upon the work of the Bruner Foundation. While the Bruner Foundation has issued a variety of bulletins and papers on Evaluative Thinking, their particular definition can be found in Bruner Foundation. 2005. Evaluative Thinking: Bulletin 2. Evaluative Thinking in Organizations. All 11 bulletins are available at http://www.brunerfoundation.org/ei/sub_page.php?page=tools


8 Agarwal 2005 and Senge 1990.

9 Agarwal 2005


13 Adapted from Davies and Dart 2005.

14 Davies and Dart 2005.


16 Acosta and Douthwaite 2005.

17 Note that this section has been reproduced in its entirety from Chapter Two’s discussion of Knowledge Management.


20 See “Guidelines for the AAR”. Mission-Centered Solutions, Inc. 2008

21 Hovland 2007.

23 Hovland 2007.


26 Westat 2002.


30 Patton 1997.

31 Patton 1999


41 Chelimsky and Shadish. 1997.


43 Patton MQ. 2002.

44 Patton MQ. 2002.


48 Westat JF. 2002.


51 Scriven M. 2007. “The Logic and Methodology of Checklists”. Available at: www.wmich.edu/evalctr/checklists/checklistmenu.htm#models

52 These are adapted from Guidance on Evaluation and Review for DFID Staff. 2005. Evaluation Department. London: DFID.


55 Quoted in Westat JF. 2002.

56 Westat JF. 2002.

57 Westat JF. 2002.


59 Westat JF. 2002.

60 Westat JF. 2002.


69 Earl et al. 2001.
Table of Contents

The Essential Elements

1. Review – Performance and Perception 4
2. Objectives – Making them SMART 5
3. Audience – Primary and Secondary Targets 7
5. Basket – Tools and Products 11
6. Channels – Promotion and Dissemination 13
7. Resources – Materials, Finances, People 14
8. Timing – Events, Opportunities, Planning 15
9. Brand – Creating one and being on it 16
10. Feedback – Evaluative Thinking 18

Communications Strategy Template 21

Further Resources

   Examples of Communications Strategies 23
Designing a Communications Strategy

Every day, communications strategies unfold all around us. Though we may not realize it, the billboards, radio jingles and storefronts, the countess logos and slogans and advertisements all over the internet, our daily newspapers, the TV, these are all clever prongs of wider strategies working to distinguish one item or idea from another. In this age of unparalleled choice, communications is committed above all to the principle of broadcasting differences: here’s why our idea – in this great sea of ideas – really matters. Here’s what separates our findings from all the others. Here’s what makes our approach and our organization unique. And here’s how our ideas can help you make a decision – whether you’re choosing between two pairs of shoes or two policy options.

While it may be easier to think about communications in terms of products – a good video documentary, for example – it’s more constructive to think in terms of an ongoing and iterative process. A communications strategy is not the glue between different communications products: it is a means of elaborating how we network, participate, and interact with the world. Good communications reflect a two-way dialogue, where we listen (what does our audience want?), design and deliver audience-informed strategies, and then gather feedback to assess our impact.

Every organization requires a dynamic communications strategy. While the private sector the world-over invests trillions of dollars every year on advertising – on broadcasting their difference – the public and non-profit sectors tend to perceive communications as an optional or fringe activity, and certainly not central to the work (e.g. the research) itself.
Communications are typically out-sourced or developed by junior personnel working with miniscule budgets and little idea of what, in the larger sense, the organization is trying to achieve.

“While policy research and formulation are given their due as tough, demanding areas of an organization’s work plan, communications is seen as ‘soft’. While program development and practice are seen as requiring expertise and the thoughtful consideration of best practices, communications is an ‘anyone can do it if you have to’ task. It is time to retire this thinking. Doing communications strategically requires the same investment of intellect and study that these other areas of nonprofit practice have been accorded.”

– The Frameworks Institute


Clearly, the stature of communications must change: if organizations want to broadcast their difference, if they want to influence decisions, they must learn how to integrate communications from top to bottom internally, externally and across all their activities. Instead of supporting the production of random products tied to specific outputs (e.g. a paper summarizing research findings), organizations need to see communications as a vehicle that is not only helpful or required but essential to achieving core goals.

To that end, this chapter has been arranged around the Essential Elements, a series of ten steps every organization should consider as it develops a communications strategy. Addressing these gives us a precise snapshot of who we are, what we have to say to the world, who we want to influence, and how we’ll do that – now, and in the months and years to come.

The Essential Elements

1. **Review**: How have we been communicating in the past? How effective has that been? How do our audiences perceive us?
2. **Objective**: What do we want our communications to achieve? Are our objectives SMART?
3. **Audience**: Who is our audience? Do we have a primary and a secondary audience? What information do they need to act upon our message?
4. **Message**: What is our message? Do we have one message for multiple audiences or multiple messages for multiple audiences?
5. **Basket**: What kinds of communications “products” best capture and deliver our messages?
6. **Channels**: What channels will we use to promote and disseminate our products?
7. **Resources**: What kind of budget do we have for this? Will this change in the future? What communications skills and hardware do we have?
8. **Timing**: What is our timeline? Would a staged strategy be the most appropriate? What special events or opportunities might arise? Does the work (or future work) of like-minded organizations or ministries, etc., present opportunities?
9. **Brand**: Are all of our communications products “on brand”? How can we ensure that we are broadcasting the right message?
10. **Feedback**: How will we know when our communications strategy is 100% successful? What will have changed? How can we assess whether we used the right tools, were on budget and on time, and had any influence?

The *Essential Elements* illustrate some core truths of communications:

- We can only communicate what we know.
- Communications is a two-way process. The better we listen to our audience, the better we’ll be able to answer their needs and the more our messages will be believed, liked, and ultimately acted upon.
- Effective communicators know what an audience needs to know, what “language” they understand, and what they look at and listen to.
- Communications are the most visible single activity we engage in, requiring extra delicacy – say the wrong thing or present ourselves incorrectly and the damage could be severe and lasting.
- We should develop tools that fit the channels available for our message.
- We must develop messages that respect the cultural context of our audiences.
- We must understand and respect our communications abilities and limits, as well as our time and resources: communications can be time- and skill-intensive work.
- We must learn from our mistakes and our successes to improve our future communications.

In this chapter, we’ll illustrate the *Essential Elements* through the example of a fictitious NGO called National Health = National Development (NH=ND). This NGO was discussed extensively in Chapter Four’s discussion of *Context Mapping* – a chapter that serves as an essential complement to this one, particularly in its tools for understanding who our audiences are.

**The Essential Elements**

If we all took some time – an hour, say, or an afternoon – to discuss these ten elements, we would have the rudiments of a communications strategy and a greater understanding of our own position in the wider scheme of things.

NH=ND’s place in the bigger picture is:

We are a small research organization with a staff of five. We’ve existed for about five years and have undertaken four different research projects. We’ve contributed papers to a regional network and have published several in international, peer-reviewed journals. In 2006, we completed a controversial project examining the cost-effectiveness of indoor residual spraying (IRS) of DDT for malaria vector control (see Chapter Four for more information on this controversial project and its *Context Mapping*). A series of meetings with the Ministry of Health during 2007 revealed that the Ministry would not implement any stand-alone IRS programme, citing various environmental and systems concerns. However, they would “welcome” evidence that might help them situate different malaria control models and interventions within the wider health system.
Based on this demand, we are now completing a research proposal and are sketching out a communications strategy. The Ministry has declined our overtures to participate in the research project (citing insufficient human resources) and has not committed itself in any way to our work beyond its vague promise of “welcoming” our evidence. We’ll need to build in a comprehensive communications and advocacy strategy to ensure our key messages reach them.

As there are several different sites in M------- implementing ITN and IRS programmes (through different public, private and NGO providers), our research aims to study the health system impacts of both interventions, with a particular lens on equity implications and individual access to each intervention.1 We are certain that our findings will reveal not only the larger health system impacts but also give a nuanced picture of who is able to access what delivered by whom, potentially resulting in recommendations suggesting new subsidies, changes in service provision, and perhaps even the promotion of an integrated malaria control policy. Whatever the case, we know we’ll wrap our findings into attractive, comprehensive and costed policy options and recommendations. After all, our ultimate goal is for this research to influence, challenge and even change national policy – and we know this will not be an easy task.

We know we have other audiences, a range of possible messages, and a small and already stretched budget. To make sure we address all of these variables, we need a communications strategy.

1. Review – Performance and Perception

How have we been communicating in the past? How effective has that been? How do our audiences perceive us?

An audit – a rigorous and structured review or assessment – can help us to assess our past communications performance and any perceptions of our organization by considering:

- the general state of communications in our organization;
- the ways our organization has communicated in the past (internally and externally);2
- how audiences perceive our organization.3

For NH=ND, we want to understand how others perceive us, knowing this will give us windows into our communication methods (e.g. if nobody knows who we are, we can assume that our previous communications efforts have been highly ineffective). We’re going to devise a survey to gauge this, but first we’ll think through:

- the audience to receive this survey. Who really knows about our past communications efforts? What audiences are we chiefly interested in reaching? And who will take the time to complete the survey? Note that we do not want to send this survey to everyone we interact with. We want to ensure the highest quality of our correspondence with our key and treasured recipients (like Ministry officials and other decision-makers) and thus may decide not to send them this survey.
- the channel to disseminate our survey. Should we send out an email to all our contacts? Should we use an easy but for-fee website like www.surveymonkey.com? Our
dissemination choices will shape the quality and quantity of our responses, and thus need to be closely considered.

Getting truthful answers often depends on granting respondents (both internal and external) absolute confidentiality. We’re asking for opinions some may not want to deliver directly to us. To this end, a web-based survey tool could be useful. Also valuable here could be contracting an outside and independent consultant – respondents may feel more open to discuss sensitive issues with those not directly connected to the organization.

Lastly, Hershey (2005) raises the idea of a competitive analysis – judging our reputation not just in absolute terms, but in comparison with others. As she rightly observes, “A big part of the ‘who are you’ question is determining what makes you unique. What do you do that no one else can do? And one of the best ways to answer that crucial question is to look at how you compare with institutions that serve the same core constituency”. She cites the work of Tom Peters and his suggestion that every organization initiate such a competitive analysis by asking itself: who are we? (in one page, then in 25 words); how do we uniquely serve our constituents (again in one page, then in 25 words); and what are three distinct differences between our organization and our competition?

<table>
<thead>
<tr>
<th>NH=ND: survey questions to assess external perceptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. How have you come to learn about NH=ND in the past?</td>
</tr>
<tr>
<td>2. In your opinion, what do you think is most unique about NH=ND?</td>
</tr>
<tr>
<td>3. What is NH=ND best known for?</td>
</tr>
<tr>
<td>4. What is the most compelling reason for supporting NH=ND?</td>
</tr>
<tr>
<td>5. What are strong reasons for not supporting NH=ND?</td>
</tr>
<tr>
<td>6. Do you find that NH=ND’s papers, ideas or products stand out from those of other research organizations?</td>
</tr>
<tr>
<td>7. What could NH=ND improve about its communications?</td>
</tr>
<tr>
<td>8. Are there any other issues regarding NH=ND and its plans that you would like to comment upon?</td>
</tr>
</tbody>
</table>


2. Objectives – Making them SMART

What do we want our communications to achieve? Are our objectives SMART?

What, ultimately, do we want from communications? All strategies must start with an understanding of objectives. Communications can be expensive in resources and time, so the more precisely we can state our reasons for communicating, the better we’ll be able to spend those precious resources.

Many research organizations might state their principal communications goal as: “In communicating our results and processes, we are seeking to influence or change X,” or perhaps more generally, “We want people to understand the significance of our research”. There may be a variety of “sub-reasons” for communicating but at the end of the day influence is typically the central goal of most research institutions.
A valuable start might be writing down this type of overarching one-sentence communications objective. “We want our communications to make our research understandable and to ultimately influence policy”. This might apply to the organization as a whole or to a single project, or both.

After defining a general objective, we should create precise sub-objectives. The “SMART” acronym is useful here: all of our objectives should be –

- **Specific**
- **Measurable**
- **Attainable**
- **Results-orientated**
- **Time-limited**

In the end we want to evaluate what we’ve done, so the SMARTer we can be, the easier it will be to ultimately assess and adjust our activities. As the World Wildlife Fund (WWF) offers [no year], examples of strong, specific, clear and measurable communications objectives could include: building awareness of a project or programme among a tightly defined audience; securing the commitment of a defined group of stakeholders to the project’s aims; influencing specific policies or policymakers among key and defined aspects; and encouraging increased stakeholder participation on specific issues.°

NH=ND’s audit revealed that it was generally trusted and accepted, though few could point to any of its actual results or any policies/ideas it had influenced. Stakeholders were aware of the organization but not necessarily any of its projects. In view of this, NH=ND to focus its communications strategy on one new research project alone. While an overarching strategy for the organization as a whole could be useful, most energy over the next few years will go into this project, and careful elaboration of this strategy now will lead to a stronger proposal, better budget, and potentially much more donor funding. Strong perception of the project will also contribute to the organization’s reputation.

The general or overall objective of our communications strategy on this project could be:

“To influence the health system, national malaria control policies, and to raise anti-malaria awareness in communities.”

The general objective is relatively tight, but is it SMART? Here we mention a desire to influence policy and communities. The general objective could be “smartened” as:

“To change national malaria control policy by 2011.”

That is specific (it’s malaria control policy, not malaria policy and not health policy). It is measurable (i.e. did malaria control policy change? Note: we’ll need to define what we mean by “change”). We feel is is attainable. It’s certainly results-orientated. And the introduction of “2011” makes it time-limited, in line with a rational term – in this case the Ministry’s scheduled 2011 creation of its next five-year Strategic Plan.

NH=ND will achieve its central objective of changing national malaria control policy by 2011 through a communications strategy that:
a) establishes NH=ND as an authoritative source on malaria control issues;
b) provides user-friendly evidence to key national and international audiences;
c) promotes NH=ND staff discussion of research processes and results with key stakeholders;
d) creates momentum towards government adoption of various evidence-informed changes in its malaria control strategy;
e) attracts international attention and endorsement, including the solidification of NH=ND as an active leader of malaria control in LMICs.

3. Audience – Primary and Secondary Targets

Who is our audience? Do we have a primary and a secondary audience? What information do they need to take action on our work?

Understanding audiences is fundamental. There may be several different “types,” each with their own likes, needs and abilities. As has been stressed throughout this Toolkit, the better we know our audience – and what they need to understand our work – the better our chances to influence them. If we don’t see them, appreciate them and listen to them, we will never reach them.

Our communications efforts hinge upon this type of understanding. For instance, we could spend time and finance in creating a video – but if our audience is, for instance, rural villagers, will they have the hardware to play it? Will they speak the language of the video? If not, can we add subtitles? And will they be able to read those? Each audience has its own needs, ranging from the intellectual (e.g. issue/research comprehension) to the cultural (e.g. images considered taboo) to the practical (e.g. owning a radio, having electricity) and the greater we understand and respect these boundaries, the likelier we are to achieve our desired impact.7

Beyond the many techniques for mapping audiences and stakeholders outlined in Chapter Four’s discussion of Context Mapping, here we’ll perform the useful exercise of dividing our audience into two: the Ministry of Health and local communities. If we revisit our specific communications objectives, we can see that there are (at least) two other audiences suggested: the national media and the international community. With the idea

Communications Objectives in Action: The International Monetary Fund

The IMF’s communications strategy is particularly useful in illustrating how communications can be used to assist an organization in realizing its core objectives. Their communication strategy seeks, above all, to “strengthen the Fund’s effectiveness” – principally by “raising understanding and support among key constituencies of the Fund’s mission and reform agenda; and using communication as a tool in the delivery of the Fund’s operational activities”.

Its communications objectives aim: “to build understanding and support for the IMF’s reform agenda...further integrate communications with operations, raise the impact of communication tools, and rebalance outreach efforts”. Each of those areas is large but very well defined, and the remainder of its Communications Strategy elaborates upon each of these objectives.

of serving both primary and secondary targets, we can develop appropriate messages for each.

Primary Targets

1. Ministry of Health
While of course we would love to have the Permanent Secretary or Director General read and understand (and even demand!) our results, let’s take a more realistic approach. Based on our knowledge of the Ministry, we’re going to focus on the Director of Research, the Director of Public Health, and also on several of the Ministry’s mid-level “desk officers” responsible for working with foreign donors around malaria initiatives (Roll Back Malaria, the Global Fund, etc). We know that these “targets” have a decent understanding of both malaria and health systems, and are broadly familiar with the details of ITN and IRS approaches. **On a scale of one-to-ten, their understanding of our issue is about a seven.** We can thus prepare much of our communications for this audience in a relatively scientific fashion. Should we describe research processes or stick to straight reporting of results and policy recommendations? Should we adopt a 1:3:25 graded-entry format as outlined in Chapter Eight’s discussion of the Two-Pager?²

### The Graded-Entry Format

| 1  | a one-pager of clear and concise take-home messages for skimming or time-pressed decision-makers; |
| 3  | a three-page executive summary (such as a policy brief) with more details and resources for interested decision-makers and practitioners; |
| 25 | a twenty-five-page scientific paper or synthesis for administrators or implementors. |

2. Local communities
From our work with communities during a previous malaria project, we know the needs and knowledge-base of this audience quite well. **On a scale of one-to-ten, their understanding of our issue is about a two.** We understand how diverse the term “local community” is, and how some sub-groups may have strong influence over others. As we can’t possibly reach every group, we’ll want to target one of those influential sub-groups. Knowing that the main challenge in reaching this audience is reducing malaria control into digestible “bites” of education (i.e. promoting prevention-savvy techniques, training of district health staff), systems (i.e. delivery mechanisms, gender analysis, equity of access) and economics (i.e. who should pay for these interventions?), we’re going to focus our energy here on women’s groups. When it comes to our country’s local communities, we know that women are the arbiters of household decisions, especially on health issues.

Local communities are a “primary” target for several reasons. The first is that they are at the coal-face of those most affected by the disease, the interventions, and any national malaria control policy. The second is that they can become excellent advocates for our policy recommendations, precisely because they are the most affected and, if amplified well, have a voice that will resonate in any decision-making forum.
Secondary Targets

1. The national media
From past experience, we don’t trust the national media. They’ve continually misrepresented our work, and they have never approached us for our opinion on national health issues. That said, we understand that the media is absolutely essential in conveying messages around social change and in stirring up policy debates. Though we recognize that television is the medium with the highest impact (especially in urban areas), we will not focus on this, though we may be fortunate enough to get an interview on a televised news programme. Instead, we’re going to prepare information for the print media and radio. **On a scale of one-to-ten, their understanding of our issue is about a two.**

Note that the media may not always be a particularly helpful target. As Media Trust observes, “Everyone would like a higher media and political profile, yet activities aiming towards this may ultimately be self-serving and only communications driven, with no wider impact”.

2. The international community
Beyond our own international funders – who themselves are an important audience – we have few contacts in the international community. However, we do know that malaria control is a hot topic; we know that the WHO has a keen interest in new malaria research and could become a vehicle for disseminating our results. In addition to using some of the techniques outlined in Chapter Four’s discussion of Context Mapping, we’ll do a good web search to reveal what networks and entities are particularly active in malaria, while also active in our country or region. Then we’ll figure out the national “portals” to these audiences, either through a local agent of that organization, or via global entities like the WHO, the GFATM and others. We’ll also see if there are any websites, “news groups” or social networking sites we might join to promote our work (for more on this, see Chapter Twelve’s take on Tapping Technology). There is often a hunger from “northern” groups to partner with strong and dynamic “southern” organizations, and we need to be savvy to this. Lastly, we’ll prepare a good list of the donors in our country who are interested in malaria issues – noting that not all of these will have an interest in health systems or malaria control issues.

**On a scale of one-to-ten, their understanding of our issue is about an eight.**


**What is our message? Do we have one message for multiple audiences or multiple messages for multiple audiences?**

While we may have only one message that we want to convey (e.g. a particular research result or recommendation), we may want to modify this message for several different audiences. It is more than likely that we will have three or four key messages, and will want to tailor them for three or four audiences using three or four different tools.

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**Problems ➔ Possibilities ➔ Policies**
As discussed in Chapter Eight’s consideration of the Two-Pager, we can imagine each “message” briefly explaining the problems, the possibilities for solving those problems, and the potential policies. Another way of phrasing this is: problem – solution – action. These component message “parts” should each be no longer than 35 words, and must reflect the comprehension abilities of each target audience. As with the Two-Pager, developing messages is an exercise in logic (especially in structuring the order of the messages) and brevity. If our primary target were to read our messages over breakfast or during an elevator ride, would they understand everything we want them to?

For NH=ND’s project, there is one additional wrinkle. We haven’t completed the research yet! Understanding that our messages will definitely change over the course of our project – likely in nuance as opposed to outright substance – we can nonetheless sketch the problems, possibilities and policies we anticipate, and qualify them as such. Importantly, we can also build time and resources into our proposal for the development of these messages. A focus group meeting or informal survey may help us get a firm hold on what our targets already understand, and what they perceive as the problems and possibilities. Our messages need not be “ours” alone. We can also assist targets like community groups in elaborating their own evidence-informed messages. What better way for our research to influence a target than to have the target do the hard work of communicating for us?

The message development for the Ministry of Health rests on advocacy and a comprehension of the ministry’s policy formulation process (individuals and structures) and policy windows. This has already been discussed in Chapter Eight’s discussion of the Two-Pager and Chapter Two’s discussion of Bringing in the Demand. In considering our other primary audience of local communities, let’s design a message that a) emphasizes the importance of the health systems aspects of malaria control; b) suggests solutions; and c) through this campaign works to enlist local communities as advocates of our research, hoping that they might come to pressure government to make the changes suited to their needs.

Message for Local Communities:
1. Improving malaria control is an essential issue for all of M--------’s communities, as malaria remains the biggest killer of children under five. When used properly, both insecticide-treated nets (ITNs) and indoor residual spraying (IRS) are strong weapons in the fight against malaria.
2. Research has shown that both interventions have a strong health systems impact, positively and negatively. A study of both interventions reveals drastically different levels of access (across geography, income levels and gender), and different levels of service and financing (from public to private to NGO providers).
3. The current national approach to malaria control is uneven and highly inequitable. Communities need to press local and national government to adopt an integrated malaria control policy that sets out fair and just mechanisms for the delivery of and access to interventions that might protect every child from this terrible scourge.
5. Basket – Tools and Products

What kinds of communications “products” will best capture and deliver our messages?

The choice of our communications “basket” depends squarely on the type and content of message to deliver, our available resources, and also – most crucially – on how the audience likes to receive information. What newspaper do they read? What radio station do they listen to? Where do they gather? How can we marry scientific content with the right dissemination channel?

After checking our budget and determining the human skills of NH=ND, we can start sketching out the kinds of items we want to place in our basket of communications.

1. Ministry of Health

A staged approach is often effective when promoting a scientific message, a desire for change and when dealing with an audience we’ll need to persuade. Here we might start by disseminating one piece of information (e.g. a compelling “headline” above a one-pager of take-home messages), then progress to something more sophisticated (e.g. a three- or eight-page discussion of the main messages), and then, assuming the success of earlier stages, conclude with a convincing product (e.g. a 25-pager) that discusses the research in full detail and points to other resources. As stated, the staged approach is well captured by the 1:3:25 graded entry format, with each product matching an anticipated rise in audience interest.

1. Take-Home Messages. Exciting facts. Tone of “Believe me, there’s evidence to prove this”. Tempts the decision-maker to learn more.

3. Main Message Discussion. Aimed at those now “open” to the possibilities. Shows the concept is more than an idea. It is real, it stands up to scrutiny, and it’s backed by authoritative experts. Persuades the decision-maker that action is required.

25. The Evidence. Shows the proof. Shows the context. Shows how policies can solve problems. Indicates other resources, and what still needs to be done. Assures the decision-maker that the time is right, the issue is pressing, and credible solutions are at hand.

A communications “basket,” however, can go well beyond policy briefs, take-home messages and peer-reviewed papers. Especially when targeting decision-makers, we cannot discount the tremendous value of face-to-face meetings. There is no substitute for them. As we know, such meetings can take the form of phone calls, seminars, workshops, focus groups, conferences, and on. And, as discussed in Chapter Two's examination of Bringing in the Demand, we might also budget some resources for multi-stakeholder fora focused on creating products like a policy brief. Our research findings (and opinions) might then serve as either the backbone or as a principal input to a full national dialogue, with the end result ideally an evidence-informed policy change.
Within this idea rests another truth of both research and communications: no matter how well we package and communicate our research processes and findings, we alone will not change policy. We must put our message in perspective, and to do that we must listen, learn, adapt, and continually refine and re-direct our message.

2. Local Communities
We require very different tools to reach this audience. Some of the audience may be illiterate (rendering irrelevant any policy brief), and “emotional” messages demand rapid feedback and quick reflexes that only face-to-face communication can provide. First, let’s organize village-level meetings with community leaders and women’s associations to explain the health systems’ issues at hand. Second, “town-hall” meetings and lively posters could be used to support or illustrate our claims. Then, as one of the centrepieces for our communications campaign, let’s commission someone – an audio-visual producer perhaps, or a communications company – to create simple, direct radio spots that could be aired on a regular basis on community radio stations. Let’s also consider putting our one-page of take-home messages (which we developed for the Ministry) in local health clinics.

All of this represents quite a number of different tools, and a serious investment of time and human resources. However, the posters, radio spots and policy briefs may also attract wider attention, either in-country or because we’ve sent them to various global contacts. The media can be brought into this scenario in different ways – first as direct targets of these outputs and, second, as the entity that reports on the use of these tools. A news report on how a community integrated IRS and ITNs that cites our cutting-edge radio spots and posters and, of course, one of our meetings, would be a communications coup – and a great “multiplier” of audiences.

We should also add a newsletter to our basket – we’ll issue it twice a year, and it will contain updates on the research project for both our primary and secondary audiences. And of course, we should also consider the use of a website to present these tools, both as a reference “zone” and to allow opportunists the chance to discover us. We need not modify any of the above tools (posters, radio spots, newsletter) for internet use, merely upload them. More information on creating a web presence can be found in Chapter Twelve, as well as through any local web designer. There are also free website hosting services available, but these typically come with advertisements that may not add the right “look” for our organization’s online presence.
Lastly, let’s review some of the communications products we must create – like reports to our donors, for instance, or formal annual reports. Can we modify some of the information in these reports for a brochure, our newsletter, or even some of the text for our policy briefs? If we start thinking that anything we produce for communications can be used whole or in part in different ways, the more shortcuts we create and the more productive our time and resources will be. It’s also worth asking a donor exactly what they want in a narrative report – would a policy brief, for instance, suffice? Could a published newspaper article take the place of a scheduled report? Donors as much as researchers are as interested in policy relevance and application of the work they support – it’s up to us to proactively influence the nature of our reporting to them.

6. Channels – Promotion and Dissemination

What channels will we use to promote and disseminate our products?

Having the right message, the right audience, and the right products is one thing. Delivering them is another. All too often, researchers spend too much time on the products and not enough on the channel. This is a critical failing because the channel is every bit as important as the product itself. The channel is essential. The medium – be it TV, newspaper, or a meeting – dictates who receives the message. If someone must pay for a service (e.g. a newspaper), those who don’t pay won’t receive it. If someone must attend a meeting to receive the message, those who don’t attend won’t receive it.

Quite simply, our products must be seen and heard to have any value at all. What’s more, they must be seen and heard by the right people to have any impact. And before we develop any product or tool, we must identify the right channel to reach our audiences, we must budget for it, and we must have a strategy in place for moving our product to it and through it.

For our primary audience of the Ministry, we’ll personally hand-out the graded-entry format documents, as well as mailing them in hard and soft copies to all intended recipients. We’ll also mount them on our website, and naturally we’ll send them to all of our email contacts – perhaps after creating a mailing list (for more information on listserv’s see Chapter Twelve). We’ll also professionally print our “take-home messages” and leave them in strategic places, like waiting rooms at health clinics, a church, a health & fitness club – anywhere we feel our target audiences may go. For our more technically complex tool of the radio spot, some context mapping techniques will help us understand how content gets onto radio (e.g. do we need to pay the radio station?), and determine other important issues like the reach and listenership of each radio station. We could also make a CD-ROM or DVD of our radio spots for dissemination (at conferences, for instance – or at the Ministry), and should definitely put them on our website – international audiences love multimedia.

Most importantly, let’s make no assumptions. Let’s find out the key details of selected channels before developing any content. A few phone calls may well reveal that a particular product just won’t work – too expensive, too limited, or just not appropriate for the channels realistically available to us.
7. Resources – Materials, Finances, People

What kind of budget do we have for this? Will this change in the future? What communications skills and hardware do we have?

Communications can be expensive. They require high-quality materials and methods for creating those materials; they require people with the skills to use those methods; and they require dedicated financing. We need to be realistic about what we can actually achieve, and aware of the many “hidden” costs around certain tools – as the following mock budget for radio spots shows:

<table>
<thead>
<tr>
<th>Item</th>
<th>Number</th>
<th>Cost</th>
<th>Total Cost (USD)</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Pre-Production</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Radio spot concept (incorporating research) and creation of 6 episode scripts</td>
<td>10 hours</td>
<td>$50 per hour</td>
<td>$500</td>
<td>Writing fees to hire professional writers</td>
</tr>
<tr>
<td>Editing of script</td>
<td>2 hour</td>
<td>$50 per hour</td>
<td>$100</td>
<td>To hire outside editor</td>
</tr>
<tr>
<td>Translation of six scripts into local languages X and Y</td>
<td>6 scripts x 2 languages = 12 translations</td>
<td>$100 per script</td>
<td>$1,200</td>
<td>Languages will be: English, X and Y. The script will be the same for all languages.</td>
</tr>
<tr>
<td><strong>Sub-Total Pre-Production Costs</strong></td>
<td></td>
<td></td>
<td><strong>$1,800</strong></td>
<td></td>
</tr>
<tr>
<td>2. Production Costs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interviews</td>
<td>20</td>
<td>$20</td>
<td>$400</td>
<td>To cover transportation fees for interviewees</td>
</tr>
<tr>
<td>Voice talent</td>
<td>2</td>
<td>$100</td>
<td>$200</td>
<td>Small honorarium for two voice-actors</td>
</tr>
<tr>
<td>Various production costs</td>
<td>18</td>
<td>$200</td>
<td>$3,600</td>
<td>Covering all technical inputs, rental of recording studio, etc.</td>
</tr>
<tr>
<td>Content Supervision and Editing</td>
<td></td>
<td>$500</td>
<td>$500</td>
<td>Honorarium for our own staff</td>
</tr>
<tr>
<td>Technical Editing</td>
<td></td>
<td></td>
<td>$500</td>
<td>Honorarium for radio staff</td>
</tr>
<tr>
<td><strong>Sub-Total Production Costs</strong></td>
<td></td>
<td></td>
<td><strong>$5,200</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Post-production Costs</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Air Time</td>
<td>18 spots</td>
<td>$100 per 10 minutes</td>
<td>$1,800</td>
<td>Each spot is 10 minutes long</td>
</tr>
</tbody>
</table>
CD creation: duplication of CDs (incl. master); labeling CDs, etc. | 180 | $2 | $360 | 180 CDs in total: 60 per language. To be produced in-house.

<table>
<thead>
<tr>
<th>Sub-Total Post-Production Costs</th>
<th>$1,260</th>
</tr>
</thead>
<tbody>
<tr>
<td>GRAND TOTAL</td>
<td>$8,260</td>
</tr>
</tbody>
</table>

Even this type of cursory budget indicates this is an expensive proposition. Sometimes the sheer act of drawing up such a budget – and taking the time to think through all costs, as well as who will do what – can help to dictate which tools should and should not be developed.

### 8. Timing – Events, Opportunities, Planning

What is our timeline? Would a staged strategy be the most appropriate? What special events or opportunities might arise? Does the work (or future work) of like-minded organizations or ministries, etc., present possible dissemination opportunities?

Setting realistic deadlines in communications can be tricky – especially when we take to heart the ideas of listening, learning and adapting, and being reactive and responsive. That said, there are obvious deadlines if we want to disseminate our messages: national policy dialogues, ministerial meetings, international conferences, purchased air time, and so on. What’s more, once we’ve aroused interest in our work, we must have the products ready to satisfy that demand.

We may opt for a “staged strategy,” envisioning the build-up of our core messages (from simple to sophisticated) as a time-bound process. Baeyaert (2005) frames his vision of a staged approach through a desire not “to play all your cards at once,” urging organizations to “map out who you will approach first (influencer cascade); plan for a regular flow of information rather than one-shot announcements; [and] build in ‘highlight activities’ with high impact”. Staged strategies often let audiences determine their own exposure to our research: in the graded-entry 1:3:25 formulation, reading the 1 may convince the audience to progress to the 3, and in turn to the 25. Whatever the case, once we announce ourselves and make our message heard, we need to keep ourselves known and our knowledge available.

A second timing point relates to any obvious or potential events we might capitalize on. These could be conferences bringing together key stakeholders, a change of government, the scheduled writing of a government position or strategic plan, or an anticipated policy shift. Every month of every year invariably has an event that we might hang our communications efforts on; the more “in tune” with these events we are, the better we’ll be able to use them for our own purposes. It’s worth tasking one of our team members to keep abreast of current and future events, an eye fixed squarely on dissemination of our products. Potential changes in government – or within the Ministry itself – are also times of great opportunity for pushing our agenda. Newcomers often want to effect a change or make a mark, and we must be ready to supply them with all the information and evidence they may need.
When it comes to global events, a key idea is to subscribe to several different listservs, which will deliver news and information on upcoming events right to our in-boxes. The pre-eminent listserv on health information and events is currently PAHO’s Equity List, which sends out 3-5 emails per day, highlighting recent papers, toolkits and upcoming conferences and events (on global issues). It can be joined at: http://listserv.paho.org/Archives/equidad.html and accepts submissions.

For NH=ND, chances are strong that we are not the only organization working on malaria issues, or even malaria research, in our country. So how can we take advantage of momentum or publicity created by like-minded organizations? What are their big events? Can we join forces? Connected to this idea is staying alert to the work of organizations that may not, on the surface, be relevant to our mandate but, if we just spin our work or focus a little bit, turn out to be superb vehicles for our agenda. For instance, a conference on Information and Communication Technologies may not be concerned with health or malaria precisely, but it may be a good place to showcase our radio spots as a cutting-edge way of disseminating research results.

9. Brand – Creating one and being on it

Are all of our communications products “on brand”? How can we ensure that we are broadcasting the right message?

Consider the logos and products of Toyota, Nike, Heinz and Barclays. These brands translate not only as car, shoes, food, and bank (what they are) but also give us an association of status, quality, and size (what they’re like – the feelings their products create in us). A brand tells the world, at a glance, who and what we are. It is what we want to be seen, known and remembered as. “Being on brand” means that whatever we do, say or produce is consistent with the image and quality our brand represents. Our brand represents everything we do.

Before any of our products are disseminated, we must go through a checklist to ensure that our messages are of high quality and are “on brand”:

- Does our message, in two sentences or less, capture the importance of our work?
- Does our product show our honesty and trustworthiness?
- Does it show, in concrete terms, what we’ve achieved?
- Does it frame our issue and our research within the issue’s broader perspective?
- Does our message inspire? Does it convince an audience of its worth?
- Does it lead an audience to further resources?


We must take “being on brand” seriously. We must be both recognizable and consistent in our communications – on the small details (e.g. using the same font and colour schemes in any print communications) and on the big details (staying true to our core messages). We communicate who we are and what our organization is every day: we must have quality safeguards in place to ensure that we broadcast the right message. Delivering
the wrong or mixed message – to a Ministry official, for instance, or a donor – might deal a debilitating blow from which our organization may never recover.

Three simple “being on brand” strategies include:

1. Creating a “communications committee” to review our messages and products before they’re disseminated. As indicated in the text box above, there are some important questions we need to ask ourselves before we release any product. The committee need not be composed entirely of our own staff members; we may find individuals from like-minded organizations (or even from a donor organization) happy to quality-check the consistency, “honesty,” and perspective in our messages.

2. Taking or providing media training. Essential to understanding how we might remain “on brand” is understanding how the media might react to our messages, and how it might choose to report us. What is a “brand” to the media? How does the media select the stories it covers? What “issues” do they generally report? We need to ensure that everyone in our organization understands how the local/national/global media works and can reduce our work to effective, punchy and consistent sound bytes. We need to ensure that even the office manager, for instance, can speak in strong detail about our general work or any our specific projects.

3. Hiring a professional to create a logo and a style guide. These design issues are central to a perceived “professionalism”; the more professional a brochure or newsletter looks, the more professional the issuing organization must be. Just as our personal appearance speaks to our professionalism (imagine wearing a T-shirt and shorts to a board meeting), so do the small details of design contribute to the “look and feel” of our organization.

To that end, hiring an outside firm to design both a logo (the graphic representation of our organization) and a style guide (rules governing all communication products) is sound. Of course, we can do both of these internally, but may benefit, resources permitting, from the perspective and experience of a professional. Either way, we need to ensure that the logo and style guide are easily accessible to all staff, and that everyone knows the rules concerning their use.

Tips for developing a style guide include:12

- Provide a description or guidelines for using our logo – when to use it, when not to use it, how to use it, whether it’s in black-and-white or colour, and so on.
- Create a preferred “house style” for all print communications, setting out rules for font type, font size, capitalization, punctuation, and abbreviations.
  - e.g. “All our correspondence (e.g. formal letters) will be in Times New Roman, size 12. Text will be justified. Headings will be in bold, italics, size 14. Logo to go in top right corner”.
- Choose a reference work (e.g. the Chicago Manual of Style) and the preferred dictionary to resolve any spelling or grammatical issues.
- Describe acceptable variations to the house style.
- Create a naming nomenclature for projects, programmes, and documents (especially collaborative documents)
• e.g. “proposal-to-WHO-malaria-control-2008-v1.3” becomes, after a round of mild revision, “proposal-to-WHO-malaria-control-2008-v1.4” and “proposal-to-WHO-malaria-control-2008-v2.0” after major revision.
• Create a good glossary of terms.
• Create a list of frequently misspelled or misused words.

In addition to this, let’s consider making templates where we can – for instance, creating computerized stationary with our logo, on which we can add any text for a quick memo or press release. A template for a newsletter would be particularly useful – instead of redesigning the newsletter from scratch each time we want to issue it, we ensure our consistency (not to mention saving all kinds of time) by filling in the template with our desired text. This also creates a sense of familiarity within our audience – at a glance they’ll be able to recognize our brand.

In general: Let’s be consistent. Let’s keep our style and our communications as simple as we can (e.g. one font and one colour will suffice – though that does not necessarily mean black and white). Let’s think about the reader’s eye (through design) as much as we do their brain (through science).

10. Feedback – Evaluative Thinking

How will we know when our communications strategy is 100% successful? What will have changed? How can we assess whether we used the right tools, were on budget and on time, and had any influence?

Chapter Five’s investigation of Evaluative Thinking explores these questions in much greater detail, particularly in creating “feedback loop” mechanisms that can shed some light on what is and is not working well. This is essential information: we want to know which of our products and tools are hitting their targets, and which are missing. We want to know how our audience receives them, and how their “perception” of us might be changing. How might we change both our strategy and our products to reflect our users’ views and experiences with our communications?

Evaluative thinking (ET) is a means of thinking, of viewing the world: practitioners of ET take time to reflect upon their work, creating valuable lessons that can then influence and modify their activities. What are we learning and how can we use those lessons to improve our performance? Both the lesson and the act of learning are at the heart of ET: learn to extend what’s working well and learn to fix what’s working poorly.

If our resources permit it, we’ll include communications – and specifically our communications strategy – in a more rigorous M&E approach. If we have external evaluators, we’ll make an assessment of our communications one of their priorities. However, if
we don’t have the time, HR, or finances for this, some informal methods to gauge how well our communications are doing include:

- **Creating an Impact Log.** This is an informal record compiled in-house that gauges how our communications have been received. The log can comprise stakeholder feedback (e.g. an email extolling the virtues of our policy brief); a list of media references indicating the reach of our communications products (e.g. direct reference or citation in newspaper articles, Internet, TV); speeches citing our work, and so on. This is qualitative and non-systematic, but at the same time it can be an excellent way to gauge where we are, what we’re doing well, and what we might do better. As Hovland (2007) observes, an impact log can be a good (not to mention an inexpensive and skill-light) way to chart which of our communications products is commanding the most attention.\(^{13}\)

- **Conducting a Formal Survey.** With a formal survey, we should carefully and purposefully select a sample of people that could provide us with the type of information we need to reflect upon and improve our communications strategy. This might, for instance, involve polling our own staff to get an (anonymous) feel for their perceptions of our communications; we may also target members of both our primary and secondary audiences. This could tie into or build upon the communications audit we completed earlier in this chapter.

- **Conducing Key-Informant Interviews.** Like a formal survey, this is a technique to gather more in-depth information from stakeholders we feel have a particular insight into our communications. These could also be done through a focus group (which tend to work well at the community level).

There are many more ET techniques and tools in *Chapter Five.*

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For NH=ND, some key questions that could inform our evaluation might be: Did we use the right tools to reach the right audience? Did we achieve our ultimate goal of policy influence? How did policy shift as a result of our campaign? Did we budget adequately for our activities? Did our audiences understand our message? And, ultimately, did our communications work to change national malaria policy by the year 2011?
To gauge its communications strategy, NH=ND has decided to dedicate time and resources to creating:

- an impact log;
- a two-year progress review collecting qualitative data (key-informant interviews, formal surveys to a select list of those who’ve received our products before, focus group interviews);
- a Most Significant Change workshop to reflect on our communications.

Every two years, we’ll create an **action-orientated learning document** that details what key lessons are emerging in communications, how we might respond to those lessons, and possible steps for incorporating them into our overall approach and every-day activities. And we’ll review the essential elements as we go, and perhaps, based on the experience of designing this communications strategy for a project, we’ll extend our strategizing to our entire organization.

One step at a time.
Communications Strategy Template

Here, in one page, we’ve reproduced the Essential Elements with some room for organizations to fill in their own answers.

1. Review: How have we been communicating in the past?

2. Objectives: What do we want our communications to achieve? Are our objectives SMART?

3. Audience: Who is our audience? What information do they need to act upon our work?

4. Message: What is our message? Do we have one message for multiple audiences or multiple messages for multiple audiences?

5. Basket: What kinds of communications “products” will best capture and deliver our messages?

6. Channels: How will we promote and disseminate our products? What channels will we use?

7. Resources: What kind of budget do we have for this? Will this change in the future? What communications hardware and skills do we have?

8. Timing: What is our timeline? Would a staged strategy be the most appropriate? What special events or opportunities might arise? Does the work of like-minded organizations present possible opportunities?

9. Brand: Are all of our communications products “on brand”? How can we ensure that we are broadcasting the right message?

10. Feedback: Did our communications influence our audiences? How can we assess whether we used the right tools, were on budget and on time, and had any influence?
Further Resources

>> This is an outstanding toolkit with many strong suggestions and examples on designing a strategy. It is available at: http://www.causecommunications.org/clients-cause.php.

>> This is a powerpoint presentation with several excellent slides. It is available at: http://ec.europa.eu/research/conferences/2005/cer2005/presentations14_en.html

World Wildlife Foundation. [no year]. *International Communications Department. Programme/ Project Communications Strategy Template.*
>> Though brief, this document has done a superlative job of breaking down the many tasks within a communications strategy. It is available at: http://smap.eew.eea.europa.eu/test1/fol597352/International_Communications_Strategy_Template.pdf/download.

>> This guide introduces participatory development communications concepts, discusses effective two-way approaches, and presents a methodology to plan, develop and evaluate communications strategies at a community level. It’s available at: http://www.idrc.ca/en/cv-52226-201-1-DO_TOPIC.html

>> This lays out excellent bullet points on “best practices in internal communications” and draws very useful distinctions between internal and external communications strategies. It is available at: http://www.wingsweb.org/download/communication_strategies.pdf

>> These 14 quick-reference “field sheets” present guidelines for developing a communication strategy for rural- or village-based projects. This includes the use of “small meddia” such as photographs, illustrations, leaflets, and working with media specialists in theatre, radio, video, etc. Available at: http://www.idrc.ca/en/cv-104545-201-1-DO_TOPIC.html

Media Trust. [no year]. “Developing a Communications Strategy”.
>> This website has a very strong division of core tasks within a communications strategy. Though not as intricate as the Big Eleven Questions, it is very useful in thinking through needs and abilities. It is available at: http://www.mediatrust.org/training-events/training-resources/online-guides-1/guide_developing-a-communications-strategy
The SPIN Project. 2005. “Strategic Communications Planning”
>> This brochure is a solid overview of the components needed for strategic communications, with good diagrams and suggestions. Available at:

Examples of Communications Strategies

Perhaps the best way of going about designing a strategy is to copy or modify that of others. To that end, here are some good examples of existing communications strategies:

>> This is a superlative example, and easily one of the best available. Its value is particularly in showing how communications can help an organization achieve its core goals. It is extremely well thought out and is well worth a read. Available at:

>> As with the IMF’s the MRC does a strong job here of laying out its strategy and imperatives. It understands its niche and audiences extremely well. Available at:
http://www.mrc.co.za/about/commsтрат2007.pdf

>> This document has an excellent breakdown of the project’s communication requirements as well as several tables that do a good job of demonstrating how to develop and pitch key messages. Available at:
http://www.adp.org.za/Trust_Meeting_Documents/ADP_Trust_Meeting_07_09_06/Documents/ADP_ComStrat_V0_1.doc

Comments? Questions? Criticisms?

Email the Research Matters Programme Officers:
Nasreen Jessani at njessani@idrc.or.ke
Graham Reid at greid@idrc.or.ke.

Research Matters (RM) is a collaboration of the International Development Research Centre (IDRC) and the Swiss Agency for Development and Cooperation (SDC). RM was launched in 2003 to examine and enhance the specific KT dynamics within the field of health systems research. From these founding connections with both a research funder and a bilateral donor, RM has occupied a unique vantage among health researchers and research-users. By working directly with both the producers of research and with its consumers, RM has developed a range of activities and modalities designed to hasten the movement of research results to the policy arena, to database and access those results, to communicate them, and to expand an appreciation of research itself. RM builds capacity among researchers to perform their own KT; RM responds to the priorities of major research-users; and RM actively brokers both research results and research processes. As an active, ground-level embodiment of KT, RM has helped to shape how health research is demanded, created, supplied, and ultimately used.
Endnotes

1 Some details for this fictional research project was borrowed enthusiastically from Yukich Y, Tediosi F, Lengeler C. 2007. “Operations, Costs and Cost-Effectiveness of Five Insecticide-Treated Net Programs (Eritrea, Malawi, Tanzania, Togo, Senegal) and Two Indoor Residual Spraying Programs (Kwa-Zulu-Natal, Mozambique)”. STI. http://www.malariafreefuture.org/news/2007/20070713_OperationsCostcosteffectiveness.pdf

2 Some large organizations may wish to pay particular attention to internal communications perceptions, noting the sharp differences between internal and external communications.

3 Again, the issue of internal vs. external communications is an important one. For reasons of space, this chapter will mostly focus on external communications strategies.


7 This toolkit does not explore issues of culture and communication, though this is an extremely important aspect of any communications initiative. For a strong treatment of this issue vis-à-vis health research, see Matthew Kreuter and Stephanie McClure, “The Role of Culture in Health Communication”. Annual Review of Public Health. Vol. 25: 439-455. Available at: http://arjournals.annualreviews.org/doi/abs/10.1146/annurev.publhealth.25.101802.123000


9 More from the Media Trust can be found at http://www.mediatrust.org/training-events/training-resources/online-guides-1/guide_developing-a-communications-strategy


11 Baeyaert (2005)

12 Adapted from Hershey (2005)

# Table of Contents

I. Designing a Communications Strategy  
   Developing our message  

II. Selecting the Right Print Tools  
   1. Articles in Scientific Journals  
   Further Resources  
   2. Newspaper articles and editorials  
      Forging Relations with the Media  
      Researchers are experts  
      Writing a Newspaper Article  
   3. Press Releases  
   4. Policy Briefs  
      Components of a Policy Brief  
   5. Newsletters  
      What should be included in a newsletter?  
   6. Brochures and Leaflets  
   7. Cartoons and Images
Communicating Research: Using Print Media

Research, package and publish – then stand back and watch as findings change policy! When it comes to influencing policy, these sentiments tend to prevail in the world of research. The emphasis falls on packaging and publishing, with researchers believing their work complete when findings convert into journal articles or policy briefs or press releases. While these “push” strategies certainly have their uses, they generally have a limited influence on the decision-making process. As discussed in other chapters of this Toolkit, the value of print media rises tremendously when used in conjunction with “pull” or “linkage and exchange” strategies.

Print media tools are typically used at the end of the research cycle – when we have results that we want to share – but there is no reason why we can’t use print tools during a project. While a peer-reviewed article, a two-pager or an editorial might present findings at completion, we can also use newsletters, brochures, and two-pagers to keep key audiences informed of interim directions, priming them for our eventual findings and recommendations. Both the opportunities and the limitations of print media must be understood to weave them optimally into a broader KT strategy that might include multimedia, conferences, and direct exchanges.

Print media’s reach is determined above all by “readability” – we must package findings in a way that is simple to understand and access, and is ultimately appealing and relevant to our audience (again that vital element of audience!). A peer-reviewed paper is pitched at
other researchers, using scientific language; writing for the media or for decision-makers requires a tone that is clear, jargon-free and in the right style.\(^1\) No matter our audience, we must keep both quality and quantity issues in mind, and carefully select the key messages emerging from our research (for more on this, please see Chapter Eight’s discussion of the Two-Pager). While we do not want to overwhelm our audience with too much, we do need to provide them with enough information to get them interested; further, we must tailor this information to their time and comprehension abilities. We cannot try to make every tool do everything – we must understand the scope of each tool and then use it appropriately.

In this chapter, we’ll review key elements of a communications strategy, and then discuss seven different print media tools: peer-reviewed articles, newspaper articles (including a section on developing better ties with journalists), press releases, policy briefs, newsletters, brochures, and cartoons.

## I. Designing a Communications Strategy

The good news is that we don’t have to be a communications expert to develop a solid communications strategy. The bad news is that there are no shortcuts. Whether we hire a journalist or dedicate ourselves to months of writing, in developing a communications strategy we must spend our precious commodities of time and resources. There is no other way.

### The Essential Elements

1. **Review**: How have we been communicating in the past? How effective has that been? How do our audiences perceive us?
2. **Objective**: What do we want our communications to achieve? Are our objectives SMART?
3. **Audience**: Who is our audience? Do we have a primary and a secondary audience? What information do they need to act upon our message?
4. **Message**: What is our message? Do we have one message for multiple audiences or multiple messages for multiple audiences?
5. **Basket**: What kinds of communications “products” best capture and deliver our messages?
6. **Channels**: What channels will we use to promote and disseminate our products?
7. **Resources**: What kind of budget do we have for this? Will this change in the future? What communications skills and hardware do we have?
8. **Timing**: What is our timeline? Would a staged strategy be the most appropriate? What special events or opportunities might arise? Does the work (or future work) of like-minded organizations or ministries, etc., present opportunities?
9. **Brand**: Are all of our communications products “on brand”? How can we ensure that we are broadcasting the right message?
10. **Feedback**: How will we know when our communications strategy is 100% successful? What will have changed? How can we assess whether we used the right tools, were on budget and on time, and had any influence?

For more on the Essential Elements, see Chapter Six’s discussion of Designing a Communications Strategy.
Developing our message
Let’s imagine our message as one short paragraph that sums up the key points. This paragraph – and it is not simple to reduce years of work or even to anticipate years of work in one paragraph – will become our template, our seed, that will then grow into the full-blown communication tool best suited to our audience and our issue.

The AIDA rule\(^2\) can be a useful way to frame our thinking. As such, we must consider:

<table>
<thead>
<tr>
<th>A</th>
<th>Attracting the <strong>attention</strong> of the target</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>Raising <strong>interest</strong> in the message or evidence</td>
</tr>
<tr>
<td>D</td>
<td>Encouraging a <strong>desire</strong> to act or to know more</td>
</tr>
<tr>
<td>A</td>
<td>Prompting <strong>action</strong> and presenting a solution</td>
</tr>
</tbody>
</table>

Our message should therefore be visible, clear, relevant, and actionable. It should also provide a solution to a problem or threat that our audience can relate to. A good way is to create one core message that can then be adapted to each specific audience.

Our message could include the following elements:\(^3\)

- Our analysis of the problem
- The problem’s cause
- Who could or should solve it
- Why change is important
- Our proposed solution
- Actions we ask others (**message recipients**) to take to bring this change about.

Our message could, for example, take the following shape:

“Every year, malaria claims over 1 million lives, three-quarters of these deaths occurring among African children under the age of five. Even when people survive malaria, it can lead to low birth weight, weakness, blindness, anemia, recurrent fever, and other problems, in addition to representing a high economic burden for individuals, families, communities and health systems. Yet, there exist proven cost-effective interventions that can help curtail the ravages of malaria if only they are made available to those who need them. By subsidizing the distribution of insecticide-treated bed nets at the local level, we can reduce all-cause child mortality by as much as 20%.”\(^4\)

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**Top Tips for Developing Messages**

- Develop some simple messages and model how these might work in different contexts: a press release, a report, a newspaper article, a web page. Remember that we can be succinct without “dumbing down”. Make sure our project is branded in line with our communication objectives.
- Consider using the **grandmother test**: would she understand our message? If it’s too complex for her, perhaps it’s too tricky for our audience as well.
- What if our message were on the back of a cereal box? “Corn Flake Papers” are short and sweet, and can be read by a rushed individual over breakfast.
II. Selecting the Right Print Tools

There are a range of print tools available to us, each with pros and cons at capturing messages and reaching audiences. As in all things KT, the more we know about our message and our audience, the better the chances we’ll select the right tool (or set of tools). In this section, we’ll discuss seven different tools and indicate which audience they’re best suited for, tips on how to make best use of them, as well as links to further resources. We’ll discuss:

- Articles in scientific publications
- Newspaper articles and editorials
- Press Releases
- Policy Briefs
- Newsletters
- Brochures/Leaflets
- Cartoons

1. Articles in Scientific Journals

This is the favoured tool of most researchers, as it is the format in which they can flex their scientific muscles and present their methods and findings. It is the tool that can capture, in its fullness, the science of any study. Peer-reviewed articles are often the litmus test of a researcher’s success, determining tenure or “fundability”. If the only goal of research is to influence the state-of-the-art, targeting only other researchers, then this is a perfectly adequate tool. However, if we want to change or influence policy, this tool is woefully inadequate. Beyond scientists and academics, the audience for scientific journals is effectively zero. Decision-makers don’t read them. Neither do the media or communities. The language of journals often makes it impossible for the lay person to understand the research. Even “non-scientists” well able to understand the content of journal articles find the format deadly dull and are often frustrated by the lack of concrete recommendations.

Importantly, many scholars in low and middle income countries (LMICs) are unlikely to have full access to peer-reviewed publications. One way of getting around this problem is to publish in open-access formats (see Chapter Ten for more on this). It’s also worth noting that the sheer quantity of articles – about three million new ones every year – makes it extremely difficult for even the most devoted scholar to keep up. It’s been estimated that a scholar would need to read 17-20 new articles every day just to keep abreast of the latest developments. Let’s think carefully before adding to that pile.

Some useful tips for maximum impact when writing for scholarly journals include:

- **Clarity** and **simplicity** are crucial – even if the audience is jargon-savvy researchers. Do not assume all are as familiar as we are with the subject area or topic;
- **Use words sparingly and precisely** and write using **crisp sentences** that are straight to the point;
- **Do not use colloquial speech or contractions**: use “do not” instead of “don’t”;
- Use **active verbs** and avoid the passive voice: use “new research shows” not “it was shown by new research that...”
- Give as much **thought and consideration** to the journal article as to the study itself: do not let it be an after-thought.

Most scientific journals publish a set of “instructions for authors” that guide article writing. While there might be slight differences from one publication to another, the general format is usually:

- **Title** – The title should describe the content in a short and clear manner. Use descriptive words and think about *keywords* that will be picked up by search engines and lead readers to the paper.
- **Abstract** – This section should be self-contained – a good abstract gives the reader the paper’s overall thrust and central conclusions, and plays a critical role in determining whether the average reader will keep reading the rest of our work. It should not be more than a few paragraphs long and it should contain the purpose of the study, the research methods, the main results, as well as principal conclusions. It may be short in length, but not in painstaking precision.
- **Introduction** – We must present the question being asked (statement of purpose), the context of the study (background information about what is already known) and the hypothesis. The background section should not overwhelm the reader but provide just enough for an understanding of the context.
- **Methods** – Explain why and how each method or procedure was used, providing sufficient information to allow others to reproduce the study.
- **Results** – These should be presented without comment, bias or interpretation through the use of a verbal summary and, when appropriate, figures and tables.
- **Discussion and conclusion** – This section should analyze the data – evaluate their meaning in terms of the original question of hypothesis and point out their significance – as well as explain how it relates to other studies. We’ll conclude by summarizing the key points we’d like our reader to take away from our study as well as point out any areas for further study.
- **Acknowledgements (if any)**
- **References** – A list of the references that were cited in the body of the paper. The *Vancouver Style* is used in most biomedical publications.

### Sections of a Scientific Paper

<table>
<thead>
<tr>
<th>What did I do in a nutshell?</th>
<th>Abstract</th>
</tr>
</thead>
<tbody>
<tr>
<td>What is the problem?</td>
<td>Introduction</td>
</tr>
<tr>
<td>How did I solve the problem?</td>
<td>Materials and Methods</td>
</tr>
<tr>
<td>What did I find out?</td>
<td>Results</td>
</tr>
<tr>
<td>What does it mean?</td>
<td>Discussion</td>
</tr>
<tr>
<td>Who helped me out?</td>
<td>Acknowledgements (optional)</td>
</tr>
<tr>
<td>Whose work did I refer to?</td>
<td>References</td>
</tr>
<tr>
<td>Extra Information</td>
<td>Appendices (optional)</td>
</tr>
</tbody>
</table>

Further Resources

- The website of the United States National Library of Medicine provides 41 citation examples using the Vancouver Style. Available at: http://www.nlm.nih.gov/bsd/uniform_requirements.html
- The International Committee of Medical Journal Editors publishes the Uniform Requirements for Manuscripts Submitted to Biomedical Journals. Available at: http://www.icmje.org/
- The websites of various scientific journals provide guidelines for authors. See for example:
  - The Lancet. http://www.thelancet.com/authors
  - The British Medical Journal. http://resources.bmj.com/bmj/authors?resource_name=Authors;

2. Newspaper articles and editorials

Articles in newspapers – news items, features or editorials – reach a wide audience and can generate public debate. The media can inform the public about our work and it can advocate adoption of our findings; at the same time, it can also dismiss our work in a few barbed sentences. Understood and influenced properly, the media can be an extremely potent ally.

Choosing the right media outlet

<table>
<thead>
<tr>
<th>Media Outlet</th>
<th>Purpose</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Online media</strong> (websites, e-forums, newsletters)</td>
<td>– for reaching new audiences quickly and cheaply;</td>
</tr>
<tr>
<td><strong>National Press</strong></td>
<td>– for stimulating a national (public/civil society/government) response;</td>
</tr>
<tr>
<td><strong>Regional Press</strong></td>
<td>– for reaching regional bodies and international civil society organizations;</td>
</tr>
<tr>
<td><strong>Local or community press</strong></td>
<td>– for reaching street-level bureaucrats and community-based organizations, raising public debate, invigorating the research agenda and increasing accountability.</td>
</tr>
</tbody>
</table>


In most cases, newspapers are written by staff members and not by ad hoc correspondents. As such, the hardest task is to convince editors that our story deserves attention. When it comes to local or community presses, however, a news article or a feature will usually be welcomed. As always, the more we know in advance (e.g. the preferences and habits of a particular publication), the better we will be able to use our time, whether in lobbying reporters to cover our story or taking the time to write it ourselves. Let’s not discount the third option either: if budget permits, hiring a journalist to write for us can help pitch the story in the right tone and style. We might further gain by taking advantage of that journalist’s media savvy and industry contacts to push our agenda forward.
Forging Relations with the Media

The media can indeed bring us into the kitchen, so that we can see how the soup of public opinion is made. However, just like policy-makers, practitioners and the general public, the media are also overwhelmed by the daily flow of information and will need to be convinced that our story merits coverage.

We must do our homework before approaching any media or journalist. We need to examine the news content of different newspapers, the audiences they reach, as well as the frequency at which they are published. In the absence of this, we risk wasting our time (and theirs) by sending our pitch to a journalist or newspaper that does not cover any type of health-related stories or that is currently occupied with more pressing news.

Foremost is the topicality and relevance of our research. Will the general public be interested in reading an article about a new AIDS drug in the midst of a Rift Valley Fever scare? Will the media be interested in our conference or findings during a general election – even in a neighbouring country? Timing is of the essence, and because of that we must keep abreast of the news, link our research with the relevant issues of the day, and identify the moments to press our agenda – and the moments to keep silent. The news often operates in cyclical fashion; there are months of hyper-activity and months of quiet. And the more we understand this cycle, the better our chances of achieving the desired levels of publicity.

When “pitching” our research to journalists, we must be sure to make the message appealing. We must make it “sexy,” using fast and simple messages, bearing in mind that journalists will ultimately reduce a headline to as few as three or four words. A good soundbite can get a message across in a single sentence.
Remember that a Journalist Has...

- an individual ego and psychology
- peers and superiors
- departmental distinctions
- competitors
- deadlines
- cameras and microphones
- an obligation to probe
- an eye and ear for evasion
- other sources of information
- a nose for scandal
- a taste for confrontation
- pressure to maximize and deliver drama
- little or no interest in a researcher’s aims or welfare
- power to harm or help
- the last word …

Researchers are experts

Our efforts with the media must centre on building strong relationships of mutual respect and trust. If we can present ourselves as a reliable and savvy expert on a given topic, then journalists are more likely to accept our story and, even more importantly, may proactively seek our opinion on a subject related to our expertise. Researchers are, after all, experts in their field. And journalists often need “authoritative sources” and “attributed statements” for their stories.

Building relationships with journalists

**Step 1** – Put together a list of journalists (with contact details) that might be potentially interested in our issue.

**Step 2** – Once we have “new” information (such as findings or details of an upcoming event) we can introduce ourselves to the listed journalists through a brief phone call. Find out: the best time to send the person information; how soon they need it before it is printed; and how they would prefer to receive the information. The best time to call is often in the morning (but not too early!).

**Step 3** – Focus on one or two journalists and build relationships with them to learn more about what they are interested in. Keep them up to date about what is going on with our research at every stage, invite them to attend events, and be available if they require any information.

**Step 4** – We must make ourselves available to comment on any particular story that journalists might be investigating. Ideally, journalists will come to us; but in other instances, we might do well to remind them that we can provide intelligent and insightful commentary on their intended story.

**Source:** Adapted from *A Researcher’s Guide to Working with the Media*, 2005.

Writing a Newspaper Article

The style and format of a newspaper article is markedly different from an article in a scientific journal. How many of the paper’s readers would be interested in or understand our methods and results? In the case of a newspaper article, not only must the title grab the reader’s attention, but the article itself should be constructed like an inverted pyramid, starting with the most important information and working down to the individual supporting details. While this applies more to a news story than to a fuller feature article, the logic is important to understand. The pyramid construction allows...
editors the easy freedom to remove words from the bottom, knowing that the story’s absolute essence is at the top.

Our typing should be double-spaced. Every page must be numbered at the top right with a “catchline” – e.g. “Malaria 1”. We should type the word “ends” at the conclusion of the story, followed by the author’s name, position and contact details in italics.

**Headline:** This should be a short and attention-grabbing statement about our story that uses an active verb (e.g. “Remarkable new science reveals...”)

**Byline:** Identifies the author.

**Lead Paragraph:** This is the key to our whole story and should identify the 6 Ws: who, what, when, where, why, and how.

**Explanation:** We must ask ourselves what information our readers need beyond the first paragraph, and provide it in order of importance. We finish our story with the supporting details and any additional information that is not crucial.

**General tips:**

- Keep sentences plain, simple and short;
- Use straightforward vocabulary and avoid jargon and acronyms;
- Use active verbs (e.g. research shows, not it was shown by research that);
- Choose words sparingly;
- Where possible, use quotations to bring life, examples and attribution to the story.

**Roles the media can play in the research process**

- To inform the general public that research is underway;
- To disseminate important findings;
- To act as a conduit between groups with similar interests;
- To provide a forum for debate and dialogue; often shaping debate by providing the parameters of discussion and highlighting particular issues;
- To provide the non-scientific context and colloquial evidence around the issue at hand.
- To market the research, the research institute, the programme or the researchers, building their profile and reputation;
- To build accountability by communicating findings with those who participated in or supported the research; to allow the public to hold decision makers to account.


3. **Press Releases**

When trying to get our research covered in the press – be it the formal launch of our project or the dissemination of our findings – one of the most pertinent tools is a press release. This informs journalists about our story and convinces them to seek more information, cover our event, or, in a best case, publish as-is.
According to Charlotte Denny (2003), the economics correspondent for *The Guardian*, researchers should “think about the rhythm of the week from a journalist’s perspective. Sunday is a good day to pitch a story for Monday’s newspaper as there is usually not much news around on that day.” In the same vein, we should attempt to send our release early in the day, ideally during a quiet news period. Sub-editors work throughout the day to progressively fill pages – after 10 am, available space shrinks by the hour.

Once the release has been sent, make a follow-up phone call to inquire whether the journalist has received it, whether s/he has any questions, and whether s/he intends to cover it. Similarly, we need to be available if journalists want to get in touch with us once the release has been sent. Again, we should attempt to peg our press release to a news-event, launch or a public meeting.

**Tips for writing a press release:**

- Make it short (no longer than one page), use simple language and avoid jargon;
- Mimic, as much as possible, the style and format of a news story;
- The title should contain key words, be punchy, and to the point;
- The first paragraph should provide all the important information and briefly outline the what (is new), the who (is involved/did the research), the where (is the study/research/publication), the when (does it take place/get published), the why (objective) and the how (relevance);¹¹
- Write in the third person (e.g. “Dr. Mutale indicated that…”);
- Use short sentences and begin a new paragraph frequently;
- Use active verbs and avoid the passive voice (e.g. “Dr. Mutale indicated that…” *not* “It was indicated by Dr. Mutale that…”)

**Format of the Press Release**

**Date or embargo:** An embargo enables a journalist to receive a release in advance on the condition that it may not be used before a specific date and time. The embargo lets us control when we would like the story to appear in the news. We should make this clearly visible at the top of the page. Beware, though – embargoes are not always honoured. We’ll need to make a judgement call on the integrity of both the paper and the journalist.

**Heading:** This should be short (no longer than two lines), use an active verb, and capture the essence of the story.

**Introductory paragraph:** The intro should succinctly provide an overview of the entire press release and answer the ‘who’, ‘what’, ‘why’, ‘when’, ‘where’ and ‘how’ questions.

**Text:** As with a newspaper article, the paragraphs should be written in descending order of importance.

**Details:** Contact information for your spokesperson; relevant website address.

We will also need to ensure that we target our release to the right media – the reader of our publication must be able to relate to our story on some level. If the paper is owned and run by the state, it may not be interested in findings that criticize existing policy. It might also be advisable to offer exclusivity to a particular journalist or publication.
4. Policy Briefs

Policy briefs communicate with officials, bureaucrats, politicians, development practitioners, donors, and more. As always, the characteristics of audience determine the format, content and style of any policy brief. Keep in mind that the audience will not necessarily be familiar with our subject, and will have a variety of constraints on their time and comprehension. We therefore need to be absolutely concise in convincing our audience of the importance, relevance and urgency of the issue and the need to adopt particular policy recommendations – all in the space of two-pages or less. The brief should pass the “corn-flakes” or “breakfast test” – “whether a politician [can] identify its main points in the time it takes to eat a hasty breakfast.”

In short, a policy brief should identify a problem, propose a solution, and present a compelling recommendation. In other words, we must move from problems to possibilities to policies. Much more on the methodology of a policy brief is available in Chapter Eight, where we see how a complex piece of research on male circumcision and HIV prevention can become an effective two-page policy brief.

Facts and science are often not enough. We need to focus on the impacts on people and the real-life implications. As Hovland (2005) explains, “the presentation of the outcomes of [our] data analysis will probably not be enough to make an impact in the policy debate on a particular issue, but through the use of this data as evidence in a comprehensive and coherent argument of [our] position, [we] will give [our] work the best possible chance of having this impact.”

Tips for an effective policy brief:

- **Remain focused** from start to finish;
- Keep the audience in mind while writing: use a professional as opposed to an academic tone;
- Ground the argument in strong and reliable evidence;
- **Limit the focus** to a particular problem or issue;
- Be succinct and to the point, using short sentences and paragraphs;
- Use language that is simple and provide enough information to allow the reader to follow the argument effortlessly;
- Make it accessible by subdividing the text to guide the reader through it;
- Make it interesting and attractive through the use of colors, images, quotes, photographs, boxes, and more;
- Make sure that recommendations are practical and feasible;
- Avoid jargon or acronyms;
- Provide an overview of any and all cost implications for implementing our preferred option;
- As indicated in the text box below, consider the supporting documents behind a policy brief. In the CHSRF’s “graded entry” 1:3:25 formula, we have a one-pager of

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**Problems — Possibilities — Policies**

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take-home messages, a three-paged executive summary (or policy brief), and a twenty-five-paged scientific paper. Each targets and is tailored for specific audiences.

### Supporting a policy brief

“Our interviews with health care managers and policy-makers suggest that they would benefit from having information that is relevant for decisions highlighted for them (e.g. contextual factors that affect a review’s local applicability and information about the benefits, harms/risks and costs of interventions) and having reviews presented in a way that allows for rapid scanning for relevance and then graded entry (such as one page of take-home messages, a three-page executive summary and a 25-page report).”


### Components of a Policy Brief

The length of a brief depends on the intended audience. If the problem is new, a two-pager might be enough to get the wheels turning. If the problem is well understood, we may need to spend up to eight pages discussing the work. For the skeleton of a two-page brief, see *Chapter Eight*. An eight-page brief is typically as follows:

1. **Title** – brief and attention-grabbing.
2. **Executive Summary** – an overview of the problem, its relevance, the reasons why action is necessary, and specific recommendations. *On the first page.*
4. **Background and/or context to the problem and its importance** – the essential facts needed to convince the audience that the problem requires urgent attention and action.
5. **Pre-existing policies** – what has been done in the past or what is in place now, if anything, to deal with the problem.
6. **Policy Options** – alternative ways to address the problem without overwhelming the reader with too many options.
7. **Critique of policy options** – the pros and cons of each alternative from the perspective of the target audience.
8. **Policy recommendation** – a preferred alternative, providing a convincing argument and imperatives for action.
9. **Sources consulted or recommended** – similar to an annotated bibliography, 1-3 sentences to explain the relevance and contribution of each source.

### Newsletters

Newsletters can be tailored for either an external or an internal audience (but not both at the same time). External newsletters are principally used to increase the visibility of an organization and its activities, and establish a regular communication channel. A successful Newsletter should tell fringe readers all they need to know, and entice core readers to want more information.

*Chapter Twelve* of this *Toolkit* provides more discussion of the newsletter, and how to integrate this with information technologies.
As ever, the audience will determine content and presentation. If we decide upon the length and style of our newsletter early on, we’ll be better able to structure and prioritize the content. If possible, we should keep our newsletter short, somewhere between two and four pages.

In terms of frequency, the key is to be consistent and predictable – stick to a timeline and readers will be more likely to look out for it. Timing is a crucial element: send it out too often and readers might feel pestered; too infrequently and readers might forget who we are and what we’ve done. Finding that right balance is difficult but essential.

Presentation is also vital. The name and masthead should catch the reader’s attention. Be innovative while keeping it short and sweet. Use headlines no longer than five to seven words, with different headline sizes highlighting degrees of importance. Use columns, boxes, paragraphs, sub-headings, even colour, to make our document more dynamic – but don’t overdo the flourishes and never use more than three type-faces on one page. Do not be afraid of using white space: it gives the reader’s eyes a rest and emphasizes the separation between different items. The more crowded our newsletter, the more difficult it is on the eye; and the more difficult it is on the eye, the less the audience will want to read on.

Articles and news items in a newsletter should be written with the same rules as in a newspaper article. Start with the ‘who’, ‘what’, ‘where’, ‘when’, ‘why’ and ‘how,’ and use the inverted pyramid.

A newsletter can be professionally commissioned or easily produced in-house using a few simple computer programs – word processing software (e.g. MS Word) is often more than enough. Ideally, there should be in-house capabilities at using programs like Adobe Photoshop or InDesign, but these are complex and require a little more computer knowledge and a lot more design skill. Word processing software, when used with attention to detail and a fuller understanding of their capabilities, will likely suffice – and they often have good, customizable templates that have done all the hard design work for us.

**What should be included in a newsletter?**

While the length of our newsletter will obviously influence its content, here are a few suggestions on what might be included:

- **Digest**: edited versions (e.g. a “snippet”) of our press releases;
- **Progress**: update of activities, projects, plans;
- **Reports**: on conferences or meetings;
- **Goals**: achievements, milestones;
- **Plans**: info about forthcoming events;
- **Tips**: technical advice;
- **Links**: to project results, articles, further information;
- **People**: profiles of researchers;
- **Graphics**: images, cartoons and pictures;
- **Features**: a meatier analysis of an issue.

Once our newsletter is complete, the final step is its distribution. Again, our audience will influence the selected methods: rural communities will need a hard copy; researchers, decision-makers and global colleagues would likely prefer something in an email. For this...
we can use a distribution list (or “list-serv” – a way of grouping together all the emails we want to address at one go), sending it to all our contacts (again, see *Chapter Twelve*). We’ll also post it on our website, and ask colleagues to link to it from theirs.

Newsletter Examples:

- *Research Matters Newsletter:* [www.research-matters.net](http://www.research-matters.net)
- *Links,* the Newsletter of the Canadian Health Services Research Foundation: [http://www.chsrf.ca/other_documents/newsletter/index_e.php](http://www.chsrf.ca/other_documents/newsletter/index_e.php)

6. Brochures and Leaflets

Brochures and leaflets are an excellent tool to promote a product, institution or project, but can also be used to share research-related information with a specific audience (whose desires, time and abilities we’ve already mapped out!).

Many of the guidelines for policy briefs and press releases remain applicable – avoid jargon and scientific language, use short sentences and simple vocabulary, and use active verbs, etc. Readers should be able to understand the message at-a-glance. Colours, images and effective fonts add flavour. Brochures have a longer shelf-life than newsletters or newspaper articles, so avoid including content that will be rapidly outdated. We must think long-term, particularly if we don’t have the time and financial resources to keep this brochure constantly updated.

While the specific content will depend on objectives and audience, the following list is typical:

- A statement of the problem – in terms of an “objective”;  
- A review of the background and rationale for undertaking the initiative;\(^\text{18}\)  
- Our research results and their ‘real-life’ implications;  
- Our policy recommendations;  
- An overview of the research project/institution/team;\(^\text{19}\)  
- Links to further sources of information;  
- Our contact information;  
- Images and graphics (throughout).

In its most basic form, a brochure/leaflet can be created out of an A4 sheet of paper, folded in half or in three. By keeping it small, we increase the likelihood that people will read it and hold on to it.
The front cover (1) should be eye-catching and provide enough content to encourage the reader to look inside. Consider using an image that illustrates the subject, a logo, and possibly a slogan. Avoid using the back cover (6) for much more than contact information, as this is the panel the audience is least likely to pay attention to. Include most information on panels 5 and the 2-4 spread as these are the first ones a reader will see when opening the brochure.

7. Cartoons and Images

How many times have we heard the saying “A picture is worth a thousand words?” While images are not always the best tool to use when trying to explain the complex science behind a specific research project, they are brilliant at bringing to life – with colour and nuance and texture – the kernel of an idea or the spirit of a project. A recent review of research has shown that “pictures closely linked to written or spoken text can, when compared to text alone, markedly increase attention to and recall of health education information.”

As highlighted in the below example – and in Chapter One’s discussion of cartoons illustrating a corruption study in Senegal – cartoons and images get a message across in a way that captures and keeps an audience’s attention. Professional cartoonists not only give the graphic more impact, but also have the mind-set to make the situation more appropriate and amusing. Additionally, local artists tend to strike a much more accurate chord for a community audience.

Alternatively, we can easily use pictures and other images that have already been produced, as long as we obtain permission from their creator or from whoever holds the copyright.
**Using Cartoons to increase adherence to treatment**

Delp and Jones (1996) conducted a study with a sample of 234 patients who arrived at an emergency room with lacerations. At the point of discharge, all patients were handed print instructions for taking care of their wounds. Half of the patients were given pictures that illustrated the information in the text. What Delp and Jones found was that patients who received the handouts with illustrations were more likely to read them than those that had only received text (98% compared with 79%). In addition, those who received illustrations were more likely to remember what they had read and to take better care of their wounds.

Comments? Questions? Criticisms?

Email the Research Matters Programme Officers:
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Graham Reid at greid@idrc.or.ke.

Research Matters (RM) is a collaboration of the International Development Research Centre (IDRC) and the Swiss Agency for Development and Cooperation (SDC). RM was launched in 2003 to examine and enhance the specific KT dynamics within the field of health systems research. From these founding connections with both a research funder and a bilateral donor, RM has occupied a unique vantage among health researchers and research-users. By working directly with both the producers of research and with its consumers, RM has developed a range of activities and modalities designed to hasten the movement of research results to the policy arena, to database and access those results, to communicate them, and to expand an appreciation of research itself. RM builds capacity among researchers to perform their own KT; RM responds to the priorities of major research-users; and RM actively brokers both research results and research processes. As an active, ground-level embodiment of KT, RM has helped to shape how health research is demanded, created, supplied, and ultimately used.
Endnotes


6 Adapted from “Appendix E: Guidelines for Writing Scientific Papers,” Available at: http://www.bms.bc.ca/library/Guidelines%20for%20writing%20Scientific%20papers.pdf


14 Adapted from Young E and Quinn L. The Policy Brief, LGI training materials, available at: http://www.policy.hu/ipf/fel-pubs/samples/PolicyBrief-described.pdf


16 Ibid.


18 Ibid.
19 Ibid.

# Table of Contents

**Writing a Policy Brief**  
I. The Policy Brief: The Outline  
II. The Policy Brief: The Science  
III. The Policy Brief: The Discussion  
IV. The Policy Brief: Policy Recommendations  

The Completed Policy Brief  

Supporting a Policy Brief  

Annex: Developing an East African Policy Brief on Male Circumcision  

Guidelines for country groups  
Key References  
Considerations related to assessments of local applicability  
Considerations related to assessments of equity  
Considerations related to scaling up  
Endnotes
The Two-Pager: Writing a Policy Brief

We have something important to say. We’re certain that if only key people would listen, things would change. We know our findings are policy-worthy and, if implemented, would have far-reaching effects. But how to reach a policy audience? How to convince decision-makers? If our full work is beyond their comprehension or time constraints, what are our options?

Enter the Two-Pager. This prominent KT tool boils down our findings and argument into brief, compelling and easily understood points. It does not tell the audience everything they need to know - just enough to ensure they’ll want to know more. It’s a teaser. An appetizer. Crafted in the right, audience-informed language, the two-pager will leave its readers wanting more.

But how do we reduce our work into two simple pages? How do we decide which details are essential? How do we tell a story in two pages that took us so long to complete?

This section focuses on practical tips and tools for writing a policy brief, a document designed for an audience that has some control over how research evidence might ultimately be converted into policy. Every audience has its own story and language needs, its own reading and absorption abilities. The details the media want are different from those a decision-maker may need, which are different still from those another researcher may require. The trick is in knowing exactly who our audience might be. If we can assess
the audience, then we know the content and tone we should carry throughout the brief. We know how scientific or how general we need to be.

### Types of Two-Pagers

The target audience defines different types of two-pagers:

**Press Releases** – stories in simple language highlighting the significance of the research and the corresponding need for action. Like a newspaper article, they can involve direct, quoted interviews with researchers. These can also be used for other promotional purposes – a webpage, for instance. See Chapter Seven for more.

**Briefing Notes** – a more in-depth and scientific examination of the issue, typically for an audience that already understands the science. Like an extended abstract.

**Policy Briefs** – outlines in simple terms the problem, the potential remedies, and a discussion of how to bridge the two.

A high-level director in a government ministry may well have different capabilities and requirements than a district commissioner. An effective policy brief understands exactly who the desired decision-makers are, and what they really need to understand our research and its implications. Do decision-makers need to understand our methodology? Or should the two-pager instead focus on the implications of our findings? How much is enough? Where is the balance?

The aim of any policy brief is to provide a clear and concise overview of the problem, then a discussion of the science which could remedy that problem, and then suggestions for implementing either a preferred policy option or a range of them, with cost implications for each. The first section outlines the problem. The last section has the policies. And the middle section bridges the two, with persuasion.

### Problems ↔ Possibilities ↔ Policies

Writing a two-pager is an exercise in logic. With a firm target audience in mind, we must isolate the points that form a clear and coherent argument. What is the simple story that leads the reader to our conclusions?

### Policy brief on support for scaling up ACTs in treatment of simple P. falciparum malaria in Burkina Faso

**Policy issues**
The resistance of *P. falciparum* to conventional antimalarial drugs is well attested by a number of studies throughout the world and in Burkina Faso. The efficacy of artemisinin-combination therapies (ACTs) has also been proven in various studies and the large-scale use of ACT is recommended by WHO. Like other countries, Burkina Faso opted to change its drugs strategy for treatment of simple malaria by substituting ACT for chloroquine treatment in February 2005. At the time of writing, this scaling up of ACTs has not been applied to all age groups.
Scale of the problem
Malaria is a major public health problem in Burkina Faso, with more than 2 million recorded cases and over 4,000 deaths every year, especially among children under 5. The majority of medical consultations, hospital admissions and deaths are malaria-related. Proper management of malaria requires the use of effective treatment. However, the socioeconomic status of the population, limited public resources and poor health service infrastructure prohibit large parts of the population from accessing this life-saving treatment.

Policy options
Given this situation, there is an urgent need for policies to improve universal and equitable access to ACTs for treatment of non-complicated malaria. These policy options are:
- Urge private-sector stakeholders (pharmacies, clinics and surgeries) to comply with national directives on subsidized pricing of ACTs;
- Motivate community health workers responsible for home-based management of simple malaria;
- Withdraw the antimalarial drugs used in monotherapy to treat simple malaria.

Implementation considerations
To implement any of these three policy options, it is essential:
- To provide information to and raise the awareness of the principal malaria control stakeholders;
- To ensure that ACTs adapted to each age group are available countrywide;
- To train the staff tasked with dispensing ACT;
- To review certain regulatory arrangements relating to policy implementation.

Source: author communication with EVIPNet team in Burkina Faso.

Writing a Policy Brief

To explore these ideas, let’s imagine we are researchers at a well-known research institute. Contacts from the Ministry of Health approach us asking for a simple document that can help the Minister and others understand the science around male circumcision as an HIV-prevention intervention. Public pressure may force the government to design an MC policy, and they want to be prepared. We begin by reviewing recent evidence:

Male circumcision and HIV/AIDS: challenges and opportunities


On December 13, 2006, the National Institutes of Health (NIH) announced the early termination of two randomised controlled trials of male circumcision – in Kenya and Uganda – on the basis of interim evidence that male circumcision provided a protective benefit against HIV infection of 53% among the 2784 Kenyan men and 51% among the 4996 Ugandan men enrolled in the respective studies. The Kenya and Uganda trials replicated the landmark findings of the South African Orange Farm study, the first randomised controlled trial to report a greater than 50% protective benefit of male circumcision. Before the availability of data from these three African randomised controlled trials, multiple observational studies correlated male circumcision with reduced risk of HIV infection. Systematic reviews and meta-analysis of observational studies provide further evidence of the association of male circumcision with reduced risk of HIV infection and a plausible explanation for the biological mechanism for reduced risk of infection has been suggested. Recently released longitudinal
evidence of the range of health benefits that male circumcision provides, modeling based on the South African trials, and cost-effectiveness data in both North America and Africa provide further evidence to support the health benefits of male circumcision. Male circumcision is also associated with reduced risk of urinary tract infections, genital ulcer diseases, penile cancer, and a possible reduction in transmission of human papillomavirus (HPV) [...] 

These findings resulted in extensive media coverage in print, TV and radio, which prompted large groups of men (particularly in western Kenya) to press for the intervention. However, there are no easy policy options when it comes to male circumcision (MC) as an HIV-prevention intervention. What is known at this point is the science – that circumcision can be a very effective HIV-prevention intervention. However, there is much that remains unknown. How might governments operationalize MC as a policy? How does it fit into existing HIV-prevention strategies? Should governments make the procedure free? Or subsidize it? Should they mandate it? And if so, how might certain segments of the population react?

This is the niche for our policy brief. There is a problem – should (and how should) male circumcision be implemented as an HIV reduction tool? There are possibilities – all kinds of debate and discussion on how MC might be operationalized. And there are policies – with several starkly different choices around MC available.

In early 2008, scientists began to question the validity of the African RCTs on MC. Green et al (2008) state that the push to implement MC in Africa “is based on an incomplete evaluation of real-world preventive effects over the long-term – effects that may be quite different outside the research setting and circumstances, with their access to resources, sanitary standards and intensive counseling.” They go on to state that “no field-test has been performed to evaluate the effectiveness, complications, personnel requirements, costs and practicality of proposed approaches in real-life conditions”. Moreover, CIET researchers in Swaziland are finding that MC is far from the magic bullet or “surgical vaccine” with circumcised and confident men (now “safe”) further eroding a woman’s ability to demand safe sexual practices (eg condoms) and thus enhancing possibilities for spreading the disease.

All of this recalls Chapter Two’s discussion on the nature of evidence: knowledge is fluid and fallible and nothing is always true. This maxim provides pitfalls and the needed humility for the authors of policy briefs – no option or answer can ever be 100% right, fair or true.

For more on this, see Green L, McAllister R, Peterson K and Travis J. 2008. “Male circumcision is not the HIV ‘vaccine’ we have been waiting for!” Future HIV Therapy, 2 (3). Andersson, N. 2006. “Prevention for those who have freedom of choice – or among the choice-disabled: confronting equity in the AIDS epidemic.” AIDS Research Therapy, 3: 23.

As the Ministry has requested this document for the Minister herself, understanding our audience’s tone and language needs is already done. We know that the Minister is not an MD or a PhD, is certainly not a researcher, and that she has a decent but not a deep scientific knowledge. She needs a summary of both the science and the context to show how any government policy must examine and address both.

We also know that we have a maximum of two pages to say what we have to say. While some policy briefs may indeed be longer (up to 8 pages – see Chapter Seven for a discussion of the 8-page policy brief), we’ll keep this one short and direct. As per the 1:3:25 formula, we may want to have a longer brief available should demand arise for a more in-depth examination.

Chapter 8: The Two-Pager
Though our policy brief is on an issue (MC), we will rely on the article for much of our content here. In the real world, as illustrated by the Burkina Faso example, we would likely cast our net beyond one paper or synthesis. That said, the challenge here is to convert complex, synthesized content – the article itself drawing on the findings of two different studies – into a discussion of the weight and implications of those findings for a particular context. We must not only deliver the salient facts in a readable form, but also explain what they mean as a basis for policy decisions. Clearly we’ll need to do more than simply translate the *Lancet* article into “plain-speak”.

We’ll need to:

- make the evidence brief and understandable
- explain why the evidence is significant
- set-out evidence-informed policy options.

Guided by these priorities, let’s reduce the evidence to a single sentence: *Male circumcision leads to a dramatic drop in HIV infection in men, and this has strong implications for those involved in research, policy and implementation*. That one sentence highlights the essential “big picture” elements. Everything that follows is simply supporting detail, examining in particular those “strong implications”. If we can pass along this one sentence to decision-makers, and convince them of its relevance and urgency, our policy brief has already made some crucial progress.

However, we don’t want just any policy that a Ministry might select in addressing those “strong implications”. Rather, we want to use our supporting details to shape the nature of the policy response. We want our choice of “explanations” to direct and persuade the Minister. To that end, we will offer three concrete policy options (roughly costed in terms of time and funding), and then recommend a preferred policy response. We’ll also show where more information on the topic can be obtained.

**I. The Policy Brief: The Outline**

Our single sentence is both the punchy introduction and the conclusion. The major points in our brief will stem from it. We now need to formulate a clear argument that will bloom into policy options. Keeping the science simple, we’ll build quickly to our overall message, implications, and set of policy options. But remember: we do not simply want to inform an audience here. We want to spur and guide action.

Throughout this brief – in the introduction, the discussion, and the conclusion – we will group our thoughts and arguments into threes. Three is not too many and not too few, and can often represent the spectrum of possibilities from left to centre to right, or from no action to small action to wholesale change.

**II. The Policy Brief: The Science**

**Three Statements**

As we break down our argument into its essential components, let’s devise three statements. They will be the “hooks” for an introductory paragraph. If these are clear, then the story – with a little “filler” here and there – almost writes itself.
Statement One

Randomised controlled trials of male circumcision in Kenya and Uganda showed such a strong protective benefit against HIV infection – 53% and 51% respectively – that the research was stopped.

This “single” statement shows three important elements of the evidence. First, that it was based on two randomised controlled trials, which most decision-makers (and our Minister of Health) would know to be a sound methodology. If our audience might not understand the term “randomised controlled trial” (and we must know such things before writing this brief) we can substitute with something generic like, “Research on male circumcision ...”. Second, the fact that the research project was stopped suggests that something definitive has occurred, which warrants urgent action. And third, this statement hints (without directly stating it) that perhaps male circumcision could become a new and powerful tool in the fight against HIV.

Statement Two

This confirms a previous landmark study in South Africa.

The South African case reinforces the result and increases the credibility of the facts, by leveraging the perception that science in South Africa is well-funded and reliable. This is debatable; but it is worth playing upon the existing prejudices of our audience: well, if this worked in South Africa then we need to pay attention. This highlights, again, the need to know our target so we can effectively take advantage of what they do and do not already believe to be true.

Statement Three

There is strong evidence suggesting that male circumcision is a cost-effective intervention not only in the fight against HIV but also for other elements of sexual and reproductive health.

In any policy brief, the idea of cost needs to be carefully considered. Cost – rather than effectiveness – is likely to be the first question any decision-maker will ask. If an intervention or approach is more expensive than the government’s existing policy, then the challenge becomes incrementally more difficult, and the policy brief will need to explain why a cost increase is justified. However, if we can convince decision-makers that action is cost-effective or will even save the government money, then our recommendations have a much greater chance of implementation.

The Title

Lastly, we need something catchy for a title, something that will encourage our audience to read on. The best titles are descriptive (in five words what is it all about?) and intriguing (Hey – I need to know more).

Male circumcision and HIV/AIDS: What are the policy options?

In December of 2006, randomised controlled trials of male circumcision in Kenya and Uganda showed such a strong protective benefit against HIV infection – 53% and 51% respectively – that the research was stopped. This suggests male circumcision could become a front-line intervention in the fight against HIV/AIDS. The findings in Kenya
and Uganda confirm the landmark findings of a similar study in South Africa, which also reported circumcision as a strong protective factor against HIV for men. Research evidence makes clear that circumcision may well be a cost-effective tool not only in the fight against HIV but also against other hazards in sexual and reproductive health. Beyond any doubt, the evidence demonstrates that male circumcision leads to a dramatic drop in HIV infection in men, and this has strong implications for those involved in research, policy and implementation.

**III. The Policy Brief: The Discussion**

While the evidence may be solid, with a clear policy imperative, there are a host of issues that need to be taken into account in detailing and optimising that policy. We need to contextualize the science.

The *Lancet* dedicates much of the paper to context and the resulting considerations. These are the *talking points* that capture the complexity of the situation, the links that will ultimately connect evidence with policy. If the first part of our brief is the evidence and the third part the policy, then here we must show our audience how to connect the first with the third. In a two-pager, that does not mean providing answers to all the problems; it means guiding the audience to the right questions.

Taking a three-point approach, we have grouped the issues into three broad subjects: Impact on Health Systems; Cultural Responses; and Safety and Education. Again, we will begin by summarizing this discussion into one sentence: *Implementing male circumcision as an HIV-prevention intervention will have a number of effects on the health system and on cultural practices, and to be effective must be accompanied by safety measures and public-awareness campaigns.*

1. Impact on Health systems.

   **Statement One**
   
   *Implementation of male circumcision as an HIV-prevention intervention may strain the human and financial resources of health systems.*

   Following the publication of the *Lancet* piece, various Africa media picked up the story and immediately men in western Kenya flooded the health system with demands for circumcision. (The clamour for circumcision lends further urgency to the situation; though this was not part of the *Lancet* article, we do not need to restrict ourselves to the article only. We must always contextualize our work). We need to show that we recognize that any intervention occurs within a broader system, and raise the possibility that increased attention to one intervention may negatively affect other preventative or curative strategies – as concerns, for instance, HIV/AIDS, antenatal care, malaria control, or nutrition.

   As a starting point, do we know the financial implications of this intervention? In Kenya, circumcision costs roughly US$10, and this must be borne by the patient. Given the efficacy of the intervention, however, should the government assume all costs? Part of the costs? If circumcision is free, will demand overwhelm the health system? We likely do not have enough information on this question, so perhaps one of the key conclusions is the need for a more in-depth examination of the health financing implications.
The second major consideration is who will deliver the intervention. If demand increases – and if the government in fact mandates widespread implementation – who will deliver? becomes especially pertinent. This human resource question has two (very simplified) parts: who should deliver the intervention and then what training issues may arise. Similar issues arose several years ago around delivery of ARVs, and we may want to draw this link in our discussion. Our key talking points are basic competency levels and certification in delivering the intervention. In WHO parlance, is male circumcision a “clinical practice within health delivery settings” – i.e. a procedure that would rule out traditional healers and perhaps even nurses from performing it? This might hinder national scale-up efforts and exclude significant parts of the population from the treatment, favouring those who have access to formal health care services.

The final health systems point: should MC be integrated as part of a country’s comprehensive HIV prevention strategy (and if so, how)? Or should the government initially offer the intervention to select target groups, such as those “with high rates of HIV infection, low rates of male circumcision, and high or potentially high rates of acceptability”?2

There are clearly some difficult choices here. It’s probably best, in a two-pager for an audience that is new to the issue, to keep these considerations simple and convince decision-makers to think, above all, about the broader context. We really don’t have hard-and-fast answers to these questions, but this is acceptable as long as our resulting policy options address and even operationalize this ambiguity (e.g. more study on health system impacts is required…).

2. Cultural Responses.

Statement Two
Male circumcision carries major religious, social and cultural meanings for large segments of the population.

This context will definitely vary from country to country, and from region to region within any one country. In parts of East Africa, MC can be a “rite of passage” among certain cultures, and thus any policy that affects this tradition will certainly provoke a strong response that must be considered at the policy level. If, for instance, the government were to mandate MC as a “clinical practice,” then it would need to have a plan for addressing affected communities.

MC in general carries significant stigma, both positive and negative, and any successful policy must take this into account. While we have discussed Context Mapping in Chapter Four of this toolkit, the bottom line here is having a good, comprehensive sense of who our policy might affect. Which groups practice MC? How do they practice it? For whom is MC culturally unacceptable? The necessary conclusion here is that we must map these stakeholders and then consult them – without their input any overarching policy will likely stir a strong and potentially negative response.

Context mapping may well identify other research or knowledge that might inform our understanding. Is there, for instance, research examining the socio-cultural incidence and impact of male circumcision? This may have been conducted by an anthropologist or sociologist, and have nothing to do with HIV but yet be entirely relevant to our inquiry. There may be scope for bringing together these researchers into a forum discussing MC
and HIV. If there is no such research available, then we might inform decision-makers that further research into cultural responses is required. Could any policy be viable without taking into account this type of knowledge?

3. Safety and Education.

Statement Three

While circumcision does provide certain medical benefits, it is not without risks and to be effective must be accompanied by clear safety measures and a public-awareness campaign.

This set of issues repeats many considerations while also introducing new ideas for policy deliberation. In terms of safety, there is first the health systems point of who is delivering the intervention (i.e. are they formally trained?), how the intervention is delivered (i.e. where, with what tools, and under what sterility levels) and then when it is delivered (i.e. as infants, children or adults). “When” deserves further discussion, as circumcising male infants or children may raise cultural issues of acceptability; circumcising men has a range of consequences beyond the cultural. These touch upon health system capabilities, the expense, the outright complexity of the procedure later in life, and the medical complications that might arise. In other words, this intervention in adults is not a simple procedure. It is not a one-stop fix. For instance, if freshly circumcised men engage in sexual behaviour, their risks of acquiring HIV soar. Similarly, undergoing circumcision does not make one “immune” to the disease and thus it must be situated within the broader context of HIV-prevention strategies.

There is a clear need for the intervention to be accompanied by public-awareness campaigns that outline the benefits and risks while also placing circumcision within the broader HIV-prevention context. We need not delve, at this point, into the details of public-awareness campaigns (e.g. using radio spots and posters, etc.) but we should have such ideas at hand.

In writing the talking points, we'll use the conclusion and our three hooks, and let the discussion flow logically from one point to the next. Bullets help make information more concise, creating a “break” for the eye and providing memorable nuggets of information. Hence:

**Discussion**

Implementing male circumcision as an HIV-prevention intervention will have a number of effects on the health system and cultural practices. To be effective, it must be accompanied by safety measures and public-awareness campaigns. While the science is sound, implementation and operationalization require high-level attention to a range of complex issues.

1. **Health Systems.**

The intervention may strain the human and financial resources of health systems. In Kenya, the research findings led to a spike in demand for elective MC. Central to this intervention are the key questions of: who will pay for it? Who will deliver it? Will increased attention to one intervention affect other disease prevention strategies? And how will this intervention be integrated into existing HIV-prevention strategies?
Financial Implications

• The cost of circumcision is US$10, borne by the patient.
• Given the efficacy of the intervention, should the government absorb some or all of these costs? What other systemic implications would this have?

Human Resource Implications

Similar issues around who should deliver it (physicians and/or nurses and/or traditional healers/surgeons) and how (training required) arose several years ago with anti-retrovirals (ARVs), and there are strong lessons to be taken from that experience.

• Have basic competency levels in delivering this intervention been established?
• Is male circumcision a “clinical practice” and thus not to be performed by traditional healers/surgeons?
• If it is deemed to be a “clinical practice,” how will this affect traditional beliefs and practices? Will restricting its availability to the formal system affect who can access the treatment?

2. Cultural Responses.

MC carries major religious, social and cultural meanings for large parts of the population. There are significant levels of stigma around the practice, both positive and negative. No national MC policy could realistically proceed without first mapping the context of existing practices and existing research on those practices. There is need for more multidisciplinary research; anthropologists or sociologists who may have already studied MC should now contribute their knowledge in the context of HIV prevention. National consultations could bring together religious and cultural leaders to discuss their views of the intervention.

3. Safety and Education.

While circumcision does provide certain medical benefits, it is not without risk and must be accompanied by safety measures and public-awareness campaigns. Safety issues include who is delivering the intervention, how they’re delivering it, and when it’s delivered. While circumcising male infants or children may raise cultural issues, for adults the procedure is more complex, results in more complications, and generates additional HIV concerns. For instance, if freshly circumcised men engage in sexual behaviour before they are healed, their risks to acquiring HIV soar. MC does not make one “immune” to the disease and thus the procedure must be placed within the wider HIV-prevention context.

IV. The Policy Brief: Policy Recommendations

Sometimes the sheer act of writing a policy brief will make policy options suddenly clear. If there are equally valuable and valid options, we may simply provide an objective assessment of each, outlining their pros, cons and cost implications. It’s more likely that there will be one or more options that we prefer and will advocate. Policy briefs are an opportunity for advocacy. They are ideal, short pieces that can outline why our particular recommendation is the best one to address the problem or situation at hand.

In the MC example, we’ll present three options that flow logically from our discussion – two that closely follow the discussion, and one that provokes further thinking. We will
use a brief introduction to reiterate why action is necessary and then weigh the merits of each option and the possible costs. Again, let’s break this down into statements and consider the relevant points to support each.

Statement One

Form a multi-stakeholder committee or task force to discuss and map the context of male circumcision both culturally and scientifically.

This recommendation has a number of advantages. First, it allows the government to send a signal that it is taking the MC issue seriously but carefully, without needing to commit itself to any immediate action or binding policy. Secondly, it allows the major stakeholders—from communities to cultural leaders to other researchers to decision-makers themselves—to discuss the issue and to arrive at a policy that has wide acceptance. Given that there is no clear-cut way forward and that all we have are the results of randomised controlled trials—as opposed to the findings from implementation research—then this option has clear merits. The government sends a message yet commits only to listening. Further, the committee may well devise the set of policies the government requires to move forward, with all considerations taken on-board. The costs of this would be high in time but low in funding. It would likely require leadership from the Ministry in establishing an inclusive committee, setting rules for dialogue, and convening meetings, with all the attendant delegate travel expenses, per diems and even sitting fees.

Statement Two

Commission multi-disciplinary research into male circumcision and HIV, emphasizing financing options, the broader socio-cultural and HIV-prevention context, and potential delivery mechanisms.

This recommendation also carries strong advantages. We ourselves do not know all the answers yet, and it is incumbent upon us to investigate the socio-cultural context before advocating any exact policy. The knowledge generated from investigations into financing options, the socio-cultural and HIV context, the potential delivery options—and even the experiences of ARV implementation—would provide a wealth of evidence that could underpin any future policy. This study would also signal the government’s commitment to resolving the issue. However, there is the perception that research is expensive and takes too long to complete, and these are important notions to consider. How quickly does the government require an answer?

Time and cost are critical, and it may be possible to combine policy one and two as “further information” steps.

Statement Three

Make male circumcision free and immediately available to all.

This is a radical suggestion, and we make it knowing full well that the government is unlikely to take such a course. However, it could push the boundaries of the debate, and make more realistic options seem less frightening. The pitfalls to such an approach are numerous, given that the context is largely unknown, the financial implications would be enormous, and capacities of the health system would likely be severely strained.

Though we cannot advocate such a position, describing it as objectively as possible may well work in favour of the options we do recommend. The first reaction of any decision-maker reading this brief could be, Well if MC is this good, we must make it free to all, but
upon reading through our careful deliberations and talking points may well come to his/her own conclusion that such a move is likely premature.

The final section of our brief could be:

**The Policy Options**

It is incumbent upon the Ministry to address these findings and act upon them. There is high demand among males for this procedure, and it could represent a significant step towards achieving lower rates of HIV acquisition. From a range of policy options, three recommendations seem the most viable:

1. **Form a multi-stakeholder Task Force to discuss and map the context of male circumcision both culturally and scientifically.** The Task Force should include community members, religious leaders, researchers, Ministry staff, and any other concerned groups. Within a Ministry-mandated framework, the Task Force will devise viable policy options within a tight timeframe. Time costs would be high, but financial costs low.

2. **Commission multi-disciplinary research into male circumcision and HIV, emphasizing financing options, the broader socio-cultural and HIV-prevention context, and potential delivery mechanisms.** While the scientific evidence is compelling, a comprehensive plan for its implementation is essential. At present, little is known in terms of how implementing MC might actually work in different contexts. Time costs could be up to two years, and financial costs would depend on the study method selected.

3. **Make male circumcision free and immediately available to all.** Given the importance of the findings, the Ministry will be under pressure to provide the intervention to all who want it. Making it free would show the Ministry’s commitment to the health and safety of its citizens, and also to reducing the spread of HIV. Financial costs of this procedure would be significant and recurring – but then, so are those associated with the high rates of HIV/AIDS.

In light of the above options, we believe the Ministry should proceed with a combination of the first and second recommendations. This intervention requires careful planning and an in-depth examination of current health system capabilities, cultural practices and responses, and an investigation into the safety and public-awareness campaigns that must accompany such an intervention for successful implementation. Above all, the Ministry must respond quickly – but responsibly – and requires a more robust evidence-base upon which to base further action.

For more information on this, see the full article at [www....] or directly contact [name] at [phone number] and [email].

And there we have it. A complex, thorough policy brief that has dissected an extremely difficult issue and made it relevant and “human” for a select audience. Now all we need to do is cut and paste the individual sections into a two-page document – and perhaps include some pictures or graphics that demonstrate the research and give the eye a
“break” from straight text.

However, upon cutting and pasting our work into a two-pager, we realize that we have almost three pages of text. Should we shrink the font? Expand the margins? The answer to both is a resounding NO! We need to review our work and delete where we can. Remember, the objective is not to cram as much information as possible into two pages. It’s to express, elegantly and concisely, what the problem is, what the considerations are, and what the policy options might be. The two-pager is an appetizer – we should always have more information on hand.

Let’s keep the choice of font simple and conventional, restricting ourselves to the widely-used fonts so as not to jar our audience with something unexpected or aesthetically suspect. Suggested fonts include Garamond (the Toolkit’s font), Times New Roman, Optima, Century, Arial and Helvetica.

Of course, even the best-written policy brief that considers and addresses every last angle of importance will have no effect whatsoever unless it gets into the hands of the people who need to read it. In Chapter Six of this Toolkit, we discuss communications strategies, with practical tips and tools for giving our research products a greater visibility.
Male circumcision and HIV/AIDS: What are the policy options?

In December of 2006, randomised controlled trials of male circumcision in Kenya and Uganda showed such a strong protective benefit against HIV infection – 53% and 51% respectively – that the research was stopped. This suggests that male circumcision (MC) could become a front-line intervention in the fight against HIV/AIDS. The findings in Kenya and Uganda confirm the landmark findings of a similar study in South Africa, which also reported circumcision as a strong protective factor against HIV for men. Research evidence makes clear that MC may well be a cost-effective tool not only in the fight against HIV but also against other hazards in sexual and reproductive health. Beyond any doubt, the evidence demonstrates that MC leads to a dramatic drop in HIV infection in men, and this has strong implications for those involved in research, policy and implementation.

Implementing MC as an HIV-prevention intervention will have a number of effects on the health system and cultural practices. To be effective, it must be accompanied by safety measures and public-awareness campaigns. While the science is sound, implementation and operationalization require high-level attention to a range of complex issues.

1. Health Systems.
   The intervention may strain the human and financial resources of health systems. In Kenya, the MC research findings led to a spike in demand for elective MC. Central to this intervention are the key questions of: who will pay for it? Who will deliver it? Will increased attention to one intervention affect other disease prevention strategies? And how will this intervention be integrated into existing HIV-prevention strategies?

Financial Implications
   • The cost of circumcision is US$10, borne by the patient.
   • Given the efficacy of the intervention, should the government absorb some or all of these costs? What other systemic implications would this have?

Human Resource Implications
   Similar issues around who should deliver it (physicians and/or nurses and/or traditional healers/surgeons) and how (training required) arose several years ago with anti-retrovirals (ARVs), and there are strong lessons to be taken from that experience.
   
   • Have basic competency levels in delivering this intervention been established?
   • Is male circumcision a “clinical practice” and thus not to be performed by traditional healers/surgeons?
   • If it is deemed to be a “clinical practice,” how will this affect traditional beliefs and practices? Will restricting its availability to the formal system affect who can access the treatment?

2. Cultural Responses.
   MC carries major religious, social and cultural meanings for large parts of the population. There are significant levels of stigma around the practice, both positive and negative. No national MC policy could realistically proceed without first mapping the context of existing practices and existing research on those practices. There is need for more multidisciplinary research; anthropologists or sociologists who may have already studied MC should now contribute their knowledge in the context of HIV prevention. National consultations could bring together religious and cultural leaders to discuss their views of the intervention.
3. Safety and Education.
While circumcision does provide certain medical benefits, it is not without risk and must be accompanied by safety measures and public-awareness campaigns. Safety issues include who is delivering the intervention, how they’re delivering it, and when it’s delivered. While circumcising male infants or children may raise cultural issues, for adults the procedure is more complex, results in more complications, and generates additional HIV concerns. For instance, if freshly circumcised men engage in sexual behaviour before they are healed, their risks to acquiring HIV soar. MC does not make one “immune” to the disease and thus the procedure must be placed within the wider HIV-prevention context.

Policy Options

It is incumbent upon the Ministry to address these findings and act upon them. There is high demand among males for this procedure, and it could represent a significant step towards achieving lower rates of HIV acquisition. From a range of policy options, three recommendations seem the most viable:

1. **Form a multi-stakeholder Task Force to discuss and map the context of male circumcision both culturally and scientifically.** The Task Force should include community members, religious leaders, researchers, Ministry staff, and any other concerned groups. Within a Ministry-mandated framework, the Task Force will devise viable policy options within a tight timeframe. Time costs would be high, but financial costs low.

2. **Commission multi-disciplinary research into male circumcision and HIV, emphasizing financing options, the broader socio-cultural and HIV-prevention context, and potential delivery mechanisms.** While the scientific evidence is compelling, a comprehensive plan for its implementation is essential. At present, little is known in terms of how implementing MC might actually work in different contexts. Time costs could be up to two years, and financial costs would depend on the study method selected.

3. **Make male circumcision free and immediately available to all.** Given the importance of the findings, the Ministry will be under pressure to provide the intervention to all who want it. Making it free would show the Ministry’s commitment to the health and safety of its citizens, and also to reducing the spread of HIV. Financial costs of this procedure would be significant and recurring – but then, so are those associated with the high rates of HIV/AIDS.

In light of the above options, we believe the Ministry should proceed with a combination of the first and second recommendations. This intervention requires careful planning and an in-depth examination of current health system capabilities, cultural practices and responses, and an investigation into the safety and public-awareness campaigns that must accompany such an intervention for successful implementation. Above all, the Ministry must respond quickly – but responsibly – and requires a more robust evidence-base upon which to base further action.

For more information on this, see the full article at <www...> or directly contact <name> at <phone number> and <email>.
Supporting a Policy Brief

As discussed in Chapters Six and Seven, a strong “push” tool (like a policy brief) must often be part of a broader KT strategy for full effectiveness. In the Burkina Faso example cited above, a team of researchers and decision-makers created their policy brief as material for a National Policy Dialogue on malaria treatment policy. The very composition of the team gave it a window into the tone and language needs of its audience, with the multi-sector team an excellent example of a “linkage and exchange” strategy. This brief was not the result of researchers advocating change but rather the product of an already successful union. (For more on National Policy Dialogues, please see the discussion of Knowledge Translation Platforms in Chapter Two).

Convening meetings and policy dialogues is one useful accompaniment or framework for both the creation and the discussion of a policy brief. As a policy brief is itself a synthesis, the best ones tend to be focused on an issue (e.g. malaria treatment) as opposed to a particular set of findings (e.g. a research project studying a new malaria treatment regime). That is not to say that a brief on a particular paper or findings has limited value – merely that policies on issues as large and contested as malaria treatment tend not to be changed by one study alone. Our role in KT is to contextualize our work within the broader field, and then to bring the weight of that field to bear in any policy influence we might have. None of us work in a vacuum – not researchers, not decision-makers – and if we can use a tool like a policy brief to put the problem in the context of “big picture” possibilities and policies, we may well increase our chances of success.

As a policy brief is just one tool in our KT arsenal, we might wish to support it with several others. Lavis et al (2005) suggest that a policy brief be framed within the 1:3:25 graded entry format, where:³

1 = a one-pager of clear and concise take-home messages for skimming or time-pressed decision-makers;
3 = a three-pager executive summary (such as a policy brief) with more details and resources for interested decision-makers and practitioners
25 = a twenty-five-pager scientific paper or synthesis for administrators or implementors.

Each high-quality format will appeal to the story needs of different audiences, and each should draw upon and compliment the others. Some key advantages to the 1:3:25 approach include:

- the shorter formats increase the chances of being read. They also build capacity among researchers to express themselves with brevity.
- the multiple formats respect the different story and language needs of the different audiences. A one-size-fits-all approach may not adequately address an audience’s needs.
- placing take-home messages up front respects how decision-makers tend to read research reports – reading the abstract first and the conclusions second.⁴
Annex: Developing an East African Policy Brief on Male Circumcision

The below guidelines on developing an MC Policy Brief were authored by Dr. John Lavis and piloted at a June 2007 workshop at the REACH-Policy headquarters in Arusha, Tanzania. Research groups from Uganda, Kenya and Tanzania worked for a week on developing strategies for writing a policy brief on MC, guided by these considerations. Research Matters acted as a co-facilitator at this workshop; an earlier draft of this Toolkit chapter on “The Two-Pager: Writing a Policy Brief” was given to all participants.

Guidelines for country groups

Possible Working Title: “Male circumcision: whether and how to support its inclusion as part of a comprehensive HIV prevention strategy”.
Authors: List the proposed authors and their affiliations

Policy Issues:
The discussion highlights the range of different issues that may or may not be applicable to specific East African contexts. Groups could:

- State whether the policy issue is primarily one related to governance, financial or delivery arrangements or to program and service coverage, provision or reimbursement:
  - Service coverage, provision or reimbursement – Should MC be included as part of a comprehensive HIV prevention strategy and, if so, to which groups?
  - Delivery arrangements – Who should provide the service, when and how?
  - Financial arrangements – Who should pay for the service and how?

- Describe how the policy issue has been framed in different ways in East African health systems (and, if instructive, in other health systems):
  - MC should be widely offered as an HIV-prevention strategy (i.e., a widely implemented “vertical” program)
  - MC should be included as part of a country’s comprehensive HIV prevention strategy (i.e., a widely implemented “horizontal” program)
  - MC should be supported as part of a country’s comprehensive HIV prevention strategy, with the initial focus being on ethnocultural groups with high rates of HIV infection, low rates of male circumcision, and high or potentially high rates of acceptability (i.e., a targeted “horizontal” program that supports both traditional male circumcision and “medical” circumcision that is delivered and financed in part as a government program).

- Describe the magnitude of the problems or challenges linked to the policy issue within East Africa health systems (e.g., demographic data, healthcare utilization data, expenditure data), how the problems or challenges have changed over time, and how the problems or challenges have affected particular groups or jurisdictions:
  - Prevalence of HIV infection by ethnocultural group
  - Benefits (to both men and women and for both HIV infection and other sexual and reproductive health outcomes) and harms (to both men and women and for both
complications and behavioural responses) of male circumcision (as identified by three randomized trials and the meta-analysis of these trials, as well as by a synthesis of observational studies, the latter of which can help in explaining how and why the intervention is thought to work)

- Benefits and harms of alternative ways of “delivering” male circumcision (i.e., who should provide it, to what age group, and using what procedure and safety precautions)
- Benefits and harms of alternative ways of “financing” male circumcision (as identified by Lagarde’s synthesis)
- Rates of male circumcision by group (and within group by age and by medical versus traditional circumcision, and within medical circumcision by delivery and financial arrangements), as well as before and after media coverage of trial results
- Rates of acceptability of male circumcision by group and profile of factors that increase or decrease acceptability (as identified by Westercamp’s synthesis)
- Profile of ethnocultural perspectives on male circumcision
- Profile of human resources (and related training) and financing capacity by group
- Benefits and harms of alternative ways of bringing about change, including the design of public-awareness campaigns and provider-focused behaviour change strategies

- Describe how the policy issue has been framed for the purposes of the policy brief:
  - MC should be supported as part of a country’s comprehensive HIV prevention strategy, with the initial focus being on ethnocultural groups with high rates of HIV infection, low rates of male circumcision, and high or potentially high rates of acceptability (i.e., a targeted horizontal program)

**Key References**

- List major policy documents on the topic that are relevant to sub-Saharan African health systems
- List major syntheses of the research literature that are relevant to sub-Saharan health systems
- Meta-analysis of three randomized trials that examined the effects of male circumcision on HIV infection
- Synthesis of observational studies that examined associations between male circumcision and HIV infection
  - Siegfried N, Muller M, Deeks J, Volmink J, Egger M, Low N, Walker S, Williamson P. “HIV and male circumcision—a systematic review with assessment of the quality of studies”. The Lancet Infectious Diseases 2005; 5 (3): 165-173. [Note that the full Cochrane review is also available]
- Synthesis of acceptability studies
- Synthesis of the effects of financing mechanisms
  - Lagarde M, Palmer N. “Evidence from systematic reviews to inform decision making regarding financing mechanisms that improve access to health services for poor people”. Alliance for Health Policy and Systems Research 2006.
• Synthesis of the effects of ways to bring about change at the level of the general public and at the level of healthcare providers
  • Cite Grilli on mass media campaigns
  • Cite Grimshaw / Haines and Kuruvilla on provider behaviour change
• List major research studies that have not yet been synthesized
• Randomized controlled trials of the effects of the intervention (Note that these three trials are included in the meta-analysis by Mills above)
• Studies that have examined the costs and/or broader economic consequences of implementing the intervention
• Studies that have examined alternative ways of “delivering” the service
• Other studies that have examined the views and experiences of stakeholders
• Studies that have examined alternative ways to bring about change at the level of organizations

**Considerations related to assessments of local applicability**

• Are there important differences in the structural elements of health systems (i.e., governance, financial and delivery arrangements) between where the research was done and where it could be applied that might mean a policy option could not work in the same way?
  - e.g. Research on the effectiveness of bulk purchasing arrangements in lowering prices for prescription drugs may have been done in countries with no concentration in the ownership of pharmacies, whereas many policymakers may work in countries with a monopoly in pharmacy ownership
• Are there important differences in on-the-ground realities and constraints (i.e., governance, financial and delivery arrangements) between where the research was done and where it could be applied that might substantially alter the potential benefits of a policy option? And can these challenges be addressed in the short-term to medium-term?
  - e.g. Research on the effectiveness of a team-based approach to maternity care in reducing both maternal and child morbidity may have been done in countries with midwives and traditional birth attendants, whereas many policymakers may work in countries with neither type of health provider
• Are there likely to be important differences in the baseline conditions between where the research was done and where it could be applied that might mean a policy option would have different absolute effects, even if the relative effectiveness was the same?
  - e.g. research on the effectiveness of a strategy for promoting HIV testing among pregnant women may have been done in countries where less than 10% of pregnant
women were offered HIV testing, whereas many policymakers may work in
countries where 85% or more of pregnant women are offered HIV testing

- Are there important differences in the perspectives and influence of health system
  stakeholders (i.e., political challenges) between where the research was done and where
  it could be applied that might mean a policy option will not be accepted or taken up in
  the same way? And can these challenges be addressed in the short-term to medium-
term?
  - e.g. research on the effectiveness (and safety) of NPs in providing routine medical
    care for children may have been done in countries with shortages of physicians and
    weak medical associations, whereas many policymakers may work in countries with
    a surplus of physicians and a very strong and vocal medical association).

Considerations related to assessments of equity

A policy option may have an impact on disadvantaged populations and equity in a health
system. Disadvantages should be considered in relation to each of the following
potentially relevant dimensions: place of residence, race (i.e., ethnic origin), occupation,
gender, religion, education, socioeconomic status, and social network and capital
(PROGRESS).

1. Are there plausible reasons for anticipating differences in the relative effectiveness
   of the policy option in disadvantaged settings within the country?
2. Are there likely to be different baseline conditions within the country, so that the
   problem would be more or less important in disadvantaged settings within the
   country?
3. Are there likely to be different baseline conditions in disadvantaged settings within
   the country, so that the absolute effectiveness would be different?
4. Are there important considerations that should be given to implementing the policy
   option to ensure that inequities are not increased and that they are reduced, if
   possible (e.g. in terms of ensuring access in disadvantaged settings?)
5. Would the policy option likely to reduce or increase health inequities within the
   country, or would it result in no change?

Considerations related to scaling up

1. Are there important challenges that will need to be addressed when rolling out or
   scaling up the policy option?
2. How complex is the policy option and does this have implications for scale up?
3. What are the total costs of expanding coverage of the policy option and sustaining it
   and what are the implications for scale up?
4. What are the requirements that the policy option imposes on government capacity
   (e.g., effective regulatory capacity) and the implications for scale up?
5. What requirements does the policy option place upon patients, health providers and
   managers, and what are the implications for scale up?
6. Would widespread implementation of the policy option be likely to have important
   impacts on the healthcare system or other sectors and, if so, what are the implications
   for scale up?
7. Is the policy option likely to be difficult to sustain or are its effects likely to change
   over time? For example, is it likely that the policy option will have deteriorating
   benefits without the ongoing training and support necessary to ensure that it is
   properly implemented?
Email the Research Matters Programme Officers:
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Research Matters (RM) is a collaboration of the International Development Research Centre (IDRC) and the Swiss Agency for Development and Cooperation (SDC). RM was launched in 2003 to examine and enhance the specific KT dynamics within the field of health systems research. From these founding connections with both a research funder and a bilateral donor, RM has occupied a unique vantage among health researchers and research-users. By working directly with both the producers of research and with its consumers, RM has developed a range of activities and modalities designed to hasten the movement of research results to the policy arena, to database and access those results, to communicate them, and to expand an appreciation of research itself. RM builds capacity among researchers to perform their own KT; RM responds to the priorities of major research-users; and RM actively brokers both research results and research processes. As an active, ground-level embodiment of KT, RM has helped to shape how health research is demanded, created, supplied, and ultimately used.
Endnotes

1 Reprinted with permission from Elsevier (The Lancet, 2007; 369: 708–13). It may be found online at: www.thelancet.com. Note users will be required to register at the site before downloading the free full-text article.

2 From author correspondence with Dr. John Lavis.


4 Adapted from Lavis et al (2005).

5 These guidelines are reproduced here with his permission.
## Table of Contents

I. Systematic Reviews: Frequently Asked Questions  
   1. What is a Systematic Review? 2  
   2. What is Critical Appraisal? 3  
   3. What are the advantages of a systematic review? 3  
   4. What is the methodology behind a systematic review? 3  
   5. Where can I find systematic reviews? 5  
   6. How can I learn how to do a Systematic Review? 7  

II. The Future of Systematic Reviews 7  
   1. Objectivity 7  
   2. Utility 9  

Resources 11  
Endnotes 12
Systematic Reviews

Every year, researchers and scientists publish more than three million new articles in scientific journals, each adding height to an existing mountain of evidence. It’s been estimated that a healthcare professional would need to read around twenty articles every day just to stay on top of her field.¹ Such a vast – and daily – accumulation of new science makes perspective easy to lose. Should we value one study over another? How does one new study relate to decades of previous work on the subject? When study findings are opposed, how do we decide between them?

Systematic Reviews take us to the top of that mountain, giving a thorough yet abridged view of the evidence in our particular field of inquiry. Conceived as early as the 17th century, when astronomers began to see the value of combining data sets instead of choosing between one and the other, systematic reviews have grown out of 19th and 20th century efforts in the social sciences, particularly psychology and education.² Increasingly, the field of medicine required some sort of synthesis, particularly in simplifying the eventual clinical decisions of medical practitioners. For many years, these narrative reviews – or qualitative summaries of evidence – were used, often overcoming the limitations of single studies. However, as these reviews were often subjective and predisposed to bias, error and selective inclusion of studies, they created a need for reviews that were reliable and as objective as possible.

When done properly, systematic reviews allow us to confidently overcome the pitfalls of comparing and contrasting science, creating rigorous syntheses that detail – fairly and
objectively – all relevant knowledge on the subject at hand. For this reason, they are a superb KT tool, as they can directly bring evidence (and innovations) to bear on practice. By summarizing the results of myriad individual studies – and further, by evaluating the effectiveness of specific interventions – systematic reviews are a cornerstone of evidence-based medicine.

While of great utility for those comfortable among methodologies, coefficients and $\phi > 0.76$, several commentators have criticized systematic reviews for being inaccessible to decision-makers; others have observed that some yield different answers to the same question, and that there is a need to revisit the methodology of systematic reviews and of the peer-review process itself. As Lavis et al (2006) observe, it may well be time to involve decision-makers in the process of systematic reviews, from asking the research questions to providing context for the question under study.

In this chapter, we’ll discuss the basic components of systematic reviews – what they are and where to access them – and then consider their future as a more integrated and even demand-driven KT tool. Throughout, we’ll pose and answer some frequently asked questions.

I. Systematic Reviews: Frequently Asked Questions

What is a Systematic Review?
In the medical arena, systematic reviews can be defined as “explicitly formulated, reproducible, and up-to-date summaries of the effects of health care interventions.” As opposed to narrative reviews, they use a very structured method that is always explicitly stated at the beginning of the review. Systematic reviews are usually prepared by a team of at least two reviewers who have a thorough understanding of both the clinical area and review methodology. This serves to minimize – without altogether eliminating – human error and bias.

Systematic reviews should not be confused with meta-analyses, which are in effect a statistical analysis of the results from separate studies. While the latter are often included in systematic reviews, this is not always possible.
What is Critical Appraisal?
The process starts with careful examination of all aspects of the studies selected for inclusion in the systematic review. This breaks down the components of the study to evaluate characteristics of participants, outcome measures used, completeness of study follow up, and appropriateness of statistical measures. Critical appraisal – which lies at the very heart of a systematic review – requires dedicated time and expertise.

What are the advantages of a systematic review?
There are multiple advantages. Systematic reviews are:

- **Condensed:** allowing the reader to access consolidated results of huge volumes of information;
- **Objective:** reducing (though not eliminating) the risk of bias and error;
- **Balanced:** including a broad range of studies which are identified via a thorough and systematic search strategy;
- **Verifiable:** incorporating transparent processes that allow the reader to know exactly how the conclusions were reached;
- **Replicable:** using a structured methodology.
- **Flexible:** can be updated on a regular basis;
- **Dynamic:** in identifying areas that are under-researched or in identifying new research questions;
- **Readable:** presented in a format that is easy to read and understand.

What is the methodology behind a systematic review?
One of the great advantages of this type of review is its process: systematic reviews are both transparent and well-documented. Reviewers must use as much rigour in conducting their review as is expected of the primary research they seek to summarize. In their illustrated “step-by-step guide” to systematic reviews, Pai et al (2004) provide a good overview of the process by breaking it down into five chronological steps:

1. **Formulating the question**
   As should be the case before initiating any type of research or review, anyone undertaking a systematic review should ensure no other such review has already been done. Once this has been established, reviewers create the “review protocol”. At the heart of this is the **study question** that determines the focus of the review. This should address the Patient group, the Intervention, the Comparison intervention, and the Outcome – **PICO**.

---

**Source:** Pai et al (2004).
For one example, a research question that incorporates all of these PICO elements might be: *Among children under the age of five living in rural settings (patient), does the use of insecticide-treated bed nets (intervention) lead to lower malaria prevalence rates (outcome) as compared to when non-treated nets are used (comparison intervention)?*

### Systematic Review Protocols

The protocol serves to make the research plan explicit as well as to minimize bias. It is one of the main things that differentiate systematic from traditional reviews. Prepared by a team of at least two, the protocol is then appraised by an editorial team.

The website of the *Cochrane Collaboration* provides an extensive list of workshops and training courses offered by Cochrane Centers around the world, many of which focus on the process behind the development of a protocol.

In-depth information, in written form, about how to prepare reviews is also freely available in the *Cochrane Reviewers’ Handbook*, available at [www.cochrane.org/resources/handbook](http://www.cochrane.org/resources/handbook) as well as through the organization’s *Open Learning Material* available at [www.cochrane.org/resources/openlearning](http://www.cochrane.org/resources/openlearning).

### 2. Search and inclusion of primary studies

Systematic reviews represent an attempt to identify and analyze all possible studies that fall within the scope of the review question. Restricting a search to a general database (such as MEDLINE) is clearly insufficient; a review group found that this tends to identify only about half of all randomized-controlled trials (RCTs).

#### Where to locate primary studies?

- Major databases;
- Reference of studies identified in databases;
- Unpublished studies (in order to avoid publication bias);
- Interviews with the authors of original studies when data is missing;
- Non-English language studies.

### Identifying RCTs: The Cochrane Central Register

The Register is a bibliographical database of controlled trials that have been identified by a team of experts through hand and database searches. To date, the database includes reference to more than 300,000 such health care trials, providing the title of the article, indicating where it was published and, in many but not all cases, an abstract. The register is available at [www.cochrane.org](http://www.cochrane.org) and offers a useful search function that allows effective advanced searches.

### 3. Quality assessment and data extraction

A step that usually involves two independent reviewers, the *quality assessment* considers the value of the studies under consideration and their eligibility for inclusion according to the criteria included in the review question. Usually, studies are appraised for their methodological error, particularly to identify any possible sources of bias.
4. Synthesis and summary of study results

If applicable, this is the stage where a meta-analysis may be used to pool statistical results from the various studies under review. The aim is to combine the multiple findings in order to reach a conclusion on the clinical effectiveness of the intervention under consideration. When a difference of effect is detected across various studies, the source of this divergence can then be analyzed.

5. Interpretation

During this final stage, the synthesized study results are interpreted and the limitations of both the review and the studies within it are discussed. As Pai et al (2004) explain, “limitations of the primary studies … may include issues relating to design flaws. Limitations of the review itself may include issues such as inclusion of only English language studies or inability to accurately interpret the summary estimates due to heterogeneity.” This allows the reader to judge personally the value of the review and its conclusions. Finally, the review discusses the practical implications and applicability of the findings.

Where can I find systematic reviews?

The Cochrane Collaboration

The Cochrane Collaboration, established in 1993, offers state-of-the-art systematic reviews of healthcare interventions. It is an international non-profit and independent organization that produces and electronically disseminates systematic reviews. It also provides resources for reviewers or individuals interested in learning how to produce a review. Currently, thousands of individuals – typically volunteers – are involved with the organization, which in turn collaborates with myriad centres throughout the world. Since 2000, the number of contributors from low, lower-middle and upper-middle income countries has increased by 248%.

Reviews are available in two formats: on-line (www.cochranelibrary.com) or on CD-ROM. While abstracts are freely obtainable, access to full-text versions is currently restricted to subscribers. In many cases, however, countries have made arrangements to provide free-access to their nationals, as in Australia, Denmark, England, Finland, Ireland, Scotland, South Africa, New Zealand, Norway, Sweden and Wales. Specific programmes are also in place to provide free-access in lower and middle-income countries. Information on these free access programmes is available on the organization’s website.

When looking for reviews, one of the Collaboration’s most useful “entities” is the Review Groups. Numbering over 50, these focus on specific areas of health and each consists of a team of reviewers as well as an editorial base. The complete list of groups, which are hosted in centres around the world, is available at www.cochrane.org/contacts/entities.htm#centres.
The Campbell Collaboration

The Campbell Collaboration, another international non-profit organization, prepares and disseminates systematic reviews in electronic format. Building on the work of the Cochrane Collaboration (and its focus on the healthcare sector), the Campbell Collaboration’ reviews focus on studies that discuss the effects of policies and practices.

If we already know what we're looking for, we can limit our search to specific Cochrane products such as reviews, clinical trials, methods, studies, etc.

Basic facts about systematic reviews

Information targeted to different audiences

The advanced search interface allows keyword search in 10 different fields
Specifically, reviews cover studies about the effects of interventions in social, educational and behavioral areas and are available at www.campbellcollaboration.org.

Currently, the Campbell Collaboration consists of six Coordinating Groups, each with an area of specialization. All identify topics, contributors, and users of reviews; assist reviewers in the process of conducting reviews; and ultimately disseminate the reviews. The six coordinating groups are:

- The Campbell Collaboration Crime and Justice;
- The Campbell Collaboration Education;
- The Campbell Collaboration Social Welfare;
- The Campbell Collaboration Methods;
- The Campbell Collaboration Communication and Internationalization; and
- The Campbell Collaboration Users Group.

The Campbell Collaboration Library consists of two databases to which online access is provided free of charge:

- The Campbell (C2) Social, Psychological, Educational, and Criminological Trials Registry (C2-SPECTR) contains more than 11,700 entries on randomized and possibly randomized trials; and,
- The C2 Reviews of Interventions and Policy Evaluations (C2-RIPE) containing approved titles, protocols, reviews, and abstracts.

**How can I learn how to do a Systematic Review?**

There is strong demand among researchers and KT professionals to learn how to undertake systematic reviews. Fortunately, there are a number of courses offered at centres throughout the world. Systematic reviews are, for their rigour, extremely difficult and should never be tried at home (i.e. only professionals trained in the arts of systematic reviews should undertake them). Centres that periodically offer systematic review training courses include:

The Joanna Briggs Institute (JBI)  
http://www.joannabriggs.edu/au/about/home.php

The South African Cochrane Centre  
http://www.mrc.ac.za/cochrane/cochrane.htm

**II. The Future of Systematic Reviews**

In recent years, a number of commentators have voiced strong opinions on systematic reviews. Concerns tend to coalesce around their **objectivity** and their **utility**, focusing in the first instance on issues of bias, methodological quality and reporting quality, and in the second on their failure to bring in the demand side in their formation, execution and use. We’ll consider both of these in the following section.

**1. Objectivity**

The strength of a systematic review ought to be in its iron-clad process – its rigorous methodology should create reviews that are fully objective and balanced. However, some authors have found sharp disparities in quality, and even some that yield different answers to the same question. For a tool that is supposed to do the “hard work” of giving us
perspective on complex issues, this is indeed troubling. Shea et al (2007a) raise flags over variance in the error and bias of some reviews. These are typically found in a review's methodological quality – "the extent to which the design of a systematic review will generate unbiased results" (literature searching data pooling, etc.) – and its reporting quality – how well the reviewers have divulged their findings and methodology. These quality issues may express themselves in language restriction (including only English-language studies may distort effect sizes); in publication bias (studies with negative findings are published less frequently or less prominently than those with positive findings); and in publication status (getting at the differences in trials and effect between published and grey literature).

While these may seem like highly detailed quibbles, if we cannot assess the quality of a systematic review or reviews, then how are we to know its real value? If the term “systematic review” isn’t a guarantee of quality, what is?

Clearly, there is a need for an evaluating framework, a tool that will allow us to stack systematic reviews and assess, objectively, their relative degrees of bias, error and value. Fortunately, there have been numerous attempts to create such a framework (Shea et al 2007 count 24 different instruments), with the latest and most promising called “A Measurement Tool to Assess Reviews” (AMSTAR). Developed by Shea and colleagues in 2007, AMSTAR seeks to determine the methodological quality of systematic reviews, ensuring reliability and construct validity. AMSTAR works by isolating 37 critical quality variables for any systematic review, and reducing these to eleven questions a panel can use to assess the quality of any given review.

<table>
<thead>
<tr>
<th>AMSTAR: assessing methodological quality</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Was an ‘a priori’ design provided?</strong></td>
</tr>
<tr>
<td>The research question and inclusion criteria should be established before the conduct of the review.</td>
</tr>
<tr>
<td><strong>2. Was there duplicate study selection and data extraction?</strong></td>
</tr>
<tr>
<td>There should be at least two independent data extractors, and a consensus procedure for disagreements should be in place.</td>
</tr>
<tr>
<td><strong>3. Was a comprehensive literature search performed?</strong></td>
</tr>
<tr>
<td>At least two electronic sources should be searched. The report must include years and databases used (eg Central, EMBASE and MEDLINE). Key words and/or MESH terms should be stated and where feasible the search strategy should be provided …</td>
</tr>
<tr>
<td><strong>4. Was the status of publication (ie grey literature) used as an inclusion criterion?</strong></td>
</tr>
<tr>
<td>The authors should state that they searched for reports regardless of their publication type.</td>
</tr>
<tr>
<td><strong>5. Was a list of studies (included and excluded) provided?</strong></td>
</tr>
</tbody>
</table>
AMSTAR: assessing methodological quality

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes/No</th>
<th>Can't Answer/Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>6. Were the characteristics of the included studies provided?</strong></td>
<td></td>
<td></td>
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<tr>
<td>In an aggregated form such as a table, data from the original studies should be provided on the participants, interventions and outcomes.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>7. Was the scientific quality of the included studies assessed and documented?</strong></td>
<td></td>
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</tr>
<tr>
<td>A priori’ methods of assessment should be provided (eg for effectiveness studies if the author(s) chose to include only randomized, double-blind, placebo-controlled studies, or allocation concealment as inclusion criteria)</td>
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<tr>
<td><strong>8. Was the scientific quality of the included studies used appropriately in formulating conclusions?</strong></td>
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<td></td>
</tr>
<tr>
<td>The results of the methodological rigour and scientific quality should be considered in the analysis and the conclusions of the review, and explicitly stated in formulating recommendations.</td>
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</tr>
<tr>
<td><strong>9. Were the methods used to combine the findings of studies appropriate?</strong></td>
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<tr>
<td>For the pooled results, a test should be done to ensure the studies were combinable, to assess their homogeneity.</td>
<td></td>
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<tr>
<td><strong>10. Was the likelihood of publication bias assessed?</strong></td>
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</tr>
<tr>
<td>An assessment of publication bias should include a combination of graphical aids (eg funnel plot, other available tests) and/or statistical tests</td>
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<tr>
<td><strong>111. Was the conflict of interest stated?</strong></td>
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</tr>
<tr>
<td>Potential sources of support should be clearly acknowledged in both the systematic review and the included studies.</td>
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</table>

2. Utility

If researchers were the only audience for systematic reviews, there would be little need to revisit their format or presentation. Increasingly, however, the objective, condensed and dynamic knowledge found in a systematic review is attractive to a number of different audiences – who may well find the format of a systematic ill-suited to their purposes.

Lavis (2006) and Haines et al (2004) outline several processes that might aid other research-users in not only using systematic reviews but in *shaping* them:

- creating systematic reviews that “address the full range of questions asked by managers and policy makers”. By attaching these contextual markers (and potentially involving those locally affected by the issue under study), the systematic reviews could be tailored for immediate use. Another approach here might be to
create, in parallel with the systematic review, a study examining “their views and experiences”.

- changing the presentation of systematic reviews to improve their uptake — “more easily scanned for relevance, decision-relevant information, and factors that would influence assessments for local applicability”. This could also involve creating “graded entry” for a systematic review in 1:3:25 format (take-home messages: executive summary: full systematic review). For more on this, please see Chapters Two, Six, Seven and Eight.
- initiating dialogue before any systematic review is undertaken that would engage decision-makers in identifying “aspects of managerial and policy challenges that could be explored through systematic reviews”. After all, if personal relationships are at the heart of KT, then nurturing this approach in a systematic review seems reasonable and desirable.

Beyond decision-makers, what if patients themselves could understand — and even demand — systematic reviews on the issues immediately confronting them? What if all health professionals could? What if a systematic review could evaluate the context around “what works”? As Lavis et al (2006) observe, this coherence between demand-and-supply could well “enhance the public accountability of researchers when they derive take-home messages from research, which is a type of accountability that has been noticeably lacking”. As Lomas (2005) concludes, “syntheses that address the broader contextual factors of the managers’ and policymakers’ world therefore appear to be the logical next step in the search for more effective ways to bring research evidence into health system practice”.

As we’ve discussed elsewhere in this Toolkit, we can never be too content with a tool that focuses primarily on the “push” factors (i.e. refining and improving the supply of knowledge as opposed to “pull” and “linkage and exchange” strategies that make knowledge more dynamic). If involving decision-makers in the design and execution of systematic reviews is too much to ask, perhaps one solution would be to begin assessing the synthesis needs of decision-makers, as well as involving decision-makers in some levels of the peer-review process.
Resources

  This website provides a handbook, guidelines, a day course workbook, a train-the-trainer handbook, powerpoint slides, links to courses, guides to hand-searching, and more.

- **The Centre for Reviews and Dissemination at University of York, UK**, organizes training days for information professionals involved in systematic reviews: [http://www.york.ac.uk/inst/crd/infosrcourse.htm](http://www.york.ac.uk/inst/crd/infosrcourse.htm)

- **The Cochrane Collaboration Training Homepage**: [http://www.cochrane.org/resources/training.htm](http://www.cochrane.org/resources/training.htm)
  Provides online resources, a training email list to which you can subscribe, workshop listings, and more.

- **Other Cochrane Centres workshop pages**:
  - Brazilian Cochrane Centre ([http://www.centrocochranedobrasil.org/](http://www.centrocochranedobrasil.org/));
  - Canadian Cochrane Centre workshop page ([http://www.cochrane.uottawa.ca/workshops.asp](http://www.cochrane.uottawa.ca/workshops.asp));
  - Iberoamerican Cochrane Centre Agenda ([http://www.cochrane.es/Agenda](http://www.cochrane.es/Agenda));
  - Nordic Cochrane Centre workshop page ([http://www.cochrane.dk/ncc/courses.htm](http://www.cochrane.dk/ncc/courses.htm));

- **National Health Service Center for Reviews and Dissemination.** *Undertaking systematic reviews of research and effectiveness.* York, England: University of York: [http://www.york.ac.uk/inst/crd/report4.htm](http://www.york.ac.uk/inst/crd/report4.htm)

Comments? Questions? Criticisms?

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Endnotes


5 Egger et al. 2001.


7 Pai et al. (2004).


9 Pai et al. (2004)


13 Lavis (2006)

14 Lavis (2006)

15 Lavis et al (2006)


# Table of Contents

**Open Access in Practice**  
*Why should we use OA?*  

**The Routes to OA**  
*OA Journals: the gold route*  
*Examples of OA Journals and directories*  
*Self-Archiving: the green route*  
*Interoperability*  

**OA in Practice: Frequently Asked Questions**  
*When should we self-archive our work?*  
*By depositing our paper in a repository, are we signing away all copyright to that paper?*  
*Does mounting our work in a repository require a lot of time and technical skill?*  
*Where can we deposit our papers? What are some good Institutional Repositories?*  
*Do IRs provide access only to peer-reviewed papers?*  
*If we provide OA to our work, will it be easier for others to plagiarize it?*  
*Will work published in OA journals or made available in repositories be less credible?*  
*What role can research funders and governments play to increase the acceptance of OA?*  

**Key Online Resources**  
**Glossary of Key OA Terms**  

*Endnotes*
“Today, most of the 2.5 million articles published in the world’s 24,000 peer-reviewed journals are inaccessible to many of their potential users because they cannot afford access.”

Since scientific journals were first created in the 17th century, they have become the vehicle-of-choice for disseminating research findings. They record the state-of-the-art, and a strong journal-publishing record can pave the way for scientists to gain tenure or secure further funding. Incentive structures drive a maxim of *publish or perish*.

From a Knowledge Translation standpoint, there is something missing. Journals are written and read by researchers; their language excludes key audiences. If the goal of our research is to publish it, then this doesn’t matter. However, if the goal is to effect change, to influence policy, to reach a wider audience, there’s a serious problem – what relevance will research have if it’s only ever read by our colleagues? Compounding this is the access barrier: for-fee journals are unaffordable to many, meaning an article which took years of work, sweat and tears achieves nowhere near the “reach” it deserves.

Fortunately, there are ways to increase visibility, audience, and ultimately the influence of peer-reviewed articles. The most important of these is called Open Access.
Open Access (OA) aims to create a “perfect world” where knowledge is free and easily accessible. It is a world where knowledge is always building upon itself. While conducting research itself is not free, in the OA paradigm, accessing it should be. Born in the 1990s, OA is all about equality of opportunity: since knowledge is a public good, everyone ought to have the same opportunity to access and use it. Nobody “owns” the science, and no one need pay a fee to retrieve it. After all, knowledge – especially that which can affect the livelihoods of millions – should not be the dominion of any one individual or organization. Knowledge must be equally available to all.

While OA is certainly in the ascendance, it is not yet the dominant publishing model. In many cases, researchers who publish in established journals often sign away their rights and lose control over how their knowledge will be disseminated. The publishers who now own those rights often sell that research – at a premium – back to the (subscribing) general public. Institutional memberships to major publications range from US$10,000 to $20,000 per year. Between 1986 and 2000, journal prices increased by 291% – four times more than the retail price index. Particularly when research is funded through public coffers, we can rightly question whether those results ought to be sold back, at a profit, to the very people who funded them.

Beyond the ethical issues, there is strong evidence suggesting OA’ed articles have a greater impact. The logic is simple: the more people who can access an article, the greater the chances that someone will ultimately use the findings, whether citing them in their own papers or applying them in a policy setting. Open Access is the future, and its ultimate success depends not upon convincing publishers to act for the greater good but upon convincing researchers (and research funders) to publish their work only in OA journals. If we as researchers adopt an OA publishing code, for-profit publishers will have no material to publish and they themselves will have to OA or perish. We control the fate of OA!

In this chapter, we explore the concept of Open Access, discuss the different “routes” to it, and conclude with a section of Frequently Asked Questions.

Open Access in Practice

OA has been defined technically as the

“free availability [of research literature] on the public internet, permitting any user to read, download, copy, distribute, print, search, or link to the full texts of these articles, crawl them for indexing, pass them as data to software, or use them for any other lawful purpose, without financial, legal, or technical barriers other than those inseparable from gaining access to the internet itself. The only constraints on reproduction and distribution, and the only role for copyright in
this domain, should be to give authors control over the integrity of their work and the right to be properly acknowledged and cited.\(^4\)

In practice, an OA environment means: beyond reading an article, we can cite it, email it, post it to our own website – \textit{whatever we like} – so long as we acknowledge the original author(s). And we can do all of this without spending a shilling or cent or rupee. The knowledge is there, available and free.

### Open Access is not Free Access

\textit{Free Access} is a situation where particular individuals, groups or institutions are given access to one or many publications free of charge or at a lower cost. In the biomedical field, for example, the \textit{Health InterNetwork Access Initiative (HINARI)} currently provides non-profit institutions in 113 developing countries that meet certain requirements with free or low cost access to over 3,750 journal titles. Such an arrangement “is seen as a type of ‘social contract’ viable only if institutions in developed countries are willing to pay higher prices for their journals than colleagues in developing countries.” OA, on the other hand, provides unlimited and free access to all, regardless of their financial status.

As OA is still developing and many publications are not yet available free of charge, Free Access initiatives can be a good alternative in developing countries. Some of the programmes currently available include:

- Ptolemy Project: [www.utoronto.ca/ois/myweb9/](http://www.utoronto.ca/ois/myweb9/)
- Electronic Information for Libraries (eIFL): [www.eifl.net](http://www.eifl.net)


### Why should we use OA?

Very simply, OA allows us to reach a wider audience. Recent studies in computer science, astronomy and physics find a clear correlation between online availability and the citation count of an article.\(^5\) While access might not be the only condition for citation, it is certainly a necessary one.

A second advantage is OA’s potential for \textit{speeding up research progress and productivity}. As each one of us is not only a writer but also a \textit{reader}, we benefit from greater availability of scientific articles. With more and more of our knowledge going into the public domain, we can eventually render the marketplace a non-factor in research dissemination.

Though the OA movement has been growing since the early 1990s – attracting an increasing number of researchers, institutions, funding agencies and governments – the pace at which authors are adopting OA is still slow. In 2004, for example, only about 20% of authors were OA’ing their articles.\(^6\) To many, the OA methodology remains puzzling. How is it done? Does it involve techno-internet wizardry? In ways, traditional publishing seems the easier task – someone else can worry about these questions.
OA does require a paradigm shift in thinking about publication. Fortunately, this shift is an easy one.

**The Routes to OA**

There are two main ways to OA. The first is out-right self-publishing in an OA Journal, commonly called the “gold route”. The second is by self-archiving articles in a repository – the “green route”.

**OA Journals: the gold route**

OA Journals are just like any other scientific journal – except they are online and free. Their numbers have been growing and, as of August 2008, 3,563 OA journals were available online, featuring close to 200,000 articles. In most cases, the author retains his/her copyrights. Even when copyrights are transferred to the publisher, the articles are still freely available.

Whatever the publishing model – be it OA or for-profit – publishers or journals fulfill a number of important functions, including peer-review, editing, layout, conversion of plain text into XML coding, and more. These costs will not disappear. In fact, the costs associated with producing and distributing OA Journals are nearly identical to those of non-OA Journals. Current conservative estimates place these at around US$1,500 per article.

The important element here is not the cost itself but exactly when these costs appear in the production cycle, and who pays them. In some cases, OA journals charge up-front “processing fees” equivalent to what it costs them to publish a specific article. Such fees are often referred to as “author fees” and have been criticized for placing too big of a burden on authors, preventing many from actually publishing. In most cases, however, sponsors (such as employers or funding agencies) provide the necessary funds, and scientists are increasingly budgeting in their research grants to accommodate this. Obviously, this only works if these actors place a premium on OA, and plan this publication method from the outset.

Today, fewer than half of all OA journals charge processing fees (or author fees). Even when such fees are charged, they are often waived for researchers who cannot afford to pay them, especially if they are from lower-income countries. Alternatively, OA Journals can opt to charge institutional memberships, where an institution pays a subscription fee which in turn allows its own researchers to publish, free of charge, articles in a particular journal. Other funding mechanisms include grants to OA publishers, institutional subsidies, and priced “add-ons”.

Some subscription-based publications are now known as hybrid journals, where authors can opt to pay a certain processing fee that will ensure their specific article is made freely available even if the rest of the publication is not. Some journals are using this as a way to move towards OA while still recovering most of their costs through subscription revenue.
Examples of OA Journals and directories

- BioMed publishes 179 open-access biomedical journals, including: BMC Public Health, BMC International Health and Human Rights, BMC Infectious Diseases, Health Research Policy and Systems, International Journal for Equity in Health, and many more. Visit: [www.biomedcentral.com](http://www.biomedcentral.com)
- The Directory of Open Access Journals offers a thorough list of OA journals which you can search by subject (or field). Visit: [www.doaj.org](http://www.doaj.org)

Self-Archiving: the green route

Self-archiving may sound techno-horrific but all it means is posting our own research electronically, without any publisher involvement.\(^\text{10}\) When we post copies of our research articles on our personal website – making it freely available to the public – that, in itself, is an act of self-archiving. The same applies when we make it available in a public (electronic) archive. Though this is often called the green route to OA, it is not equivalent to publishing; instead it allows for the free availability of articles “in parallel to any publication system”.\(^\text{11}\)

There are a number of ways in which authors can self-archive their work, including personal websites, disciplinary archives, and institutional repositories (IRs). While we will focus on this third method of institutional repositories, the text-box below contains a brief discussion of the alternatives.

### Author Website and Disciplinary Archives

Posting articles on a **personal website** increases access but the chances of a specific search locating the material (through Google or Yahoo!) are often slim. Also, as websites often change and links become “broken,” materials posted on personal websites have a shorter lifespan than those posted in formal archives.

The first free on-line **disciplinary archive**, arXiv.org, was created in 1991 as a **preprint archive** for physicists. Today, disciplinary archives have grown in number and are very similar to institutional repositories. The only difference is that the former only house information relating to a particular subject or academic discipline. With the advent of OAI search engines, however, the difference becomes irrelevant as these will locate any articles that match search criteria, regardless of which type of archive/repository they are in.

Institutional Repositories (IRs) are databases that host the literature produced by a particular entity, be it an academic institution or a research organization. As opposed to disciplinary archives, IRs are cross-disciplinary and house preprints and/or postprints of articles submitted to scientific journals.

**Preprints** are versions of articles that have yet to be peer-reviewed and published. Often, this is the version submitted to a journal for review.

**Postprints** are versions that have been approved by the peer-review process. These do not necessarily have to be copy-edited – some journals, for example, will only allow authors to archive the version of their postprint that has not been edited and formatted – the “author-manuscript”.\(^\text{12}\) Similarly, some journals will only allow us to post the
preprint version of an article that appears in their subscription-based publication, or allow us to post the postprint only after a predetermined embargo period. To distinguish between journals' self-archiving policies, a color code is often used:

<table>
<thead>
<tr>
<th>Color</th>
<th>Policy Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gold</td>
<td>OA is provided to all articles without delay. Articles are freely available at the time of publication.</td>
</tr>
<tr>
<td>Green</td>
<td>Authors are allowed to self-archive their article (postprint) after it has appeared in the subscription-based version of the journal. The delay between the initial publication and the permission to archive varies from one publisher to the other.</td>
</tr>
<tr>
<td>Pale Green</td>
<td>Authors can only self-archive preprint versions of their articles</td>
</tr>
<tr>
<td>Gray</td>
<td>None of the above.</td>
</tr>
</tbody>
</table>


While some journals still do not allow authors to self-archive their work, the proportion of journals that permit either preprint or postprint archiving has risen substantially in recent years. The most recent survey of the 278 publishers registered with the SHERPA/RoMEO project – which provides a listing of publisher copyright policies and self-archiving – reveals that 91% of their journals (over 8,000) are “green”.13

Interoperability
The major advantage of IRs is that they are interoperable and cross-referenced. We don’t have to search every individual IR for information on a specific topic. As most IRs comply with the Open Archives Initiative Protocol for Metadata Harvesting (OAI-PMH), we can simultaneously search most repositories as if they were “one, big, seamless, virtual archive.”14 Using specialized search engines that aggregate the content of thousands of archives, we can search and retrieve documents from any IR.15 Today, more OAI “Googles” are being created, most notably the University of Michigan’s OAIster (http://oaister.umdl.umich.edu/o/oaister/). Even standard search engines such as Google Scholar and Yahoo! have started indexing metadata from IRs and favour OA copies of articles. If an OA copy of a document has been indexed by Google, our search will lead first to this copy, instead of to those for which we must pay.16
OA in Practice: Frequently Asked Questions

When should we self-archive our work?

Our ability to self-archive our work will depend on whether the journal to which we have submitted is “gold,” “green,” “pale-green,” or “gray”. How do we know what a journal or publisher’s policy is? The SHERPA/RoMEO project provides an extensive list of various publishers’ policies at [http://www.sherpa.ac.uk/romeo.php](http://www.sherpa.ac.uk/romeo.php).

Legally speaking, we can self-archive any preprint version of our work without a journal’s permission. As long as we haven’t signed any agreement with a publisher stating otherwise, we are still the sole copyright holders of our work. In some cases, however, specific journals can decide not to consider for peer-review an article that has been previously circulated to the public or submitted to another publication, including anything that has been posted on the internet. This has nothing to do with copyright law, but can be applied by any journal as part of their own institutional policy. Referred to as the Ingelfinger rule, this policy was first put in place in 1969 by the then-editor of *The New England Journal of Medicine*, Franz J. Ingelfinger. While few journals now impose such requirements, we should always check a journal’s policy if we intend to submit an article for peer-review.

In the case of postprints, the situation is more complicated as copyright is typically given to publishers who now own the rights to our work. Four likely scenarios are:

1. The journal allows us to self-archive the final, ready-for-publication, peer-reviewed version of our article without any delay, i.e. as soon as it appears in the subscription-based version.
2. The journal allows us to self-archive, without delay, our author-manuscript – the final, peer-reviewed version of our work that has not been copy-edited and formatted for publication.

![Journal Policy Chart: the growing number of “green” journals](http://romeo.eprints.org/stats.php)
The journal allows us to self-archive the final peer-reviewed version of our article (or our author-manuscript) but only after an embargo period (usually between six months and a year).

The journal denies us the right to self-archive anything other than the preprint version of our work.

The when and how of self-archiving will vary on a case-by-case basis – if in any doubt, we should refer to the SHERPA/RoMEO Project to determine any publisher’s self-archiving policy. It contains the policies of over 400 publishers. Today, 64% of publishers and 91% of all journals inventoried by the SHERPA/RoMEO list allow us to postprint our work.17

By depositing our paper in a repository, are we signing away all copyright to that paper?

No. Depositing an article in a repository in no way interferes with copyright law. All that is required is for the copyright holder – be it the author or the publisher – to agree to make his/her work OA. The copyright holder will retain rights to the article as defined in the copyright agreement.

In the case of a preprint, we, as authors, will retain all rights to our work.

When our article is accepted for publication in a scientific journal, most publishers will demand that we sign a copyright agreement, which means that they now own the rights to our work. In that case, we will need to seek their permission before depositing our postprint – either the “author-manuscript” or the final, type-set and formatted version as it appears in the journal – in a repository.

Before signing any copyright agreement with a publisher, authors should ensure that it will not prevent them from providing OA to their work. One useful resource here is the Creative Commons licences which can help us manage our copyright in a more flexible, open way (www.creativecommons.org).18 Such licences can also be used by authors to create an OA-compatible copyright for the preprint version of their work. The SHERPA project provides a template that authors can use to request permission to place their work in a repository from publishers who do not usually grant such a right (http://www.sherpa.ac.uk/guidance/submission.html#requests).

Does mounting our work in a repository require a lot of time and technical skill?

No. Depositing an article takes about ten minutes. And the more we do it, the easier it gets – we don’t even need to be computer-savvy. Once we have registered with a specific repository all we have to do is upload our work, fill-in a few simple fields, and hit the “submit” button.

Where can we deposit our papers? What are some good Institutional Repositories?

We cannot self-archive our work in any institutional repository of our choosing. Though this may change, at present institutional repositories generally limit their content to work produced by staff, students, grantees, funded projects, and other funding recipients. Thus, if we are interested in self-archiving, the first step is to find out whether our university, research institute or funder already has an IR. Apart from the obvious step of asking...
them directly, we can also turn to a variety of websites that provide searchable databases of existing IRs. These include:

- The Directory of Open Access Repositories, OpenDOAR: http://www.opendoar.org/index.html; and,

If we already have access to an IR, then the next step is to find out how to upload documents – every IR will have specific instructions on this particular to their web interface.

If, on the other hand, the organization or institution to which we are affiliated does not have an IR, we can turn to other types of archives, mainly subject-based ones. In the field of public health, however, there are not many. The best known digital archive is PubMed Central (http://www.pubmedcentral.nih.gov/index.html), a “free digital archive of biomedical and life sciences journal literature.” PubMed Central (PMC) only archives previously peer-reviewed materials. In most cases, PMC enters into agreements with publishers to make some or all of the content of their journals freely available on PMC. In some circumstances, PMC will accept material directly from authors when this has been mandated by their funding agency. At all times, articles must meet PMC standards of quality, both in terms of the “scientific and editorial quality of their content, and the technical quality of their digital files.”

Another option is to submit work to Eldis, one of the knowledge services provided by the Institute for Development Studies (Sussex). This website offers full-text access to over 22,000 documents, 30 resource guides, an email newsletter, and more, hosting documents that are already online elsewhere. After completing a simple submission form, our document will be reviewed by an editorial team who will determine whether it is suitable for inclusion on their site. If the document is not already available online, we must confirm that we are the sole copyright holder and give permission for Eldis to make it publicly available. For detailed instructions, see http://www.eldis.ids.ac.uk/about/contribute.htm.

Note that IDRC has recently launched its own IR, the “Digital Library” (at http://idl-bnc.idrc.ca/). This aims to “provide the international research community with access to a current and comprehensive collection of research results and documents generated by IDRC-funded projects, IDRC funding recipients, and IDRC staff about a wide range of subjects related to international development”.

A final option is to create our own IR. The following websites, documents and software are available to assist us:

- The SPARC Repository Resources offers a variety of readings and links concerning IRs, including how-to guides and discussion forums: http://www.arl.org/sparc/repositories/.
- The CARL Guide to Setting up an Institutional Repository discusses the various steps involved in the process: http://www.carl-abrc.ca/projects/institutional_repositories/setup_guide-e.html
Three free software packages are available for use for institutional repositories: GNU EPrints (http://www.eprints.org/software/); DSpace (http://www.dspace.org/); and CDSware (http://cdsware.cern.ch/)

Richard Jones, Dr Theo Andrew and John MacColl. 2006. The Institutional Repository. Oxford: Chandos Publishing. In this book, the authors discuss IRs, including their set-up and maintenance.

**Do IRs provide access only to peer-reviewed papers?**

No. While some IRs or archives, such as PubMed Central, only host e-prints or peer-reviewed articles, others host a variety of other types of documents, including drafts and working papers, books and monographs, non-published digital objects, reports, and other grey literature. IRs are free to determine what type of work they want to host, but will usually differentiate clearly between documents that are peer-reviewed and those which are not.

If we are interested in finding repositories that only host peer-reviewed publications, the OpenDOAR’s searchable database allows us to limit our search to repositories that host preprints or postprints. The Registry of Open Access Material Archiving Policies (ROARMAP) allows us to find out what a specific repository’s policy is with regards to archiving.

**If we provide OA to our work, will it be easier for others to plagiarize it?**

No. By providing OA to our work, we are simply consenting to the “unrestricted reading, downloading, copying, sharing, storing, printing, searching, linking, and crawling of the full-text of the work.”21 By using copyright agreements, such as those provided by the Creative Commons, we ensure our work can be used only for these purposes, and nothing else. Secondly, plagiarism is in fact easier to detect once our work is online as search engines can be used to find out whether entire segments of our article are being used by others.

**Will work published in OA journals or made available in repositories be less credible?**

No. Contrary to what some people might think, OA is absolutely compatible with peer-review. OA journals use the same standards of quality as subscription-based publications, requiring peer-review as the basis for selecting which articles they will publish. The only difference is that the costs involved with such procedures are not borne by the reader.

Posting in a repository in no way interferes with the peer-review process. While repositories do not perform peer-review – they are not a refereed publishing medium – they can opt to host only peer-reviewed works. In fact, most repositories and archives limit their content to peer-reviewed research literature. And those that also house non-peer-reviewed works, for example preprints, will clearly label them as such. Making our work available in a repository doesn’t decrease its value or credibility; in fact, it enhances it by increasing its readership and citation count.
What role can research funders and governments play to increase the acceptance of OA?

These actors could play a critical role; for instance, they could require that the research findings they have funded be OA as a precondition of funding in the first place.22 Today, a number of funding organizations are mandating OA as part of their funding agreements with new grantees. For example,

- The U.S. National Institute of Health has had a “Public Access Policy” in place since May 2005. Self-archiving must be done in PubMed Central, but authors are allowed an embargo period of up to one year if that is required by the journal in which they have published. For more information, see: http://publicaccess.nih.gov/
- The Wellcome Trust’s “Position Statement in Support of Open and Unrestricted Access to Published Research” took effect in October 2005. Under this new policy, all grant holders must place a version of any peer-reviewed paper in PubMed Central (PMC), and eventually UK PubMed Central (UKPMC). An embargo period of up to six months is permitted. In addition, recognizing that authors might not be able to cover the extra costs of publishing in OA journals, the policy also provides for extra funds to cover processing fees. For more information, see: www.wellcome.ac.uk/doc_WTD002766.html

Other research funders are now coming on board, including the Research Council UK and Canada’s Social Sciences and Humanities Research Council. A number of governments are also introducing legislation to put research findings funded by government money into the public domain.23

What can we do to advance the OA movement?

If possible, publish in OA journals. As this might not always be feasible due (among other factors) to the unavailability of a suitable journal, we should make our work available in a repository as early as possible. If we must publish in non-OA journals, choose publishers who allow us to self-archive preprints or postprints. The power to increase the percentage of OA articles rests, after all, in the hands of individual authors who are willing to make their work freely available online.

Be familiar with our rights as authors and retain copyright. If relinquishing copyright is unavoidable, we should make use of freely available licenses such as those provided by the Creative Commons to ensure that our copyright agreement does not forbid OA. Always retain a copy of our author-manuscript – the peer-reviewed version of our article that has not been type-set and formatted – in case our publisher does not allow us to self-archive the version that appears in their publication.

Sign the Budapest Open Access Initiative, a public statement in support of OA – both self-archiving and OA journals – for scholarly journal articles. It was launched in February 2002 and is available at: http://www.soros.org/openaccess/.
Key Online Resources

Search Engines (or service providers):
- OAIster, University of Michigan Digital Library Search Service: www.oaister.org
- Arc, Old Dominion University, Digital Research Library Research Group: www.arc.cs.odu.edu
- Citebase, Open Citation Project: www.citebase.org
- Citeseer: http://citeseer.ist.psu.edu
- Scirus: www.scirus.com/srsapp
- Google Scholar: www.scholar.google.com
- The Open Archives Initiative (OAI) maintains a list of other service providers: www.openarchives.org/service/listproviders.html

OA Statements and Definition
- Budapest Open Access Initiative: www.soros.org/openaccess/
- Bethesda OA Statement: www.earlham.edu/~peters/fos/bethesda.htm
- Berlin OA Statement: http://oa.mpg.de/openaccess-berlin/berlindeclaration.html
- OECD Declaration on Access to Research Data from Public Findings: www.oecd.org/document/0,2340,en_2649_34487_25998799_1_1_1_1,00.html

Directories, databases and more
- Open Access and the Developing World: http://www.biomedcentral.com/developingcountries/
- Directory of Open Access Journals: www.doaj.org
- SHERPA/RoMEO Project: www.sherpa.ac.uk/romeo.php
- Directory of Open Access Repositories: www.opendoar.org
- Open Society Institute: www.soros.org
- Create Change: www.createchange.org
- Creative Commons: www.creativecommons.org
- SPARC: www.arl.org/sparc

OA Overviews:
- “Authors and Open Access.” Nottingham, SHERPA Project, 2006. http://www.sherpa.ac.uk/guidance/authors.html#whatoa
Glossary of Key OA Terms

**Author manuscript**: The version of an article that has been accepted for publication, including revisions made by the author but generally excluding final copy-edits and other small changes made by the journal’s editorial staff prior to publication.\textsuperscript{24}

**Creative Commons**: A non-profit organization that “provides free tools that let authors, scientists, artists, and educators easily mark their creative work with the freedoms they want it to carry.”\textsuperscript{25} The Creative Commons licences allow authors to hold on to their copyright and control how their work can be accessed and used.

**Disciplinary Archives**: A repository that is created to house postprints and/or preprints in one or more specific fields.

**Embargo**: In the context of OA, this is a pre-determined period of time after publication in a subscription-based journal during which authors are not allowed to self-archive their work (i.e. make it available OA). During that period, the publisher holds the sole right to publication.

**E-prints**: the digital texts of peer-reviewed research articles, before and after refereeing.\textsuperscript{26}

**Free Access**: a situation where particular individuals, groups or institutions are given access to one or more publications free of charge or at a lower cost.

**Gold Route**: publication in an OA journal.

**Green Route**: used interchangeably with the term “self-archiving”, the green route to OA refers to “the electronic posting, without publisher mediation, of author-supplied research.”\textsuperscript{27}

**Ingelfinger Rule**: a policy by which specific journals can decide not to consider for peer-review an article that has been previously circulated to the public or submitted to another publication, including anything that has been posted on the internet.

**Institutional Repository**: an online database that houses the full text of the literature produced by a specific institutions and its affiliates (i.e. staff, students, etc.).

**Interoperability**: “the ability of two or more systems or components to exchange information and to use the information that has been exchanged.”\textsuperscript{28}

**Metadata**: information – data – about the content of an electronic document (e.g. author, title, journal title, etc.)

**Open Access**: “free availability [of research literature] on the public internet, permitting any user to read, download, copy, distribute, print, search, or link to the full texts of these articles, crawl them for indexing, pass them as data to software, or use them for any other lawful purpose, without financial, legal, or technical barriers other than those inseparable from gaining access to the internet itself. The only constraints on reproduction and distribution, and the only role for copyright in this domain, should be to give authors
control over the integrity of their work and the right to be properly acknowledged and cited.”

**Open Access Journals:** are journals that “use a funding model that does not charge readers or their institutions for access.” Readers are furthermore allowed to “read, download, copy, distribute, search, or link to the full texts of these articles.”

**Postprints:** versions that have been approved by the peer-review process. These do not necessarily have to be copy-edited – some journals, for example, will only allow authors to archive the author-manuscript.

**Preprints:** versions of articles that have not yet been submitted for peer-review or publication.

**Self-archiving:** the electronic posting, without publisher mediation, of author-supplied research.

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**Comments? Questions? Criticisms?**

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Research Matters (RM) is a collaboration of the International Development Research Centre (IDRC) and the Swiss Agency for Development and Cooperation (SDC). RM was launched in 2003 to examine and enhance the specific KT dynamics within the field of health systems research. From these founding connections with both a research funder and a bilateral donor, RM has occupied a unique vantage among health researchers and research-users. By working directly with both the producers of research and with its consumers, RM has developed a range of activities and modalities designed to hasten the movement of research results to the policy arena, to database and access those results, to communicate them, and to expand an appreciation of research itself. RM builds capacity among researchers to perform their own KT; RM responds to the priorities of major research-users; and RM actively brokers both research results and research processes. As an active, ground-level embodiment of KT, RM has helped to shape how health research is demanded, created, supplied, and ultimately used.
Endnotes


3 The Open Citation Project. “The effect of open access and downloads (‘hits’) on citation impact: a bibliography of studies”. Available at: http://opcit.eprints.org/oacitation-biblio.html


7 Directory of Open Access Journals (DOAJ). Available at: www.doaj.org


9 Suber P. 2007. *Open Access Overview*. Available at: www.earlham.edu/~peters/fos/overviewhtm


12 Suber (2007).


20 PMC Frequently Asked Questions (FAQs), http://www.pubmedcentral.nih.gov/about/faq.html#q3

21 Suber (2007)

22 Harnad (2005).


25 See www.creativecommons.org

26 See “Self-Archiving FAQ” at www.eprints.org/openaccess/self-faq/

27 Crow (2002).


Crow (2002).
# Table of Contents

## I. Oral presentations

- The Speech  
- The “Three-Message Speech”  
- Giving the Speech  
- Rehearse  
- The Big Moment  
- The Follow-up  
- The Technology Supporting the Presentation  
- Other Technology Tips  
- Concluding Thoughts on Oral Presentations

## II. Poster Presentations

- The Structure of a Poster  
- Poster examples  
- Further resources

## III. Conference Presentations

- Overview  
- 1. Synthesis  
- 2. Rapporteur  
- Concluding thoughts  
- Endnotes
The conference: an unparalleled moment to network, present, source some funding, solve problems, and soak up new knowledge. We travel great distances to attend them, to be among our peers on the field’s cutting-edge. We get fancy conference bags, brochures, books and buffet lines; in a time-zone warp, we ask important questions and then dash off to see another presentation. But soon our enthusiasm wanes. We listen to speakers “reading” in barely audible monotones. Those running out of time start blathering at double speed. Some presenters have techno-traumas they never recover from; others transpose entire papers to the bullets of powerpoint. There’s never any time for questions, and no one has brought any hand-outs providing more details about their talk.

A month later, we receive an ugly reminder in the mail: in weighty book format, the conference organizers have captured the detail of every moment, unabridged. It has transcripts of every laboured speech, and makes no attempt to summarize the main messages. What did the conference or any of its presentations add to the general pool of knowledge? What did we learn? What big ideas came out and what did we take away?

All too often, conferences pay little attention to their overall contribution to the field. They can’t summarize that contribution because no one is even trying to – organizers are too busy attending to the needs of delegates, who, in turn, are too busy attending to their
speeches and print-outs and networking opportunities. Nobody is concerned with the big picture. Main messages are completely lost; they’re neither delivered nor captured well.

The “next wave” of conferences – the Conference 2.0 – aims to remedy that. Like the “learning organization” in Chapter Five’s discussion of Evaluative Thinking, the Conference 2.0 seeks to turn every conference into a dynamic learning environment, where solid oral and poster presentations easily flow into proceedings that capture strong messages and action points.

In this chapter, we’ll focus on:

- **oral presentations** – how to make speeches and talks more memorable, and how to use supporting technology responsibly (without letting the technology become the speech);
- **poster presentations** – how to choose the right content, the right look and the right size;
- **conference presentations** – how to streamline and improve the conference’s final record or proceedings, how to nurture better rapporteurs, and how to amplify the participation of session chairs in capturing main messages.

### I. Oral presentations

**Fact one:** While we give our presentation, some audience members may open their laptops to finish their own presentations or check their email. The average adult attention span is around 20 minutes. Chances are high that 16% will fall asleep.

**Fact two:** Nobody in the room is interested in knowing *everything* we did.

**Fact three:** Nobody will leave our presentation saying, “I wish that presentation had been longer!”

**Fact four:** At any conference, people may see 20-30 presentations. Any excuse to stop listening to us and they’re gone!

The Speech

Like a two-pager, a video, or a newsletter, a speech is another means of translating, exchanging and interacting with an audience. And just like these other tools, the speech is an appetizer; it should leave our audience hungry for more information. A good speaker impresses the importance of an issue, “sells” a core idea, and then points the way to follow-up details, the paper, hand-outs, brochures, DVDs etc. that are “up here by the lectern” or available on the internet or will be mailed directly to all interested parties…

A speech is not an academic paper. It is not an opportunity to discuss the finer points of methodology – and, most of all, a speech is not a powerpoint! A powerpoint is an *aid*. As in most other research endeavours, technology is there as a support; and the more we relegate technology to this supporting role, the better the speech we’ll write. And the better the speech, the greater our chances of impressing upon the audience our
memorable messages. If one minute after our speech – never mind a week or a year – the audience can recall three major points, we’ve done our job well.

In this section we’ll discuss the “Three-Message Speech”; provide some tips for presenting; and conclude with the responsible use of Microsoft’s PowerPoint application.

The “Three-Message Speech”
As with every other tool in this Toolkit, the audience must be our starting point – a speech must satisfy their experience, not our own. So, what does the audience need and want in order to understand and potentially act upon our take-home messages?

Effective speeches grab attention, communicate audience-relevant arguments and evidence; persuade an audience they are true; and are memorable and entertaining. As with the Two-Pager, the easiest (though certainly not the only) way to structure a speech is to create three core take-home messages: isolate three “pegs” that capture our essential points and then hang our talk on them. This clearly does not resemble the abstract-introduction-hypothesis-methods-discussion-conclusion format of a paper, and nor should it. A speech is not a paper! In a paper, the reader can skim content and return to previous sections; not so in a speech, so we must organize the content in a way that is easy to follow and recall at one “reading”.

There are all kinds of other things an audience could be doing instead of listening to us, so we’re obliged to give them something useful. In the “typical” speech as shown below, an audience’s attention is both high at the beginning (with great hopes for the talk) and at the end of a talk (hoping to get something, anything, from what we’ve said), with few hanging on during the discussion. But structuring our speech around three take-home messages works to maintain an audience’s attention throughout, as it promises and delivers regular “peaks”.

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The Three-Message Speech:
tell them, show them, remind them, ask them.
Tell Them.
Show Them.
Remind Them.
Ask Them.

While some have re-spun the “tell them; show them; remind them; ask them” directive as “tell them what you’re going to tell them; tell them; tell them what you told them,” these pointers are a useful way to structure the “three messages” approach:

- tell them what the three messages are;
- show them those three messages in action and with detail;
- remind them what the three messages were;
- ask them for their questions or concerns.

Tell Them.
Show Them.
Remind Them.
Ask Them.

“While attending lectures on dementia, doctors Kenneth Rockwood, David B. Hogan and Christopher J. Patterson kept track of the number of attendees who nodded off during the talks. They found that in an hour-long lecture attended by about 100 doctors, an average of 16 audience members nodded off. ‘We chose this method because counting is scientific,’ the authors wrote in their seminal 2004 article in The Canadian Medical Association Journal. The investigators analyzed the presentations themselves and found that a monotonous tone was most strongly associated with ‘nod-off episodes per lecture (NOELs),’ followed by the sight of a tweed jacket on the lecturer.”


Using “brevity, levity and repetition” really does work. We may have three “sub-messages” explaining each of our three major messages, but so long as we restrict...
ourselves to three major “pegs” — briefly, and memorably — our audience should leave the room with our key take-home messages in mind.

“Ultimately, people are not at all rational; they ‘hear’ the emotional content of the lecture more clearly than they ‘hear’ its intellectual content. Therefore, the emotional content establishes the context in which they receive the intellectual content. If the emotional context is solid, then they are receptive to the intellectual content, they understand it better, and they take away more. If the emotional context is weak, then they just don’t pay enough attention to really absorb the intellectual content.”

Source: Hecker C. “How to give a good presentation”. Available at: http://chrishecker.com/how_to_give_a_good_presentation.

Three Rules for Simple Speechifying:
1. The audience’s experience is much more important than our own. What must they be told in order to understand our messages? What should we not tell them?
2. Group thoughts together: create three major messages. Don’t expect the audience to filter them from a muddle.

Giving the Speech

Rehearse
Once we’ve written a brilliant, 20-minute (maximum) “three-message speech,” we need to rehearse it. In fact, we need to rehearse, rehearse, rehearse. Rehearsal tips:

• video-tape ourselves. This helps us judge our pace (do we speak too quickly?), our mannerisms (do we have an annoying tic?), our speech patterns (do we say “um” too frequently?) and our appearance.
• pay attention to timing. There should be no short-cuts during rehearsal: a 20-minute speech should take 20 minutes to rehearse. Timing is essential in the three-message speech to ensure that each message receives proper and balanced treatment.
• enlist an audience. A “mock” audience can provide feedback on our speaking style, and whether they grasp our ideas or if more explanation is required.
• use real conditions. If possible, rehearse the speech at the very podium in the room where the speech will be delivered. This allows familiarization with the available technology, acoustics, sight-lines, and so on.
• get to know our presentation. In rehearsing, we should be able to catch any problems with visual aids (not loading properly, slides in the wrong order, spelling mistakes, etc.).
The Big Moment

Some tips for the (frightful moment of) actual delivery:

- Unless the session chair offers an extensive introduction, it’s always a good idea to introduce ourselves properly, giving the relevant aspects of our identity and saving our other work and publications “for the corridor”.
- Never quit, never get desperate or angry or rattled. Simply apologise (e.g. for a technical glitch) and get on with it, as if to say both my content and my competence can easily cope with this.
- Start and end strong.
- “The right word may be effective, but no word was ever as effective as a rightly timed pause” – Samuel Clemens (a.k.a. Mark Twain).
- Stand up.
- Vary the pitch and tone of our voice.
- Enunciate.
- Face the audience: make eye contact.
- Don’t read from a paper.
- Don’t read the visual aids.
- Do “read” the audience, and respond to it – give it what it wants!
- Respect time limits.
- Add some flair: “your audience wants to be wowed, not put to sleep”.

Try for an unforgettable moment.

“Talking clearly means not distracting your audience. Do you pace? Chain yourself to a chair. Do you say “uh” between every sentence? Get therapy. Do you touch your nose or your chin all the time? Cut off your hand. All of these things can be distracting because when you are anxious, you will do them very fast.”


The Follow-up

Questions are an essential part of any conference presentation, so we’ll need to budget for a question period. If there are no questions, we can briefly expand upon an earlier topic. If there are difficult – or downright abrasive – questions, we might say something like:

- “I’m going to come back to that later”;
- “By all means let’s you and I discuss that afterwards”.

Chapter 11: The Conference 2.0
• “That’s an interesting perspective I hadn’t thought of – could you elaborate on that for us?”

Once the question period itself is over – and the audience has divested us of all our supporting material (our papers, brochures, DVDs, etc.) – we might want to make note of what worked well in our speech, and what did not. The principles of an After Action Review (see Chapter Three’s discussion of the technique) are recommended, especially if we know that we’ll have to deliver the same speech again. What did the audience warm to? Given the questions, what did they not understand as thoroughly? What adjustments can we make?

The Technology Supporting the Presentation

Oral presentations too often become subordinate to the Powerpoint. Technology subsumes substance. Everyone’s attention – the speaker’s included – rests on the screen as bullets swirl into graphics only to be wiped aside by a table awkwardly pasted from a journal’s website that nobody can actually read…

Some turn to these visual aids as crutches, as something that will divert attention away from themselves; some view powerpoint as an invitation to a “read along,” leading the audience word-by-word through every slide as we might our children. Some commentators believe that Powerpoint has come to colonize the oral presentation, routinely asserting its insidious mastery over the speech. Websites like “Death by Powerpoint” abound (http://www.slideshare.net/thecroaker/death-by-powerpoint), relating horror stories of how technology can “kill” even the best speech…

We should use Powerpoint to give visual support to our presentation. Photographs, charts, and graphs can illustrate our main messages with colour, flair and emotion.

“If the audience has never seen a powerpoint presentation before, they will ooh and aah at the little graphical effects. If the audience has seen one before, they will groan at your attempt to look cool.”

Source: Everything: how to give a good powerpoint presentation. Available at: everything2.com/index.pl?node_id=1134342

If we have twenty minutes for our speech and spend around two minutes on each slide, we’re looking at a grand total of ten Powerpoint slides: one for the introduction of our
messages, eight for the details of our messages, and another to reinforce our main messages with some action points.

The Bad Slide

- Does this look familiar? There's too many bullets and way too much text here. Plus, the text is far too small to read from the back of the room.
- The text has all kinds of different fonts that just distract our audience's attention. There are too many “serif” fonts (i.e. letters with “feet”).
- There are some awful spellings mistakes and tipos
- The black background and white font is hard to read and expensive to print (eats print cartridges)
- There are no graphics, photos, tables or illustrations
- There are terribly distracting slide transitions – this slide “dissolved” into the next, which “wiped” into another, which...

The Good Slide

- One “sans-serif” font large enough to read.
- White background, black text.
- Funny visual that illustrates our point about keeping technology simple.

In addition to animating a live presentation, our Powerpoint may be used for several different purposes. Most conferences will make print-outs of the presentation, and we may wish to email it or post it to our website. They should be easy to print and clear in any medium.
The “good” slide uses font size 42. It shows a visual that has highly relevant information, and some humour. A laughing audience is one that is listening – humour is an outstanding attention-keeping device. This slide also shows the responsible use of bullets – the three points are “talking points” that the speaker can expand into greater detail. The slide does not tell the story; it suggests and supports one. Slides also build on previous slides: we know the “good” slide is good because we’ve already seen just how bad the “bad” slide is. Let’s also remember that we must never “read off” the information – the audience will have read it before we start.

Other Technology Tips
1. Know thy technology. Respect Murphy’s Law. No matter our level of technical expertise, we should always be prepared for technology to crash or malfunction at the worst possible moment. So why tempt fate? Do we really need to add an audio or video recording to our presentation? If the answer is “yes,” let’s rehearse a contingency for what we’ll do if it all goes wrong. The general rule is – if we haven’t mastered the software, let’s not use it.
2. Laser pointers. Hold them steady (i.e. don’t circle an object) or, better yet, don’t use them at all.
3. Bring backups. The wise presenter has her powerpoint on two or three different formats (eg memory card/flash disk; CD; stored on web mail). The wise presenter is also prepared to do her presentation without any visual aids at all.
4. On the presenting computer, make sure that all auto-update features (e.g. virus check, software update) are turned off. Also disable an internet connection. Turn off the screen saver. Turn off any instant messaging. Quit any other open programs (e.g. email, internet browser, etc.).
5. “You are not a graphic artist. Really. You’re not. If you were, and you were presenting, you wouldn’t be using Powerpoint”.
6. Avoid at all costs Powerpoint’s built-in animation features.
7. Less is more. “Simplicity is the best aesthetic”.

Concluding Thoughts on Oral Presentations
Remember that an oral presentation is the very same tool as a two-pager or a press release or a brochure: publicity designed to convince an audience to seek out more information. Let’s be sure that we have “more information” on hand, preferably on a table in the presentation room. At the start, tell the audience what material will be available and where, but give them nothing in advance, or there’ll be reading it while we’re
talking. Supporting information includes print-outs of the presentation (having too many is better than running out); any printed material relevant to the talk (papers, briefs); and perhaps some general information on our organization (brochure, newsletter, DVD). We are on stage and this is the time to highlight our work. The spotlight is on us, so let’s not lose this opportunity.

Links to videos of excellent presentations are listed below. They can be a good resource for those looking to see how the experts do them. How do they stand? Use gestures? How do they structure a speech? How do they create simple but stylish presentations?

- **Presentation Skills: World Champion of Public Speaking.** This award-winning speaker is very, very good. His secret? “Get them to want to know the point before they know the point.” [http://www.youtube.com/v/HOSADvJnrG8&hl=en&fs=1](http://www.youtube.com/v/HOSADvJnrG8&hl=en&fs=1)

- **Steve Jobs Introduces the iPhone.** Watch this speech from one of the pre-eminent business speakers introducing a new product. [http://www.youtube.com/watch?v=PZoPdBh8KUs](http://www.youtube.com/watch?v=PZoPdBh8KUs)

- **Death by Powerpoint (and how to fight it).** This online Powerpoint presentation (irony?) walks us through the necessary (and unnecessary) Powerpoint ingredients. [http://www.slideshare.net/thecroaker/death-by-powerpoint](http://www.slideshare.net/thecroaker/death-by-powerpoint)

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### How to give a research presentation to decision-makers

1. Identify the specific decision we wish to influence
2. Understand who the decision-makers might be, and how they absorb information
3. Establish our credentials
4. Frame our work within the political, legislative, fiscal, social context
5. Don’t issue any sudden or unsightly surprises
6. Begin the presentation with a main message that is jargon-free and action-oriented
7. Focus on the implications of our work without a discussion of the methods (unless asked)
8. State limitations of the work
9. Use humour, flair and style.

**Source:** adapted from CHSRF (2000). “How to give a research presentation to decision makers”. Available at: [http://www.chsrf.ca/knowledge_transfer/communication_notes/comm_research_presentation_e.php](http://www.chsrf.ca/knowledge_transfer/communication_notes/comm_research_presentation_e.php)

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### II. Poster Presentations

Much like an oral presentation, a two-pager and a brochure, a successful **poster presentation** summarizes the best of our work into easy, captivating nuggets. It is an advertisement, an eye-catching visual presentation with a bonus – because there we are, standing right next to our poster and holding forth on the compelling aspects of our work. Like other KT tools, a good poster inspires an audience to want more information: further resources should be immediately at-hand.

One strong difference between a poster and any other KT tool is that it must stop a “strolling audience” from walking by. In a sea of competing posters, we need to use
imagery and catchy titles to stop the audience in its tracks. We have about eleven seconds to grab and retain their attention; then we have less than ten minutes to give them an explanation of our work. Let’s use that time well.

According to Connor [no year], a good poster is a combination of compelling science, an uncluttered and colourful design, with text that is legible, brief, and organized in a straightforward fashion. Some argue that it’s better than giving a talk: it works even if we’re not there; it can go to multiple conferences unchanged; it can compensate for the presentation-shy; and it can provide valuable opportunities for students or other up-and-comers to make an impact. While what we show on a poster (e.g. results of one study or results of a programme) will vary case-by-case, we’ll need to make some careful choices of what to include and what to leave out, bearing in mind that a full reading of the poster should take between five and ten minutes.

The Structure of a Poster

When it comes to designing a poster, the very first thing we must do is check the instructions that came with the acceptance letter from the conference organizers. How much space will we have? Organizers will typically indicate that a poster may be “no larger than” a certain set of dimensions; the average poster measures 36 inches (about a metre) in height and 56 inches (a metre and a half) in width.

Then: how much can we budget? Can we produce it on our own computer or do we need to outsource? If we have a lot of colour or high-resolution graphics (e.g. photos), will that boost the printing costs? A quick phone call to a professional printer should answer cost implications. While we can certainly do this “at home” with a computer and an ordinary printer, let’s bear in mind that we need this to look as professional as possible,
and may want to print something larger than the standard A4 sheet of paper – though, with resourcefulness, a series of A4s can work just fine...

The next consideration is travel and poster transport. Should we travel with our poster rolled into a cardboard tube – or should we print the poster on-site? Both have their risks.

Once we know these three things – size, cost, and transportability – we’re ready to go. Like the suggestions for the Powerpoint presentation, we need to pay particular attention to:

- **fonts.** Keep them *sans-serif* (without curlicues or fancy swirls) and large enough to be read at a distance – as Connor puts it, “the over-forty crowd should not have to put on reading glasses”.\(^{14}\) We should not go any smaller than 18-point font. 24-point and up is preferable.

- **white space.** We do not want to cover every available space with words. We need to give the viewer’s eye a break here and there.

- **graphics.** The photos, tables, and other graphics that are *self-explanatory* are best. We should convert any tabular material to graphics if possible (e.g. spreadsheets to pie charts).

- **text.** Carter and Nilsson (1999) succinctly advise: “start with your conclusions. Use less and larger text. Emphasize figures and illustrations”.\(^{15}\) Can we reduce the overview of our poster into one sentence?

- **extraneous material.** Anything remotely “extra” should be eliminated.

- **reading direction.** We need to help our readers know where they should start reading (typically the top centre) and the flow of the narrative (usually left to right and top to bottom).

- **handouts.** As with a speech, we should have as much supporting material on-hand as possible. The poster is an excellent opportunity to disseminate our work, and if the poster-as-appetizer works, we’ll need something to satisfy the audience’s hunger for more.

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**Poster examples**

**Poster #1**

This poster guides the reader through its content by using numbered boxes. There is plenty of white space here, and the layout is balanced, simple and pleasing to the eye.
Poster #2
Like #1, this poster guides the reader through its content with the use of arrows (which provide a little more pizazz than numbers).

Poster #3
Key to this poster is the circle in the middle: here we'll insert an arresting graphic or photo as the poster’s centrepiece.

Poster #4
A slight variation on the others, this emphasizes the main messages and the policy options. Graphics in the centre add colour and simple explanations for what can be complex concepts.
Further resources

- Colin Purrington’s “Advice on designing scientific posters” is an excellent place to start. It has great pictures and sound advice. Available at: www.swarthmore.edu/NatSci/cpurrin1/posteradvice.htm
- Carol Waite Connor, “The Poster Session: A Guide for Preparation” has excellent tips as well, especially in capturing the attention of the “strolling audience”. Available at: www.aapg.org/meetings/instructions/prepguide.pdf
- The University at Buffalo Libraries also has a strong collection of links dedicated to poster presentations in “Poster Presentations: Designing Effective Posters”. Available at: http://library.buffalo.edu/libraries/asl/guides/bio/posters.html.

III. Conference Presentations

Overview

So much money is spent on conferences. So many people travel such great distances to attend them. So little energy is put into capturing what happens at them.

How can this be? Why do we spend so much to get so little? How can we get more out of conferences? How can we create a dynamic record that documents more than just the presentations? How might we decide upon the “main messages” and then create a “conference report” that gives rapid access to a conference’s key events?

In this section we’ll examine the role that conference organizers could play. After all, if they don’t focus on capturing the messages, no one will. They and they alone will issue the conference’s “record” and whether this is a 300-page transcript of every delivered speech or a sleek 30-pages of main messages is up to them. Either way, conference organizers and funders need to start embracing new ways of producing better, more dynamic conference records. A conference is an opportunity not only for individual presenters but for the conference’s theme and the overall subject field.

Two different strategies for producing better conference reports are:

- **synthesis**: making the final report a dynamic synthesis incorporating presentations, interviews, discussions, workshops, and on.
- **rapporteuring**: selecting rapporteurs, helping them capture the key messages, and convincing session chairs to contribute to the rapporteurs’ work.
Throughout this section, we’ll draw upon the outstanding example below, a conference synthesis report produced by South Africa’s Health Services Trust (HST). Using a well-trained corps of rapporteurs, HST (and the organizers, the University of the Free State) managed to capture and synthesize key presentations, workshops, and discussions.

### Conference Report

**Implementing the Comprehensive Care and Treatment Programme for HIV and AIDS patients in the Free State: Sharing Experiences.**

_Bloemfontein, South Africa 30 March – 1 April 2005_

This report is intended to share the experience of the Free State in expanding ART in the province, and aims to develop lessons and recommendations for the Free State and elsewhere. The document is directed at four specific user-groups: policy-makers and planners; health workers; researchers; and civil society.

This report was compiled by four researchers commissioned by the Health Systems Trust. They attended the conference and took notes throughout. Information gathered was supplemented by notes from rapporteurs and discussions with conference delegates.

A draft report was presented by the researchers at a subsequent one-day workshop held in Johannesburg on 5 May 2005. Participants included policy-makers, planners, researchers, health workers and representatives of civil society from different provinces in South Africa and regionally. The participants provided feedback on the report content and made further contributions to the recommendations of the report.

**Source:** [www.hst.org.za/publications/677](http://www.hst.org.za/publications/677)

### 1. Synthesis

At any conference, presentations range from oral to poster, workshop to seminar, and all kinds of corridor discussion. How can we capture this? How can we structure these inputs so we might know exactly what we should capture?

In the above HST example, they began where all good KTers do: with the audience. Who would be most interested in a synthesis of this conference? Initial discussions with the conference organizers (who had selected HST for the purpose) revealed that the conference would likely present information relevant to four different audiences: policy-makers and planners; health workers; researchers; and civil society. These groups could be from the Free State, from other South African provinces (especially the Western Cape, which had a particularly high interest in the conference’s theme and the overall Free State approach), from other African countries facing similar issues, and from the North, particularly its researchers, donors and civil society members.

With the audience established, this planning group identified three major themes:

- The Process of Implementing the ART Programme in the Free State;
- Resource Requirements for the ART Programme in the Free State;
- The Impact of Implementing the ART Programme in the Free State.

Given that almost every conference invites presenters to speak on certain topics (or has accepted papers for presentation), any planning group should have little problem in isolating the conference’s key themes. Consensus may be more difficult, but the HST
group designed a mechanism to address this – following the production of the synthesis, they held a one-day “feedback workshop” to ensure they were indeed on the right track.

Beyond the synthesis’ strong blend of presentations, workshops, seminars and other discussions – and its audience segregation – what really makes this stand out is its action-oriented focus. Each chapter concludes with “Lessons and Recommendations,” divided into different audience sections. For instance, concerning the theme “The Process of Implementing ART,” the lessons and recommendations for policy-makers include “at a national level, conduct an independent assessment of provincial approaches to ART implementation” and “ensure broader inclusion of role players in planning and be transparent about successes and problems”. Lessons and recommendations for health workers include “seek and develop relationships that cut through ‘unnecessary’ bureaucracy,” with researchers in turn to “develop research partnerships” and “revise research strategies in consultation with policy-makers and planners”. Civil society, for its part, is urged to work to hold governments “accountable” on their ART programmes.

Disseminating this synthesis is the final ingredient in its success. A communications product is only as good as its distribution, and fortunately this type of document has a number of built-in channels. The first and most obvious is to send a copy to all those who came to the conference – contact information should be easily at-hand. The second is to send a copy to all those implicated by the key lessons and recommendations (e.g. prominent HIV/AIDS policy-makers, health NGOs, journalists). The third is to post a copy on a website alongside all presentations, creating in the end links to the finished, polished product and then to every presenters’ Powerpoint, paper or poster.

2. Rapporteuring

Make no mistake: rapporteuring is an art form. Not everyone can sit with a pen or computer and capture a presentation’s key points. One person’s key points are over the head of another; key points imply a value decision. How do we define “key”? Who determines the definitions? Writing down every word a presenter utters is much easier than making an on-the-fly selection of the most important bits, and this is likely why most conference records are far too large. When we make choices of what to include and what to highlight, what if we are wrong? What if we miss something?

Those questions will never disappear. However, the more we work with our rapporteurs, the better armed they will be to capture those main points. Important here is:

a) **careful rapporteur selection.** Typically, rapporteurs are students who usually have an academic background aligned with the conference’s theme. However, the more we know the messages and lessons we want to capture in advance, the wider we might be able to cast our rapporteuring net. Would journalists (or journalism students) be appropriate, given their skills at writing and interviewing, or do we need someone who can converse with the science? What about (available and interested) primary health care workers? What about members of the research team?

The HST team of rapporteurs drew on all of the above.

b) **rapporteur training.** Having several training or information sessions with our intended rapporteurs makes sense. We can alert them to the core messages we want them to capture, and generally assist them in navigating the tremendous volume of content the
conference will throw at them. Such sessions will allow rapporteurs to ask questions, clarify their tasks, and allow us to get a better sense of their abilities, which in turn will influence the eventual synthesis report. We can use this time to give them documents (such as lists of intended audiences, likely core messages) which they can use to tighten their note-taking, and in general heighten their interaction with conference presentations and presenters. With the conference schedule in hand, we can also allow the rapporteurs to choose the sessions best aligned with their individual knowledge and expertise.

c) session chairs as rapporteurs. In most cases, the expertise of a session chair is restricted to a few opening and closing remarks, with the chair doing little during the presentation beyond listening (and occasionally napping!). More than any rapporteur, the session chair has unique insights into the presentations, and we should take full advantage of this. While we would not ask chairs to be rapporteurs, we would ask them to answer a few questions, either during the presentation or afterwards. At a January 2007 national conference on health research in Zambia, session chairs were each given a sheet of paper on which were the following questions:

- In your opinion, what were the three main messages arising from this presentation?
- How should decision-makers respond to the presented findings?
- What are the major action points arising from this research?

While answers to these questions would certainly not replace a rapporteur’s notes, they would add another source of expert evaluation for the eventual synthesis; such information requires little time to write and can ensure a chair’s unique perspective and knowledge is brought to bear.

Concluding thoughts
All of us, at one point or another, have given an awful presentation. As we read this, somewhere out there, over one million speakers are reading their slides, shooting all kinds of bullets, drowning an audience in colour and detail, and putting that 16% to sleep. The world is teeming with dreadful presentations.

We owe it to our audiences to try to understand what makes presentations good or bad, in the hopes of correcting flaws. We might spend a moment watching excellent speakers practice their trade on youtube. Better yet, we might review the principles behind “Tell them, show them, remind them, ask them,” and then write and rewrite a three-message speech…

Conferences are becoming ever-more prevalent and ever-more important. Some capture and disseminate their messages with flair. Some employ a smart, flexible and responsive corps of rapporteurs. Most, however, are under-budgeted and under-staffed, with anything beyond a schedule and getting delegates to the right rooms falling by the wayside. Most conferences are marked by chaos and panic.

From organizers to presenters to spectators to chairs to donors, we all have a role to play in creating the Conference 2.0. As conference organizers, perhaps we can think through some big-picture points – how will we remember this conference? – before getting caught up in the details. As presenters, perhaps we can give the organizers the smallest bit of help by designing presentations that respect the audience, that distill three core messages, and then provide links to more detailed information. And as spectators, chairs and donors,
perhaps we can start insisting upon a comprehensive yet sleek record of a conference’s presentations and dialogue – something to give us the flavour and feel of an explored theme that only a conference can create.

Comments? Questions? Criticisms?

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Research Matters (RM) is a collaboration of the International Development Research Centre (IDRC) and the Swiss Agency for Development and Cooperation (SDC). RM was launched in 2003 to examine and enhance the specific KT dynamics within the field of health systems research. From these founding connections with both a research funder and a bilateral donor, RM has occupied a unique vantage among health researchers and research-users. By working directly with both the producers of research and with its consumers, RM has developed a range of activities and modalities designed to hasten the movement of research results to the policy arena, to database and access those results, to communicate them, and to expand an appreciation of research itself. RM builds capacity among researchers to perform their own KT; RM responds to the priorities of major research-users; and RM actively brokers both research results and research processes. As an active, ground-level embodiment of KT, RM has helped to shape how health research is demanded, created, supplied, and ultimately used.
Endnotes


4 see Ferriss.

5 as quoted in Dahlin M. 2006. “Giving a conference talk”. University of Texas at Austin. Available at: www.cs.utexas.edu/users/dahlin/professional/goodTalk.pdf


7 Adapted Hayes KG. “Effective research presentations: a guide for graduate students”. Oklahoma State University. Available at: www.gradcollege.okstate.edu/download/pdf/EffResePres.pdf


9 Shewchuk J. [year unstated]. “Giving an academic talk”. Available at: www.cs.berkeley.edu/~jrs/speaking.html. Note that the New Yorker cartoons throughout this chapter were originally found in this article.


12 Connor.

13 Purrington C. [year unstated]. “Advice on designing scientific posters”. Swarthmore College. Available at: www.swarthmore.edu/natsci/cpurrin1/posteradvice.htm

14 Purrington.


16 This report was partially funded by Research Matters.

17 Statistics from “Death by Powerpoint (and how to fight it)”. Online presentation. Available at: http://www.slideshare.net/thecroaker/death-by-powerpoint
# Table of Contents

I. Email 2  
*The Gilbert Email Manifesto (GEM)* 3  
*Creating an Electronic Distribution List* 4  

II. The Internet 5  
*Social Networking* 7  
*Creating a Web Presence* 9  
*Creating a Blog* 10  

III. Word Processing 11  
*Creating a Newsletter* 11  
*The audience* 11  
*The design* 12  
*Material review* 13  
*Reverse engineering* 13  
*The importance of trial and error* 14  

IV. Integration 15  
*Endnotes* 18
We all have a computer – and a love-hate relationship with it. We call it a “confuser,” we marvel at its capabilities and we curse colourfully when it crashes. Much as humankind has done for millennia, we have tremendously complex and conflicted feelings towards our communications technology. While perhaps longing for the simpler days of printing presses and typewriters, we know that a failure to use a computer – fully and well – would be as nonsensical as failing to use the ballpoint pen or the telephone.

In this chapter we'll discuss a few practical ways that will help us get more out of the three major computer applications we use every day – email, the internet, and word processing. New techniques will allow us not only to see these applications in different ways, but to start using them in a more integrated and ultimately more intelligent fashion.

- **Email**: effective email strategies, creating a distribution list;
- **Internet**: open source, social networking, creating a web presence;
- **Word Processing**: creating a newsletter using simple desktop publishing techniques.
In this world of attachments and blogs and viral videos, it really is compute or kaput! And thus the more computerate we can be – even in small and seemingly insignificant ways – the more efficient this maddening yet indispensable tool can become.

I. Email

Email is extremely simple to use, and has the considerable advantage of accessibility – we can open it almost anywhere. While its principal task is to communicate ideas, we tend to use it as an overarching knowledge management platform. We use email for file management (storing and retrieving files as we might in a database), to author collaborative documents (sending various versions of a file back and forth), to archive important documents and decisions, to record activities and workplans, and to keep abreast of developments in our field, both as a recipient of news and as a “forwarding” broker of information we think others might find useful. There are many different applications that can perform these actions, but we prefer the “all-in-one” platform of email. It may not be the most efficient tool, but everyone has it, everyone understands it, and everyone knows how to use it.

But that doesn’t mean that everyone uses it well. Email, like any other means of communication, has a set of rules and conventions – even if unwritten. First, we can be held liable for anything that we put down on paper, and that includes email. Second, what we write in an email – and how we write it – reflects on our professionalism and our organization more broadly. A message littered with spelling mistakes OR WRITTEN IN ALL CAPS is not an acceptable “representation” of ourselves or our work. We may email our friends with a stream-of-consciousness approach – letting words tumble unedited onto the screen – but when it comes to our colleagues, we must take “email etiquette” seriously:

- Keep messages short and to the point. An email is not a novel.
- Limit messages to one subject. For more than one item, consider a second email, or at least a numbered list.
- All rules pertaining to grammar, spelling and punctuation apply to email.
- Never write in CAPITAL letters. It’s like “shouting” at the reader.
- Never send a message without proofreading it first.
- Always check the “To”, “Cc” and “Bcc” fields before sending. There’s nothing worse than sending a message to the wrong recipient, especially if it contains sensitive information.
- Always check the “To”, “Cc” and “Bcc” fields before sending. So important it deserves repetition.
- Answer emails promptly. Even if only to inform the sender that we’ll respond later.
- Never assume that any message will be kept private. It may be forwarded to others without our knowledge, so let’s always be cautious and diplomatic.
- Write something meaningful in the subject line. Let’s entice and intrigue our recipients with a strong, concise and illustrative subject line – an email they must open.
- Use the “Reply to All” option sparingly. Does everybody really need to read our response?
- Use plain text. Not all mail programs can handle fancy fonts and formats, so keep it simple.
• **Limit attachments to 1MB.** Unless the recipient has a high-speed internet connection, keep emails as small as possible. This is especially important to consider when sending photographs.
• **Don’t send attachments at all.** Instead – consider copying and pasting the attachment into the body of the email. This reduces the number of steps a recipient must follow to read an important message. But beware format changes!
• **Do not overuse the ‘Priority’ email function.** Not everything is URGENT!
• **If an email is time-sensitive, put an “expiry date” in the subject line.**
• **Avoid personal emails sent to mailing lists!!!**

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### Who needs to receive our message?

**‘To’:** This field should be used for our direct audience: those from whom an action or response is expected. It should not be used when sending a message to a massive mailing list (see ‘Bcc’ below).

**‘Cc’ (or Carbon Copy or Courtesy Copy):** This field is meant for our indirect audience, those who need to be “in the know”. Be discerning: only send it to those who will gain from the content of the email.

**‘Bcc’ (or Blind Carbon Copy):** This field allows us to hide our list of addresses. It should be used when sending to a list of people whose privacy we want to respect, or when we do not want the ‘To’ to know who else has received it. In parallel, recognise that an email apparently sent to you might have been sent as a ‘Bcc’ – and may have been ‘Bcc’ed’ to others.

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### Further Resources:

- “Email Etiquette Rules for Effective Email Replies.” [www.emailreplies.com/](http://www.emailreplies.com/)

### The Gilbert Email Manifesto (GEM)

Michael Gilbert’s *Email Manifesto* tells us that email is an absolutely vital strategic tool that *must come first.* Before we develop a website or podcasts or any other part of our electronic communications strategy, we must understand how email itself will help us achieve our goals. By following Gilbert’s three golden rules, we can significantly increase our online presence, and our influence:

- **Rule 1:** Resources spent on email strategies are much more valuable than the same resources spent on web strategies.
- **Rule 2:** A website built around an email strategy is much more valuable than a website that is built around itself.
- **Rule 3:** Email-oriented thinking will yield better strategic thinking overall.
Creating an Electronic Distribution List

As stated above, Gilbert's Number One Way to fail at email is not collecting email addresses. Developing a good contacts database – where we collect and store all relevant contact information for our colleagues – allows us to do a few different things well. First, we won't waste hours searching for someone's email address. Any business card, snail mail or email we receive goes directly into the contacts database, with a description of that person if needed to jog our memory later. Second, we can use this database to create distribution lists (commonly called “listservs”) when we want to send the same email to many different people. This is an especially useful tool when we have something like a newsletter that we want to disseminate as widely as possible.

There are several ways to set up a listserv. If we don’t already have a contacts database, the best way to start is to comb through our email inbox and our address book to come up with a list of the email addresses we already have. Beyond direct email with these contacts, we can also review the listservs we’ve received to see if they might contain relevant addresses. With little effort, we’ll suddenly have several hundred names in a rudimentary database (which could be as simple as a word processing document). Now we have four choices:

- Copy these names directly into an email and send that email to everyone;
- Visit a site like www.dgroups.org and create a mailing list, so that with one touch of a button we can send anything we like to all our contacts (instead of entering email addresses every time). www.dgroups.org gives more information on how to do this.
- Create a Yahoo! Group, which operates in a similar way to the dgroups option.

Thunderbird: Developed by Mozilla, Thunderbird offers an alternative to proprietary and potentially expensive email software such as Outlook, Eudora, or Entourage. It is a freely available and open source email program, and can be downloaded at www.mozilla.com.
• Use the built-in distribution list feature of Outlook or Thunderbird, which will create our own listserv. http://www.freemailtutorials.com/mozillaThunderbird/thunderbirdAddressBook.cwd has more information on how to do this with Thunderbird. http://support.microsoft.com/kb/284292 contains all the relevant tips for doing this with Outlook.

Not everyone will want to receive such email from us. We must be open to people requesting not to receive any further correspondence from us. Giving them a simple “unsubscribe” option (if sending a listserv) or indicating at the bottom of any correspondence “if you believe you received this email in error...” can be convenient ways for letting recipients opt out. This is a basic and essential professional courtesy.

Lastly, emailing something like a newsletter needs a brief covering note to introduce ourselves, our newsletter, and why people should open the attachment. The “subject” line of the email is thus very important. If we write URGENT or Hello in the subject line, we’ll likely be caught by spam or junk-mail filters. The fictional example below observes proper listserv etiquette.

II. The Internet

Though there are many different ways to access the Internet, we typically use “browsers” to surf from link to link. Most of us have Windows (XP or Vista) as our operating system, meaning that our computers came pre-installed with Internet Explorer, Microsoft’s version of the web browser. Once upon a time, Internet Explorer was top-of-the-line, as good as it got. That time is no longer. It is time for us to stop using Internet Explorer altogether, right now.
Download Mozilla’s Firefox. This is an outstanding open source browser. Like the online encyclopedia Wikipedia, anyone (smart enough) can modify Firefox’s source code, and anyone can develop “plug-ins” that add further functionality to it. Even better, by using and supporting Firefox, we’re letting the corporate world know that we prefer the free “competitor”. Why support a corporation when a free, community-built and -based product is actually better? Why support corporate control over our web experience when a “people’s” model is at hand?

Imagine if all software were free. There would be no need to buy licences or fuss with serial numbers or infect our computers with virus-ridden pirated versions of the real thing. Everyone would be able to access and use all the software they needed. Happily, this is no pipe-dream – it’s the world the open source movement is creating. Open source is the public sector of the computer world, and it’s getting stronger by the day. For simple software such as word processors, spreadsheets and internet browsers, the open and free version is often a superior experience, with no compatibility issues should we need to co-author a document using any of Microsoft’s proprietary formats (e.g. .doc and .xls). Just as we might raise flags over inequitable for-fee health services, so too should we use our computer experience to promote an open internet free from corporate control. The more people using and demanding open source products, the better they get.

For good open source software, consider

- Firefox. The pre-eminent web browser, used now by over 10% of all web surfers. Available at: www.mozilla.com/firefox/
• **Thunderbird.** Mozilla’s open source email software. Available at: [www.mozilla.com/thunderbird](http://www.mozilla.com/thunderbird).

• **Open Office.** This huge open source project provides word processing, spreadsheets and more. Available at [www.openoffice.org](http://www.openoffice.org).

There is one notable cost in using this open source software – our time to install the programs and become acquainted with them. We should not upgrade to either Thunderbird or Open Office unless we have an above-basic computer knowledge (whereas everyone should download and install Firefox). Some inexperienced users might lose their emails if they install Thunderbird incorrectly.

### Social Networking

As this browser discussion illustrates, the internet is a constantly evolving place. Whereas the internet once specialized in one-way content, where the user experience was similar to leafing through a magazine or flipping through TV channels – with users unable to interact meaningfully with the content – in recent years the web has become much more of a two-way interactive experience. Some have argued (see text box below) that it simply takes any new medium an interval of time before it understands its real strengths. And the internet’s true strength, make no mistake, is in facilitating our communication and interaction with each other. Like no medium before it, the internet is extending our social networking in ways previously unimaginable. Email represents only the beginnings of the internet’s social networking power; we haven't even come close to seeing its full potential.

The emerging social networking character offers organizations (NGOs, non-profits, universities, parastatals) excellent opportunities to advertise, interact, and link with like-minded individuals around the world. As Satterfield (2006) remarks, “Although popularly known as places where people make friends and find romance, social networking sites can also play a key role in helping your organization achieve its goals”.2

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“**When you look at the history of any new medium, it takes a decade or more for people to figure out what the native behavior of that medium is. For the first 15 years of television, they were actually filming radio shows. And it really took 10 to 20 years to start seeing native TV programming like the Today show, which nobody thought was going to be successful because people didn’t watch television the first thing in the morning. What’s becoming very, very clear ... [is that] when you look at what the fundamental or native behavior of what the Internet is, it’s social. It is two-way communication.”**


A host of these social networking communities have emerged in recent years, often referred to as FOAF platforms (Friend-Of-A-Friend) to capture how our experience on that platform is enriched by the “friends” we know, which is in turn enriched by all the “friends” they know. Friends share ideas, content, photos, they alert each other to excellent websites and videos, and, most critically for our purposes, they often group together to promote good causes and even to fundraise.

**Facebook** is the latest and most successful entry as a social networking phenomenon. It currently has more than 100 million members, with each member having their own (free) website that features personal photos, information and direct links to other users who...
share the same interests, opinions, experiences, and so on. In many cases, these “other
users” are our friends in real life – but, increasingly, we become “friends” with individuals
we will never actually meet but with whom we share key things in common. We’ll meet
this second type of friend through Facebook’s many groups and networks, with each
dedicated to an issue, a university, or a region. For instance, we might join a “group”
advocating health equity for all, and we might join the Kenya “network” (which currently
has more than 58,000 members) – and now we’re directly connected to others who have
also joined the same groups and networks.

This has clear advantages as much for individuals – keeping us abreast of new ideas,
vibrant networks and communities of practice – as it does for organizations. Facebook’s
“Causes” application currently has more than four million users, allowing people to
browse NGOs and charitable organizations, and then directly contribute funds. While
this is currently only available to US 501(c)(3) organizations, it is expected that it will
extend to other countries in the future. As one example, UNICEF’s “Causes” page shows
almost 700,000 members, who have donated over $33,000 to date.

As of August 2008, the top five Causes on Facebook include:
Support The Campaign for Cancer Prevention
3,318,914 members – $70,732 donated
Stop Global Warming
1,988,837 members – $26,061 donated
Animal Rights
1,463,757 members – $28,175 donated
Society against child abuse
1,159,587 members – $16,766 donated
Save Darfur
940,858 members – $26,761 donated

Source: http://apps.new.facebook.com/causes/causes
Not forgetting that these personal social networking websites all come at the price of time and ability, they are free and can certainly be an excellent complement to other communications strategies.

Other social networking sites include:
MySpace www.myspace.com
Care2 www.care2.com
Friendster www.friendster.com

Creating a Web Presence
While a social networking site can be part of our overall web presence, we’ll need to develop other online tools, as social networking is limited to those who are part of the network. Those who have not joined cannot, for instance, see our photos or join our cause.

In Chapter Six, we outlined the Essential Elements that any organization should consider in designing a communications strategy. Developing a web presence is no different from developing print tools or videos or radio spots: we shouldn’t do it unless we know exactly what we’re committing ourselves to. Of particular concern for establishing any web communications is getting a handle on exactly what web-ready content we already have.

On reviewing our “inventory” of content – all the communications products we’ve created in the past – we might find things like donor reports, annual reports, newsletters, a brochure, our Strategic Plan, and so on. These can certainly become good “add-on” content to our eventual web presence (for instance, as discrete links users can click on). They can also become the content we borrow from (or outright cannibalize) in writing short and punchy blurbs for the web. Other content suited for the web includes photographs and any multimedia tools, especially .mp3s or radio spots (as these are easily accessed by most web surfers around the world). We might want to take some time to identify websites we deem of strong quality and then “reverse engineer” them, seeing how we might graft our own content onto their component parts.

Apart from some modest finances, we’ll need some human resources to create our web presence. This applies not only to the set-up of any website but also to its routine monitoring and updating. This is of paramount importance: it is one thing to create a website, but a whole other to maintain it, troubleshoot it, and keep it up-to-date. The

The Essential Elements

1. Review: How have we been communicating in the past?
2. Objective: What do we want our communications to achieve?
3. Audience: Who is our audience?
4. Message: What is our message?
5. Basket: What kinds of communications “products” will best capture our messages?
6. Channels: How will we promote and disseminate our products?
7. Resources: What kind of budget and HR do we have for this?
8. Timing: What is our timeline?
9. Brand: Are all of our communications products “on brand”?
10. Feedback: Did our communications influence our audiences?

See Chapter Six for a more detailed discussion of these points and more.
best, most accessed websites are updated every minute of every day; if we don’t have the staff to attend to our website every other week (adding, deleting, modifying content) then perhaps we shouldn’t pursue a website just yet.

Many organizations hire an outside firm to design the website, to populate it (with content), and then to keep it updated. Resources permitting, this really is the best model until we have strong in-house capabilities and adequate time to do this ourselves.

Creating a Blog
Beyond social networking and more formal (e.g. www.nhnd.org) websites, another simple way of establishing an online presence is to create a “blog” – they’re free (except in time) and easy (ability permitting).³ Like an electronic journal or diary, blogs allow us to post entries on a website, from quick messages to photographs to more indepth articles. These posts are typically sorted by date, meaning that our most recent entry is displayed first. As with social networking sites, many blogs are interactive, encouraging visitors to leave a comment.

### Why create a Blog?
- A blog (or a website more generally) can extend an institution’s influence by attracting audiences in a way that is far more interactive than email. But we must be careful: blogs and websites must be routinely updated to be effective.
- Blogs can create a forum for expert commentary and analysis on hot policy issues;
- A blog’s easy-to-read, informal writing style can demystify key concepts;
- Blogs can help set the media agenda – authoritative comment and analysis on under- or unreported issues can lead journalists or others to follow up and write about it;
- For those interested in a specific topic, relevant blogs could eventually become a leading supplement to traditional print and online news.
- The “feedback loops” created by the blog could lead to new audiences and collaboration opportunities.


There are a range of options at the disposal of the aspiring blogger. Blogs can be freely created at:
- www.civiblog.org
- www.blog.co.uk
- www.livejournal.com
- www.mindsay.com
- www.blogger.com

### Five Common Web Mistakes
1. No clear identification of what we want from our site;
2. Not understanding the importance of good design;
3. Not editing or updating our content;
4. Failing to use the web as an interactive platform;
5. Not assembling an in-house web team.

III. Word Processing

Joining the internet and email on our most-used application list is the humble word processor. Recalling our open source vs proprietary software discussion of above, it may well be time to experiment with an open source word processor (see www.openoffice.org or www.abisource.com) that can offer us the same functionality and the ability to open, edit and co-author documents in Microsoft’s .doc and .xls format. Though we may not all have the time and ability to do this, open source allows us to make informed and corporate-free choices in software. Choosing open source is an easy one, but we can only adopt it when we feel we have sufficient technical savvy to trade one program for another.

When it comes to word processing, most of us use this software for writing papers or taking notes. What few realize is that a word processor can also be used as an effective desktop publishing tool. We are already very familiar with word processors, so why not start using their many features for more directed and professional ends? With time and effort, we can use our word processors to create effective communications documents like brochures and newsletters. Word processors have evolved dramatically in the past few years, and many now come equipped with good newsletter and brochure templates that we can customize to our own ends. As with the internet discussion above, we need to understand the time and ability constraints in desktop publishing, but with the right ideas in mind from the outset, we can convert this already well-known tool into our own private printing press, letting us become accomplished (and affordable!) desktop publishers.

Creating a Newsletter

There are a number of compelling reasons for any organization to have a newsletter. If email is the “killer app,” then newsletters should be thought of as “killer communications”. Newsletters highlight research findings, announce a special event, and work to keep our organization in the public eye with updated and useful information. They are inexpensive to make, print and disseminate, and they are a critical tool for distilling complex events into manageable bites and promoting the essential work we do. *Every organization must have one* – and with good word processing software at hand (as well as a commitment to the principles of trial and error), we might as well do it ourselves.

As with any KT tool, we must make careful choices around its design and content, and (again!) we must tailor both for a specific audience. Whatever its content or style, a newsletter must selectively inform: like an appetizer, a good newsletter must leave the reader wanting more. Here, we’ll keep things simple and focus on:

- determining our audience and the channels to reach them;
- deciding upon our newsletter's design, quality and size;
- reviewing our materials;
- performing some reverse engineering; and
- bringing it all together.

**The audience**

We put this section first not to discuss it outright – for more on understanding our audience see the chapters on *Context Mapping* and *Designing a Communications Strategy* – but to remind ourselves once again that our audience will dictate every element in our
newsletter. If we want to reach a general public, then we must develop straightforward content (and design) that does not delve into complex science, but reduces main messages to digestible bites, and point the truly interested to more indepth resources. However, if we are to attend a global conference of experts and we want something to give our fellow researchers or donors, we can certainly craft a newsletter with much more complexity.

But remember: any attempt to satisfy multiple audiences (of different needs and comprehension) with a single product may well disappoint or alienate both.

The design
If we know the audience, we know what they’ll want to read, and we’ll have an idea of how to present that content. For instance, a newsletter pitched at a highly scientific audience will use different graphics (e.g. complex charts and logs) than one aimed at community groups (e.g. using photographs). Let’s pay attention to a few other design elements here (and for more, please see the mock newsletter following this discussion):

• the **logo** and **title** (or **masthead**) must capture our audience’s attention at a glance. We may use colour, but most of all we want something clean, elegant and professional that will stand out and intrigue. If the masthead does not have a professional look, the content may well be prejudged as sub-standard. If we don’t have a logo, we should strongly consider hiring a professional firm to design one for us. Logos are an essential part of any organization’s identity – logos represent an organization’s image, style and quality. And a poorly rendered logo is worse than no logo at all.

• the **text** must be both easily legible and visually interesting. Columns, text boxes and bullets can be used to break up slabs of text. White space (areas without any content) create a clean, clear look and avoid a “cramming” effect.

• include different types of **information**. There may be results to highlight, future plans, and perhaps a report on a conference attended. There might be important future events to feature or a particular research project or researcher to profile and, certainly, links to further information, resources, and ways readers can contact us.

• include different types of **media**. Photos, graphs, charts, cartoons, text boxes all give the eye a break from plain text.

If the audience is primarily local, and if dissemination will be chiefly electronic (email or internet), the issues of quality and size become extremely sensitive. Recipients may not be able to download large files (anything over 1MB). They will be less likely to print large or colourful files as they consume expensive ink – and make no mistake, we want our recipients to print our newsletter. People tend to scan information on their computer screens, not reading it as intently as they do the hard-copy word.

Cropping, resizing and shrinking photographs is one easy way of keeping our file sizes small and manageable. Photos from a digital camera are much too large and data-rich for as-is reproduction in a newsletter. Crop them (to remove unnecessary background), resize them (to fit the available space), and shrink them (to condense their file size). There are many free and easy ways to do this, from downloading freeware (like Photogadget at www.xemico.com/photogadget) to uploading pictures to a website that will convert them to the size we wish (like Pic Resize at http://www.picresize.com/).
Any newsletter that we email should be around 500kb, and in .pdf format. We can always have two versions of the newsletter – a high-quality one we publish professionally, and a low-quality, small file-size newsletter we compress for electronic dissemination.

Lastly, we should repeat that most if not all word processors include useful templates that have made these kinds of design decisions already. All we need to do is insert our content, without any layout worries. The newsletter example following this chapter was created entirely from an existing template.

**Material review**

We may want to tell the world about what we’re doing – who we are and what we’ve achieved. Or we may want to inform the government about our recent results. We may be targeting communities with some behaviour-change advocacy. We may want to impress our colleagues at an upcoming conference. Whatever our motivations, we need to understand what materials we have (i.e. text, photos, graphics) to support our core messages.

As seen in this chapter’s internet discussion, we can certainly cannibalize text written for other purposes. A small amount of editing can, for instance, turn an executive summary or the opening of an annual report into a punchy “article” for our newsletter. Photographs taken as part of a data collection stage might add the necessary illustration of a strong concept or finding.

**Reverse engineering**
Other newsletters can be good “inspiration” and allow us to perform some reverse engineering, where we take a final product and then disassemble it step-by-step to see how all the small parts created the end result. An online search engine can return us with dozens of examples of good – and many bad – newsletters. These examples were taken from the www.research-matters.net website.

The importance of trial and error

When we embark on any desktop publishing adventure, there is one mantra that we must repeat and respect: trial and error. We will make a thousand mistakes doing this, something won’t look right, or we just won’t be happy with something we’ve done. Keep trying. Keep experimenting and testing. And keep saving our work. We can always use the ‘Save As...’ feature to keep multiple versions of the document (e.g. Newsletter-v1.doc, Newsletter-v2.doc, Newsletter-v3.doc) in case we’re not quite sure of our changes and want to check them (and even undo them) once we’ve done more experimenting.

Knowing that our content and design depend upon our audience and our available materials (including who will do it), some simple suggestions for a newsletter include:

- a brief overview of our organization;
- a brief description of a new project (and what makes it so cutting-edge);
- a brief biography of an involved researcher;
- an acknowledgement of any involved donor;
- the titles of any previous projects, including links to more information;
- a mention of any past publications;
- an advertisement for open positions or calls;
- all contact information, from street to email to website addresses.
IV. Integration

A newsletter is one of those communications products that every organization – large, small or shoestring – should have. It summarizes essential information and leaves audiences up-to-date and wanting more. Even more, it becomes a core communications product which we can disseminate using the different tools discussed in this chapter. We might:

- email the newsletter directly to chosen recipients;
- send it to our listserv;
- post it to our website (either as a .pdf document or by cutting and pasting relevant pieces of the newsletter’s text onto the various pages of our site);
- post it to our blog (as today’s entry and as a “permalink” that can be easily seen and accessed in days to come);
- via our online social networking, alert our “friends” that our newsletter is ready to read.
- use the email function in our social networking website to disseminate the newsletter;
- encourage our social networking “friends” to comment on the newsletter, and to send it on to others who may want to see it.

Just as the internet is becoming an increasingly interactive and social environment, so are the tools behind it: email, the internet and desktop publishing are intensely connected applications. We shouldn’t use any of these applications without considering the others: email can support the internet; word processing can provide content for both; and when used well, all three can bring new attention, new publicity, new relevance, and even new funding to us. They are tools that we can bring together as the foundation for our online communications strategy.

Beyond any doubt, the past decade has seen online possibilities mushroom – from a technical, a substantive and an access point of view. With computers now widespread, internet connectivity steadily improving around the globe, and easy-to-use and free tools readily available, there has never been a better time to take advantage of online opportunities. Such an approach remains only one of many, but the more we understand the online world, the more we can use it to achieve our goals.
NH=ND is a research organization in M------ dedicated to studying the governance, equity and health impacts on vulnerable populations. Our knowledge works to change national policy.

### A Quarterly Newsletter

#### The Paper

Look for quality without ostentation. Ordinary bond can be cheap. Gloss Art perhaps too showy. 90 grams per metre (gsm) is perhaps enough to prevent unsightly “see-through.” More than 120 gsm can be too expensive and cumbersome.

#### The Title

Even a newsletter needs a name! “News” or “newsletter” can be the mainhead - but every issue can have an original title, perhaps by theme. Page 2

#### The Style

Our “house style,” makes our work instantly recognizable and consistent. Best of all, we don’t have to decide with every new newsletter which fonts, margins, and print areas to use - this is already done. Page 2

#### Headlines

Be consistent with our choice of colour and font. Page 2

#### Body Type

Again, let’s use only one type of font throughout. That keeps things easy for us and easy on the eye of our viewers. Also, is our type justified? Page 3

#### Columns

How many columns is too many? Is 6 too much? Page 4

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**Smart Flourishes**

Recalling the communications strategy for NH=ND in Chapter Six of this Toolkit, NH=ND identified women’s groups as a primary target for its messages. Notice how each picture addresses that core demographic? Notice as well how each picture has remarkably similar colours? We have not altered these photos in any way - save a crop and zoom in the above photo to eliminate unnecessary background - but out of our stock of hundreds of photos we chose those that reflected our demographic (women and children) and our design and colour scheme. We even extended that colour scheme to our headlines…

**Fun Fact:** The structure of this newsletter was entirely created using a word processor template. All the hard work was done for us!

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**Smart Flourishes Part 2**

Let’s never get carried away with our flourishes. Less is more and consistency is essential. Used skillfully, these types of flourishes can add a professional touch; used liberally, flourishes scream amateurism. Perhaps it’s best to test both the content and the “look and feel” of our newsletter with a small focus group before disseminating (especially the first time).

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### Changing Malaria Control?

Changing Malaria Control?

The pages of our newsletter may contain several different items, but this newsletter has a fairly standard format: above we have “links” to the content inside, and in this section we have our most important content, our major or lead article. It is topped by a catchy headline and has several supporting photographs.

Pictures, diagrams and charts showing our programming in action are incredibly useful. They capture immediate interest and add colour to complex research processes. They help people understand what we do. From a design perspective, they also give the eye a needed “break” from straight text. Every good newsletter has plenty of “white space” - areas with no content whatsoever.

Using knowledge to change policy

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Chapter 12: Tapping Technology

16
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Research Matters (RM) is a collaboration of the International Development Research Centre (IDRC) and the Swiss Agency for Development and Cooperation (SDC). RM was launched in 2003 to examine and enhance the specific KT dynamics within the field of health systems research. From these founding connections with both a research funder and a bilateral donor, RM has occupied a unique vantage among health researchers and research-users. By working directly with both the producers of research and with its consumers, RM has developed a range of activities and modalities designed to hasten the movement of research results to the policy arena, to database and access those results, to communicate them, and to expand an appreciation of research itself. RM builds capacity among researchers to perform their own KT; RM responds to the priorities of major research-users; and RM actively brokers both research results and research processes. As an active, ground-level embodiment of KT, RM has helped to shape how health research is demanded, created, supplied, and ultimately used.
Endnotes

1 Most email programmes have a contact database option. Open source contact database software can also be downloaded. See http://civicrm.org/ for one example.


3 “Blog” is a derivative of “weblog”.
Application des connaissances: une introduction

Qu’est-ce que l’Application des connaissances ? Connue sous une multitude de noms, l’Application des connaissances (AC) est un enchevêtrement d’acteurs, d’idées et d’approches au point qu’elle échappe à une simple définition. En effet, il existe des explications théoriques de l’AC, il y a l’AC en action. Pour certains, l’AC signifie les communications ; et, pour d’autres, liaison et échange. Toutefois, réduite à son essence, l’AC est le point de jonction entre deux processus fondamentalement différents : celui de la recherche et celui de l’action.

L’AC vise, par-dessus tout, à relier ces deux processus. En tant que processus intensément social, l’AC dépend des relations. N’ayant aucune formule magique pour la prise de décisions – où pour une politique donnée, on doit examiner tous les faits afin d’arriver à la solution la meilleure, la plus rationnelle – l’AC repose sur des partenariats et des collaborations actifs et, par dessus tout, des contacts personnels entre les chercheurs et les utilisateurs de la recherche. En liant la pureté de la science avec le pragmatisme de la politique générale, les valeurs immatérielles de la confiance, de bonnes relations et même de l’amitié peuvent se révéler plus efficaces que la logique et plus contraignantes que les preuves.

Bien que le concept d’AC ait existé depuis des décennies, le Sommet ministériel des Ministres de la Santé de Mexico en 2004 a mis l’accent sur l’écart mondial “savoir-faire”. À une époque où nous connaissons tant de choses, pourquoi en mettons-nous si peu en pratique ? Le Sommet a fait de ce problème une priorité, et un impératif de solution. Les participants
au Sommet ont demandé qu’il y ait une participation accrue du côté de la demande dans le processus de recherche, en mettant l’accent sur le courtage des connaissances et sur d’autres mécanismes afin de “faire participer les utilisateurs potentiels de la recherche à la fixation de priorités pour la recherche”.1 La politique de la santé, a déclaré le Sommet, devrait finalement être “basée sur des preuves fiables provenant d’une recherche de haute qualité”.

Bien que la déclaration ait été faite avec enthousiasme – et relayée lors de nombreuses réunions et documents de suivi – il y a eu peu d’orientation sur la manière de mettre effectivement en contact la recherche et les utilisateurs de celle-ci. Comment, en pratique, pouvons-nous ouvrir ces nouveaux sentiers réunissant tous ces acteurs clés ?

Dans les années qui ont suivi le Sommet, notre recherche sur cette question particulière nous a conduits à trois principes de base de l’AC, que nous illustrons à chaque page de cette Boîte à outils :

**Connaissances.** Les efforts de l’AC à tous les niveaux dépendent d’une base de connaissances solide, accessible et contextualisée.

**Dialogue.** Les relations au cœur de l’AC ne peuvent être soutenues qu’à travers un dialogue et un échange réguliers et bilatéraux.

**Compétences.** Les chercheurs, les décideurs et d’autres utilisateurs de la recherche ont besoin d’une base de compétences renforcée pour créer et répondre aux opportunités qu’offre l’AC.

**Les quatre modèles de l’AC**


L’acteur central dans le modèle push est le chercheur, dont les connaissances constituent le principal catalyseur pour le changement. Les techniques du modèle push comprennent la mise au point d’outils présentés de manière attrayante (il s’agit d’outils comme des synthèses, des dossiers de politique, vidéos) qui rendent les processus de recherche et les découvertes plus accessibles aux décideurs et autres utilisateurs de la recherche. Ces techniques peuvent tenir compte du contexte et des besoins des décideurs – et peuvent même faire participer les décideurs à leur conception – mais la participation des décideurs dans le modèle « push » est typiquement en tant que récepteur ou cible de l’information. Les efforts du modèle « push » sont idéaux pour des situations dans lesquelles les décideurs pourraient avoir besoin (ou être convaincus d’avoir besoin) d’informations sur un sujet particulier.

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Le modèle pull est centré sur les utilisateurs de la recherche, dont le désir pour plus d’informations ou de compétences est le principal moteur de l’action. Dans ce modèle, les décideurs peuvent rechercher des preuves sur un sujet particulier, mener une étude critique des programmes ou services pour déterminer si une nouvelle preuve justifie des changements, ou ils peuvent participer à un stage de formation sur la manière d’évaluer les preuves avec un œil critique ou de comprendre comment et où utiliser les preuves tirées de la recherche pour la prise de décision.

**Modèles de l’application des connaissances**

**Modèle A**
Efforts du modèle push de la part des producteurs ou fournisseurs

**Modèle B**
Efforts du modèle pull de la part des utilisateurs

**Modèle C**
Efforts d’échange

**Modèle D**
Efforts intégrés

**Connaissances**
**Dialogue**
**Compétence**

Le modèle échange (souvent appelé lien [liaison] et échange) repose sur des partenariats entre les chercheurs et les utilisateurs de la recherche collaborant pour un bénéfice mutuel. De tels partenariats peuvent être à court ou à long terme, peuvent se produire à n’importe quel moment de la recherche ou du processus de politique, et peuvent comprendre des activités telles que des exercices de fixation de priorités, des projets de recherche en collaboration, et créer des systèmes de connaissances (p. ex. des bases de données). Des courtiers des connaissances peuvent jouer un rôle crucial dans l’établissement de ces stratégies.

Enfin, le modèle intégré est mieux représenté par l’idée émergente de la Plate-forme d’application des connaissances (PAC), une institution au niveau national – ou régional engagée à favoriser les liens et échanges à travers un système de santé. Étant l’équivalent institutionnel d’un courtier des connaissances, les TAC sont un intermédiaire entre la recherche et la politique car elles œuvrent à relier les besoins du processus de politique avec les outils de la recherche, et à insuffler dans le dialogue public une reconnaissance et une compréhension des processus et résultats de la recherche. Les TAC peuvent contribuer à la création d’une base de connaissances facile à exploiter ; susciter des dialogues et des réunions ; et offrir des stages réguliers de renforcement des compétences.

Bien que nous explorerons chacun de ces quatre modèles à travers ces douze chapitres, cette Boîte à outils accorde une place particulière au “modèle push” de l’AC. Elle a été inspirée par des chercheurs qui désirent améliorer leur capacité à informer, influencer et s’engager dans des questions de politique et de pratique. Renforce la capacité des chercheurs à devenir de meilleurs AC-eurs est l’esprit dans lequel baignent toutes ces pages, et à cet égard nous sommes inspirés par l’expérience de longue date du CRDI et de Research Matters dans leur travail avec des chercheurs des pays à bas - et moyen revenu.

Ainsi, le public principal de cette Boîte à outils est constitué de chercheurs en systèmes de santé et en politique sanitaire qui cherchent à renforcer leurs compétences au niveau individuel et celle de leur organisation, de projets de recherche particuliers aux questions plus larges du développement de l’organisation. Cette Boîte à outils puise dans des sources universitaires, mais ne s’étend pas sur, ni ne crée de nouveaux modèles ou théories. Chaque chapitre explique un concept clé de l’AC et le rend ensuite opérationnel à travers des exemples pratiques, avec des suggestions sur comment trouver davantage de ressources.

Application de la recherche en action : rendre la recherche vivante
Ces dessins sont des exemples très éloquents de l’AC en action, racontant l’histoire d’une étude portant sur la corruption dans le système de santé du Sénégal. D’un coup d’œil, ils réduisent les résultats de recherche complexes en quelque chose de facilement compréhensible par les groupes cibles de l’étude – les médecins et autres travailleurs de santé, les agents du ministère, et les citoyens recherchant les soins de santé. Ces dessins ne présentent aucun résultat, ils ne discutent pas de méthodologie ni de plan de la recherche. Ils ne font que provoquer – « Que sous-entendez-vous, des sages-femmes qui soutirent de l’argent! » - sachant qu’un public provoqué cherchera des informations complémentaires. Dans la terminologie de l’AC, ces dessins sont un outil du modèle « push » car ils se concentrent purement sur la création d’une demande accrue pour les résultats. Le but de ces dessins n’est pas d’essayer d’établir un lien et un échange, ni d’essayer de faciliter les efforts du modèle pull ou du modèle intégration : il est tout simplement celui de mettre en avant un aspect des conclusions de la recherche sur un ton de Qu’allez-vous faire à propos de cette affaire ? Ces dessins constituent une salve d’ouverture, et en tant que tel ils doivent être soutenus par plus d’informations pour ceux dont l’intérêt ou la colère aura été provoquée.3

Bien que cet outil du modèle « push » ait été utilisé à la fin d’un projet de recherche, nous pouvons aussi utiliser de tels outils au commencement ou à mi-parcours de notre projet. Les dessins n’auraient pas été nécessaires si les chercheurs avaient travaillé avec des groupes médicaux et le gouvernement dès le début – si le public visé n’avait pas besoin d’être choqué pour réagir – en utilisant, par exemple, la recherche comme un outil régulier de politique et de planification, comme un feedback constant sur les progrès d’un programme ou d’une politique. Cela peut ne pas être toujours possible, et il est bien sûr peu probable pour toute étude qui, par exemple, enquêterait sur un sujet comme la corruption. C’est pour cette raison que les dessins mettent en lumière un autre aspect central de l’AC - comprendre le contexte global. En effet, la corruption n’est pas une question qui peut être discutée ou traitée au cours d’un déjeuner amical avec un responsable ministériel. Les chercheurs avaient bien compris que les “pouvoirs en place” allaient probablement se révéler hostiles à leurs conclusions parce que la question de corruption avait été hautement politisée et des noms des personnes impliquées pouvaient même être révélés. En les imprimant dans les journaux, en affichant des dessins sur les murs des centres médico-sociaux – ces tactiques agressives ont contraint beaucoup de publics différents à réagir. Ils ne pouvaient pas ne pas le faire.

Bien sûr, chaque chercheur, projet et organisation diffèrent, donc le choix d’outils du modèle « push » sera différent, comme le seront les perspectives pour faciliter les efforts du modèle « pull » et créer des partenariats de liaison et d’échange. En effet, une étude sur les modalités concurrentes de financement de la santé dans des communautés rurales de Tanzanie peut ne pas se prêter à des dessins – mais peut présenter de fortes perspectives de partenariat avec les autorités locales et peut même finir par provoquer un « dialogue sur la politique générale du pays » pour discuter de l’éventail d’options disponibles. Une


4 Avec ces dessins, quelques communiqués de presse bien rédigés, et une dose de chance et du choix du bon moment, les chercheurs sénégalais ont créé une tempête médiatique qui a mis leurs conclusions au-devant de la scène (en août 2005) Cela a eu pour conséquence que le Président du Sénégal a écrit une lettre félicitant les chercheurs et promettant une enquête approfondie sur les conclusions de leur étude. Le gouvernement a depuis lors pris plusieurs mesures pour soupeser et mettre en œuvre ces conclusions.
étude sur la thérapie antiretrovirale en Afrique du Sud peut devenir un modèle de “meilleure pratique” à la pointe dont les expériences et les connaissances sont présentées non seulement pour le public local et national (les décideurs, les media, les communautés, les praticiens et les chercheurs), mais aussi le public international et mondial. Après tout, les chercheurs ne sont pas que des agents de changement dans leur propre milieu : chaque chercheur est aussi un public. La liaison et l’échange entre les chercheurs dans des milieux et géographies différents peuvent se révéler être certaines des meilleures et plus fortes stratégies d’AC disponibles : nous avons tellement à partager et à apprendre l’un de l’autre.

**Vue d’ensemble de cette Boîte à outils**

Cette Boîte à outils est consacrée à cet esprit de partage et d’apprentissage. Ses douze chapitres sont tous intégralement liés et peuvent être lus ensemble ou examinés individuellement.

Dans le *Chapitre deux*, intitulé *Intégrer la demande : vers l’harmonie des modèles push et pull*, nous continuons cette discussion de vue de l’ensemble de l’AC. Nous essayons là de démystifier la « demande » de la recherche, nous aventurant dans la théorie qui sous-tend le processus de politique (comment les décisions sont-elles prises ?) et la nature des preuves elles-mêmes (qu’entendons-nous par “preuves” ?). Nous y discutons de certaines approches et stratégies utiles pour favoriser le lien et l’échange, et fournissons quelques exemples qui ont intégré avec succès le côté demande. Nous concluons le chapitre avec une discussion sur le courtage des connaissances et l’émergence des Tribunes d’application des connaissances consacrées aux principes de base de l’AC en matière de connaissance, dialogue et compétence.

Le *Chapitre trois*, examine la *Gestion des connaissances* (GC). Bien que définie et présentée de plusieurs façons différentes, la GC signifie identifier, capter et partager la connaissance, ce qui nous permet d’avoir accès à la connaissance dont nous avons besoin lorsque nous en avons besoin. Ce chapitre est un module de départ pour la GC, car il examine les personnes, les processus et la technologie qui capables de maximiser l’utilité et l’impact de la connaissance à la fois tacite et explicite. Nous y exposons les grandes lignes des étapes pour concevoir une stratégie globale de GC (où sommes nous, où voulons nous être, et comment y allons-nous ?), et ensuite épluchons une diversité des différents outils de GC en théorie et en action, parmi lesquels des bilans de l’action, des audits de la connaissance, la transmission orale, et l’assistance des pairs.

Dans le *Chapitre quatre*, nous examinons l’art de la *Configuration du Contexte*. Qui pourrait soutenir notre travail ? Qui pourrait l’entraver ? Qui doit être informé de ses implications de politique générale ? Comment les politiques dans notre domaine sont-elles formulées ? *Qui et quoi essayons nous d’influencer* ? Aussi connue comme configuration politique et analyse situationnelle, la configuration du contexte est un processus de compréhension et d’adaptation aux besoins, à la politique et aux “réalités” de notre environnement afin que nous puissions interagir plus efficacement avec ce dernier. Nous examinerons une partie de la théorie de la configuration et l’illustrerons avec des outils pratiques et un exemple particulier, imaginaire où la preuve n’est pas définitive et sur laquelle les savants, les institutions et mêmes les pays divergent nettement.
Le Chapitre cinq explore le concept relativement nouveau de Pensée évaluative. La pensée évaluative (PE) fait de l’évaluation une mentalité intégrée à plein temps ; ses praticiens réfléchissent constamment sur leur travail, tirant de précieuses leçons qui marchent pour influencer et modifier leurs activités. Qu’apprenons-nous et comment pouvons-nous utiliser ces leçons pour améliorer notre performance ? Nous discuterons de certains concepts clés, examinerons certains outils cruciaux de la PE, et conclurons avec quatre suggestions pour développer des stratégies de PE efficaces. Une annexe complète à ce chapitre, intitulée Contrôle & Évaluation (dans un format Foire Aux Questions) suivra.

Le Chapitre six nous emmène à travers comment Développer une stratégie de communication. Dans ce chapitre, nous discuterons la théorie et passerons en revue dix Éléments essentiels auxquels toute stratégie doit répondre pour obtenir une meilleure image d’où nous sommes, de ce que nous avons à dire au monde, et comment nous comptons le dire. Tout au long du chapitre, nous soulignons la nécessité de moins se focaliser sur les outils – un documentaire vidéo, par exemple, ou un dossier de politique – et plus sur comment les communications nous aideront à atteindre nos principaux buts. Comment le communication soutiendra-t-il tout ce que nous faisons ?

Le Chapitre sept est le premier de plusieurs autres chapitres examinant des outils spécifiques de communication dans le cadre du modèle “push”. Dans le contexte d’une stratégie globale de communication, ce chapitre, intitulé Communiquer les résultats de la recherche : la presse écrite, traite d’un éventail d’outils imprimés pour atteindre des publics spécifiques. Bien que la presse écrite soit seulement l’un des nombreux débouchés pour notre travail, les outils imprimés restent la “norme industrielle” et sont extrêmement importants. Parmi les outils examinés dans ce chapitre il y a les articles soumis à la critique des collègues, les articles des journaux, les communiqués de presse, les dossiers de politique et les bulletins. Tandis que les outils de la presse écrite sont typiquement utilisés à la fin du cycle de recherche (lorsque nous avons des résultats que nous voulons partager), ce chapitre souligne comment on peut les utiliser au cours de tout projet de recherche.

Dans le Chapitre huit, nous réduisons un document et une question complexe en dossier de politique orienté vers l’action. Dans ce chapitre intitulé En deux pages : comment rédiger les dossiers de politique, nous prendrons le sujet contesté de la circoncision masculine et de la prévention du VIH et observerons, étape par étape, comment les découvertes purement scientifiques sont résumées, analysées, rendues opérationnelles, et concentrées dans un document de deux pages qui conclut en proposant un ensemble d’options politiques viables. Nous examinerons et utiliserons le format problèmes-possibilités-politiques si efficace pour la conceptualisation des dossiers de politique, des notes, et même des communiqués de presse.

Le Chapitre neuf est consacré à l’Examen systématique, un outil unique et puissant d’AC qui évalue – de façon juste et objective – toutes les connaissances pertinentes sur une question actuelle. En utilisant un format Foire Aux Questions, nous examinerons les composantes de base d’un examen systématique – avec une vue d’ensemble sur sa forme et son utilisation jusqu’à une discussion sur où y avoir accès – et conclurons par des observations sur l’avenir des examens systématiques en tant qu’outil d’AC plus intégré, contextuel et même guidé la demande.
Le Chapitre dix ouvre une fenêtre dans l’Accès ouvert, expliquant ce que c’est et comment nous pouvons y contribuer, d’abord en donnant un profil plus élevé à notre travail, et ensuite en pénétrant davantage les masses de connaissance qui existent dans le monde. Ce chapitre donne un aperçu de la logique derrière l’Accès ouvert (AO), son histoire, les différentes “voies” menant à l’AO, et ensuite explique comment les chercheurs peuvent à la fois accéder et contribuer aux mines d’information et journaux consacrés à l’Accès ouvert. Le chapitre se termine avec une section démystificatrice Foire Aux Questions et un Glossaire des termes clés.

Dans le Chapitre onze, nous discuterons de l’art de présenter et de créer la “prochaine vague” de conférences. Intitulé La Conférence 2.0 : de meilleures présentations, de meilleures conférences, ce chapitre vise à transformer chaque conférence en un environnement d’apprentissage dynamique, dans lequel de vigoureuses présentations orales et avec affiches se transforment facilement en des séances qui rendent les messages et points d’action clés de la conférence. Nous traiterons de présentations orales (comment rendre les discours plus mémorables et utiliser la technologie comme un support sérieux), de présentations avec affiches (comment décider du bon contenu d’une affiche, de son aspect et de sa taille), et de présentations lors de la conférence (comment mieux faire participer les rapporteurs et les présidents des séances pour rendre les messages principaux et créer un procès-verbal de la conférence qui soit dynamique et ait été utilisé).

Notre dernier chapitre, le Chapitre douze, intitulé Exploiter la technologie : comment intégrer les applications, se concentre sur les trois applications principales que nous utilisons tous quotidiennement – le courrier électronique, l’Internet, et le traitement de texte. Nous examinerons quelques trucs, ficelles et techniques pour utiliser chacun d’eux (depuis les stratégies de courriers électroniques efficaces jusqu’à la publication assistée par ordinateur en passant par comment développer une présence web) et voir comment commencer à utiliser ces applications d’une manière plus intégrée et finalement plus intelligente.
Comme l’AC elle-même, cette boîte à outils est itérative et exploratoire – c’est un point de départ, une introduction, non un traité ni une analyse définitive. Et sa réussite dépend de vos commentaires actifs, questions et critiques. Avons-nous oublié quelque chose ? Vous n’êtes pas d’accord avec quelque chose ? Des sujets auxquels nous devrions consacrer des chapitres dans l’avenir ?

Envoyez un courriel aux chargés de programme de Research Matters :
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Research Matters (RM) est une collaboration entre le centre de recherches pour le développement international (CRDI) et l’Agence suisse pour le développement et la coopération (DDC). Le projet RM a été lancé en 2003 afin d’examiner et accroître la dynamique spécifique de l’application des connaissances (AC) dans le domaine de la recherche sur les systèmes de santé. Fondé sur ces liens solides entre un bailleur de fonds pour la recherche et un donateur bilatéral, RM occupe une position unique parmi les chercheurs sur la santé et les utilisateurs de la recherche. En travaillant directement avec les producteurs et les consommateurs de la recherche, RM a mis au point un éventail d’activités et de modalités destinées à accélérer la dissémination des résultats de la recherche vers l’arène politique, à constituer ces résultats en base de données et y accéder, à les communiquer, et à développer l’appréciation de la recherche elle-même. RM renforce la capacité entre chercheurs à pratiquer leur propre AC ; RM répond aux priorités des principaux utilisateurs de la recherche; et RM sert d’intermédiaire actif entre les résultats de la recherche et les processus de la recherche. En tant qu’incarnation active de l’AC et basée sur le terrain, RM a permis d’orienter la demande de la recherche en matière de santé, de montrer comment cette recherche en matière de santé, de montrer comment cette recherche est créée, fournie et finalement utilisée.