

Target Audience		Strategy		Outcomes	Outcome Indicators
Patients/Public	<ol> <li>Blog</li> <li>e-newsletter</li> <li>educational material</li> <li>brochures</li> <li>Infographic</li> <li>FAQ</li> </ol>	<ul><li>10. press release</li><li>11. promotional material</li><li>12. success story</li></ul>	2. change la sengage s	cehaviour or practice citakeholders citakeho	reach indicators (# distributed, # requested, # downloads/hits, media exposure) usefulness indicators (read/browsed, satisfied with, usefulness of, gained knowledge, changed views) use indicators (# intend to use, # adapting the information, # using to inform policy/advocacy/enhance programs, training, education or research, # using to improve practice or performance) partnership/collaboration indicators (# products/services
Policy Specialists	<ol> <li>case study</li> <li>educational material</li> <li>fact sheet</li> <li>newspaper article</li> </ol>	6. PowerPoint presentation 10. too 11. vide 12. well 12. well 12. well 13. too	ео	5.	developed or disseminated with partners, # or type of capacity building efforts, social network growth, influences, collaborations) practice change indicators (intent or commitment to change, observed change, reported change) program or service indicators (outcome data, documentation,
Researchers	<ol> <li>blog</li> <li>case study</li> <li>educational material</li> <li>fact sheet</li> <li>journal article</li> </ol>	8. podcast       13. suc         9. press release       14. wel	earch summary cess story	7. 8.	feedback, process measures) policy indicators (documentation, feedback, process measures) knowledge change (quantitative & qualitative measures) attitude change (quantitative & qualitative measures)
Health-Care Professionals	<ol> <li>case study</li> <li>educational material</li> <li>handbook</li> <li>journal article</li> <li>magazine article</li> </ol>	<ul><li>6. newspaper article</li><li>7. PowerPoint</li><li>presentation</li><li>11. succession</li><li>12. too</li><li>13. well</li></ul>	cess story Ikit		
Health System Administrators	<ol> <li>blog</li> <li>case study</li> <li>e-newsletter</li> <li>educational material</li> <li>fact sheet</li> <li>Infographic</li> </ol>	<ul> <li>9. newspaper article</li> <li>10. podcast</li> <li>11. PowerPoint</li> <li>presentation</li> <li>15. suc</li> <li>16. too</li> <li>17. vide</li> <li>presentation</li> </ul>	earch summary cess story lkit eo		



## **Things to consider:**

**Target Audience/User Profiles:** Who are you trying to reach? Is there a tailored message for this audience?

**Key Message**: What messages do you anticipate sharing? **Strategy:** What strategies will work best for this audience?

**Outcomes:** what are your intended results?

Outcome Indicators: How will you measure your intended results?



#### **Target Audience - User Profiles**

#### 1. Patients/Public

**About:** includes interested public, media, job seekers, vendors, engaged patients, families and caregivers or their representative associations, etc.

Main activities online: checking email & social media

Secondary activities: reading the news on a website, watch online content

Social media usage at home ranked: FB, YouTube, Twitter, Pintrest, Instagram, and LinkedIn

**Device Usage:** use a variety of devices for all activities: Personal computer, mobile phone, computer

tablet

**Primary Digital Activities:** Computer at home, use the internet, watch tv at home, watch videos on the internet

**Secondary Digital Activities:** Watch tv while on portable device, websites specific to health issues, journal articles, conferences

Unmet Information needs: information on system performance, end-of-life care, health system costs

Priorities: quality of data, quality of analysis, ease of use

#### 2. Policy Specialists

**About:** Policy makers at the federal, provincial, territorial, municipal, and community or regional levels, as well as advocacy groups and NGOs

Primary Task: Prepare a briefing note or report for a minister or councilor

What types of information do they need? High-level, regionally comparable data. At the federal level, the information should have a national view. At the provincial and municipal levels, the information should be within provinces and regional health authorities

Why are they look for information? To inform creation of a brief or report for a minister/councilor/senior staff member. To inform guidelines and best practices.

What sources do they turn to for information? Systematic reviews, journals, websites specific to health issues, Google, Colleagues, Conferences

How often are they looking? Search for information is initiated by an 'ask'

**Preferred format and channels:** websites, digital and printer friendly products, well-referenced summaries, journal articles, interaction with colleagues (in-person or digital), conferences, communities, webinars and internal network drives also important and frequently used, online portals and shared learning spaces are rarely used, videos – though most watch videos (e.g. YouTube) they have a low preference for video format, and social media – few have access to social media at work, however many use it outside their work.

**Unmet Information Needs:** Health system cost: synthesized, comparable data across provinces on prevention, treatment, and drug costs. End of life care: best practices and guidelines on palliative care, and uncommon illnesses: incidence rates and best practice guidelines for low incidence health issues.

**Device Usage:** Virtually all searches are conducted on their work computers. Mobile device usage kept mostly for personal use, unless they are out of the office or in a meeting.

Priorities: Quality of analysis, Ease of use, quality of data



#### 3. Researchers

**About:** Researchers, statisticians, analysts, health economists.

Primary Task: Fulfill a request, inform research

What types of information do they need? Focus is on informing their research questions and search queries.

Why are they looking for information? To answer a research question.

What sources do they turn to for information? Health information databases, registries, journals How often are they looking? As needed basis when requested by others.

Preferred format and channels: Information is almost exclusively digital – hard copies are rarely created or used, websites, databases, online summaries attached to in-depth reports, colleagues (who are most likely on the same research team), conferences, communities, webinars and internal network drives also important and frequently used, online portals and shared learning spaces are rarely used, videos – though most watch videos (e.g. YouTube), they have a low preference for video format, social media – few have access to social media at work and would not use it for their work even if they did. However, many use social media outside of their work.

**Unmet information needs:** Health-care costs: requests for prevention, treatment, and drug costs. Patient outcomes, track remission and recurrence. System performance – review how each system tracks information to optimize tracking and comparisons.

**Device usage:** Virtually all searches are conducted on their work computer. Mobile devices kept mostly for personal use, unless they are out of the office or in a meeting.

**Priorities:** Quality of data, quality of analysis, credibility of source.

#### 4. Health-Care Professionals

**About:** Specialists, surgeons, primary care practitioners, nurses, public and community health professionals, allied professionals and/or their corresponding professional societies.

Primary Task: Patient question, stay up-to-date

What types of information do they need? Summaries and patient-level information on the cancer journey and supportive care, clinical practice guidelines, public health nurses seek clinical treatment information, public health nurse administrators seek information on RFPs; community demographics; national norms for various health indicators; health outcomes, public health agency professionals seek risk reports, information on new interventions, 'best practice' evidence-based resources on emerging practices in preventative behavior, information on new interventions; synthesized info on health threats, as well as research – and evidence-based guidelines.

Why are they looking for information? To find information for their patients and to stay up-to-date, to answer a clinical question; solve a problem; or support decision making related to clinical practice, proactively search for cancer information when a higher percentage of their practice is cancer related What sources do they turn to for information? Grey literature, journals, websites specific to health issues (e.g. provincial agencies, national organizations that are specific to health issues), Google, Conferences, Colleagues, Continuing Medical Education (CME) opportunities



**How often are they looking?** Specialists and GPs will look weekly, while nurse/allied health will look monthly

Preferred format and channels: Clinically oriented, quick to access, online preferred (printer-friendly), targeted to nurses and patients, well-referenced summaries, conferences, communities, webinars and internal network drives also important and frequently used, online portals and shared learning spaces are rarely used, 'curbside consultations' with other physicians, videos – most watch videos online (e.g. YouTube), but rarely for cancer-related information, social media – few have access to social media at work, of the few who use it at work, it is more to stay up-to-date rather than for specific searches. However, the majority visit social networking sites on a weekly basis (68% of registered nurses do so daily). Specialists are more comfortable with digital technology than GPs, nurses, and allied health professionals.

**Unmet Needs:** End-of-life care, best practices and guidelines on palliative care, system reintegration, ensure easy transition between care professionals

**Device usage:** Virtually all searches are conducted on their work computer. Mobile devices kept mostly for personal use, unless they are out of the office or in a meeting.

**Priorities:** Quality of analysis, ease of use, quality of data.

#### 5. Health System Administrators

**About:** Health system leaders and managers at the federal, provincial, territorial and municipal levels. **Primary Task:** Develop procedures, evaluate performance

What sources do they turn to for information? Journal articles, summaries/full text, websites specific to health issues (provincial agencies, organizations), local system performance data, Google, Colleagues, Conferences

How often are they looking? Search for information is initiated by an 'ask'

**Preferred format and channels:** websites, digital (printer-friendly) products, well-referenced summaries, interaction with colleagues (in-person or digital), conferences, communities, webinars and internal network drives also important and frequently used, online portals and shared learning spaces are rarely used, videos – though most watch videos (e.g. YouTube), they have a low preference for video format, social media – few have access to social media at work. However, many use social media outside of their work.

**Unmet Needs:** system performance: synthesized, comparable performance data within provinces and regional health authorities, end-of-life care: best practices and guidelines on palliative care, health system cost: synthesized, comparable data across provinces on prevention, treatment, and drug costs. **Device usage:** Virtually all searches are conducted on their work computer. Mobile devices kept mostly for personal use, unless they are out of the office or in a meeting. The device often stays the same. **Priorities:** Quality of data, quality of analysis, ease of use.



Product	Event	Networks	Impact		Indicator
<ul> <li>blog</li> <li>case study</li> <li>e-newsletter</li> <li>educational material</li> <li>brochures</li> <li>fact sheet</li> <li>Infographic</li> <li>FAQ</li> <li>handbook</li> <li>journal article</li> <li>magazine article</li> <li>newspaper article</li> <li>podcast</li> <li>PowerPoint presentation</li> <li>press release</li> <li>promotional material</li> <li>reference list</li> <li>report</li> <li>research summary</li> <li>success story</li> <li>toolkit</li> <li>video</li> <li>website content</li> </ul>	<ul> <li>annual meeting</li> <li>awards ceremony</li> <li>conference</li> <li>debate</li> <li>forum</li> <li>interactive workshop</li> <li>lunch and learn</li> <li>media event (e.g. TV or radio segment)</li> <li>panel</li> <li>presentation</li> <li>symposium</li> <li>training session</li> </ul>	<ul> <li>chat room</li> <li>community of practice</li> <li>discussion board</li> <li>listserv</li> <li>online forum</li> <li>social media (Instagram, Twitter, FB, LinkedIn)</li> </ul>	<ul> <li>change attitudes</li> <li>change behaviour or practice</li> <li>engage stakeholders</li> <li>fulfill funding requirements</li> <li>generate interest or awareness</li> <li>influence policy action</li> <li>share knowledge, experience or tools</li> <li>validate, legitimize or defend a position</li> </ul>	•	reach indicators (# distributed, # requested, # downloads/hits, media exposure) usefulness indicators (read/browsed, satisfied with, usefulness of, gained knowledge, changed views) use indicators (# intend to use, # adapting the information, # using to inform policy/advocacy/enhance programs, training, education or research, # using to improve practice or performance) partnership/collaboration indicators (# products/services developed or disseminated with partners, # or type of capacity building efforts, social network growth, influences, collaborativeness) practice change indicators (intent or commitment to change, observed change, reported change) program or service indicators (outcome data, documentation, feedback, process measures) policy indicators (documentation, feedback, process measures) knowledge change (quantitative & qualitative measures) attitude change (quantitative & qualitative measures)



#### **Budget Items:**

- Knowledge Broker
- Project Manager / KMb Specialist
- Clear Language Writer
- Web development / IT
- Travel
- Workshops / Venue
- Public Relations
- Web 2.0 (social media)
- honoraria
- materials
- meeting expenses
- students/volunteers

### References

1. Phipps D. Building a Knowledge Mobilization Strategy [Internet]. 2015 [cited 2019 Feb 13]. Available from:

 $https://www.mta.ca/uploadedFiles/Community/Research\_and\_creative/Research\_Office/Mount\_Allison\_Connects/Institute\_events/Building\%20a\%20Knowledge\%20Mobilization\%20Strategy.pdf$