

DISSEMINATING EVIDENCE TO A WIDER AUDIENCE



Once evidence from the Conversation Events has been shared with stakeholders (including participants of the Conversation Events), disseminate the evidence to a broader audience so that they can learn about Responsive Dialogues – the processes and outcomes. This might include, for example, the general public, policy-makers from across the One Health spectrum, NGOs, and AMR researchers.

This module provides guidance on the following:

- Why, who, and when to share evidence?
- How and what evidence to share?
- How to identify resources required to share evidence?

Why, who, and when to share evidence?

Sharing information and evidence about the Responsive Dialogues project is an opportunity for others to learn about the processes and their impact. This can assist your project and others to gain support for future projects. It is something that should be considered at the beginning of your project. It may be helpful to develop a dissemination plan that charts the who, what, how ,and when of sharing evidence. A table could be drawn up for this purpose and responsibilities allocated amongst team members.

Dissemination plan

Who (audience)	What (message)	How (approach)	When (timing)	By whom (person responsible)	

We disseminated our findings to our key stakeholders in a workshop, and thereafter we generated a policy brief to share with key policy-makers. (Zambia Responsive Dialogues project)



In addition to the stakeholders involved in the Responsive Dialogues project, there are several different audiences who can benefit from understanding the evidence and learning. Depending on the audience, you may share the evidence at different times.

Who to share evidence with and why

Audience	How they can benefit from the evidence	
Civil Society Organisations/NGOs	They can use the evidence to generate support for an issue and to improve the impact of their work.	
Policy-makers, government departments, researchers	They will hear the voices of those most affected by AMR and their co-created, concrete, and practical solutions to address the challenges of AMR.	
General public	This is an opportunity to raise their awareness of AMR.	
Wider research community	They can learn from the findings.	

How and what evidence to share?

How you share evidence, the methods you use to share it, and what you share, depends on the audience you want to target.

Presentations at conferences and other AMR forums

AMR conferences and forums are useful platforms to present the evidence and learnings from the Responsive Dialogues project and the pilots of co-created solutions. They provide excellent opportunities for raising awareness and getting feedback from other researchers and project implementers.

Local conferences and forums are usually fairly accessible, and the core implementation team could present the project at various stages during implementation. At global conferences, more substantive project findings are expected and this is likely to be towards the end of the Responsive Dialogues project.

Policy briefs (policy recommendations)

See Module 12 for more on writing policy recommendations.

Publications – academic journals

Disseminate the learnings from the project to researchers by publishing in recognised academic journals – international peer-reviewed, or regional or country-level journals. The project processes and findings will be of interest to this community.

Example from a Responsive Dialogues project



The **Thailand** project published a study protocol on the Wellcome Open Research website. For the full paper, see: Poomchaichote T, Osterrieder A, Prapharsavat R et al. "AMR Dialogues": a public engagement initiative to shape policies and solutions on antimicrobial resistance (AMR) in Thailand [version 2; peer review: 2 approved]. Wellcome Open Res 2021, 6:188 (https://wellcomeopenresearch.org/articles/6-188).



Posters/leaflets

Posters and leaflets are useful ways of disseminating findings amongst community members and the general public, although it is important to take literacy levels and language into consideration. In many settings the use of culturally sensitive graphical illustrations will be useful.

Examples from Responsive Dialogues projects

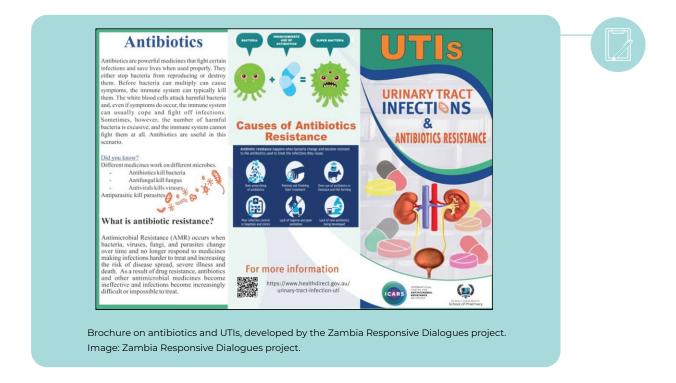


The **Thailand** project developed a booklet as feedback to the participants of the Conversation Events.

In the **Zambia** project, over 500 brochures that explained Urinary Tract Infections (UTIs) and AMR were distributed to a wider community during the Conversation Events across the five sites. These were distributed via community participants and healthcare facility staff. (See example that follows.)

The project also created a key messages document that outlined important information participants wanted to relay to the communities. This document was shared with a journalist who covers AMR news from the national TV station, Zambia National Broadcasting Cooperation (ZNBC). Project staff and AMR experts were further interviewed by the journalist and aired on the ZNBC's main news.

Lastly, the project staff shared key findings and community AMR recommendations on a live radio programme that was streamed on Facebook and Youtube.



How to identify resources required to share evidence?

To effectively disseminate and share your findings and outcomes, you will need people with different communication and organisational skills, as well as adequate financial resources.

It is advisable to build these requirements into your project plan right at the outset of the project. See <u>Section 1</u> for more on setting up a Responsive Dialogues project.

Checklist of guidance in this module

Tick completed activities/tasks and those that still need completion.

Activities	Yes	To do
The importance of sharing feedback and outcomes with others is understood		
Examples of ways to share feedback and evidence are identified		
Resources required to share feedback and evidence are identified		

