


BMJ Open Advancing the impact of research through a dissemination-focused special interest group

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ABSTRACT

Background The proverbial gap between research and translation to the real world is a complex and multifactorial issue that persists and threatens the impact of research. Dissemination and implementation science emerged as significant contributors to knowledge translation. Much attention has been focused on implementation, with less developed methods and work dedicated on dissemination. Our academic research centre identified the need to better understand the intersection of ageing research and dissemination science for impactful and equitable dissemination of ageing research beyond the academic audience.

Objective We describe the purpose, deliverables, and plans of the Dissemination Special Interest Group (SIG) as a model for academic research centres to support and advance the dissemination efforts of their members.

Summary of key arguments In the long term, achieving robust dissemination will require restructuring academic and research incentives, alongside developing infrastructure and methods to assess the impact of dissemination efforts on the translation of ageing research findings. However, actionable efforts can be taken immediately for meaningful impact.

Conclusion Our Dissemination SIG can serve as a model for advancing and supporting dissemination within other research centres, regardless of content and focus areas. More work is needed to develop infrastructure capable of assessing the reach and impact of dissemination efforts on the adoption of research findings.

INTRODUCTION AND BACKGROUND

The translation gap between research and practice persists due to inadequacies in both implementation and dissemination.¹ Implementation research can be defined as the systematic use of strategies to integrate evidence into practice.^{2 3} Dissemination research can be defined as the systematic study of factors and processes that allow for targeted, active distribution of information to key audiences.^{2 3} To date, much more attention has been focused on implementation, and there is comparatively less guidance for researchers—who are not trained in marketing—as to how best to disseminate

their information beyond an academic setting.⁴⁻⁶ However, challenges exist to fully embracing the science of dissemination including:^{5 7-12} (1) tensions between current academic incentive structures for promotion (eg, number of peer-reviewed publications) and acknowledgement of other dissemination works, (2) time and resource constraints and (3) limited methodologies and methods to evaluate the effectiveness of dissemination. The consequences of this are missed opportunities to highlight the importance of research findings to people who can use it (deliver it) or benefit from it (receive it), which limits the reach and impact of important research findings to the public at large.

Infrastructure to support multi-modal and comprehensive dissemination in conjunction with restructuring of academic incentives is needed to fully achieve the potential of dissemination science to positively influence the larger field of knowledge translation. The purpose of this communication is to outline our short- and long-term efforts to network within our institution to make sense of these complexities, raise awareness of the critical importance of dissemination science and build initial resources or tools for our research centre. This paper and our work constitute the first stage of our approach to sharing, use and ultimately the translation of research knowledge.

MODEL FOR THE DISSEMINATION SPECIAL INTEREST GROUP

The Dissemination Special Interest Group (SIG), established in November 2023, was borne out of identified centre needs to better understand the intersection of ageing research and dissemination science for impactful and equitable dissemination of ageing research beyond the academic audience. This SIG is housed within the University



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of Minnesota Centre for Healthy Ageing and Innovation (CHAI). Briefly, the mission of CHAI is to advance interdisciplinary ageing science, create meaningful and immersive educational experiences in ageing, build and sustain innovations and establish a community to promote healthy ageing.¹³ With over 100 members, ranging from faculty to undergraduate students, CHAI supports four cores: Research, Policy, Equity and Community Engagement, Education and Clinical Sciences and Practice. Under the Research Core exist eight active SIGs which foster collaboration by bringing together persons with shared interest in a topic or research method.

The Dissemination SIG consists of five voluntary members—of faculty rank—from various interdisciplinary backgrounds (nursing, audiology, physical therapy, policy, gerontology, sociology) who meet at least monthly. One member leads the meetings with a structured agenda and note taking. We are open to all disciplines in the ageing field and all levels of academic rank or student status. Our vision is to build expertise in the emerging science of dissemination, create a learning space for exchanging effective dissemination strategies and promote the widespread diffusion of ageing research to broad and diverse audiences. For example, the SIG aids in connecting researchers to existing tools on campus designed to disseminate information to communities including communication, marketing and external relations offices.

Our long-term goals are to (1) create processes to provide a forum for consultation/discussion about different approaches to dissemination as CHAI members are planning, conducting or finishing studies, (2) translate different dissemination strategies across diverse ageing research content and methodological areas to elevate the impact and reach of ageing research and (3) contribute to the broader dissemination science field through exemplar work in ageing. This work translates to other research centres, beyond the ageing focus. Below we outline foundational efforts that have produced three deliverables and are linked to our long-term goals. Our future plan for evaluating these deliverables includes soliciting feedback from CHAI members once per year on which resources they have used and if (and how) they inspired the use of new dissemination strategies for their research.

CONDUCT A NETWORK NEEDS ASSESSMENT

To make sense of the complexities surrounding dissemination, we conducted a brief CHAI-members needs assessment. A link to a six-question survey (table 1) was emailed to the CHAI member list-serv with a follow-up email 2 weeks after. Question format included select all that apply, rank order, yes/no and free text. Eleven members responded to date (table 1). The top channels for dissemination include conferences (100%), journals (91%), social media (64%) and newspapers (27%). Other researchers were the audience indicated as the

highest priority for dissemination of results, followed by clinicians/healthcare staff and then leadership/policy makers. The lowest rankings were audiences such as older adults, patients and communities. Our long-term goal is to respond to needs and create processes to provide a forum for consultation/discussion about different approaches to dissemination as CHAI members are planning, conducting or finishing studies across the research lifecycle.

DEVELOP A RESOURCE LIBRARY ON DISSEMINATION

For the resource library, we sought to raise awareness of the critical importance of and gaps in dissemination science through a resource library. Four SIG members individually conducted informal literature reviews across scientific fields and disciplines. Initial searches in PubMed with search terms (dissemination(Title)) AND (scoping review(Title)) yielded 19 articles, from which Bauman *et al*'s review was selected given its broad application across fields and disciplines.¹⁴ From there, cited articles were hand searched and additional informal searches were conducted based on keywords found in the scoping reviews and subsequent, relevant articles. Eleven articles included content on communication techniques, dissemination frameworks and applied examples of dissemination and/or communication/marketing strategies.^{7 15–23}

We also included content-agnostic toolkits for dissemination planning made publicly available by organisations such as the Veteran Health Administration's Diffusion of Excellence and universities.^{24–27} Our resources and capacity limited a systematic review of the literature and thus focused on seminal articles and practical resources. This library is available on a locally shared Google Drive to CHAI members and will be updated at least annually by the Dissemination SIG. Our long-term goal is to conduct a systematic or scoping review of barriers/facilitators to dissemination and/or evaluation methods of dissemination strategies.

BUILD A MEETING INVENTORY

We sought to build a meeting inventory where diverse dissemination strategies could be potentially tested, and non-academic audiences can be engaged. First, we compiled a statewide and national inventory of potential avenues for dissemination based on our collective, interdisciplinary knowledge and experience in the ageing space. This inventory includes relevant conferences, webinars and other venues to directly disseminate the research results to people who support practice and policy change. To obtain the inventory, Dissemination SIG members entered events into a Google Drive spreadsheet with information on titles, general dates, links to websites, target audiences (eg, clinical, community/population, health system leaders, public health leaders, policymakers) and a brief description (example available on request). A total of 24 dissemination outlets

Table 1 CHAI member needs assessment survey and results

Question	Answers	Average ranking (1 = highest and 8 = lowest)	
		Number of responses	Percent of total (n = 11)
How do you prioritise which audiences to disseminate to?	Researchers	1.82	
	Clinicians and other medical staff	2.73	
	Leadership and policy makers	3.82	
	Community-dwelling older adults	4.36	
	Patients	5.00	
	Local communities	5.55	
	Regional communities	6.00	
	National communities	6.73	
What channels do you typically use for dissemination?	Conferences (eg, academic, clinical, policy, or community-focused conferences)	11	100%
	Journal (eg, academic, clinical, policy, or community-focused journals)	10	91%
	Social media	7	64%
	Newspapers	3	27%
	Newsletters (eg, academic, clinical, policy or community-focused newsletters)	2	18%
	Magazines	1	9%
	Blogs	0	0%
	Policy briefs	0	0%
	Executive summaries	0	0%
How do you determine which dissemination techniques to use based on the audience?	Use various methods depending on where the intended audience receives their information, for example, use research talks and peer-reviewed manuscripts for researchers; use interviews with journalists for mentions in media (podcasts, newspapers, online periodicals) and community talks for older adults; and use webinars, brief reports and industry conferences and workshops for professionals who work with older adults	2	18%
	Adjust tone and depth of papers and presentations based on the audience and the ways they will use the information	1	9%
	Unsure or did not respond	8	73%
Please describe any challenges you face when disseminating your work to diverse audiences.	There are limitations to including partners with dissemination experience and rewarding effort and time spent on non-academic dissemination activities	1	9%
	Lacking access to findings due to cost, access to libraries or not knowing where the information is located	1	9%
	Unsure if social media is effective for disseminating work, and writing research briefs can feel like a waste of time	1	9%
	Unsure or did not respond	8	73%
What, if anything, would support you in broadly disseminating your work to diverse audiences?	Webinars and workshops on how to disseminate information effectively and garner support (eg, effort) for doing so on specific projects	2	18%
	Additional staff support and funding to support travel/materials	1	9%
	A central source with easily accessible information	1	9%
	Interaction with LinkedIn posts and introductions to journalists	1	9%
	Unsure or did not respond	6	55%

Continued

Table 1 Continued

Question	Answers		
Are you interested in attending a CHAI Dissemination SIG meeting or becoming a member?	Yes	3	27%
	Not at this time	4	36%
	Did not respond	4	36%
CHAI, Centre for Healthy Ageing and Innovation; SIG, Special Interest Group .			

were identified, spanning national and regional conferences, professional associations and organisational meetings. While some are traditional academic conferences, many are practitioner- and policy-oriented, engaging care professionals and policymakers who directly influence service delivery, long-term care and ageing policy. These dissemination opportunities include a mix of in-person and virtual formats, with some offering recurring webinars to reach broader audiences.

We then shared the inventory with CHAI SIG leaders and community members for additional input. Both the CHAI Community Advisory Board and Minnesota Leadership Council on Ageing (MNLCOA) were consulted to obtain insight on non-academic meetings commonly attended by community members. The CHAI Community Advisory Board consists of 19 members from diverse backgrounds who work in close collaboration with CHAI members and leadership to share their lived experience and knowledge to enhance the impact of CHAI members' work on communities.²⁸ MNLCOA is a non-profit organisation representing 35 organisations that serve older adults and advocate for policy and systems change.

The spreadsheet may be edited by any CHAI members, and the Dissemination SIG will update at least annually. Our long-term goal is to create and leverage infrastructure within CHAI to create channels for patient and public involvement (also known as patient and public engagement)²⁹ and build on community participatory principles^{30 31} to capture breadth and depth of feedback on study or centre-specific dissemination modalities, messages, channels and impact.

CONCLUSIONS

CHAI executive and SIG leadership recognised the immediate value of our three Dissemination SIG deliverables in enhancing the reach and impact of our community's ageing research. We believe our Dissemination SIG and its deliverables can serve as a model for advancing and supporting dissemination within other research centres, regardless of content and focus areas. However, achieving equitable and impactful dissemination requires further effort. Beyond promoting broader dissemination of research findings, our future work will emphasise knowledge translation—optimising research messaging to meet end-user needs and facilitate implementation. Additionally, future dissemination initiatives should extend beyond our centre, focusing on restructuring academic and research incentives³² while developing infrastructure

to assess the reach and impact of dissemination efforts on the adoption of research findings.

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