

CIHR Knowledge Mobilization Framework and Action Plan

Mobilizing Research for Better Health

Executive Summary

Canada faces many health challenges and our health care systems urgently need solutions. CIHR recognizes our critical role in informing these solutions – not just by funding health research, but also by ensuring research is prioritized and informed by a diversity of perspectives, and that findings are accessible and shared in tailored ways to optimize impact.

For this reason, CIHR's [2021-2031 Strategic Plan](#) includes a commitment to better integrate evidence into health decisions by advancing the science and practice of knowledge mobilization (KM). CIHR envisions a future where discoveries in health research are a driving force for transformation in health care, public policy and personal well-being. In this future, the needs of patients, people with lived and living experience, communities and health care systems shape and are reflected in health research and associated products; the uptake, scale and spread of evidence are ingrained in the fabric of Canadian institutions; and Canadian research is at the forefront of international KM best practices.ⁱ

To implement this commitment, CIHR has developed a new KM Framework and Action Plan to guide CIHR's KM activities over the course of the Strategic Plan. An emphasis on KM is integral to CIHR's work to champion inclusive research excellence, foster learning health systems, and ultimately increase the relevance and impact of research to improve the health of people living in Canada and around the world, and the sustainability of our health care systems.

The KM Framework and Action Plan builds on CIHR's two decades of experience leading and funding the advancement of knowledge translation (KT) science and practice. Since our inaugural KT strategy in 2004, CIHR has helped define, refine and build associated capacity in Canada. We have launched funding programs, embedded related requirements into our initiatives, and experienced ongoing success with our knowledge brokering activities and events. CIHR's thirteen Institutes have been committed partners in this process and have championed important and innovative initiatives for moving research into action. One of CIHR's largest ongoing investments in this area is the Strategy for Patient-Oriented Research (SPOR), which has brought scientific discoveries to the bedside and produced information that decision-makersⁱⁱ need to improve care. The new KM Framework and Action Plan leverages the expertise gained from these experiences, while also embedding learnings from our work to promote equity, diversity and inclusion within the health research funding system.

The KM Framework outlines CIHR's new approach to KM, which emphasizes the importance of setting priorities and co-producing research with diverse knowledge users and holders, and of valuing broadened concepts of knowledge. In line with CIHR's inclusive [definition of research excellence](#), this approach includes ensuring that considerations for equity, diversity, inclusion, anti-racism, anti-ableism and Indigenous rights are meaningfully integrated within the science and practice of KM.

The **KM Framework** comprises four streams of work, focused on addressing pressing KM challenges and opportunities within the health research landscape:

- **Build:** Strengthen capacity and build a culture that promotes and sustains KM
- **Transform:** Address structural and systemic barriers to KM and promote systems change
- **Fund:** Play a leadership role to fund and advance the science and practice of KM
- **Learn:** Advance CIHR's internal KM measurement, monitoring and evaluation as part of being a learning health research system

An associated **Action Plan** outlines the activities CIHR will take within each stream to support a consistent and coherent integration of KM across the agency's programs, policies and processes. The Action Plan reflects the most pressing priorities we heard from the research community during engagements, while transparently indicating which activities will proceed in the short- and medium-term and which are dependent on additional resources.

CIHR is excited to implement a modernized approach to KM. Working alongside the research community and our valued partners, our goal is to position health research in Canada to be more accessible, useful and beneficial to people and communities – ultimately bridging research into positive impact and maximizing the return on research investments.

Introduction

KM for Better Health and Health Systems

As the Government of Canada's health research funding agency, the Canadian Institutes of Health Research (CIHR) has a mandate to move knowledge into policy and practice for the benefit of people in Canada.

CIHR's mandate includes not only the creation of new knowledge, but also its mobilization into improved health and health systems for Canadians. Since its inception, CIHR has helped shape the field of knowledge mobilization (KM) and bridge the knowledge-to-action gap using the full breadth of available levers. Along this journey, we have seen significant advances in key areas of KM such as implementation science, integrated knowledge translation, embedded research and learning health systems.

Despite the Government of Canada's investments in health-related research and KM, research findings often remain inaccessible or underutilized by [knowledge users](#), including patients, people with lived and living experience, communities and decision-makers. In the context of post-pandemic recovery and Canadian health system challenges, there is a pressing need to enable the rapid dissemination of knowledge and mobilize the implementation of evidence-informed recommendations into health systems. In addition, recognition of health inequities across Canada, as well as discrimination within the health research and healthcare systems, has highlighted the need to support research that is driven by the needs of communities and founded on respectful, authentic and inclusive partnerships between diverse actors who produce, use and are affected by health research.¹

To help address these gaps and ensure that people living in Canada reap the full benefit of health research led by our country, CIHR's 2021-2031 Strategic Plan includes a priority focused on integrating evidence in health decisions. In informing the delivery on this commitment, CIHR commissioned a comprehensive environmental scanⁱⁱⁱ and subsequently undertook extensive pan-Canadian and international engagements with diverse groups of researchers, KM-related experts, decision-makers, health research funders, First Nation, Inuit and Métis researchers and organizations, and patient and community groups.

These scanning and engagement activities resulted in the identification of the following key KM-related challenges and gaps:

- Lack of KM capacity across diverse contributors to research
- Systemic barriers and lack of incentives to advance KM, including:
 - Lack of incentives and enablers for research to be co-produced with knowledge users and knowledge holders, reducing its relevance and therefore likelihood of uptake or use
 - Limited consideration of equity, diversity, inclusion, anti-racism, anti-ableism, intersectionality and Indigenous ways of knowing and doing
 - Underdeveloped and uncoordinated evidence support infrastructure, including priority setting, knowledge brokering, data analytics and evidence synthesis activities, and the lack of an equity lens across these products and services
- Lack of recurring, predictable KM-specific funding opportunities
- Lack of indicators and processes to evaluate impacts of KM and KM funding investments

These insights were used to inform the development of a new CIHR definition of KM, as well as a new CIHR KM Framework and Action Plan. This Framework and Action Plan builds on the success of knowledge translation (KT) activities led and supported by CIHR over the past twenty years, while transitioning the agency towards a modernized approach and an enhanced commitment to moving evidence into use.

Insert Infographic on Levers of Influence and Control

From Translation to Mobilization

CIHR's Strategic Plan marks a transition in the agency's terminology, with the agency shifting from using 'knowledge translation (KT)' to 'knowledge mobilization (KM)'. CIHR's definition of KM retains key elements of KT, while adding an action-oriented emphasis and an enhanced focus on diverse knowledge users, knowledge holders and concepts of knowledge.

Consideration of equity, diversity, inclusion, anti-racism, anti-ableism and Indigenous rights are central to CIHR's approach to both the science and practice of KM.

Knowledge Mobilization at CIHR

KM is the process of moving research into practice, policy and the public sphere, with the goal of maximizing its uptake and benefits for society.

For CIHR, KM means that health research is collaboratively produced and used in order to improve health (of people living in Canada and around the world) and our Canadian health care systems – ultimately bridging insights into positive impact and return on research investments.

The practice of KM encompasses a wide range of approaches that can be applied at different stages of the research process. Where relevant, key components of KM include:

- Priority-setting and co-production of research with knowledge users and knowledge holders
- Developing and using timely evidence syntheses for decision-making
- Tailoring the dissemination and communication of research findings
- Applying high-quality evidence to shape health policy, health services and future research

KM practices should be intentional and context-specific, and must be founded on respectful, authentic and inclusive relationships between those who produce, use and are affected by health research. CIHR's approach to KM prioritizes equity; encourages KM *for, with* and *by* diverse communities; and embraces varied ways of knowing and doing.

As a learning health research organization, CIHR also supports the science of KM which includes dissemination and implementation science, evaluation research, and the scale and spread of evidence-informed policies for health system improvements. KM science is critical for advancing the understanding of how the application of knowledge differs across contexts and populations.

Insert Infographic – Key milestones in the evolution of Knowledge Mobilization at CIHR

CIHR KM Framework and Action Plan

The CIHR KM Framework and Action Plan outlines an agency-wide approach toward leading and supporting KM. The overarching aim is to maximize the relevance and positive impact of health research findings, thereby optimizing return on research funding investments. Thus, it has been purposefully designed to address the key KM challenges and gaps identified above via four streams of work:

- **Build:** Strengthen capacity and build a culture that promotes and sustains KM
- **Transform:** Address structural and systemic barriers to KM and promote systems change
- **Fund:** Play a leadership role to fund and advance the science and practice of KM
- **Learn:** Advance CIHR's internal KM measurement, monitoring and evaluation as part of a learning health research system

The KM Framework and Action Plan applies to all four pillars of health research supported by CIHR – biomedical; clinical; health services; and social, cultural, environmental and population health research – while appreciating that the nature of KM activities may differ across these areas. In addition, commercialization and collaboration with industry are recognized as valued types of KM; however, specific actions within these areas are addressed in other CIHR endeavours and are therefore not covered here. CIHR is committed to working with diverse actors across the health research ecosystem to deliver KM activities within the Framework's four streams.

Insert infographic of 4 Streams

Build

Build a culture that strengthens capacity in both the science and practice of KM across the health research ecosystem

Objective

Strengthen capacity and build a culture that promotes and sustains KM

Background

Capacity for engaging in KM continues to be a key gap across the health research ecosystem. Therefore, researchers, knowledge users, trainees, and peer reviewers need accessible and tailored KM resources. Resources should cover fundamental KM concepts and practices, as well as provide practical guidance in areas such as effective communication strategies and fostering collaborative research partnerships.

This gap will be addressed in partnership with other national and international funders, knowledge brokers and KM experts, many of whom have already created KM training products, activities and/or resource compilations.

As such, CIHR will leverage and promote existing KM resources developed by leaders in the field and develop new resources to fill priority learning gaps and highlight exemplars of strong KM science and practice. In addition, CIHR will continue to collaborate with and learn from other funders who have a shared interest in building capacity for KM science and equity-oriented co-produced research (as outlined in the 'learn' stream).

Action Plan

Goal	Strategy	Action	Term
Build KM capacity and culture both internally and externally	Develop new, and amplify existing, training products for researchers, knowledge users, peer reviewers and CIHR staff to build capacity across a range of KM practices	Develop a casebook of successful KM strategies across Institutes and Initiatives from all four pillars of health research to illustrate how KM practice can be applied in different research contexts and help researchers understand a broad range of KM methods	Short (1 - 2 years)
		Develop a toolkit containing new and existing KM training materials , tailored for different levels of expertise, to build capacity for a broad range of effective KM practices, including research co-production and how to be effective science communicators	Short (1 - 2 years) and ongoing
		Develop guidance for and train peer reviewers to critically assess the strength of KM components in grant applications to elevate the importance of KM practices and outputs; explore the identification of KM experts on peer review committees, as part of the implementation of research excellence champions	Short (1 - 2 years)
		Develop plain language resources for knowledge users (including decision-makers and community members) to raise awareness of research processes, considerations for evidence use, and how they can help shape and lead research	Dependent on sustained resources

Transform

Remove barriers to empower the meaningful engagement of patients, people with lived and living experience, communities and health care organizations throughout the research process

Objective

Address structural and systemic barriers to KM and promote systems change

Background

During engagements, we heard that organizational and systemic barriers to KM persist throughout the Canadian health research and broader health care ecosystem. Examples include a lack of incentives and recognition for diverse KM activities, power imbalances associated with who can hold CIHR funding, and issues of research being underutilized when it is not designed to address the priorities of those positioned to use or act on findings.

We learned there is a lack of systematic consideration of equity, diversity, inclusion, anti-racism and anti-ableism throughout the KM we support, and that better enablers are required to support authentic and meaningful collaboration with equity-deserving communities.

Engagements with First Nations, Métis and Inuit researchers and organizations emphasized that KM terminology and approaches often do not resonate with Indigenous ways of knowing and doing. More avenues are needed to ensure research is driven by the needs of communities and resulting findings are shared using culturally safe and meaningful ways.

We have also seen – as was highlighted during the COVID-19 pandemic – an urgent need to review our endeavours to inform policy, practice and personal decisions. This need includes exploring ways to enhance coordination of our evidence support investments; modernize CIHR's flagship knowledge brokering program; and expand opportunities for embedded trainees and researchers poised to support the real-time integration of evidence within organizational decision-making.

As such, through the Transform stream, CIHR will focus on removing barriers and adding enablers for KM and evidence integration, including ensuring that the KM we fund and lead is advanced through meaningful collaboration between diverse researchers, knowledge users and knowledge holders.

Action Plan

Goal	Strategy	Action	Term
Address systemic barriers and incentivize researchers, knowledge users and knowledge holders to engage in KM	Promote and value a broad range of KM-related practices and outputs as part of inclusive research excellence	Require peer reviewers to critically appraise KM components of grant applications, including by consistently applying enhanced scoring criteria and associated guidelines, to elevate the importance of KM practices and outputs	Short (1 - 2 years)
		Require and enable effective and equitable sharing of research findings in alignment with the CIHR Accessibility Plan and the CIHR Policy Statement on Official Languages	Short (1 - 2 years)
		Enhance open science policies (open access and research data management) and enabling practices	Short (1 - 2 years)
		Enable and require KM practice in all CIHR funding opportunities with consistent approaches/guidelines for KM practices (e.g., co-production, priority-setting, evidence synthesis) to incentivize and clarify KM requirements	Medium (3 - 5 years)
Reduce structural barriers to embedded research and co-production		Revise CIHR's funding policies to broaden who can apply for and administer funds (e.g., knowledge users, Indigenous health researchers, health system organizations) to enable equitable, diverse and inclusive research leadership	Short (1 - 2 years)
		Review internal processes and policies to remove barriers to knowledge user participation	Medium (3 - 5 years)
Promote and prioritize equity in research co-production		Require researchers to share research findings with study participants in culturally safe and meaningful ways and enable the fostering of relationships between researchers and communities who use and are affected by research	Short to Medium (1 - 5 years)

Support evidence-informed health decision-making	Coordinate CIHR investments in evidence support products and services	<p>Develop guidance and requirements to promote equity between researchers and knowledge users during co-production (e.g., the use of co-production frameworks, shared leadership, and consensus-based decision-making throughout the research process)</p>	<p>Medium (3 - 5 years)</p>
		<p>Collaborate with partners in exploring the development of a more cohesive pan-Canadian evidence support system to address the evidence needs of patients, people with lived and living experience, communities and decision-makers</p>	<p>Short (1-2 years)</p>
		<p>Coordinate CIHR investments in high-quality, timely and responsive evidence support products and platforms</p>	<p>Short to medium (1- 5 years)</p>
	Strengthen alignment between research and the evidence needs of health decision-makers	<p>Modernize CIHR’s flagship knowledge brokering program, Best Brains Exchanges, to incorporate more robust evidence supports and inclusive ways of knowing and doing</p>	<p>Short (1 - 2 years)</p>
	<p>Provide enhanced support for embedded research programs, such as the Health System Impact Fellowship, to strengthen the link between research and policy priorities</p>	<p>Medium (3 - 5 years)</p>	

Fund

Fund the science and practice of KM through new and enhanced programs to improve the impact of health research

Objective

Play a leadership role to fund and advance the science and practice of KM

Background

During engagements, we heard there are insufficient financial investments in KM and a heavy reliance for KM requirements to be nested within broader investments in specific priority areas. This reliance has resulted in a lack of dedicated and consistent funding for KM science and practice, and in turn has made it difficult for researchers to build KM-specific career pathways.

From the perspective of co-produced research, we heard about the lack of support to cover the time and resources required to bring together researchers, knowledge users and knowledge holders to set research priorities and co-design research projects.

The limited funding for KM science has also impacted potential for research and career advancements in the field of KM, including understanding of best practices for the real-world application of health research findings.

Through the Fund stream, CIHR will therefore invest dedicated funds to support co-produced research that responds to pressing evidence needs, furthers the field of KM science, and informs the scale and spread of research findings across different contexts and populations.

Action Plan

Goal	Strategy	Action	Term
Fund the practice of KM	Provide dedicated funding to foster co-produced research	Fund a new partnership catalyst program for researchers, knowledge brokers, knowledge users and knowledge holders to establish and foster partnerships, and to co-develop research priorities and questions	Short (1 - 2 years)
	Establish a dedicated KM funding program that responds to decision-maker evidence needs	Fund a stand-alone modernized KM program for incenting co-produced research that responds to priority policy and practice evidence needs	Dependent on sustained resources
Fund the science of KM	Establish dedicated funding programs for KM science	Review how KM Science is supported within investigator-initiated program ('Project Grant') competitions to ensure consistent and dedicated funding for KM science, including dissemination and implementation science and evaluation research	Short (1 - 2 years)
		Fund and coordinate KM science activities across Canada to better support the dissemination, implementation and evaluation of evidence within health practice	Ongoing

Learn

Act as a learning health research organization by continuously evaluating and evolving our approach to KM

Objective

Advance CIHR's internal KM measurement, monitoring and evaluation as part of a learning health research system

Background

Historically, the measurement and evaluation of KM interventions have been inconsistently prioritized within the research ecosystem – including amongst funders. In recognition of this gap, we are committing to measure, monitor and evaluate the implementation of the KM Framework and Action Plan, and to adapt it as necessary. We also recognize the importance of modernizing our approach for capturing the impact of the KM we support and lead to better demonstrate the benefit of health research for Canadians.

Measuring the impact of KM is not easy. CIHR is mindful of the burden that more rigorous reporting requirements can have on researchers and knowledge users. At the same time, we recognize the importance of capturing the impact our investments in KM, so that we can demonstrate the associated return and value-add of this component of our mandate and make improvements to our approach to KM as needed.

Therefore, the Learn stream will see CIHR taking a learning approach to transparently measure and report on our Action Plan progress and the impact of the KM activities we fund and lead. In addition, CIHR will continue to provide leadership through national and international partnerships with other funders similarly committed to learning more about the practice of KM funding (or research on research use) and explore interest in collaborating on KM training tools and/or opportunities as part of our learning approach.

Action Plan

Goal	Strategy	Action	Term
Advance CIHR's internal KM measurement, monitoring and evaluation, as part of being a learning health research system	Commit to taking a learning approach in the implementation of the KM Framework and Action Plan	Develop a performance measurement framework that evaluates the impact of the CIHR KM Framework and Action Plan	Short (1 - 2 years)
		Revise CIHR's reporting requirements in alignment with indicators within the performance measurement framework to improve accountability in KM	Medium (3 - 5 years)
		Review the KM Framework and associated activities within the Action Plan and adapt as needed, to ensure our approach is informed by continuous learning	Medium (3 - 5 years)
	Re-establish CIHR's KM leadership in the international health research ecosystem, while employing a learning approach	Engage with funders and other research ecosystem actors, including boundary spanning organizations in Canada and internationally , to exchange lessons learned and advance KM best practices	Ongoing
		Coordinate with domestic and international partners to leverage collective KM capacity and reduce duplication in KM efforts	Ongoing

Conclusion & Acknowledgements

The CIHR KM Framework and Action Plan marks a significant shift in how the agency supports the mobilization of evidence into policy and practice, taking a more action-oriented and inclusive approach.

We are excited to initiate the series of KM actions outlined in this Framework over the coming years, in continued partnership with others across the health research landscape. We commit to transparently sharing updates regarding the steps we are taking and progress towards maximizing the uptake and benefits of the research we fund.

We would like to acknowledge the many groups and individuals across Canada and internationally who meaningfully contributed to the development of the CIHR KM Framework and Action Plan. Over two years, more than 200 people from the health research community (including First Nations, Métis, and Inuit Peoples, patients, people with lived and living experience, and decision-makers) generously shared their time, expertise and experiences with us. CIHR staff across the agency also contributed their time and knowledge for the betterment of this work.

As we move forward with our enhanced commitment to KM, we welcome the opportunity to continue learning and working together to further enhance Canada's KM leadership and to build the supportive culture required for this key component of inclusive research excellence.

ⁱ Canadian Institutes of Health Research. n.d. Canadian institutes of health research strategic plan 2021–2031. [online]: Available from [cihr-irsc.gc.ca/e/documents/cihr-strategic-plan-2021-2031-en.pdf](https://www.cihr-irsc.gc.ca/e/documents/cihr-strategic-plan-2021-2031-en.pdf)

ⁱⁱ KM supports evidence-informed decision-making for policy, health care practice and personal well-being. In this document the term 'decision-maker' is used to capture policy-makers and practitioners.

ⁱⁱⁱ Christine Fahim, Danielle Kasperavicius, Robyn Beckett, Keelia Quinn de Launay, Arthana Chandraraj, Amanda Crupi, Suvabna Theivendrapillai, and Sharon E. Straus. 2023. Funding change: An environmental scan of research funders' knowledge translation strategic plans and initiatives across 10 high-income countries/regions. *FACETS*. 8(): 1-26. <https://doi.org/10.1139/facets-2022-0124>