

# Building the Concept of Research Impact Literacy

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**Author post-print (accepted) deposited by Coventry University's Repository**

**Original citation & hyperlink:**

Bayley, J & Phipps, D 2017, 'Building the Concept of Research Impact Literacy' *Evidence and Policy*, vol (in press), pp. (in press)  
<https://dx.doi.org/10.1332/174426417X15034894876108>

DOI 10.1332/174426417X15034894876108

ISSN 1744-2648

ESSN 1744-2656

Publisher: Policy Press

**This is a post-peer-review, pre-copy edited version of an article published in Evidence and Policy. The definitive publisher-authenticated version Bayley, J & Phipps, D 2017, 'Building the Concept of Research Impact Literacy' Evidence and Policy, vol (in press), pp. (in press) is available online at:**

**<https://dx.doi.org/10.1332/174426417X15034894876108>**

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1 **Building the Concept of Research Impact Literacy**

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12

13 **Abstract**

14 Impact is an increasingly significant part of academia internationally both in centralised assessment  
15 processes (eg. UK) and funder drives towards knowledge mobilisation (eg. Canada) Narrowly focused  
16 assessment or institutional ranking approaches can obscure the benefits of brokering research into  
17 practice. It is vital that academics, non-academic stakeholders and research managers alike fully  
18 comprehend how to generate and demonstrate impact. Derived directly from UK and Canadian  
19 experiences of supporting impact and knowledge mobilisation, this paper introduces the original concept  
20 of impact literacy. Implications of poor impact literacy for the successful mobilisation of research are  
21 discussed alongside requirements for associated skill development.

22

23

24 **Background and previous work**

25 Research impact is defined by the Higher Education Funding Council of England (HEFCE) as “*an effect*  
26 *on, change or benefit to the economy, society, culture, public policy or services, health, the environment*  
27 *or quality of life, beyond academia*” (HEFCE, 2012 pg 26). Fundamentally impact is the (provable) real  
28 world benefits derived from academic research and research expertise more generally. Creating and  
29 reporting on the impacts of research beyond the academy is now a regular feature of academic research.  
30 However, the underlying knowledge and skills to achieve impact are arguably underexplored. More  
31 specifically as yet there is no conceptual framework for the nature of the comprehension necessary to  
32 underpin impact practice.

33  
34 Impact is a function of academic knowledge creation, its dissemination to and uptake by non-academic  
35 partners who then use the research evidence to inform implementation of new products (by industry),  
36 policies (by government), services (by community agencies) and creative works (by arts based  
37 organizations) to improve the lives of end beneficiaries (Phipps, Cummings, Pepler, Craig and Cardinal,  
38 2016; Morton, 2015). Knowledge brokering, the active facilitation of the engagement of research and  
39 researchers with end users and non-academic research partners, can support these pathways to impact  
40 (Ward, House, Hamer, 2009; Dagenais, Laurendeau and Briand-Lamarche, 2015) although the  
41 effectiveness of knowledge brokering has yet to be established through rigorous evaluation (Bornbaum,  
42 Kornas, Peirson and Rosella, 2015; Dobbins et al 2013).

43

#### 44 **International impact differences: reflections from UK and Canada**

45 Impact – and the associated pursuit of pathways to impact – is becoming progressively weaved into the  
46 landscape of academic research internationally. In recent years, research impact in the UK has been most  
47 substantially driven by the centralized Research Excellence Framework (REF, see [www.ref.ac.uk](http://www.ref.ac.uk) for  
48 details and results). Newly introduced to the 2014 assessment process, case studies outlining the  
49 demonstrable changes beyond the academy ensuing from academic research were worth 20% of the  
50 overall mark (See HEFCE, 2011 for determination of weighting) and thus contributed significantly to the

51 funding universities subsequently received from the government. Definitions of impact for REF are  
52 narrow, discounting benefits to the academy and those not arising directly from demonstrably ‘excellent’  
53 research or from the activities of researchers and graduate students beyond their established bodies of  
54 evidence. Impact is also a vital part of the competitive funding stream of the UK’s dual funding research  
55 system, with Research Council UK (RCUK) grants requiring strong ‘Pathways to impact’ statements on  
56 the generation of benefits from discrete research studies. RCUK definitions of impact mirror - but are  
57 slightly broader than - those for REF, and include benefits within the scientific community. As RCUK  
58 specify:

59

60 *A clearly thought through and acceptable Pathways to Impact statement is an essential*  
61 *component of research proposals and a condition of funding. Grants will not be allowed to start*  
62 *until a clearly thought through and acceptable Pathways to Impact statement is received.*

63 *Research Councils have agreed that if an application is considered excellent for research in*  
64 *terms of the proposed research but has a poor Pathways to Impact statement, funding will be*  
65 *withheld until a clearly thought through and acceptable Pathways to Impact statement has been*  
66 *received (<http://www.rcuk.ac.uk/innovation/impact/>).*

67

68

69 In contrast, Canada does not have a centralized system of research impact assessment. It is instead driven  
70 primarily by funders’ requirements to plan for and report on the impacts of research. Most Canadian  
71 academic research funding agencies require a strategy for knowledge mobilisation (in the social sciences  
72 and humanities; <http://www.sshrc-crsh.gc.ca>), knowledge translation (in health; [http://www.nserc-](http://www.nserc-crsng.gc.ca/)  
73 [crsng.gc.ca/](http://www.nserc-crsng.gc.ca/)) and commercialization (in natural sciences and engineering; <http://www.nserc-crsng.gc.ca/>).  
74 Researchers are required to report on impacts of research in end of grant reporting to funding agencies (a  
75 process similar to RCUK’s ‘Pathways to Impact’ and reporting to the repository Researchfish), but this is  
76 subject only to a staff review of the end of grant report. This is not subject to a national peer reviewed

77 assessment process. Thus whilst Canada and the UK align on strategizing impact from the funding stage,  
78 the prominence vs. lack of centralised impact reporting in the UK and Canada respectively drive differing  
79 paradigms across academia. For Canada, support for the process of transferring, exchanging and  
80 mobilising knowledge is key; for the UK, any such processes, whether supported or not, must result in  
81 demonstrable benefits if they are to be valued. The (dis)proportionate focus on ‘what’ (UK) versus ‘how’  
82 (Canada) unintentionally masks the vital link between the two.

83

84 The emerging focus on impact has created an agenda with operational implications for researchers,  
85 institutions, funders and governments. Impacts do not (usually) occur serendipitously. Since the passage  
86 of the US Bayh Dole Act in 1981 commercialization and technology transfer have become well  
87 established practices globally. Focused on patenting, licensing and entrepreneurship these ubiquitous  
88 practices support the impacts of research mediated through commercial transactions. More recently a  
89 focus on the non-commercial impacts of research on public policy, professional practice and social  
90 services has been receiving increasing attention both as a scholarly discipline and as an increasingly  
91 professionalized practice (see Nutley, 2007). Across the sector there has been a shift from technology  
92 transfer as a primary route, to technology transfer as a component of more comprehensive and less  
93 unidirectional means of achieving impacts. With the arrival of the formal impact agenda, non  
94 commercially-focused researchers faced the challenge not only of generating and articulating benefits  
95 from their research, but also doing so by drawing on models previously largely applied to profit-based  
96 effects.

97

98 Effectively creating and articulating research impacts requires researchers to develop bespoke pathways  
99 grounded in the nature of the academic work itself as well as the corresponding impact targets and the  
100 non-academic organisations that are critically important in facilitating impact (Morton, 2015). Again  
101 RCUK guidance emphasises this need for tailored strategies over generic pathways

102 (<http://www.rcuk.ac.uk/innovation/impacts/>):

103

104 “A clearly thought through and acceptable Pathways to Impact statement should:

- 105 • be project-specific and not generalised;
- 106 • be flexible and focus on potential outcomes;”

107

108 Further evidence is provided by analysis of the 2014 REF results (King’s College London and Digital  
109 Science, 2015) which confirms there is no singular pathway to impact. Of the 6,647 submitted impact  
110 cases, 3,709 unique impact pathways were identified from all academic disciplines working with non-  
111 academic partners across the public, private and non-profit sectors. Such path diversity both precludes  
112 prescriptive approaches to impact and underscores the need for tailored approaches.

113

#### 114 **Research Impact Practitioner roles**

115 The need to comprehend diverse aspects of research impact is not limited to those working in formal  
116 impact roles. Unless an academic also holds a practitioner role through which research can be directly  
117 implemented (e.g. a clinician-scientist, a school teacher undertaking a PhD in education or a social work  
118 faculty member who maintains a practice), s/he cannot create impact independently. Multiple agents,  
119 especially implementation partners, are needed to successfully negotiate the translation of research into  
120 benefits (Morton, 2015). For the purposes of this paper we will therefore use the umbrella term ‘*research*  
121 *impact practitioners*’ to reflect all those who undertake work individually or in teams helping to support  
122 the translation of research to impacts. This includes but is not restricted to academic researchers, impact  
123 officers, knowledge brokers, public engagement professionals, research support staff and all those whose  
124 work aligns to realising non-academic benefits of research.

125

#### 126 **Impact Literacy**

127 With this need for comprehension, we here present the new concept of *impact literacy*. This is derived  
128 from both authors’ extensive experience of supporting impact/knowledge mobilisation and draws from

129 broader literature on health literacy (the ability to comprehend information to engage in empowered  
130 decision making about one's health). Reflecting the UK and Canadian experiences, along with the  
131 implications for research impact practitioners, impact literacy is conceptualised as the intersection of three  
132 elements of research impact:

133

134 1. The identification, assessment, evidencing and articulation of impact endpoints (“what”)

135 2. The practices that create impact (“how”)

136 3. The successful integration of these by research impact practitioners (“who”)

137

### 138 **1. “What”**

139 Much of the practice of research impact assessment (“what”) can trace its roots to the Payback Model

140 (Buxton and Hanney, 1996) which articulated five impacts arising from health research: knowledge;

141 research benefits; political and administrative benefits; health sector benefits; and broader economic

142 benefits with the latter three representing impacts beyond the academy. The Payback model has been used

143 for example by RAND to assess the impacts of the research funded by the Arthritis Research Campaign

144 (UK). This required developing and populating a logic model and then constructing narratives to

145 articulate the impacts of arthritis research (Hanney, Grant, Wooding, and Buxton, 2004). Impact models

146 such as Payback are underpinned by a linear (albeit iterative) logic which leads sequentially from research

147 to ultimate impact. There is thus an underlying assumption that impact can be identified, measured and

148 reported; this practice is the antecedent of the REF process in the UK

149

### 150 **2. “How”**

151 The practice of research impact assessment (the “what”) is inextricably linked to the methods and means

152 of creating research impact (the “how”). A review of systematic reviews of the literature on methods for

153 creating impacts of research showed that multifaceted methods are more effective than individual

154 interventions (Boaz, Baeza and Fraser, 2011). These methods for creating impacts of research fall into

155 two broad categories: 1) dissemination or transfer methods; and, 2) co-production or engaged methods.  
156 The Canadian Institutes of Health Research describes these as “end of grant” and “integrated”  
157 respectively (CIHR, 2012) indicating that practices can occur after the research has concluded or  
158 throughout the research process including upstream to inform the research agenda using stakeholder  
159 engagement as has been described in disability research (Camden et al, 2014). There is general agreement  
160 that integrated methods are more effective than end of grant methods (Gagnon, 2011; Ross, Lavis,  
161 Rodriguez, Woodside and Denis, 2003). Indeed, Van de Ven and Johnson (2006) and more recently  
162 Bowen and Graham (2013) have framed the knowledge to action gap as a problem not of knowledge  
163 transfer (i.e. end of grant dissemination) but of knowledge production (i.e. integrated or engaged  
164 scholarship). Drawing on evaluation science if impact is what one is seeking to achieve (the dependent  
165 variable) then knowledge mobilisation/exchange/translation is what one changes to influence impact (the  
166 independent variable). Measuring research impact is arguably measuring the effectiveness of knowledge  
167 mobilisation plans and subsequent activities that connect the production of research outputs to their  
168 impacts beyond the academy.

169  
170 Canadian organizations have also developed impact planning (and hence impact assessment) frameworks.  
171 The Canadian Academy of Health Sciences (CAHS, 2009) framework traces the progress from research  
172 outputs to improved health and wellbeing and economic and social prosperity in a five stage logic model.  
173 The CAHS framework is being operationalized as the research impact planning and assessment  
174 framework for Canadian provincial health research funding organizations as exemplified by the Alberta  
175 Innovates Health Solutions (Graham, Chorzempa, Valentine and Magnan, 2012). Extending the CAHS  
176 framework by including a co-produced element throughout the logic model informed the *co-produced*  
177 *pathway to impact* that has been adopted as the research planning framework by large, multi-million  
178 dollar Networks of Centres of Excellence (Phipps et al, 2016).

179

180 **3. “Who”**



181 A common feature of research impact practitioner roles (“who”) is their support of activities that create  
182 and/or assess and articulate impacts of research beyond the academy. Whilst communication skills are  
183 likely integral to many of these positions, these roles are distinct from communication professionals  
184 (Barwick, Phipps, Myers, Johnny and Coriandoli, 2014). A systematic review of knowledge brokers  
185 identified 10 distinct tasks and 39 associated activities of knowledge broker practice (Bornbaum, Kornas,  
186 Peirson and Rosella, 2015); however, this diversity of skills and foci has been cited as a challenge for the  
187 planning, training and sustainability of these roles (Lightowler and Knight, 2013; Chew, Armstrong and  
188 Martin, 2013). In addition to these tasks and activities, the qualities (Phipps & Morton, 2013) of  
189 knowledge brokers and their organisational context have received attention as described by Browen and  
190 Graham, 2015. *“Recognition of the importance of organizational context has resulted in a shift from*  
191 *focusing on individuals who broker knowledge between specific individuals to the concept of knowledge*  
192 *brokering as an organizational process.”* (page S5). It is the effectiveness of these individuals (within  
193 their organizational context) in facilitating “what” and “how” collectively that leads to impact.

194

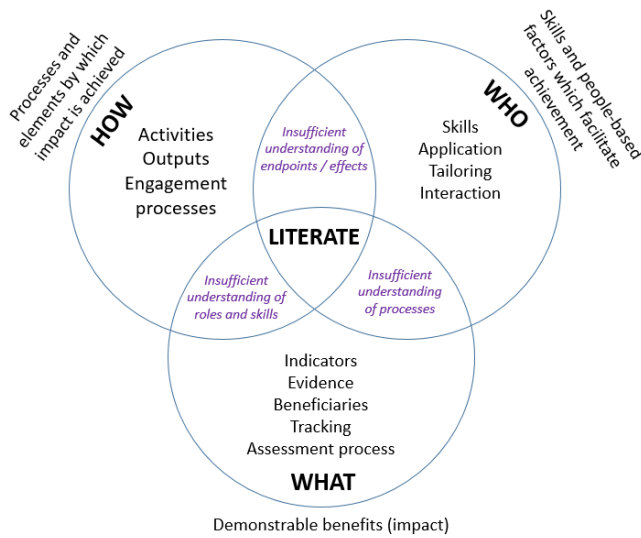
### 195 **Conceptualising Research Impact Literacy**

196 Drawing together the literature on understanding “how” to create research impact, “what” to measure and  
197 “who” supports these activities can be graphically represented (see figure 1). Comprehending the  
198 intersection of how, who and what creates impact literacy.

199

200

201 **Figure 1: The intersect of What, Who and How to create Impact Literacy**



202  
203 Impact can be pursued without being literate, but this is likely to lead to poor execution, missed  
204 opportunities, poor resource use and misaligned or underachieved targets. Only by comprehending all  
205 three elements can impact be pursued effectively, with clear implications for poor literacy where only two  
206 elements intersect:

- 207
- 208 A. HOW and WHO in the absence of WHAT leads to insufficient understanding of the ultimate
  - 209 impacts, indicators, evidence and assessment thereof.
  - 210 B. WHO and WHAT in the absence of HOW leads to insufficient understanding of the bespoke and
  - 211 nuanced processes by which impact is achieved
  - 212 C. HOW and WHAT in the absence of WHO leads to insufficient understanding of the roles and
  - 213 skills required to plan, generate, execute and assess impact and results in poorly informed and
  - 214 unsupported impact strategies.

215  
216 Drawing on earlier UK-Canada comparisons, arguably Canada’s focus on supporting impacts through  
217 knowledge mobilisation/translation (“how”) with less focus on the evidence of impact places them at risk  
218 of (A). In contrast the UK’s focus on planning pathways and reporting demonstrable effects (“what”)

219 makes (B) the more likely limitation. In countries where the impact agenda is beginning to emerge, the  
220 concept of impact literacy offers a means to consider the most effective ways to build and configure  
221 national, local and institutional approaches.

222

### 223 **Recognising impact literacy**

224 If impact literacy is the state of understanding *who* undertakes the *how* to create *what* impacts across the  
225 spectrum of research-to-impact activities, then an individual can be deemed impact literate if s/he:

- 226 1. Knows *how* to create impact; and
- 227 2. Knows *what* impact can be achieved, articulated and evidenced appropriately and
- 228 3. Understands the skills needed by research impact practitioners to effectively navigate both #1 and  
229 #2.

230

231 Extending this concept further, we can shift from a binary sense of impact literate vs. illiterate. Whereas  
232 illiteracy is the absence of at least one of the three elements, literacy itself – the intersection of all three  
233 impact elements - can range from a basic awareness through to a higher level comprehension. This  
234 proposition is reinforced by drawing on the parallels with health literacy. Guzys, Kenny, Dickson-Swift  
235 and Threlkeld (2015) identified a number of characteristics of health literacy which align with  
236 characteristics of integrated methods of creating research impact. These include the recognition that  
237 (health) literacy is complex, multifactorial and context dependent. Achieving (health) literacy requires  
238 involving end users in developing (health) literacy frameworks to distribute power between (health)  
239 providers and (health) consumers. Extending this parallel further, Chinn (2011) describes three  
240 progressive levels of health literacy:

241

242 **Basic/Functional literacy:** basic reading, writing and literacy skills, as well as the knowledge of  
243 health conditions and health systems which are the desired outcomes of traditional health  
244 education initiatives;

245

246

**Communicative/interactive literacy:** communicative and social skills that can be used to derive meaning from different forms of communication, and to apply new information to changing circumstances;

249

250

**Critical literacy:** higher level cognitive skills and social skills required to critically analyse information, and to use this information to exert greater control over life events and situations through individual and collective action to address the social, economic and environmental determinants of health.” (page 61).

254

255

Research impact practitioners may build their level of literacy through the study of evidence derived from peer review literature, practice based guidelines, grey literature and tacit knowledge of practitioners. This evidence base reflects a continuum of knowledge from anecdotal to rigorously proven. As such, practitioners must develop the skills needed to discern the strongest and most appropriate methods. We further therefore propose a similarly tiered approach to impact literacy, wherein basic, intermediate and advanced literacy levels underpin progressive levels of integration and critique of available evidence (see table 1)

262

**Table 1: Three levels of impact literacy**

263

Literacy level	Integration and critique of evidence	Description of level
Basic	Aware	Aware of the evidence, understands there is a body of expertise, knowledge and tools which can underpin practice but demonstrates insufficient understanding on how to draw on these in practice. Likely to be able to comprehend at a project (small scale) level
Intermediate	Engaged	Informed by and engaged with the evidence, understands there is a body of expertise, knowledge and tools which can underpin practice and can draw on these prescriptively in practice. Likely to be able to comprehend at a programme (higher order) level
Advanced	Critical	Critical of the evidence, understands there is a body of expertise, knowledge and tools which can underpin practice and is able to (i) synthesize, (ii) critique and (iii) add /extend the evidence base– Likely to be able to comprehend at a strategic and/or systems level

264 It is important to note that neither literacy nor critical assessment skills unequivocally match job roles or  
265 seniority. Whilst there is a plausible expectation that literacy is higher in those holding more strategic  
266 roles, the complexity of impact and detail-orientation in operational roles may provide differential profiles  
267 within institutional hierarchies.

268

## 269 **Discussion**

270 This paper presents the concept of impact literacy as a schema which aids the understanding of impact  
271 and associated processes. The intersection of “what”, “who” and “how” offers a simple description of the  
272 elements needed for research impact, and this schema may help inform training and development  
273 approaches for research impact practitioners.

274

275 A model is a necessarily simplified description of complex processes such as those in implementation  
276 science where research is informing practice or policy (Nilsen, 2015). We recognise that the simplicity of  
277 the presented model risks masking the breadth of research impact and knowledge mobilisation processes  
278 required for effective research impact. Undoubtedly attempting to singularly configure ‘literacy’ is open  
279 to criticism, particularly from those whose work does not align with all three elements or for those  
280 research impact practitioners for whom increasing comprehension is challenged by lack of training and  
281 mentorship. Impact can take many years to achieve (Hughes and Martin, 2012) and with extensive focus  
282 on assessment there can be perverse incentives to pursue short term measurable goals ahead of pursuing  
283 meaningfully appropriate paths. Alongside ongoing debates on metrics (Wilsdon et al, 2015), there is  
284 continued need for discussions on shifting rhetoric away from linear ‘input-output’ models towards an  
285 understanding of the more iterative and engaged process of impact creation as may be derived using  
286 evidence informed tools such as Melanie Barwick’s Knowledge Translation Plan template  
287 (<http://melaniebarwick.com/training.php>) to inform the development of both co-produced research and  
288 co-produced impact. Notwithstanding criticisms and ongoing debates on impact itself, the principle of an

289 underlying literacy underscores any such discussions about the most meaningful and appropriate ways to  
290 create and assess benefits of research.

291

## 292 **Conclusions and implications**

293 Knowing how impact ‘works’ is central for guiding research impact practices and the people who support  
294 them. The literacy of research impact (i.e. knowing) is distinct from the skills and competencies (i.e.  
295 doing) of research impact practitioners. Literacy automatically extends to competence especially in the  
296 practice of research impact, but arguably any research impact practitioner should use knowledge to  
297 inform practice and practice to inform knowledge. Decoupling literacy from competence in this paper is a  
298 purposeful attempt to separately examine ‘knowing’ and ‘doing’ ahead of a necessary connection to  
299 enable impact to be achieved. Moving beyond knowing about impact (research impact literacy) to  
300 executing the practice of research impact requires an additional focus on the skills and qualities of  
301 research impact practitioners. At present therefore there is arguably a ‘know-do’ gap: literacies cannot be  
302 put into practice without developing the relative competencies, and knowing and doing are mutually  
303 reinforcing factors. This “know-do” gap is well known in impact literature (Booth, 2011), and is neatly  
304 encapsulated in Goethe’s assertion that “*knowing is not enough; we must apply. Willing is not enough; we*  
305 *must do.*” (cited in World Health Organization, 2004, page 3). Future practitioner-focused research must  
306 focus on the development of the competencies needed to maximise the translation of research into real  
307 world benefits, connected to and underscored by a critical level of impact literacy.

308

309

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