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## **Knowledge Management Through a Behavioral Economics Lens Webinar Q&A: Written responses to audience questions**

Hosted by [Knowledge SUCCESS](#)

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**With regard to choice overload & non-centralized data, has there been any concerted effort to create universal classification codes that are adopted by all practitioners (to include funders/donors) that also includes a virtual library that is monitored/managed using AI/machine learning?**

- There are sources like PubMed that provide access to peer-reviewed literature with standardized keywords, but we are not aware of any concerted efforts among donors to create a centralized source of information with universal classification codes for 'gray' literature. We are exploring in our project how we can use machine learning to help people get the information they need in a timely and efficient way. That said, we also know there is an intention-to-action gap, so even if a system with standardized codes and efficient information retrieval mechanisms are in place, it doesn't necessarily guarantee that practitioners will use the system. Applying certain behavioral economics (BE) principles, such as the use of incentives or commitment devices, can help to reduce the intention-to-action gap.

**Sometimes we don't just want people to share knowledge but also put it into practice. In your opinion, what are the barriers for people to put into practice the knowledge they already have? And how can we help in overcoming it?**

- There could be many barriers to people using knowledge and putting it into practice. In our research and in subsequent co-creation workshops with family planning and reproductive health professionals around the world, program managers, technical advisors, and others often pointed to cognitive overload and choice overload as key barriers. Cognitive overload—when too much information is presented in a way that may be hard to understand and apply—often manifested in that information about health programs typically does not include enough detail about program implementation experiences to allow others to adopt the program approaches or adapt them to fit their needs. Health professionals also pointed to not having enough information that is specific to their context that they could readily apply to similar environments, cultures, and norms. Finally, challenges with understanding and interpreting data emerged as a common theme among health professionals. One way to address this is to create knowledge products in a range of formats to meet different learning styles so the information is easily understood. Of course, choice overload—having too many choices from which to choose—is another key barrier, especially when health professionals have limited time and competing priorities to sift through the large body of existing knowledge. Providing opportunities for health professionals to ask questions and easily and quickly get answers to their specific questions—through interactive KM tools and techniques like learning exchanges,

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peer assists, communities of practice, and even conferences and meetings or chat apps—can help address this barrier.

**Would be interested in probing the challenge of not enough context or detail as a barrier to use of knowledge. Maybe another webinar?**

- We agree this particular challenge expressed by health professionals is an interesting topic in and of itself for further discussion. We will definitely consider this for another webinar. Thank you for the suggestion!

**To what extent does fragmentation in the research cycle (design to uptake) lead to inaction? E.g implementers not engaged in the induction/design stage.**

- Fragmentation in the research cycle can surely lead to inaction. There is a wealth of evidence and experience that points to the critical need for researcher to engage and coordinate with the appropriate stakeholders at the outset of designing a research project to ensure the planned research is relevant and practical and to get their buy-in to facilitate future use of the research results. Knowledge SUCCESS partner FHI 360 specializes in this “research utilization” field and has a [research utilization framework and planning tools](#) that can help bridge the gap between research and impact.

**What feedback has Knowledge SUCCESS received from the "That One Thing" email? This seems like a great "push" strategy and I'm curious how it's been received.**

- For those of you who don't know, “That One Thing” is an email that is sent once a week by Knowledge SUCCESS. It's meant to highlight the one thing family planning professionals should be aware of that week. The purpose is to help cut through the noise and get essential/key information to professionals. This can help address choice overload. You can register for it on the [Knowledge SUCCESS website](#).
- We have received really positive anecdotal feedback about “That One Thing.” Some people say it really is the one thing they read every week. Quantitative metrics also point to the popularity of That One Thing. Standard open rates for emails in Education & Training are 23.42% and click rates are 2.9%. The open rate for That One Thing ranges between 29% and 46% and the click rate between 2% and 6%, depending on the week.

**Learning styles: did location where work/research is being conducted have an impact on preference?**

- In our research, we found some statistically significant associations between self-reported learning style and geographic region. For example, the preference for verbal learning was significantly high (40.7%) in high-income countries than across the sample as a whole and the preference for visual learning was significantly high (30.6%) in Asia compared with the entire sample. These findings, however, should be interpreted with caution given the small sample sizes for some geographical sub-groups in our research. In addition, the existing literature does not point to variations in learning style preferences by geography.

**Are people really self aware about their learning style?**

- We had some questions that asked people to directly rank their preferred learning styles (which many are able to do from having previously done such questionnaires

and others are able to provide their best estimate based on the types of materials that resonate the most with them). Other questions went for a less direct self-reported route, whereby respondents answered questions about how they would behave or feel in different scenarios, such as whether they prefer to study alone or in a group, and from that we can deduce learning style. When it comes to KM, we also think more of it in terms of learning *preferences* (i.e., how someone prefers to engage with material) rather than a cognitive ability (i.e., if someone is actually better able to process information in a certain format).

**With regard to norms (sharing data), any thoughts on whether there is a need to re-think motivating factors & how to approach such, especially when there are common issues and goals?**

- A key point of consideration is to understand both intrinsic and extrinsic motivations, which can influence whether or not people share information. Understanding these can help us to identify different types of levers that can be used to develop messaging, which can serve to encourage information sharing in institutions or sectors where there is a lot of work taking place in silos. In addition, understanding social norms can also help to redefine motivations for sharing information by understanding the prevailing context in which people share information. Social norms can influence who shares information and in what form. For example, in some contexts there are social norms that do not encourage young people to share knowledge with their elders because the convention is for information to flow in the other direction, from the more experienced elders to the youth.

**You mentioned that “some level of information was happening” and that information being shared was likely formal, which seem very interesting insights to explore. Has any formative research been done on the rationale behind the status quo?**

- Formality of sharing is influenced by the people with whom the information is being shared. Internal information sharing within organizations among peers tends to be less formal while sharing with external partners and organizations tends to be more formal (mostly through emails and formal publications like reports). Organizational norms also influence the channels that people use to share information both internally and externally, with people being influenced by the different sharing methods that others in their organizations use.

**Do you think COVID would change the results of the survey? For example, podcasts were good for me when I had a long commute. Much less so now I am home all the time. (I forget when you conducted the survey--pre-pandemic or post.)**

- Our research was conducted prior to the COVID pandemic outbreak. We think people's behaviors and attitudes have certainly changed since COVID. For example, in our research many people reported face-to-face meetings and conferences as core ways in which they sought and shared information and obviously face-to-face gatherings are not happening at the moment. Casual, informal conversations are really important for information sharing, particularly for sharing tacit knowledge, and they have largely disappeared now that everything is being done over video conferencing and email. In some sense though, the new environment in which we're working under COVID really highlights the need to think about some of the barriers we identified. For example, we are even more reliant than before on internet

searches, so ensuring that information is accessible and easy to find is really important. Similarly, it's important for us to think through how to ensure those with social or aural learning styles are still able to find and share information that aligns with their preferences. What is likely is that the behavioral mechanisms that we identified in our research are still applicable (e.g., motivation and incentives are crucial, cognitive and choice overload are challenges) but that they manifest in different ways now (e.g., how do you motivate and incentivize a remote workforce, or how do you reduce the choice overload that comes with an ever increasing amount of webinars!).

**Will this research influence Knowledge SUCCESS's plans for the toolkits?**

- The Toolkits platform was created under the Knowledge for Health (K4Health) project and managed under the project from 2008-2019. Toolkits are practical collections of trusted public health resources chosen by experts. The Knowledge SUCCESS project is [hosting K4Health Toolkits](#) that focus specifically on family planning and reproductive health. The behavioral research we conducted, and more specifically the co-creation workshops we recently conducted with family planning/reproductive health (FP/RH) professionals around the world, are informing our plans for creating new KM solutions for the FP/RH field, and/or improving existing solutions (like Toolkits), to meet FP/RH professionals' information needs. We are currently in the process of synthesizing the insights and findings from our co-creation workshops and plan to share those with the broader FP/RH community very soon. One key thing we've heard over and over again from our FP community is that FP professionals are challenged with information overload and need more highly curated collections and synthesized information. While Toolkits were initially designed to provide that level of curation, they tended to lean toward being exhaustive collections of resources rather than highly curated collections. We've begun to address that through our new [20 Essentials Collections](#) that include 20 essential resources on important FP/RH programmatic topics that we use to inform our own programs, selected in collaboration with other topic experts.

**Any thoughts on cultivating partnerships (philanthropy, corporate & gov't) that could facilitate FP community's ability to make needed shift?**

- Partnerships between and among FP/RH organizations will help make some of these needed shifts, specifically in regard to making sharing information a social norm and incentivizing sharing, etc. Learning from other sectors and partnering with others (such as designers, communication organizations, etc) could also help the FP community "think outside the box" to address some of the behavioral barriers to KM identified, including choice overload, cognitive overload, and learning styles.