Dissemination and Scale-Up - Detailed Guidance

Designing a pilot for dissemination from the outset can help a program scale up and be replicated in a larger trial.

Review the guidance organized by the elements below. Being clear on these details from the outset will limit future setbacks.

You've already done a lot of work to ensure your intervention and strategies are designed to be easily disseminated in the most rapid and rigorous way. Dissemination and scale-up ensure that your project reaches a larger audience and has a growing impact.

Throughout this document, we often use both Dissemination and Scale-Up together since they are highly related and one often follows the other, however, they are slightly different. If you see them in other contexts, it may be helpful to know the nuance:

- **Dissemination** is how we get the information, materials, evidence, or intervention package to the right people.
- **Scale-up** is how we expand the actual use and impact of a successfully tested intervention across more people and locations?

The steps below will help you reach your intended audience, and we also recommend developing a guide that will help new settings successfully apply your intervention. We describe key issues in developing such a guide and provide links to examples of guides.

1. Develop a Dissemination Plan Early

Why It Matters

Planning early ensures dissemination is intentional rather than an afterthought. Like sustainment, dissemination must be built into the research process from the start to improve reach, adoption, and long-term impact. Early planning helps teams align goals, resources, and timelines so dissemination activities and application in new settings are feasible and meaningful. It also prevents the common pitfall of rushing dissemination after results are finalized.

Action Steps

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- **In your protocol, include dissemination** goals, audiences, channels, and timelines directly in your protocol. Treat dissemination as a core component of the study, not an optional addition. If this isn't in your protocol, you can add as an amendment.
- **Consider using frameworks** like RE-AIM, CFIR, or a dissemination model such as CSAT to guide planning. These frameworks help clarify who needs to know what, when, and why.
- **Review older dissemination plans** and adapt rather than reinvent. Many research teams already have templates that can be updated to fit new projects.
- **Develop an Adoption and Adaptation guide** for your intervention as described in the last section below.

Example

A clinic-based diabetes program outlines how findings will be shared with clinicians, patient advisory boards, and health system leaders before recruitment even begins. Community groups plan early for town halls, local newsletters, or Spanish-language materials to ensure broad and representative reach. These are different approaches, but both help support the goal of dissemination.

Impact Summary

Early planning increases the likelihood that findings will be used in your intended settings. It also improves transparency with partners and funders, who increasingly expect dissemination strategies to be explicit. Over time, this approach builds organizational capacity, consistency in how research is shared, and impact of your research.

Tools and Resources

- RE-AIM Planning and Evaluation Tools - Provides planning worksheets and guidance for designing interventions with dissemination, adoption, implementation, and maintenance in mind. Excellent for integrating dissemination into study design from the outset.
- CFIR Guide & Interview/Planning Tools - Comprehensive implementation framework with constructs, interview guides, and planning resources to identify barriers and facilitators before dissemination begins.
- Communication and Science to Accelerate Translation Dissemination Model - Evidence-based dissemination planning model developed to guide communication strategies that move research into practice. Useful when selecting dissemination approaches beyond publication.

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2. Identify Your Audiences

Why does this matter?

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Different audiences value different information, so messages should be tailored to their needs and decision-making priorities. Identifying the audience and understanding what they value most helps ensure communication is relevant, actionable, and effective.

Action Steps

- **List all potential audiences:** clinicians, policymakers, patients, community leaders, researchers.
- **Tailor messages** to each group's values, needs, and decision-making context. Decide how much tailoring is necessary. This can depend on the different audiences and their needs. The downside is multiple different messaging campaigns. Try to find unifying messages that reach large audiences.
- **Acknowledge that you may not reach all audiences equally,** or you may need different approaches for different audiences. Prioritize based on feasibility, relevance, and equity.

Example

A heart failure decision-aid study identifies clinicians, patients, caregivers, and health system leaders as distinct audiences. Each group receives different materials—clinicians may get more-detailed evidence summaries, patients get plain-language decision aids, and leaders get cost and workflow implications. Community groups may need culturally tailored materials or translation.

Impact Summary

Audience-specific dissemination increases relevance, uptake, and trust. Tailored messages reduce cognitive burden and help stakeholders quickly understand why findings matter to them. This approach also supports broad adoption by ensuring materials resonate with diverse groups.

Tools and Resources

- RE-AIM Reach & Adoption Resources - Guidance for identifying priority audiences and planning strategies that maximize representativeness and adoption across settings.
- CDC Clear Communication Index - Practical toolkit for developing audience-specific, understandable health communication materials using plain language principles.
- NIH Plain Language Resources - Federal guidance for tailoring messages to different audiences while improving readability and accessibility.

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3. Use Targeted and Multi-Modal Strategies to Reach Your Settings and Populations

Why does this matter?

Every setting communicates differently and has different concerns and perspectives, so dissemination must be targeted to match local norms. Context strongly influences whether information is noticed, trusted, and used. Understanding communication patterns helps ensure materials reach the intended population. **A pro tip can be to use multi-modal strategies to reach people within a group.** People absorb information differently, so using multiple formats increases reach and comprehension. Multimodal dissemination is more effective than single-channel approaches.

Action Steps

- **Identify communication channels** used by your target settings. Consider newsletters, social media, meetings, local media, or peer networks.
- **Choose approaches** that align with what works best for your audience.
- **Use multimodal approaches**- for example clinic huddles, community health worker networks, and/or local advocacy groups.
- **Think of multiple modes to reach your audience.** You may combine outreach (meetings, workshops, webinars) with digital tools (websites, podcasts, social media).
- **Consider your available resources** when choosing your dissemination strategies.

Example

A community mental health project relies on local radio, church bulletins, or neighborhood associations. In contrast, an academic medical center prefers grand rounds, email newsletters, or intranet postings. Tribal communities may require relationship-based dissemination through trusted leaders.

Impact Summary

Setting-specific strategies increase the likelihood that information reaches the right people at the right time. This approach also strengthens relationships with organizations that can champion your findings. Over time, it builds trust and credibility. **Multimodal dissemination increases engagement and supports diverse learning preferences.** It also helps findings spread beyond the initial audience as materials are shared across networks. This approach enhances sustainability and long-term visibility.

Tools and Resources

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- RE-AIM Dissemination & Implementation Resources -Planning tools and examples for matching dissemination strategies to settings and implementation contexts.
- CDC Clear Communication Index - Helps evaluate whether dissemination materials are understandable and actionable across multiple communication formats.
- AHRQ Health Literacy Universal Precautions Toolkit - Provides practical guidance for producing patient-centered communication materials suitable for diverse populations.

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4. Engage Partners Throughout

Why does this matter?

Engagement builds trust, relevance, and shared ownership of dissemination. When you scale up and disseminate, engaging partners throughout can greatly help your message development and expand your dissemination channels. These will improve your overall reach and impact from the project. Engagement also ensures dissemination strategies reflect targeted needs. Our Engagement component covers strategies and components of Engagement throughout a project.

Action Steps

- **Co-create and refine materials with end-users.** Use Engagement [link] tip sheets or structured feedback sessions.
- **Iterate this guidance as you did your intervention.** Consider important time points (e.g., quarterly, beginning/middle/end, yearly, etc.).
- **Use participatory engagement approaches**.
- **Use stories, narratives and testimonials** to frame your dissemination activities**.**
- **Share reports and dissemination plans with partners** to maintain transparency.

Example

A community-engaged cancer screening project may co-develop materials with patient navigators and local leaders. Partners help refine messages, identify dissemination channels, and test materials for clarity. When initial strategies were not working, the partners switched to those recommended by end-user groups that were not being reached. This iterative approach mirrors how interventions themselves are refined.

Tools and Resources

- PCORI Engagement in Health Research Resources - Extensive guidance, examples, and tools for engaging patients and stakeholders throughout the research lifecycle, including dissemination.
- PCORI Engagement Rubric - Framework for planning meaningful stakeholder engagement and documenting engagement activities across project phases.
- CDC Principles of Community Engagement (3rd Edition) - Widely used guide covering practical methods for building trust, maintaining partnerships, and sustaining community engagement.
- StoryCenter Digital Storytelling - Provides frameworks for using storytelling to communicate health interventions and research findings in compelling ways.

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5. Leverage Existing, Credible, and Influential Networks

Why does this matter?

Trusted networks amplify dissemination far more effectively than individual researchers can. Use existing structures such as professional societies, advocacy groups, and health systems to spread your work by using the advantage of inherent credibility and reach.

Action Steps

- **Identify networks aligned with your topic.** Think about creating a map of important players in your topic area, such as professional societies, advocacy groups, and health systems.
- **Share materials through trusted channels** such as newsletters, webinars, workshops, or listservs.
- **Build relationships with network leaders** who can champion your work.

Example

A geriatrics decision-aid study may partner with the American Geriatrics Society, local aging councils, and health system quality committees. These groups can distribute materials through newsletters, webinars, and conferences. Community organizations may share findings through neighborhood associations or advocacy coalitions.

Impact Summary

Leveraging networks dramatically increases reach and legitimacy. It also reduces the burden on research teams by using established communication pathways. Over time, this approach embeds findings into professional and community norms.

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Tools and Resources

- NCFH Community Asset Mapping Guide - This guide assists health centers in identifying and collaborating with community partners in efforts to provide resources to address elements of social determinants of health (SDOH). Asset-mapping is a method to discover local resources and create an inventory of available services.
- CDC Community Health Improvement Navigator - Helps identify community partners and collaborative networks for scaling interventions.

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6. Monitor and Adapt

Why does this matter?

Dissemination is not static—ongoing monitoring and adaptations ensure strategies remain effective. Without monitoring, teams may continue ineffective strategies or overlook key audiences. Detailed guidance on Pragmatic Pilot Trials [link ref] provides great information and advice about adaptations that apply to dissemination activities.

Action Steps

- **Track adoption, reach, engagement, and feedback.** Pay attention to who is being reached and who is not.
- **Adjust strategies** based on what is working and what is not.
- **Use rapid-cycle evaluation** to refine dissemination in real time. By monitoring challenges that come up, you can quickly change your dissemination to match changing contexts.

Example

A community hypertension project tracks website analytics, workshop attendance, and partner feedback. If younger adults are not being reached, the team could shift to social media or peer-led outreach. Clinical teams could monitor clinician uptake or workflow integration.

Impact Summary

Monitoring and adaptation improve efficiency, equity, and overall impact. This approach ensures dissemination remains responsive to community needs and changing contexts. It also supports sustainability by identifying strategies that continue to work over time.

Tools and Resources

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- iPRISM Webtool - Interactive planning and evaluation platform based on the PRISM implementation framework to monitor implementation and dissemination progress over time.
- Iterative RE-AIM Website - Provides rapid-cycle evaluation methods, monitoring templates, and adaptation guidance for ongoing dissemination and implementation improvement.
- Anna Maw et al. Iterative RE-AIM Paper - Illustrates use of dashboards, continuous feedback, and iterative adaptation during implementation and dissemination.

Overall Tools and Resources

- PCORI Dissemination and Implementation Resources - Comprehensive dissemination planning guidance, templates, and examples developed specifically for patient-centered research.
- CCTSI Dissemination & Implementation Toolkit - Practical dissemination planning workbook and implementation resources from the Colorado Clinical and Translational Sciences Institute.
- Implementation Science Exchange - Repository of implementation science training materials, frameworks, webinars, and practical resources.
- AHRQ Dissemination Planning Resources - Evidence-based guidance for planning dissemination strategies that move research findings into healthcare practice.
- Fit to Context Framework (Kwan et al., 2022) - Framework describing how to systematically adapt interventions to local context while preserving effectiveness during scale-up.
- Dissemination for Design (D4D) Website (Kepper et al.) - Interactive website with dissemination planning tools, strategy selection resources, and practical implementation guidance for researchers.

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