



# Results That Lead to Action: How to Use Sticky Messaging for More Impactful Reporting

Our evaluation reports aren't always read.

The Curse of Knowledge affects our ability to communicate succinctly.

If you overload your audience with results, less information will be stored in their long-term memory.

We need to develop key messages from our findings that busy people will remember.

Make your messages sticky by using the six elements of SUCCESS.<sup>1</sup>

## Resources

1. Heath, C. & Heath, D. (2007). Made to stick: Why some ideas survive and others die. New York, NY: Random House.
2. Hutchinson, K. (2017). A Short Primer on Innovative Evaluation Reporting. [www.communitysolutions.ca](http://www.communitysolutions.ca)

## Simple

stripped to bare essentials  
use layering  
use flags

## Unexpected

grab their attention  
create a mystery to be solved

## Concrete

replace abstract with more concrete  
create a visual cue  
use flags

## Credible

incorporate vivid details  
put stats in a more concrete context  
use another perspective

## Emotion

link to something they care about or can empathise with  
use flags or emotive stimuli  
avoid fear

## Stories

engaging, inspiring, efficient  
bring the macro down to personal level  
short is fine

## Before

## EXAMPLE

## After

#1. To date the E-CLIPs program has successfully delivered on its intended evaluation capacity-building outcomes. These outcomes occur at the individual, program, Evaluation Studies Unit, and broader faculty level. At the individual level there is an increased appreciation and knowledge of evaluation and more independent evaluation activity. At the program level it has facilitated better quality evaluations and increased the utilization of evidence for program improvement. At the faculty level there is now a group of E-CLIPs participants who function as internal evaluation champions.

- Simple
- Unexpected
- Concrete
- Credible
- Emotion
- Stories

[Turn the following quote into a brief story]

“Well that’s the kind of fun thing – at the end of the day I am running around saying ‘Are you evaluating this properly? What are you measuring?’. So in fact I have become a really engaged supporter of the process of evaluation. In my [new] role right now ... I am looking around saying, ‘Where are the evaluators? Where’s [the evaluation support]? Where’s the person that I can talk to about how I can decide what are going to be the best questions to ask?’. So it’s completely educated me. Hugely. I have been walking around ...causing trouble saying, ‘We need to be evaluating. We’ve got these programs and we’re spending so much money and we don’t even ... survey the people who are using it’.”

#2. Although the number of participants was small, the "learn by doing" design of E- CLIPS is still a very cost-effective mechanism for building evaluation capacity within the faculty. Substantial outcomes were observed from this relatively small, simple, and low-cost intervention, even for those with limited involvement. Moving forward, additional value can be gained by more strategically identifying and using this small number of participants as future evaluation champions.

- Simple
- Unexpected
- Concrete
- Credible
- Emotion
- Stories

E- CLIPS is a simple and cost-effective mechanism for building evaluation capacity within the faculty.

#3. The evaluation specialists play a critical role in the success of the program and are its largest asset. They are extremely popular and well-respected by E-CLIPs participants.

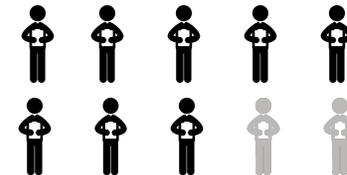
- Simple
- Unexpected
- Concrete
- Credible
- Emotion
- Stories

Despite the intentional “learn by doing” design of the program, the evaluation specialists still play a critical role in the success of the program.

#4. The biggest challenge facing the E-CLIPs program is the busy nature of participants' work in the Faculty of Medicine and a general lack of time to follow-through on their evaluation goals.

- Simple
- Unexpected
- Concrete
- Credible
- Emotion
- Stories

Lack of faculty time is the biggest challenge facing the E-CLIPs program and affected eight of ten projects who regretted they couldn’t spend more time on it.



Before

# MATERNAL HEALTH EXAMPLE

After

#1. Among the 680 valid pregnancy-associated deaths for which relatedness could be determined, the Nine Committees determined 237 were pregnancy-related (34.9%). Pregnancy-related deaths occurred more commonly within 42 days of the end of pregnancy (45.0%) than during pregnancy (37.6%) or 43 days to one year after the end of pregnancy (17.5%)

- Simple
- Unexpected
- Concrete
- Credible
- Emotion
- Stories

#2. Among non-Hispanic black pregnancy-related deaths, the following were the five leading underlying causes: 1. Cardiomyopathy (at 14.0%), Cardiovascular and coronary conditions (at 12.8%), 3. Preeclampsia and eclampsia (at 11.6%), 4. Hemorrhage (at 10.5%), and 5. Embolism (at 9.3%).

- Simple
- Unexpected
- Concrete
- Credible
- Emotion
- Stories

#3. The Nine Committees estimated that 63.2% of pregnancy-related deaths were preventable (Figure 8). Variations in the percentage of deaths estimated to be preventable varied by timing of death in relation to pregnancy. An estimated 63.2% of deaths that occurred during pregnancy, 66.7% of deaths to be preventable. that occurred within 42 days of the end of pregnancy, and 58.3% of deaths that occurred between 43 days and one year after the end of pregnancy were determined

- Simple
- Unexpected
- Concrete
- Credible
- Emotion
- Stories

#4. Provider factors comprised 27.3% of the total contributing factors for mental health deaths. The most common classes of provider factors were provider assessment at 25.0% and provider communication at 20.1%. The dominant themes that emerged related to provider assessment were failure to screen and the use of ineffective treatments. The most common themes for communication were a lack of communication between providers to support coordinated care and a lack of communication between providers and patients/families.

- Simple
- Unexpected
- Concrete
- Credible
- Emotion
- Stories