MEDICI
Mapping Digital Inclusion

# *Mapping the Evolving Digital Inclusion landscape to support Cohesion and Integration*

***TRANSFERABILITY TOOLKIT***
***SECTION 3: DELIVERING YOUR PROJECT***

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# SUMMARY

The MEDICI Transferability Toolkit aims to help stakeholders working in the field of digital inclusion for vulnerable groups apply the good practices in the MEDICI Catalogue to design and implement effective interventions to support digital inclusion. It is essentially a 'User Manual' – or 'Handbook' - that provides Guidelines, procedures, tools and practice examples to support the successful transferability and implementation of the MEDICI good practices within organisations who work with vulnerable groups.

The Toolkit approach is based on 'Ten Steps to Transferability' each of which takes the reader through the process of developing and customizing the digital inclusion project to suit local needs, from familiarization with the good practice cases contained in the MEDICI Catalogue, through adaptation and customisation to evaluation and sustainability.

**Ten Steps to Transferability**

Each step involves a 'primary task' which in turn links to activities that are required to complete the task. To support Toolkit users in completing the task each step provides:

- guiding principles to perform the task;
- a checklist of activities to be carried out;
- pitfalls and trouble-shooting tips, including good practice examples of how to carry out the task and activities successfully;
- list of resources (from the 'Resources' folder on website) to support the task and activities.

The ten steps are incorporated into five sections (chapters). The section you are about to read, entitled **Delivering your Project,** is made up of two steps:

Step 5: **Learning from MEDICI Good Practices**

Step 6: **Delivering the Project**

# SECTION 3: DELIVERING YOUR PROJECT

## Step 5: Learning from MEDICI Good Practices

### Primary Task of this Step

The Primary Task of Step 5 is to familiarize yourself with the information provided in the MEDICI Catalogue and Map to get some more ideas on how to design your own digital inclusion project. You can then re-visit the initial design developed in Step 2 and refine it.

### Guiding Principles

- Make sure you and relevant people in your organization familiarize yourselves with the MEDICI Catalogue and Map and how to use them effectively.
- Take a tour of the Catalogue and Map and identify the good practices you can learn most from
- Review your selected list in more detail to find out what made these practices work
- Evaluate the extent to which these practices can be adapted to suit your own project context and target groups
- Be clear who your users are and what are their needs.

### Checklist of Actions

| | |
|---|---|
| Sign up to the MEDICI Knowledge Community | ☐ |
| Explore the Learning Tools and Resources in the MEDICI platform | ☐ |
| Read the section below on using the Catalogue and Map effectively | ☐ |
| Explore the Catalogue and identify the cases you can learn from | ☐ |
| Review these cases in more detail and highlight the key learning points | ☐ |
| Re-visit Step 2 of this Transferability Toolkit and refine your project idea as required | ☐ |
| Carry out a 'service walk through' to assess whether you are likely to meet your user needs | ☐ |

### How to get the best out of the MEDICI Good Practices Catalogue & Map

By knowing how to use the MEDICI Catalogue and Map effectively you can:

- Get a picture of current state of the art in digital inclusion for vulnerable groups, to help you develop ideas for your own project.
- Highlight the gaps in current provision of digital inclusion initiatives to support vulnerable groups, so you do not 're-invent the wheel'.
- Identify the good practice cases that provide the closest match to your project idea, its objectives, and its target groups.
- Review good practices in detail, so you can find out what makes a particular project successful and learn from how it was done.

**Taxonomy of the Catalogue**

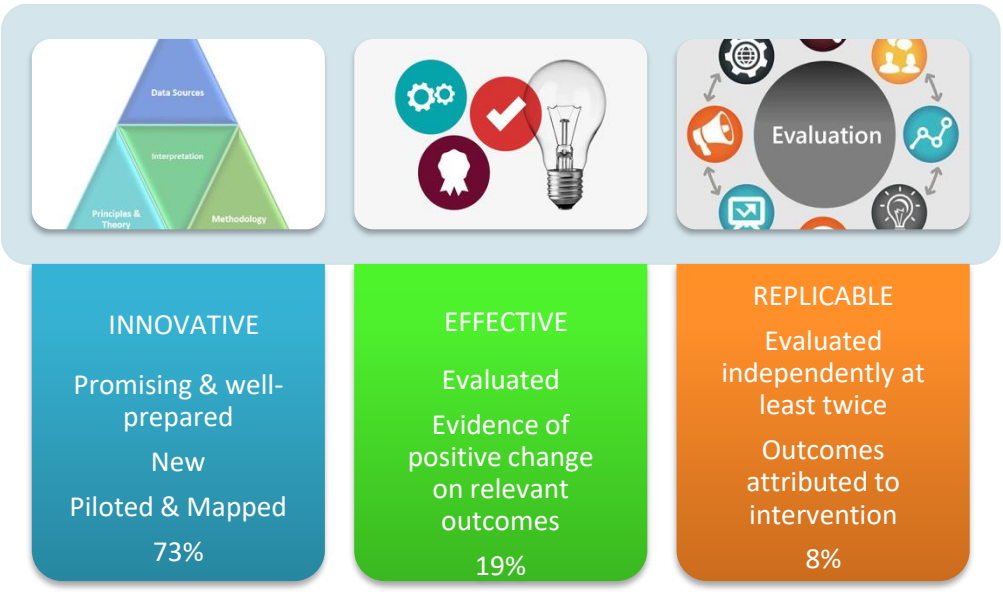
The Medici's taxonomy served as the structure for the Knowledge Bank database which allows organizing and classifying each Good Practice's information into hierarchical relationships as well as permitting searching for specific information and filtering results.

The taxonomy consists of a 2-level structure containing Category->Descriptor where descriptors are key-value fields. Each descriptor was defined to better explain the field, as well as the type and range of accepted values.

The MEDICI Interactive Catalogue provides for each case 7 sections, in which describes structured and unstructured information about each case: 1. General Information; 2. Organisation; 3. Organisational Information; 4. Outcomes; 5. Evidence; 6. Replicability; 7. Rating.

**Searching by Category of Evidence Effectiveness and Replicability**

The MEDICI Interactive Catalogue uses a rating system which was used to assess the robustness and quality – evidence effectiveness as well as the 'replication potential' - of the good practice cases. This rating system is structured under three categories:




- **Cluster A cases:** Innovative - high potential (based on a logical framework/theory of action), lack evidence of outcomes/evaluation but this may be forthcoming. These cases may be very recent and therefore lacking enough gathered information about their outcomes to show their full potential. These are innovative Interventions which are 'promising and well-prepared'.
- **Cluster B cases:** Effective- Show all of the innovative and framework characteristics to make the catalogue and cluster A, but in addition have evaluation evidence and

outcomes evidence (or a developed logical framework that could be expected to lead to positive outcomes). These are effective interventions that show a 'positive change followed the delivery of the intervention'.

- **Cluster C cases:** Replicable- all of the attributes of B and A, in addition they have more than one evaluation, evidence of outcomes and application evidence in a new setting with evidence of replicability (replicable or highly replicable). Therefore, these are replicable Interventions in which 'the project caused change and this change can be replicated'.

Medici Good Practices and Catalogue are openly accessible by clicking on https://digitalinclusion.eu/digital-map/

Different features are available to enhance user experience:

1. **Direct access** to the Map & Catalogue from the upper menu and home page.
2. **Map** functionality. Allows to browse the map.
3. **Cards**: shows summaries of all the practices displayed in the map in the form individual "cards"
4. **Catalogue**: access to the catalogue. It will display all the list of practices displayed in the map, modulated by the zoom feature.
5. **Statistics**: displays several graphics with statistics extracted from the catalogue
6. **Download:** allows the bulk download of catalogue contents.
7. **Filter menu**: allows to select the content of the catalogue by target group, countries of implementation and allocated cluster, displaying the results in the map.
8. **Open search**: free search feature to look for cases using open text.
9. **Zoom**: Google feature to zoom in and zoom out the contents of the map. Zooming in a specific area will only display the practices implemented in such area. Other sections, as the catalogue (4) will only display the practices of the area.
10. **Map legend**, to better decode the pins displayed in the map.

**Using the Map**

The map displays all the information collected in the catalogue, pinpointing its exact coordinates.
Every pin has a specific colour, depending on the target group addressed by the specific intervention or practice.
Being the case an intervention adressed two or more target groups, the pin would be green

So, zooming in or zooming out in any area of the map will display the practices being carried out in that specific area. Clicking on any pin will display the abstract and basics of that practice.

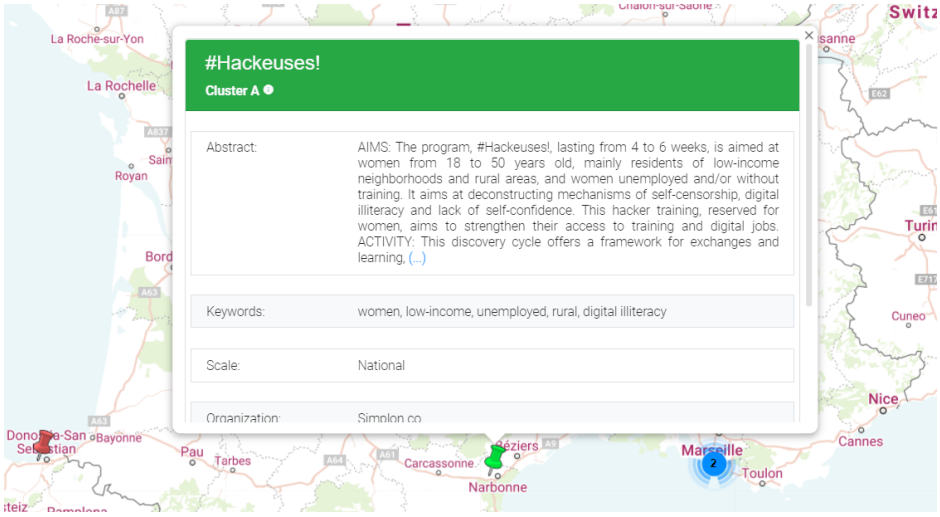


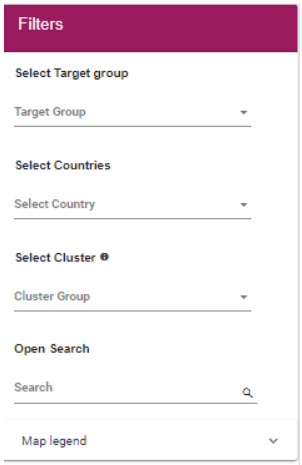
Image 2. Best practice pop up information, with selected fields

This pop-up window has been improved, reducing the number of fields, and facilitating the access to the full description. It also incorporates the allocated cluster of the practice. Mousing over the cluster, the description will appear.

**The filters**

To browse through the 326 practices collected in the catalogue we can use the free search engine. This search engine allows search any case with the catalogue using alphanumeric characters, in a dynamic way. Another way of filtering out the information is using specific filters:

- By Medici **target groups**: Elderly people; Marginalised young people; People with disabilities; Migrants; Unemployed and those facing social problems.
- By **countries**, EU-27, UK and non-EU countries.
- By **cluster**. Practices have been evaluated and allocated in three different Clusters A, B and C. The criteria for this allocation is explained below.




The filters can be used in a simultaneous way, allowing in this sense a combination of interactive maps that is far beyond the 10 mentioned in the project application.

Filters can be hidden by clicking on ☰ widen in this sense the map view.

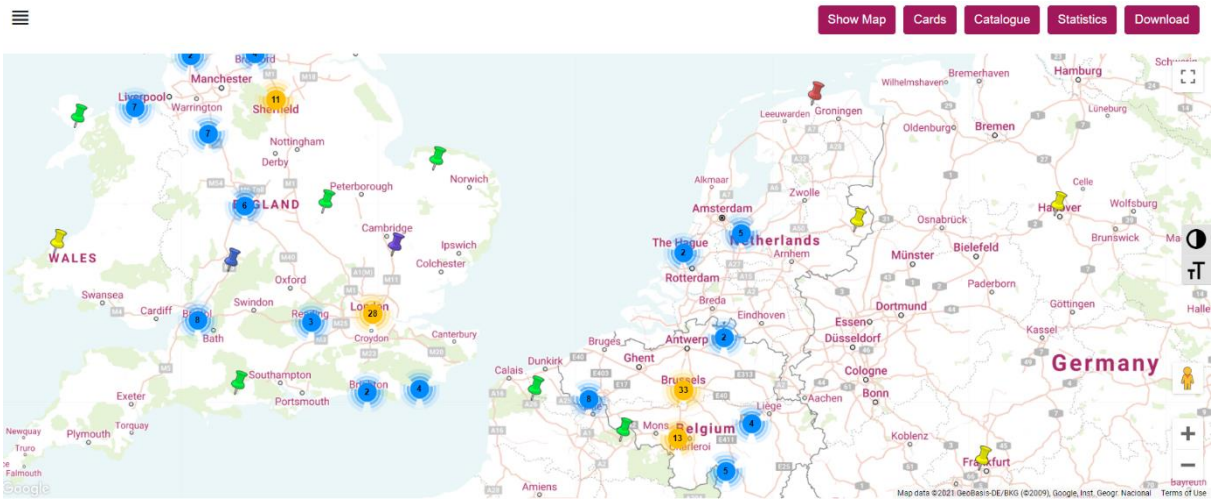
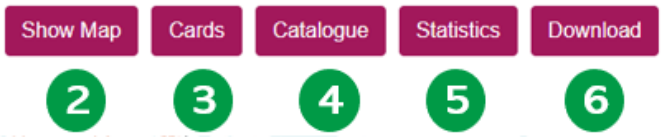



Image 4. Map widened to full screen

**Visualization options**




The main access to the **catalogue** provides access to the full information of every practice. The catalogue is dynamically linked to the **map**. That means that only cases displayed in the map, all or filtered, will be shown in **cards format** or listed in the catalogue.

Clicking on this button will open the full content of every practice.

The **statistics** 5 engine will support the data analysis through different graphics.

It shows different information pending on:

- Target Group
- Rating (cluster)
- Target group and rating
- Scale (European, national, local)
- Implementation country
- Implementation country / scale

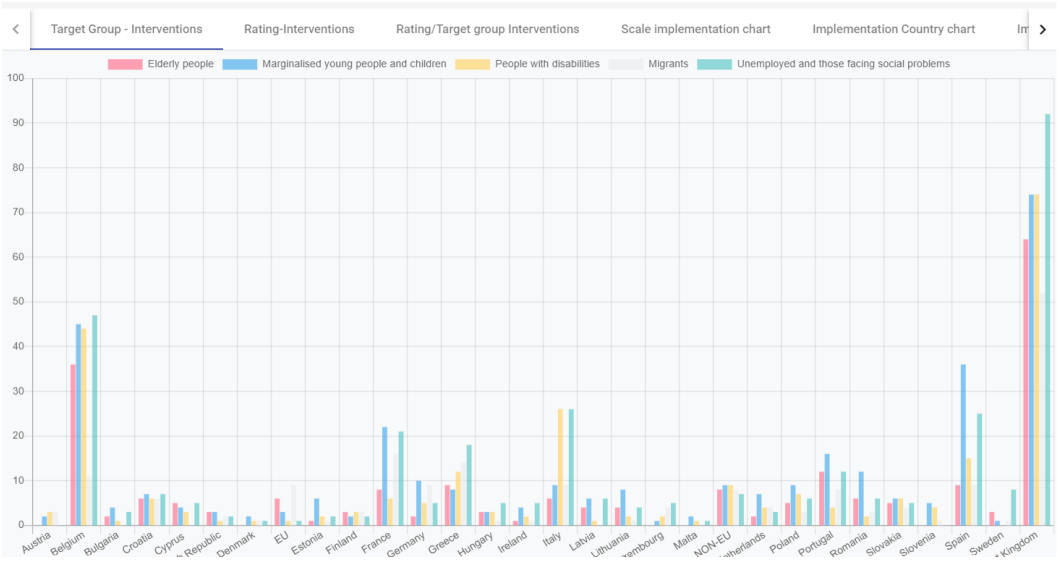


Image 5. Cases by target group graphic

## Download all practices

Clicking on 6 will download the full dataset (in xls) of the practices stored in the catalogue.
This open file allows any Medici user to analyse, research and work with data collected. All excel features are available.

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| 1 | **Best Practices Download** | | | | | | |
| 5 | **Title** | **Innovative** | **Key learning points** | **Scale Implementation** | **Type Implementation** | **Website** | **Context and rationale** |
| 6 | Ravalgames | 4 | There was a deep involven | Local | Policy | http://www.lmi.ub.edu/bridge-it/rav | Ravalgames was a vid |
| 7 | TGD - online communicatic | 3 | Large community of immig | National | System | www.tgd.de | The Turkish Communi |
| 8 | EMA Online Support for Et | 3 | It is a significant interventi | Regional | Policy | www.emaonline.org.uk/ema/ https:/ | The introduction of EI |
| 9 | The IBM KidSmart Early Lea | 4 | Effective for digital and so | International | System | www.ibm.com/ibm/ibmgives | In 2003 IBM organised |
| 10 | INSENSION - Personalised | 5 | Very innovative project fo | International | Service | www.insension.eu | INSENSION was a 3-ye |
| 11 | Konexio | 3 | - Konexio adapt their train | National | Service | https://www.konexio.eu/ | Today, nearly 13 millic |
| 12 | DE-ENIGMA | 5 | This project could be partic | International | Service | http://de-enigma.eu/features/ | Autism affects childre |
| 13 | Able to Include | 4 | It is a project where the en | International | Policy | http://able-to-include.com/ | People with intellect |
| 14 | The Solidarity FabLab prog | 3 | NEI. | International | Service | https://tinyurl.com/yy9q3wzx | Since 2015, the Orang |
| 15 | La WAB | 3 | NEI. | Local | Service | https://www.la-wab.fr/ | The WAB is a Coopera |

Image 6. Downloaded dataset. Excel sheet.

### *'Six of the best': MEDICI Good practice cases to help you refine your project idea*

The cases below are categorised by the target group. Below, there is one case per each vulnerable group that is featured in the catalogue. The last case has been chosen as the most viewed by Knowledge Community members.

**#1 – Migrants: Hack the Future**
https://digitalinclusion.eu/digital-map/344

**Brief summary**
It is a long-term volunteering activity that aims to contribute in reducing unemployment for refugees and Greeks and promote social entrepreneurship. The case suggests the significance of providing soft and technical coding, digital, marketing etc. skills through non-formal education in order to support refugees integrate in Greek society. The training activities promote social entrepreneurship in practice as a way of reducing unemployment and especially long term unemployment in youth and refugees/migrants. A Social Incubator is developed to include training, mentoring and coaching and support beneficiaries to become social entrepreneurs by putting their digital skills into a social startup. Emphasis is based on developing proficient knowledge in 3 main areas: a) ICT, new technologies, digital competences, b) Integration of refugees/migrants and c) Labour market issues (career guidance/ youth unemployment).

**Target group**
The high unemployment rates in Greece, the need to bridge the gap between the general lack of digital skills, the unemployment rates and the threat of social exclusion for young long term unemployed, refugees and migrants, support this good practice for integrating refugees and long-term unemployed through educating them in coding.

**Transferability/ replicability potential**

Transferability is high. The model of Social Incubators is straightforward and well known across Europe. Further, it oscillates around ICT skills which are universal and desirable in each sector. Such initiative can be easily applied to other target groups.

**Key takeaways**

Expand the network with tech companies, by reaching out to 20 more companies and connect students belonging to vulnerable groups (migrants, refugees, unemployed citizens) with their recruiters.

**#2 - People with disabilities**: **ABLE TO INCLUDE**
**https://digitalinclusion.eu/digital-map/220**

**Brief summary**

The main target users of the *Able to Include* project are people with Intellectual and Developmental Disabilities (IDD), who encounter difficulties in many situations of daily life, ranging from mobility to work to social life. Digital technology could indeed bring independence to this group. However, many digital apps are not accessible by people with IDD, which constitutes a major form of exclusion of this group from the digital society.

**Target group**

To address this situation the *Able to Include* project created a context-aware Accessibility Layer based on already developed components that, by being integrated with existing and future digital tools (and particularly with mobile apps) increase their accessibility by people with IDD,

thus allowing them to achieve a more meaningful and independent life and experience satisfactory social interactions.

The *Able to Include* "Accessibility Layer" is composed of a text and content simplifier, a pictograph-text and text-pictograph translation tool, and text-to-speech functionalities. The system was tested by groups of users (people with IDD) in three contexts: in social communication, by integrating it into social networking apps such as Facebook, Messenger, Twitter, WhatsApp, so that users with IDD could access the same technology as their peers, family and friends and could also interact and chat with people from different countries thanks to pictograph-based communication); in the mobility context, by integrating it into an existing urban transport guidance system app; in the work context, where a group of users with IDD working as administrative assistants applied the system for simplifying their tasks.

**Key takeaways**

The strong point of Able to Include was its approach of involving end users (people with IDD) in all phases since the beginning, in both the development process and the testing and evaluation of the "Accessibility Layer". Their concerns were heard and developers took their opinions into account, which made them feel included in the project team and contributed to their feeling of self-worth.

Able to Include was funded by the EC ICT Policy Support Programme. The project has a high degree of replicability, having been tested and assessed. A Good Practice Procedure Guide for implementing pilot tests is provided in the project's Final Conclusion Report.

**#3 - Marginalised young people and children**: **MIND OF MY OWN (MOMO)**

**https://digitalinclusion.eu/digital-map/720**

**Brief summary**

Mind of My Own believe that Children are better supported and cared for when they're listened to. Young people should be able to participate fully in their lives and it should be easy for them to speak up anytime they want. Digital technology should help us work smarter and MOMO believe that investing in early intervention is key to making human and cost savings further down the line.

They create digital participation tools. Currently, that translates as two co-produced apps for children and young people who use health, care and education services. Participation is key. The apps enable young people to have their voices heard and to participate in decisions about their lives.

Mind of My Own has developed apps that help young people communicate their views in a way that suits them.

**Target group**

With MOMO's 'One App' for example, young people create their own account, which can be used on any device at any time. This means that young people can use the app to say how they are feeling, what support they need and tell their worker about things that are important to them. The One app enables young people to be more actively involved in their lives. An accessible and empowering way for young people to tell their workers about things that are

important to them, while always being in control of their own data. This helps workers understand young people better, saves them time and can be used to better evidence young people's views.

It includes scenarios that allow young people to share information important to them, prepare for statutory meetings, report problems and share their good news whenever they want to share. One app is fully accessible and available in over 100 languages.

**Transferability/ replicability potential**

The replicability and transferability potential for Mind of My Own is high. MOMO's Apps and approach, particularly their co-production ethos and model has wide relevance and potential. Participation matters, both One App and Express are effective direct work tools which are used by a range of professionals including social workers, teachers and support workers.

**Key learning takeaways**

The apps were co-created with users to develop the most effective tool.

The apps were well researched, catering for and responding to key identified needs appropriately.

The second app can be used by those as young as two years old.

The apps are designed to be accessible to all, including those with learning difficulties or disabilities.

Ongoing development and support are important.

**#4 - Unemployed and those facing social problems: EMLPLEANDO DIGITAL**
**https://digitalinclusion.eu/digital-map/1110**

**Brief summary**

#EmpleandoDigital is a pilot project developed by Fundación Secretariado Gitano (FSG) and the Spanish Red Cross (SRC), in collaboration with the Accenture Foundation. The project is co-financed by the Accenture Foundation and the European Social Fund. The project was launched during 2017 with the objective of supporting digital transformation by developing the necessary skills of current and future workers. In addition, the project aimed at enhancing the digital knowledge and skills of the people at risk of exclusion that take part in the employment programmes of the involved partners.
#EmpleandoDigital has been running in 12 regions and over 300 professionals from 26 employment teams have been directly involved in it (13 teams from FSG and 13 from Spanish Red Cross). As from the official web site of the initiative, so far, in total, 9,826 people have improved their digital skills and knowledge thanks to #EmpleandoDigital, being more than 50% women

- 5,924 people have improved their digital skills through basic courses on digital skills, and 2328 have followed advanced courses
- 1,848 people have acquired digital knowledge in one of the "Digital Classroom" courses.

- 304 people have gone through one of the 23 courses in occupations that are being modified by digital transformation.
- 48 people have participated in the 4 software development courses in JavaScript and Java; 12 of them are already working in a technological position, 9 of them with an employment contract of indefinite duration.

**Target group**

The main target groups of the initiative are:
- Employees working at the Spanish Red Cross and at the Fundacion Secretariado Gitano
- Young people at risk of social exclusion, including Roma youngsters

**Key takeaways**

The main elements of success of this initiative can be summarised as follows:
1. #EmpleandoDigital is an example of a project that works not only with the beneficiaries, but also tries to deeply transform the methodology and tools of the organisation, which is one of the keys an entity should consider in the Digital Transformation.
2. #EmpleandoDigital focuses on the digital soft skills of the vulnerable people, but also in the digital knowledge and hard skills necessary to be hired in the IT sector.
3. #EmpleandoDigital is a successful example of partnerships between social organisations and a big company of the technological sector such as Accenture.

**#5 - Elderly people- MUDA EM CASA**
**https://digitalinclusion.eu/digital-map/1295/**

**Brief summary**

MUDA (Movement for a Universal and Digitally Active citizenship) was launched in Portugal in 2017 with the objective of contributing to a more advanced, inclusive and participative country. MUDA aims to reduce the number of citizens who have never accessed the internet and to increase the number of citizens with advanced digital skills. MUDA also means CHANGE in Portuguese.

The Covid-19 pandemic has had a very significant impact on the daily lives of people who now have to stay at home in social isolation with their families or even completely alone. Many Portuguese have started to work or study from home. MUDA launched the MUDA EM CASA (”Change at Home”) – a digital inclusion project in the midst of the State of Emergency to help all Portuguese people take advantage of internet usage from their home and to combat the digital exclusion that was clearly amplified by covid-19.

MUDA EM CASA was designed to meet this objective by providing three key services:

1. A platform that aggregates more than 500 videos and articles to help both basic and advanced users develop their digital capabilities with helpful daily digital tips and suggestions on how to use the internet to work, learn, communicate, use public services, shop, utilize home banking, and many other services.

2. Challenge people to become volunteers from their homes and to teach their family members who have no digital skills, using their 8 digital guides (eBooks).

3. A weekly newsletter that disseminates carefully curated articles from their partners and other current news sources with relevant digital tips and suggestions for all citizens.

The MUDA EM CASA project was launched in response to the covid-19 pandemic but it's overwhelming success has ensured that it will stay online and running.

**Target group: Elderly People**

The programme can benefit all segments of the population, about 22% of the Portuguese population can be classified as digitally excluded, i.e., Portuguese population that has never used the Internet, with half of this segment being over 45 years old and under 64 years old. The reality is that this group is (i) a very significant target audience in Portugal (ii) they are, to a large extent, part of the national active population and (iii) have a high potential to develop their capacities for using internet.

**Transferability/ replicability potential**

More than 500 videos and articles, as well as 8 digital guides laid out in modules for those who want to become volunteers and equipped with the knowledge to teach their family members digital skills are the resources readily available in the project's website: #MUDAEMCASA

**Key learning takeaways**

The MUDA EM CASA project provides a unique example of how a partnership of public and private organisations can come together to provide free online resources where citizens with basic, intermediate, and even advanced digital skills can further their digital education. The informative and educational resources made available are regularly updated ensuring that users will always be able to find relevant, up to date information. The project was designed to provide a means through which all citizens can learn tools to work online, learn online, communicate online, use public services online, shop online and utilise many more online services, regardless of their level of digital competency.

**#6 Most viewed case by members of Knowledge Community- DIGITALIADA**

**https://digitalinclusion.eu/digital-map/948**

**Brief summary**

The project implemented by The Orange Foundation aimed at encourage digital education in Romania and increase school performance among pupils in rural area and raise those pupils to the level of pupils from urban schools so that they may compete equally in high school. The project empowers teachers with the technology and training to deliver Blended Learning and encourages the creation and sharing of digital educational materials in Romanian.
The teachers attend training sessions and are mentored through the year. Teachers became creators of digital educational materials, which feature on the platform and they deliver accredited courses for others teachers. In rural areas, the project equips the schools with modern digital labs. The equipment includes laptops, tablets, 3D printers, a video projector, a suite of applications, digital materials, and lesson plans to support the learning of Math and TIC with the help of digital technologies.

**Target group**

Children and young people, in school and at home, in urban and rural settings.
School student groups included migrants and marginalised children and young people.

**Transferability/ replicability potential**

Digitaliada has created a national community: 40 schools (from 26 counties), 133 teachers and school principals and 4500 pupils and their parents dedicated to digital education. Simultaneously, it has enabled an online community around www.digitaliada.ro platform and its recurrent online contest. The programme has addressed the national challenge of increasing the capability of Romania's individuals in Schools and Online. They have successfully engaged children, young people, their families and teaching professionals in gaining digital skills by providing equipment, an interactive learning platform and training teachers to deliver blended learning practise.

**Key learning takeaways**

Changed attitudes: 94% of parents said their child had a better understanding of the subject, as a result of using the apps and tablets. More than 96% of all teachers involved agreed that the apps and tablets are useful for the teaching and learning process. Over 86% of all teachers involved agreed that apps and tablets made teaching their chosen activity easier.

Benefits of using technology in the classroom, observed by teachers are lessons are more efficient and students are more engaged, especially those in vulnerable groups. Teachers say that the use of digital tools is an effective way to combat absenteeism and early school leaving, in the case of children with poor grades.
In the case of students with average and good learning outcomes, these methods are used and appreciated because they provide immediate response, motivate them to overcome themselves and develop on a personal level.
In the context of the school suspension measure due to the COVID-19 pandemic in 2020, the online learning and testing section available on the Digitaliada platform has proven to be very useful for the continuation of the educational process, for all teachers and students in Romania. Over 30,000 students, teachers and parents learn and communicate through the platform.

## Service Walk-through

Before going ahead with the implementation stage of your digital inclusion project it's worth getting a small number of users involved in the validation of the project idea by running a 'service walk through' with them. The service walk-through is a tool that provides project designers with a way to understand the experience of the 'project as a service' from the user point of view. The technique uses the 'journey' through the service as a way of getting users to understand how they will experience it. You can use various ways of representing this journey. One way is using 'lego blocks' to show how the various components of the service fit together. Another way is to literally accompany users through a tour of the physical space in which the project will be delivered

In this example lego blocks are used to simulate how the project uses physical spaces to deliver its services and how they connect with each other.
Users are 'walked through' the service using the blocks and their observations – including potential issues raised – are recorded to feed into future service revisions.

Source: Boletsis, 2018/Designscapes Toolbox

### Pitfalls and how to survive them

- Don't venture into the land of MEDICI without being prepared. Make sure you are familiar with the MEDICI Catalogue and Map and how they work
- Avoid not seeing the trees for the wood. Use the Catalogue and Map filters to narrow down your searching to projects that broadly fit your project objectives and target groups
- Avoid over-ambition. If your project idea involves a small community-based digital skills training project for migrants, don't use a major national project to improve broadband speed as a benchmark
- Don't forget the evidence. Focus in particular on the evidence provided in the Catalogue on the outcomes of a good practice and the evidence for its replication and transferability.
- Don't do it alone. Use the MEDICI Knowledge Community to engage in meaningful conversations with other people working in the field and share ideas and experiences.

### Resources

- FAQs – Digital Inclusion Atlas
- Overview map – Digital Inclusion Atlas
- Digital Inclusion Atlas

## Step 6: Delivering the Project

### Primary Task of this Step

The Primary Task of Step 6 is to familiarize yourself with how to run a digital inclusion project, in close collaboration - co-working - with your target group. The assumption in this step is that your digital inclusion project is pitched at the local – community – level. The approach recommended to do this is based on 'participatory action research' – PAR. However, projects pitched at the larger scale – for example national projects – can also benefit from the principles and practices of co-design covered in this Step.

### Guiding Principles

- Make sure you and relevant people in your organization construct arenas for dialogue, mutual learning and co-design
- Familiarise yourself with the Action Research Model and adapt it in a way that best suit the needs of your organisation and your target group.
- The implementation process derives from actions emerging out of joint experiences and from mutual reflections - co-generative research.
- Explore solutions to problems that emerge and are identified by the participants and relate to their 'digital lifeworld'
- Develop, implement and evaluate solutions to these issues at the local level - aiming to make a real contribution to social change in communities
- Participants engage as drivers of social change, finding and co-designing solutions to digital problems identified by them.
- Review the ideas generated for digital inclusion projects in a collaborative, participative way and come to a consensus on which idea to proceed with.
- All the target groups and you have an equal stake in implementing the plan.
- Evaluation is part of the process - for example by observing what happens in practice and recording the outcomes (practical and useful information on evaluation is provided in section 5 of this guide).

### Checklist of Actions

| | |
|---|---|
| Use and adapt the Action Research Model provided | ☐ |
| Explore problems and solutions with the participants | ☐ |
| Review the ideas generated collaboratively | ☐ |
| Select the idea(s) to proceed in a manner that everyone has an equal voice | ☐ |
| Plan, develop and implement the selected idea (s) | ☐ |
| Monitor and evaluate the outcomes | ☐ |
| Reflect on the outcomes and feed what has been learned into another cycle of action | ☐ |

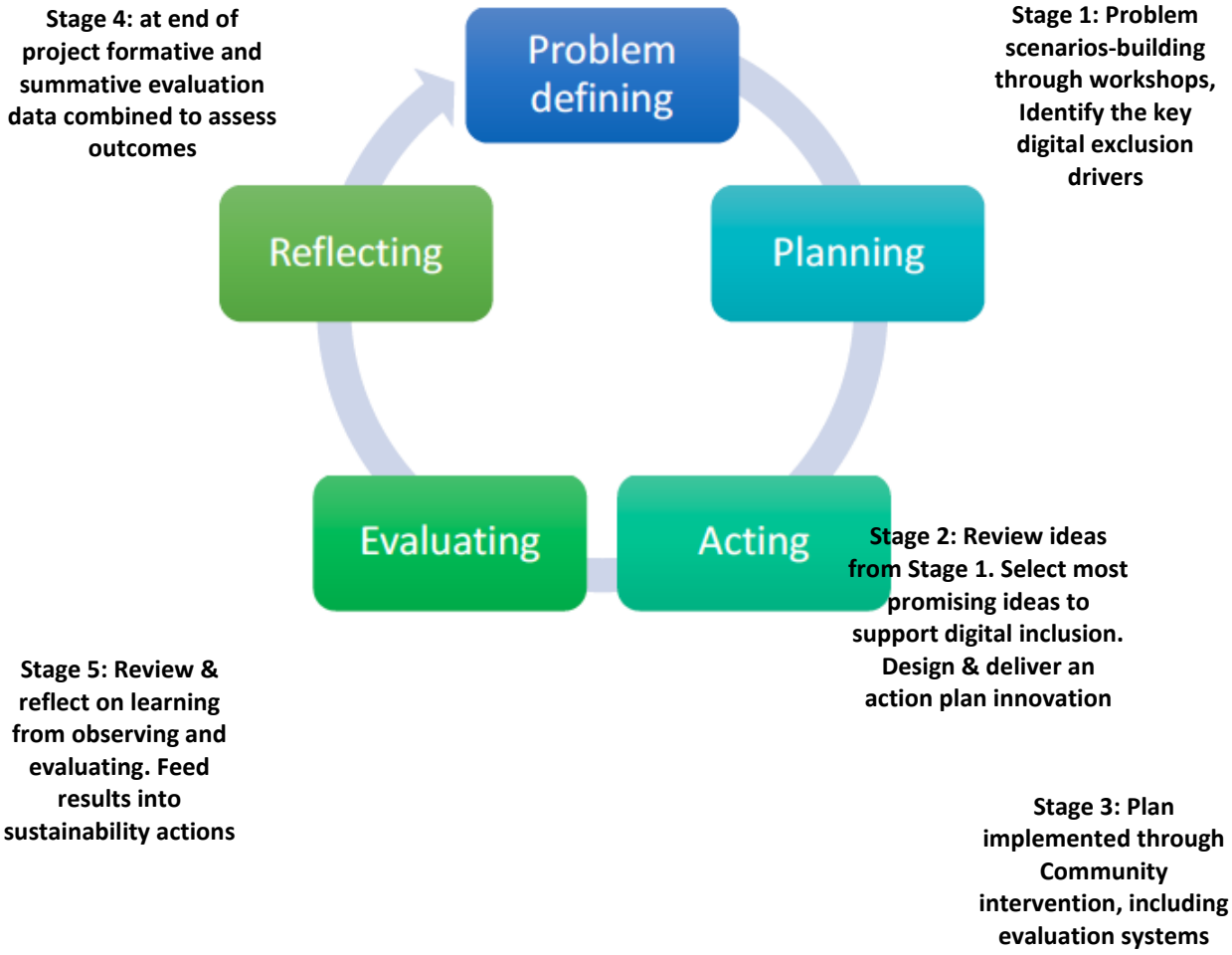
Tools to help you deliver a digital inclusion project using an Action Research Methodology

**Action Research Methodology**

Putting a model of Action Research into practice in a digital inclusion project requires careful consideration of the local conditions and context prevailing in the local context, and therefore the adaptation of the learning derived from relevant MEDICI good practice cases to that local context.

**Action Research Implementation Framework**

To help you do this an illustration of an action research Implementation Framework is shown in the graphic below.




The graphic shows:

- **Stage 1** - ***Problem-definition*** focuses on working with participating vulnerable people to co-produce ideas on problems that inhibit their full engagement in digital life. The mechanisms used to do this is the co-creation workshop.
- **Stage 2** - Taking the ideas developed in Stage 1 and putting them firstly through a process through which participating target groups, and key stakeholders, critically

review and evaluate the ideas. A dedicated workshop is designed and delivered to produce an ***Action Plan*** for putting the best idea into practice.

- **Stage 3** - The Action Plan is ***put into practice.*** The co-ordinating partner integrates and co-ordinate the resources available - host infrastructure, project staff, community organisations, social services - to deliver the Action Plan.
- **Stage 4** - The plan is ***observed and evaluated*** in action. At Stage 3, evaluation systems and tools are put into place to track progress on the plan - for example observation protocols, diaries, blogs. These are then applied as the action research takes place. At the end of the action research experiment, this formative evaluation data is combined with ex-post evaluation data - collected, for example, through participant surveys, focus groups and interviews to participants and stakeholders to evaluate the success and outcomes of the experiments.
- **Stage 5** – In the final stage, the learning from observing and evaluating the experiments is ***reflected on*** and triggers the next cycle of the action research 'spiral'. A Community Action Learning Set can be held to discuss how to promote the sustainability of the experiment in the future.

**# Action Research Implementation Framework- Case Study**

**MEET, Media Education for Equity and Tolerance**
http://meetolerance.eu

MEET, Media Education for Equity and Tolerance is a project funded by the European Commission's Erasmus+ Programme (2016-2018). The aim of the MEET project was to create a European community of stakeholders including experts, researchers, teachers/educators and students committed to using media education to counteract discrimination, intolerance, and violent behaviour towards others, and to promoting active citizenship and human rights. Working with disadvantaged young people (aged 13-19), including migrants and refugees, the project used an action research method to co-design and develop inter-cultural media education toolkits to support digital inclusion, working on the premise that digital tools are a powerful means of spreading intolerance, and vice versa.

### Pitfalls and how to survive them

- Make sure you are familiar with the Action Research Framework and its stages before applying them.
- Make sure to create a trustworthy, supportive and safe environment for all participants, where they feel they can share and be heard.
- Don't assume you know what your group interests are - let them express these freely.
- Have an active listening approach.
- Encourage projects (experiments) that are small, practicable, inclusive and iterative.
- Don't focus on having perfect results, but having the participants engaged throughout the process.
- Don't forget to monitor the process since the beginning - you will need this information for the evaluation stage.