

EVALUATION TOOLKIT: TOOL #1

**2016**

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# Monitoring Organizational Reach and Influence

A TOOL FOR SOCIAL  
ENTERPRISES IN HEALTH



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## EXAMPLE IMPACT STATEMENTS BASED ON UTILIZING THIS TOOL

“Since launching our product, we have seen on average a **10% increase each quarter** in the number of individuals and organizations subscribing to our newsletters, a **90% increase** in those following our blog, and a **150% increase** in our product being mentioned via social media.”

“While the number of our formal clinical partnerships decreased from 2015 to 2016, we **increased the amount of funds leveraged through fewer, more targeted clinical partnerships by 50% during that same time period.**”

“Our model is now being used in the regional training curriculum for healthcare providers with **70 healthcare providers** being exposed to our best practices model of care in 2016. In addition, we are involved in incorporating sections of our model into the **Ministry of Health’s Maternal & Child Health guidelines**, which will have an even greater impact on those receiving training on quality of care.



## WHAT THIS TOOL IS

This strategic tool provides a systematic way to think about the **influential reach of your organization**, specifically for entrepreneurs and social enterprises working in health in low-resource settings.

The tool provides a template for documenting and tracking your efforts to be an influential organization, including planning for and potentially changing how you and your organization spend time on influence-related efforts, and allowing you to ultimately **present and communicate** to others the influential reach you have in your target communities, areas of expertise, and beyond.

Measurement is often focused on programs, services, or processes of an organization rather than the wider influence of your work. This tool helps address that gap, covering items that standard monitoring and evaluation efforts typically overlook. The listed items are based on existing literature and are strategically valuable to organizations. Many of these items are steps you already take, but do not regularly track. Other items may be strategic areas where you would either like to move into, or reduce your organization’s efforts on due to limited gains.

By identifying your top priority items, tracking organizational efforts and decisions, and highlighting those areas where you spent significant effort, you can strategize whether your influence-related activities are meeting your organization’s needs (versus diverting energy and resources from where it is most needed) and you can better leverage the day-to-day work of your organization and demonstrate added value.



## WHAT THIS TOOL IS NOT

This is not a tool to measure policy influence. However, you may be able to better position yourself for policy influence by using this tool to better understand and track your organization’s reach. Many resources on policy influence exist. Once ready to address the policy world, check out our suggested key resource in the Reference section.



## HOW TO USE THIS TOOL

### Discuss and strategize the domains.

What is critical? How would you like to be influential? What do you and others believe is necessary to reach your desired level of influence? Who is responsible for these items? How often do these items change? Revise the table again.

### Customize and fill in the template table.

Revise it and make it applicable to you and your organization's strategic purposes and intentions.

Add/delete/expand rows or columns as needed.

Does one item fall better under a different section heading for you? Move it!

### Review targets carefully and set priorities among items.

The goal is not to have the most items or the highest numbers. Spreading yourself too thin is not necessarily useful in creating influence and impact. Use the priority column to highlight what is of importance to your organization. How do these priorities differ across the organization, personnel, and stakeholders?

### Assess and adapt your performance against target goals.

Are there benchmarked international standards of interest to you? What is the standard of practice? What entities drive the standard (locally, nationally, globally)? Where is the decision-making power? What parties lack power, but still hold significance? Discussing and answering these questions helps set better targets.

### Communicate.

Use your table for strategic planning. Share your hard work in your promotional materials. Think grant applications, website copy, and annual reports!

Photo c: Jacaranda Health



## TARGET AUDIENCE

Social enterprises providing healthcare services in low and middle income countries (LMICs). Social enterprises are for-profit and not-for-profit private sector businesses with a social mission.

Discuss & Strategize

Customize & Review

Track

Assess & Adapt

Communicate

*"I can imagine coming up with questions to discuss, such as which areas are we most interested in developing out more, or which areas are we putting in too much energy, and who will take ownership of an area if it's unclear."*

Jessie Liu, Co-Founder, (former) Impact and Health Lead, Noora Health

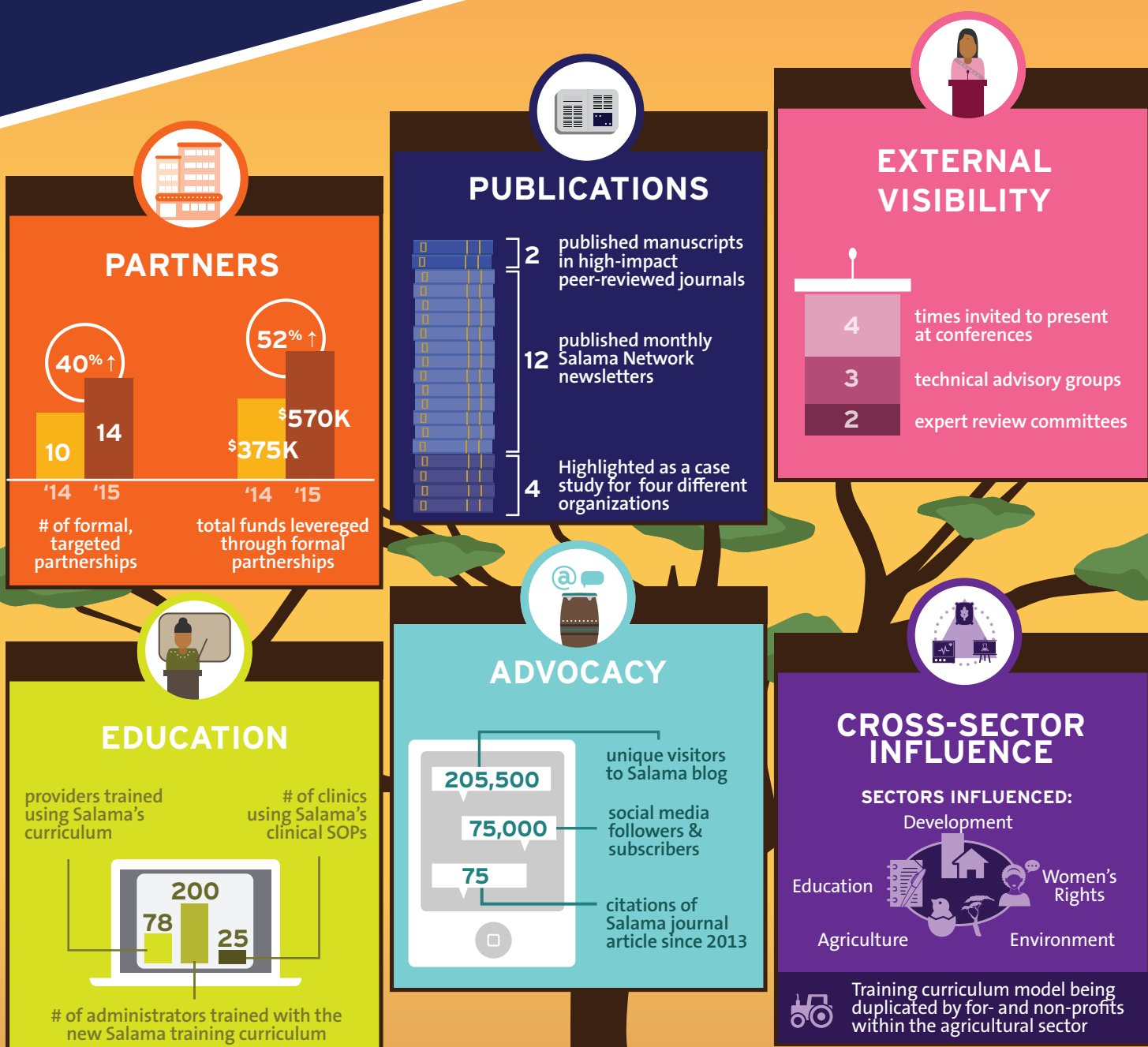


# A hypothetical case study

Using this influence tool is simple. To make the most from your tracking, consider how you may communicate what you record in the table to your stakeholders.

Consider a hypothetical rural health facility network, Salama Network, which also partners with facilities to provide systems training. See how their data can turn into powerful statements and data visualizations in the example below.

Consider how you could do the same.



Consider your own network – the reach of your roots and the spread of your branches. Use the influence table to track your organizational reach.

Determine which areas are strong, and which need to grow. Highlight these strengths and your continued growth internally and externally to better communicate your local and global influence.



## TABLE TEMPLATE: SAMPLE EXCERPT

To help you make the best use of the influence tool, refer to this example table filled in with hypothetical data. Further details on the indicators are provided on pages 8-9.

ITEM / INDICATOR	TIME PERIOD	TARGET	TRACKED VALUE (record fields as text, count or selected category)	PRIORITY	NOTES
Partnerships or Relationships					
NUMBER OF FORMAL PARTNERSHIPS/RELATIONSHIPS	2016	5	5	high	
1) DISTRICT HEALTH OFFICE			<ul style="list-style-type: none"><li>• Sub, nat'l</li><li>• Bi-directional</li><li>• SOPs used in public facilities</li><li>• \$20k support for rural networks, in-kind support for procurement assistance</li></ul>		Bi-directional knowledge transfer: Salama Network shared SOPs & management trainings. DHO provided assistance with setting up rural clinics.
2) NATIONAL ASSOCIATION OF NURSES			<ul style="list-style-type: none"><li>• National</li><li>• NAN Official on our Advisory Committee</li></ul>		
Education / Training					
INFLUENCE ON EDUCATIONAL CURRICULA <ul style="list-style-type: none"><li>• LEVEL OF INFLUENCE (NATIONAL, LOCAL)</li></ul>	2016	National	National & District	medium	Target is to move to nat'l-level from district-level. High long-term priority. Medium priority in 2016.
PROJECT IS A TRAINING SITE <ul style="list-style-type: none"><li>• NUMBER OF TRAINEES/ PARTICIPANTS</li></ul>		50 providers 20 Finance	78 providers 39 Finance 17 Administrators	high	
External Visibility / Perception <sup>4</sup>					
INVITED CHAIR/REVIEWER/ FACILITATOR/ADVISOR	2016	2 (nat'l & global)	3 technical advisory groups (2 nat'l, 1 global)	high	
EXTERNAL CONSULTATION		3	5 consultancies: local clinics and hospitals, public and faith-based	low	Transitioned from high to low priority as brand awareness increased.
Publications					
PUBLISHED ARTICLES/STUDIES (PEER-REVIEWED)	2016	1	2 published manuscripts, 1 under review	high	
NEWS STORIES BY MEDIA		0	Case study highlighted by Duke, USAID Global Development Lab, & 2 other organizations	low	
Advocacy					
SOCIAL MEDIA OUTREACH	2016	50,000	75,000 subscribers and followers	medium	
WORKS CITED BY		5	1st manuscript: 75 times 2nd manuscript: 20 times	medium	Number of citations ever cited. It is not specific to 2016

# COMPLETE TABLE TEMPLATE

Please see separate 'Influence Tool Template Table' for an editable version of the following table at [globalhealth.duke.edu/evidence-lab](http://globalhealth.duke.edu/evidence-lab)

Refer to pages 8-9 for a full glossary of terms.

Item / Indicator	Time period	Target	Tracked value	Priority	Notes
Partnerships or Relationships					
Number of Formal Partnerships/Relationships					
Names and types					
Content of partnership/relationship as practice or clinical (e.g., national accrediting bodies, prof associations)					
• Geography: sub-nat'l, nat'l, regional, global					
• Global South-to-Global South					
Policy-related content of partnership/relationship (e.g., district, sub-national regional, national officials, global bodies)					
• Geography: sub-nat'l, nat'l, regional, global					
• Global South-to-Global South					
Reach of partners					
Direction of Knowledge Transfer					
• Outward to others					
• Inward to organization/personnel					
• Bi-directional					
Partner's use of your product/service					
Receive Timely Responses					
Funds leveraged through partnership/relationship					
Contributions or investments into existing infrastructure					

Item / Indicator	Time period	Target	Tracked value	Priority	Notes
Education/Training					
Influence on Educational Curricula					
• Level of Influence (national, local)					
Project is a Training Site					
• Number of Trainees/Participants					
Focus Population for Education/Training					
Capacity-Building					
• Number and type of informal or applied capacity building efforts					
• Examples of diffusion of knowledge or second-tier capacity building					
• Examples of content or process improvements with a partner					
External Visibility/Perception					
Expertise Recognized					
• Invited Speaker					
• Invited Chair/Reviewer/Advisor					
• Invited Presentations					
• External Consultation					
Publications					
Published Articles/Studies (peer-reviewed)					
Published Articles (non-peer reviewed)					
News Stories by media					
Newsletters or Briefs					
Advocacy					
Social Media Outreach					
Works Cited By					
Blog Reach					
Increased Public Involvement					
New Advocates or New/Existing Champions					
Media Partnerships/Earned Media					
Cross-Sector Impact					
Sector-Crossing Influence					
Number of Sectors/Organizations Influenced					
Level of Influence (low vs. high)					
Intervention or Model Replication					

# GLOSSARY OF TERMS

## Partnerships or Relationships

**Partnerships:** Any formal exchange (financial or non-financial) with groups or organizations that may be occurring or planned. Examples include joint grants, an MOU, sub-contracting, fellowships, and network memberships. Highlights the scope and reach of your own organization through partnerships with other organizations, and provides strategic assessment of each partnership.

**Relationships:** An informal exchange, collaboration, or connection (financial or non-financial) with individuals, groups, or organizations that may be occurring or planned. Examples include trusted unpaid advisors, potential sub-contractors, and non-formalized relationships with organizations. Highlights the scope and reach of your own organization through relationship with other organizations, and provides strategic assessment of each relationship.

### Notes on Partnerships and Relationships:

- List all relevant partners or relationships separately along with their content, reach, direction of knowledge transfer, etc. as targets and priorities will differ by type of partner. Copy and paste any relevant rows to capture the information for as many partners as desired.
- Prioritize and list only those partners and relationships determined as relevant and strategic.
- In few cases, an entity may be both a partner and in a relationship with your organization. Overall, partners will generally not fall under the relationship indicator as well.

**NAMES AND TYPES:** List out each partner /relation (e.g., NGOs, government, industry, academic) and the their corresponding type of partnership (e.g., sub-contractor, grantor, advisor, coalition, etc.) Descriptive text field.

**CONTENT OF PARTNERSHIP AS PRACTICE OR CLINICAL & CONTENT OF PARTNERSHIP AS POLICY-RELATED:** Whether the partner/relation is practice/clinical or policy-related is potentially important distinction to make based on your organization's strategies. Within the content, the geographic scope/reach of the partner/relation may be recorded and any South-to-South connections where learning, sharing, and collaboration may be important to document. Select a category (e.g., district, national) and/or include a Descriptive text field.

**REACH OF PARTNERS/RELATIONS:** Intended to briefly capture their scope of influence, depth of connections, perceived influence in the field. Descriptive ext field or consider categorizing into narrow vs. broad and superficial vs. deep.

**DIRECTION OF KNOWLEDGE TRANSFER:** Refers to who is providing, sharing, or benefiting in a partnership/relationship. Are both organizations benefiting? Is one giving more than the other? Is your partner giving you technical assistance or are you providing technical assistance? Select the appropriate direction.

**PARTNER/RELATION USE OF YOUR PRODUCT/SERVICE:** Use of your product/services, processes, frameworks, SOPs by your partners or relations. Note use in guidelines, service deliver, program decision-making, adaptations or translations, reprints or reuses. Yes/No or Descriptive.

**RECEIVE TIMELY RESPONSE:** This indicator is most relevant to partnerships/relationships with government officials, departments, or other decision-makers. Consider using responses within a reasonable timeframe to be a proxy for support and interest. Yes/No or Descriptive.

**FUNDS LEVERAGED THROUGH PARTNERSHIP/RELATIONSHIP:** Yes/No, Amount of Funds, &/or Descriptive.

**COLLABORATION/PARTNERSHIP WITH EXISTING INFRASTRUCTURE:** Describe the organization's contributions/investments into the existing infrastructure.

## Education / Training

Intended to capture the influences of your organization on an educational level, as well as focusing on training provided through your organization's work and projects.

**INFLUENCE ON EDUCATIONAL CURRICULA/LEVEL OF INFLUENCE:** Has there been an influence on educational curriculum and if so, was it on a national or local level? Consider influence in teaching, counseling, health education, community outreach, and other areas. Yes/No &/or Select appropriate level (national or local).

**PROJECT A TRAINING SITE/NUMBER OF TRAINEES & PARTICIPANTS:** If the project is also a training site, count the number of individuals who undergo training and participate. Yes/No &/or Count.

**FOCUS POPULATION FOR EDUCATION/TRAINING:** What group is targeted with your outreach: individuals from the local community, healthcare professionals nation-wide, etc.? Categorize and specify the type of population.

**CAPACITY-BUILDING:** Intended to capture potential results from your organization's education and training efforts. Descriptive text field or complete sub-indicators.

- **NUMBER AND TYPE OF INFORMAL OR APPLIED CAPACITY BUILDING EFFORTS:** Count, Descriptive text field, or categorize and specify type of efforts (e.g., weekend workshop, sharing of SOPs, etc.)
- **EXAMPLES OF DIFFUSION OF KNOWLEDGE OR SECOND-TIER CAPACITY BUILDING:** Expand on times when another group shares information you originally provided, shared, or trained. Descriptive text field or Categorize.
- **EXAMPLES OF CONTENT OR PROCESS IMPROVEMENTS WITH PARTNER:** For example, improved M&E systems, revised HMIS, revised SOPs, etc. Descriptive text field or Categorize.



## External Visibility/Perception

Intended to capture the visibility of your work with stakeholders and external audiences (outside of advocacy).

**EXPERTISE RECOGNIZED:** Indicators that highlight others' recognition of either a leader within your organization or your organization itself.

- **INVITED SPEAKER:** Examples include invitations to speak at a conference keynote, TED talks or other speaking sessions. Descriptive text field, Count, &/or Categorize.
- **INVITED CHAIR/REVIEWER/FACILITATOR:** Captures invitations to serve in an advisory role. Examples include invitations to expert review committees, technical advisory groups, or chairing a panel presentation or talk. Indicate regional, national, or global if relevant to your missions and strategy. Consider leadership roles in particular. Descriptive text field, Count, &/or Categorize.
- **INVITED PRESENTATIONS:** Invitations specifically for presentations at conferences or events. Descriptive text field, Count, or Categorize.
- **EXTERNAL CONSULTATION:** Count or describe opportunities for, or completion of external consultation. In tracking, consider the pros and cons to external consultation. What is the purpose? Consider the benefit to the organization, alignment with your mission, the opportunity cost, and pro bono vs. paid consultations. Descriptive text field, Count, or Categorize.

## Publications

This indicator broadly refers to organizational presence in variety of publications specified within the sub-indicators below.

**PUBLISHED ARTICLES/STUDIES (PEER-REVIEWED):** The number of peer-reviewed articles/studies your organization or staff members have contributed to; within the notes section examples of journals or specific articles may be given. Count.

**PUBLISHED ARTICLES (NON-PEER REVIEWED):** The number of non-peer reviewed articles the organization or members of the organization have contributed to; within the notes section examples of journals or specific articles may be given. Count.

**NEWS STORIES BY MEDIA:** The number of news stories available provided by your organization or work picked up by the media. Count.

**NEWSLETTERS OR BRIEFS:** The number of newsletters or briefs released by the organization itself. Count.

## Cross-Sector Impact

Focuses on the broad impacts an organization may have beyond their specific realm of work, spreading to other fields and sectors.

**SECTOR-CROSSING INFLUENCE:** Highlight the different sectors influenced by your organization's work. Descriptive text field.

**NUMBER OF SECTORS/ORGANIZATIONS INFLUENCED:** The number of varying sectors or cross-sector organizations that have been influenced by your organization or work. Count.

- **LEVEL OF INFLUENCE:** For each sector, cross-sector organizations or groups influenced, identify the level of influence, i.e. was it high or low? Select high or low, or Categorize.

**INTERVENTION OR MODEL REPLICATION:** Describe any replication in a non-health sector. May have beneficial or negative effects. Consider situations like co-partnering, franchising, being initiated by your organization, or external parties initiating replication

## Advocacy

Intended to help capture whether an organization is seen as a credible source on an issue, as well as the level of public awareness of the issue or organization.

**SOCIAL MEDIA OUTREACH:** Detail the social media applications used by your organization and make note of statistics (e.g., Twitter: number of followers, hashtag use, re-tweets, and number of key followers). Count and Descriptive text field.

**WORKS CITED BY:** The number of times the organization or organizational work (e.g., publications and/or projects) are cited by others. Count.

**BLOG REACH:** Posts or blogs written by the members of the organization (this may be on the organization's own blog or an external publication such as Huffington Post), the number of times it has been viewed or shared. May also track number of blogs. Count.

**INCREASED PUBLIC INVOLVEMENT:** Social media reach of others outside your organization (e.g., number of re-tweets or hashtags created around organization or issue of focus). Count &/or Descriptive text field.

**NEW ADVOCATES/CHAMPIONS:** Garnering support from newly targeted individuals or organizations who now take action in support of your organization/issue. These individuals or organizations, high-profile or not, publicly advocate/support your organization and/or issue. Count &/or Descriptive text field.

**EXISTING ADVOCATES/CHAMPIONS:** Individuals or organizations who continue to take action in support of your organization/issue. Count &/or Descriptive text field.

**MEDIA PARTNERSHIPS/EARNED MEDIA:** Evidence that a media company promotes a cause or showcases your work. May be measured through the number and types of media partnerships. Earned media refers to publicity gained through promotional efforts/news coverage other than paid advertising. Count &/or Descriptive text field.

Photo: North Star Alliance, Quintin Mills





## HOW WAS THIS TOOL DEVELOPED?

The domains of influence and the items listed were developed after a thorough review of various publications and databases. Most sources referenced are guides and manuals focused on the measurement and analysis of key areas such as knowledge transfer, stakeholder engagement, and advocacy and policy developed for organizations.

Keyword searches focused on social impact, influence, and knowledge transfer and were conducted in the peer-reviewed and grey literature as well as online resources and forums across a variety of sectors (i.e., not just health) as a means of producing relevant and far-reaching indicators to measure influence.

### Key Policy Influence Resource

URL: [www.odi.org/sites/odi.org.uk/files/odi-assets/publications-opinion-files/9011.pdf](http://www.odi.org/sites/odi.org.uk/files/odi-assets/publications-opinion-files/9011.pdf)

**Young, J et al. (2014). Rapid Outcome Mapping Approach (ROMA): a guide to policy engagement. Overseas Development Institute (ODI): Research and Policy in Development.**

*"I would envisage [this tool] being used as a mapping exercise to be conducted in a workshop format - with key data being collected in the two weeks prior... I could see the Senior Management team, or select members, being present in the workshop and discussing the results and where they thought the links were with our operational goals."*

Luke Disney, Executive Director, INSEAD Social Innovation Center, Former Executive Director, North Star Alliance

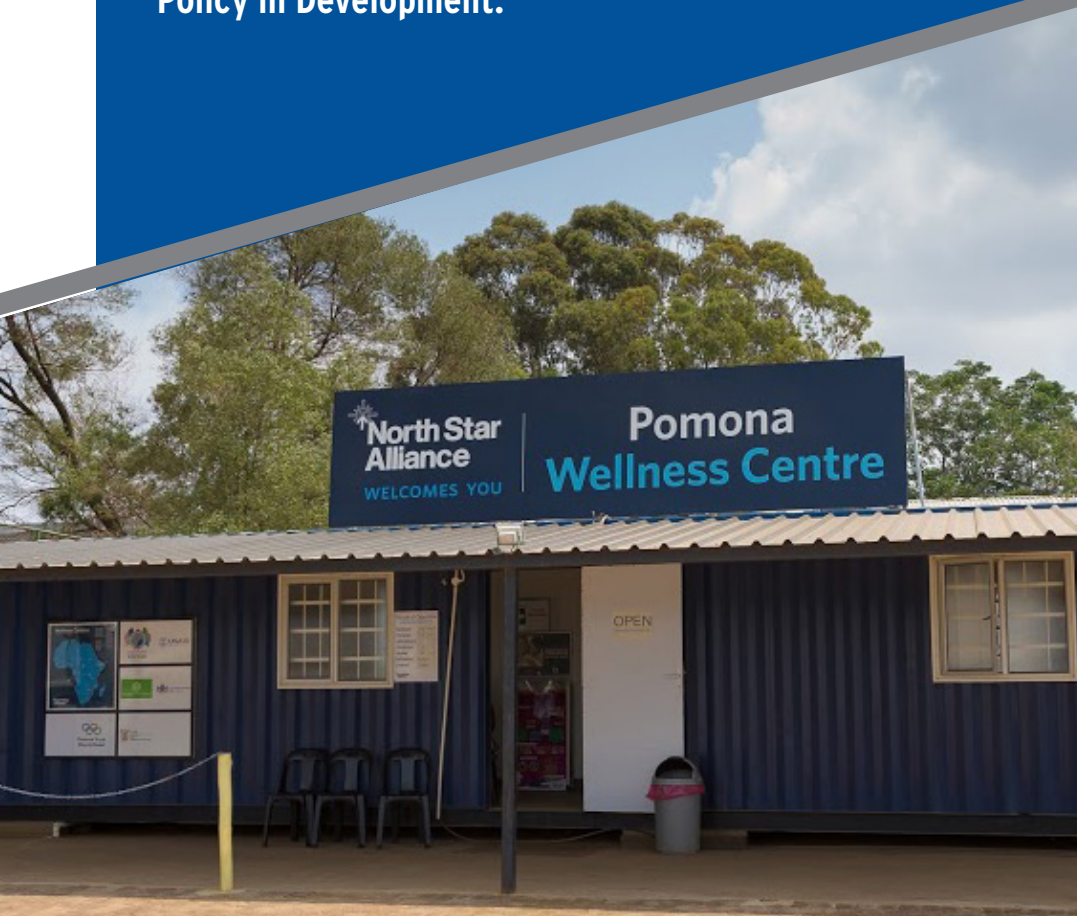


Photo: North Star Alliance, Quintin Mills



## REFERENCES

1. Brent AC, Labuschagne C. Social Indicators for Sustainable Project and Technology Life Cycle Management in the Process Industry. *Int J LCA*. 2006; 11(1):3-15. URL: <http://link.springer.com/article/10.1065%2Fca2006.01.233>  
» Identifies key social impact indicators and further separates them into categories for further evaluation.
2. Reardon R, Lavis J, Gibson J. *From Research to Practice: A Knowledge Transfer Planning Guide*. Toronto, Ontario; Institute of Work and Health; 2006. URL: <http://www.iwh.on.ca/from-research-to-practice>  
» Provides key information about knowledge transfer followed by practical thinking exercises to aid in learning.
3. Coston JM. A Model and Typology of Government-NGO Relationships. *Nonprofit and Voluntary Sector. Nonprofit Volunt Sect Q*. 1998; 27(3):358-382. URL: <http://nvs.sagepub.com/content/27/3/358>  
» Identifies different types of government-NGO relationships and the levels of linkage observed.
4. FHI 360 Research Utilization Indicators. URL: <https://www.k4health.org/toolkits/research-utilization/fhi-360-research-utilization-indicators>  
» A set of indicators developed to measure the extent research produced was moving into policy and/or practice.
5. LaFond, A. and Brown, L. (2003) *A Guide to Monitoring and Evaluation of Capacity-Building Interventions in the Health Sector in Developing Countries*. MEASURE Evaluation Manual Series, No. 7. Carolina Population Center, University of North Carolina at Chapel Hill. URL: [https://www.k4health.org/sites/default/files/M%26E\\_Guide\\_ms-03-07.pdf](https://www.k4health.org/sites/default/files/M%26E_Guide_ms-03-07.pdf)  
» A guide to health sector capacity-building in low-resource countries.
6. Coffman J. (2010) *Monitoring and Evaluating Advocacy: Companion to the Advocacy Toolkit*. UNICEF. New York City, NY. URL: [http://www.unicef.org/evaluation/files/Advocacy\\_Toolkit\\_Companion.pdf](http://www.unicef.org/evaluation/files/Advocacy_Toolkit_Companion.pdf)  
» Companion documents for UNICEF Advocacy Toolkit, focuses on strategies for M&E of an organization's advocacy.
7. Reisman J, Gienapp A, & Stachowiak S. (2007). *A Guide to Measuring Advocacy and Policy*. Organizational Research Services & Annie E. Casey Foundation. URL: <http://www.aecf.org/m/resourcedoc/aecf-aguidetomeasuringpolicyandadvocacy-2007.pdf>  
» Provides a means of determining meaningful ways to measure and evaluate an organization's advocacy and policy work impact.





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Photo: Jacaranda Health

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## ABOUT THE EVIDENCE LAB

The Duke Global Health Institute Evidence Lab conducts objective and high-quality evaluations using rigorous and innovative research designs paired with cutting-edge methods. Our team blends theory and practice, and draws upon the research and policy expertise across Duke University to inform our evaluations and to disseminate new evidence to policymakers and diverse stakeholders. We have deep, on-the-ground knowledge and experience with a wide range of global health projects and offer research and practice-based understandings of regional health challenges.

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*Providing social entrepreneurs in global health  
with the knowledge, systems, and networks needed  
to succeed.*



*SEAD brings together interdisciplinary partners through a coordinated effort across Duke University and leverages institutional relationships and networks to create an integrated global health social entrepreneurship hub for diverse stakeholders across the globe.*

*SEAD, in partnership with the U.S. Agency for International Development (USAID) and the USAID Higher Education Solutions Network (HESN), mobilizes a community of practitioners, investors, policymakers, faculty, staff, and students to identify, assess, help develop, build capacity of, and scale solutions, technologies, and business models for healthcare delivery and preventive services in developing countries around the world. Through this program, SEAD captures lessons learned and policy implications to ensure that our work impacts both entrepreneurs on the ground and the broader development community.*

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