

# Tools for Data Demand and Use in the Health Sector

Stakeholder Engagement Tool



**MEASURE** Evaluation  
MANUAL

# Stakeholder Engagement Tool

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## 1 PURPOSE

To be useful—and used—data initiatives must reflect the needs and values of relevant stakeholders.

Since such large amounts of money and effort are being devoted to collecting data from health facilities, communities and populations, maximizing the impact of that data for real-world benefit is essential. This is where the Stakeholder Engagement tool is so valuable.

Data is only valuable if it is seen as relevant and useful by prospective users. When data is seen as useful, it is more likely to be ‘owned’ by those who need it to inform decision making.

For data ownership to be built, the appropriate set of stakeholders needs to be identified and involved when proposing, designing, implementing, and reporting on research and monitoring and evaluation (M&E) initiatives.

- Who needs to use the data, and what questions are they seeking to answer?
- Who has influence and resources that can be brought to bear to aid this project?
- Who will be directly or indirectly affected by the outcome of this initiative?
- Who will support our plan? Who will oppose it? Why? How do we deal with it?
- What each of these individuals contribute to the process?

Effective stakeholder analysis answers these questions in a way that significantly improves a project’s design and outcomes.

Yet, typically, stakeholder analysis is done informally, in an ad hoc way. The rationale behind choosing and engaging stakeholders is rarely consistent, systematic, or documented. A researcher may talk to people to identify stakeholders and their roles, but the process is intuitive rather than systematic, and it rarely happens the same way twice. As a result, the following scenarios are typical:

- Only those stakeholders in agreement with the proposed plan are invited to participate.
- Stakeholders are selected only from the organization that is directly involved in the project.
- Stakeholders are invited to a preliminary briefing, but they are not included thereafter in project design.
- The process includes only the bare minimum number of stakeholders required to obtain formal approvals.
- Stakeholders included in the project may not be at the appropriate level in a community or organization to contribute to the project or make decisions.

If these conditions exist, the research of the M&E project will, in all likelihood, suffer as a result. For instance:

- Project developers may overlook important interest groups that could contribute valuable insights about the activity.
- The project will not benefit from the resources of those interest groups, such as government agencies with policy influence or media representatives who can build public awareness.
- The resulting data may be underutilized, because the people who could use it may not feel that it was developed with their interests and involvement.

For example, the national government of an African country did not support the findings of a new demographic and health survey because they had not been very involved in the process. In addition, the results conflicted with other indicators and data sources they had that cited similar information. In short, since they were not involved in the process, they did not see the value of the new data.

In another example, the clinic staff tasked with collecting data for a new M&E system did not see much purpose in what they had been tasked to do and, as a result, the data collected were of poor quality. They had not been engaged early on as stakeholders and thus had a difficult time appreciating their role in the larger context of the health information chain. As a result, staff members had little incentive to provide the energy and attention to detail that would have produced higher quality data.

In yet another example, an international donor agency undertook an ambitious stakeholder engagement strategy in preparing a national poverty reduction plan. They involved thousands of people in community focus groups. This activity sparked interest and excitement about the potential of the project. Unfortunately, there was no follow-up to inform the focus group participants about what the project had achieved. This lack of follow-up created disillusionment, and may discourage people from participating in such exercises in the future.

These are just a few examples of many that point to the same conclusion: there is a strong relationship between ownership, data quality, data relevance, and data use. People are more likely to use data in their decision making if they have been involved from the beginning, they believe the data are of high quality, and they feel the specific data address their priorities. Engaging stakeholders early and systematically in the research process enables the right questions to be asked in the right way, and, in turn, to define data activities that will generate quality information that can be used.

## 2 DESCRIPTION

Stakeholder engagement provides a structured way to identify and engage stakeholders to improve data initiatives.

The Stakeholder Engagement tool is a matrix framework and process for:

- **Identifying stakeholders.** The tool helps identify individuals and groups that are stakeholders in an M&E activity, either as contributors, influencers or beneficiaries.

- **Defining their roles and resources.** The tool provides a structured way to define the roles that stakeholders play in the activity, and assess the resources they could bring to bear.
- **Identifying dynamics among stakeholders.** The tool also provides a framework for assessing the interests, knowledge, positions, alliances, resources, power, and importance of various stakeholders. Who will resist the initiative? Who will support it? What are their reasons?
- **Setting the optimum stakeholder group.** The tool helps assess which stakeholders to include in the process by determining the relative priority of stakeholders. Which stakeholders have the highest priority?
- **Creating an engagement plan.** The tool helps the user to develop an engagement plan by providing examples of stakeholders engaged in pre-project briefings, project design, project execution, and follow-up activities.
- **Tracking stakeholder engagement.** Finally, the tool helps ensure that stakeholders are engaged as appropriate throughout all project phases, including the post-project follow-up that is so often overlooked.

The Stakeholder Engagement tool presented in this document was developed from extensive experience with healthcare and population planning issues in Africa, Asia, and the Caribbean. However, the tool reflects practices that are applicable to a broader realm of issues and environments. The tool is not a prescription; the varying needs of research and M&E projects require flexibility with an overlay of process consistency. Rather, the Stakeholder Engagement tool is intended to be used as a guide, and therefore provides guiding principles, suggested practices, and a matrix for recording information.

## 3 TEMPLATES

This section presents a blank version of the two-part Stakeholder Engagement tool. The next section describes the type of content to be included in each category and field. There are two parts to the tool:

- Part 1: Stakeholder Analysis Matrix—For project planning phases.
- Part 2: Stakeholder Engagement Plan—For project implementation and follow-up phases.

### **Practical considerations for using the tool**

The Stakeholder Engagement tool represents a guide to asking the right questions, but there is no one way or specific protocol for gathering the necessary information. Useful information to add to the matrix and plan can surface in any encounter, not just in meetings specifically designed for this tool.

### **The process tends to be iterative**

The process begins by asking a key informant to identify the key stakeholders. During discussions with those individuals, they will likely identify other stakeholders. Ultimately the matrix will capture the contributions, roles and engagement strategies of stakeholders and groups at different levels and with different vested interests.

**The tool can be used in hardcopy or electronic form**

It is generally better to print a copy of the matrix and write notes in it by hand, because typing on a computer can create a barrier to comfortable communication when working with key informants or stakeholders.

**Supplementary stakeholder profiles may be helpful**

The matrix is designed to allow the user to quickly and visually see that information is complete for each stakeholder group. Including additional supporting detail in a separate document can also be helpful in building a complete profile for each stakeholder group.



Name of stakeholder organization, group, or individual National, regional, or local?	Stakeholder description Primary purpose, affiliation, funding	Potential role in the issue or activity Vested interest in the activity	Level of knowledge of the issue Specific areas of expertise	Level of commitment Support or oppose the activity, to what extent, and why?	Available resources Staff, volunteers, money, technology, information, influence	Constraints Limitations: need funds to participate, lack of personnel, political or other barriers
Non-governmental sector						
Other civil society target audiences						
International donors						

<sup>1</sup> Adapted from Brinkerhoff, D. and B. Crosby, *Managing Policy Reform: Concepts and Tools for Decision-makers in Developing and Transitioning Countries*, Kumarian Press, CT, 2002 and *POLICY, Networking for Policy Change: An Advocacy Training Manual*, 1999.

## Stakeholder Engagement Plan<sup>2</sup>

Program issue: \_\_\_\_\_

Proposed activity: \_\_\_\_\_

Date: \_\_\_\_\_

Stakeholder organization, group, or individual	Potential role in the activity	Engagement strategy How will you engage this stakeholder in the activity?	Follow-up strategy Plans for feedback or continued involvement
Government sector			
Political sector			
Commercial sector			

Stakeholder organization, group, or individual	Potential role in the activity	Engagement strategy How will you engage this stakeholder in the activity?	Follow-up strategy Plans for feedback or continued involvement
Non-governmental sector			
Other civil society target audiences			
International donors			

<sup>2</sup> Adapted from Brinkerhoff, D. and B. Crosby, Managing Policy Reform: Concepts and Tools for Decision-makers in Developing and Transitioning Countries, Kumarian Press, CT, 2002 and POLICY, Networking for Policy Change: An Advocacy Training Manual, 1999.

## 4 GUIDING PRINCIPLES

Issues and considerations for using this tool

### **Ownership fosters use**

The ultimate goal of M&E efforts is to create useful information that is actually used. Promoting use rests on two key questions:

- Will analysts trust and use the data generated by surveys, studies, and M&E data collection systems?
- Will officials trust and rely on the analysis to design interventions, make management decisions, and formulate policy?

The answers to these questions are strongly connected to ownership. Experience has shown that data use is frequently linked to the extent of the ownership and commitment people have in these systems and the research findings they produce.

### **Stakeholder engagement improves relevance of data**

Once again, given that the ultimate goal of M&E efforts is to create useful information, data specialists have to ask:

- Is the study designed to gather relevant information on relevant issues—at an appropriate level?
- Is it socially and culturally appropriate?
- Does it reflect the realities of the people it is ultimately intended to benefit?

The answers to those questions depend largely on the degree to which stakeholders with a vested interest in the outcome have been included in project design.

It is tempting to include only those people who share the vision of the data specialists and are likely to support the initiative and/or only the most limited number of people required to secure project approval. But the relevance of the data initiative and the usefulness of the results may be greatly enhanced if the process engages stakeholders of many types.

### **Stakeholders should represent a diversity of perspectives**

The process should include a broad range of stakeholders, including, at a minimum, representation from the following three categories:

- Technical specialists, such as an M&E coordinator or co-primary investigator.
- People who are empowered at the appropriate governmental level to implement any planned improvements, such as a national-level or district-level malaria program manager.
- Development partners, such as staff of donor agencies in the funding/reporting cycle.

Stakeholders should be included from various levels—national, regional and local—as appropriate to the activity. Stakeholders who have the interest, expertise, resources, or influence to be champions for change should be considered with particular interest. Whether program or policy changes are being considered, engaging such champions can help influence a positive outcome.

### **Recognize the differing roles of stakeholder groups and individuals**

Stakeholder contributions will vary. For example, different stakeholders may offer:

- Advocacy at high levels of government.
- Greater public awareness through the media.
- Technical inputs to the design of the activity.
- Resources that can be mobilized for implementing the activity.

For some stakeholders, the role will be that they are personally and directly affected by the issue under study. For example, in planning HIV/AIDS-related projects, several people living with HIV/AIDS should be included. Their perspectives can enhance the accuracy, appropriateness, and effectiveness of the activities and interventions.

The Stakeholder Engagement tool is designed to capture all of these potential roles in a systematic way.

### **Engage stakeholders throughout the project process—from design to follow up**

Oftentimes, stakeholder engagement has been limited to a pre-project briefing and post-project debriefing, with the primary objective to convince stakeholders to endorse an initiative that was already formulated. Stakeholders may have also been solicited for their feedback later, but not for their active involvement in project development.

By contrast, the Stakeholder Engagement tool supports a three-stage process: identify, engage and follow up. The tool prompts users to consider stakeholder engagement not just in the design phase of the activity, but throughout all phases of the project by developing an action plan for engaging stakeholders.

Engaging stakeholders throughout the process, not just at the beginning and end, can raise awareness of the activity and facilitate the use of data and information produced by the activity.

### **Acknowledge the unintended effects of stakeholder engagement**

The more stakeholders, the more cumbersome the engagement process. It takes time, energy and resources to expand the number of stakeholders included in an activity. It is one thing to gather a focus-group discussion of 10 representatives and another thing entirely to organize a formal stakeholder meeting of 150 high-level officials with media. The relative value of each person's involvement versus the added time and costs of expanding the number of stakeholders needs to be considered carefully at the outset.

### **The more stakeholders, the greater the complexities of project design**

As more stakeholders are included— each with their own unique perspectives and priorities—the likelihood of finding inconsistent or competing interests may increase. Their diverse demands may require negotiation and compromise in the activity, which may or may not improve the outcome.

For example, national and ministry program managers tend to want summarized demographic and health survey data, while district officials desire data disaggregated at the district-level. Similarly, local leaders might wish to use the survey data for municipal planning, whereas national

leaders might focus on increased social services—these very well could be competing interests. Resolving differences requires negotiation and compromise, and increases the difficulty in building consensus.

### **A large stakeholder group might stimulate excessive expectations**

As a larger number of stakeholders are engaged, there is an increased risk of creating more demand than the activity can fulfill and politicizing the issue in an unintended way. For example, when media representatives are included—and thereby the public is involved—there is a danger of raising unrealistic expectations about what the activity will achieve. If stakeholders do not see the rapid change they imagine should happen, they can become disillusioned and less willing to participate in future activities.

### **Transparency can add unwanted accountability**

Engaging a large group of stakeholders could raise the profile of an activity in a way that stakeholders may find unproductive. For example, opening up a researcher's work to public scrutiny could invite unwanted critique of a research design that has already been reviewed and found to be fundamentally sound.

Addressing the unintended effects of stakeholder engagement:

- All objectives of the activity should be clearly defined at the beginning so the most essential stakeholders to engage can be identified. The maximum number of possible stakeholders should then be identified. The optimum number to ultimately engage will be somewhere between these two extremes, commensurate with the time and resources available.
- The level of stakeholder involvement should be appropriate to the size/scale of the intervention being proposed. More is not necessarily better.
- Anticipated outcomes must be clarified in stakeholder meetings to help minimize unrealistic expectations. Timeframes, levels of resources available, and cost-sharing implications to be met by different stakeholder groups should also be reiterated during these meetings.
- Stakeholder involvement should be limited to those who can directly influence the quality of the research or data, or have a use for the data. Those not directly benefitting from the activity should not be involved.
- The political or culturally sensitive nature of certain topics, and how stakeholders may react, need to be taken into consideration. For example, HIV/AIDS programs raise political and religious sensitivities regarding condom distribution programs, homosexuality, and intravenous drug use—topics that church representatives and public officials may be reluctant to address.

### **The Stakeholder Engagement tool is flexible and adaptable**

This tool can be tailored for any type of setting that entails information gathering and use at the international, national, and sub-national levels. Outlined in this document is the typical sequence of steps that would be followed in implementing the Stakeholder Engagement tool. Not all steps, however, will be relevant for all cases. For example, only the up-front stakeholder analysis, as part of a data assessment, could be performed; or a stakeholder engagement plan to develop activities

for a proposal could be created. The Stakeholder Engagement Matrix provided in this tool can be incorporated into any type of M&E or research activity.

## 5 USE

The Stakeholder Engagement tool is useful in planning, executing, and sustaining any project related to data demand and use.

Data demand and use processes have several different points of entry. For example, a project that requires stakeholder engagement could be triggered by any of these conditions:

- Stakeholders report that they need information that does not yet exist.
- Information exists, but it is not being used as it should.
- A decision needs to be made based on data not yet located or generated.
- A data use plan, information use map, or other tool is being used.
- An M&E system must be developed or upgraded.

The project in question could be a primary research project, such as a survey, data collection effort, or program evaluation. It could also entail operations research, such as further analysis of a health service provision assessment. Finally, the activity could involve development and implementation of an M&E system component itself.

The Stakeholder Engagement tool is of great value in any of these scenarios and project types, and should be used at the earliest stage of project design, prioritization, and preparation. It is important to identify and acknowledge areas of resistance, as well as areas of potential support early in the process. Stakeholder engagement should continue in the implementation phase, in sustaining the activity, and in advocacy efforts that flow from the activity.

## 6 AUDIENCE

Key people involved in designing activities to collect, analyze, report, or use health information.

The Stakeholder Engagement tool has two principal sets of users, with unique roles in using the tool:

### 1. Program managers and directors or other high-level program officials:

- Identify key project management team members.
- Work with the project management team and other host country counterparts to complete the Stakeholder Engagement Matrix.
- Validate the findings from the stakeholder analysis.
- Endorse or oversee stakeholder engagement activities.
- Participate directly in engagement activities with stakeholders at an equivalent level, such as senior government and political officials and other organizational leaders.
- Serve as spokespersons in high-profile media engagements.

**2. Program management team members, including the institute or organization that is sponsoring/coordinating the activity:**

- Contribute their knowledge of stakeholders who have a vested interest in the program, activity or issue.
- Identify individuals who are not only stakeholders, but potential champions for this particular activity.
- Contribute their knowledge of the strategies that could be successful in this context, based on their experience.
- Collaboratively complete the Stakeholder Engagement Matrix.
- Implement the engagement strategies and follow-up measures as defined in the Stakeholder Engagement Matrix.
- Revisit the matrix at various project stages to ensure that stakeholder involvement is continued as appropriate throughout the project life cycle.

## **7 FIELD APPLICATIONS**

### **Tanzania, 1979**

A researcher with an international agency was developing a plan for an integrated rural development project. The question at hand was, “Should the project focus foremost on clean water supplies, building roads, or improving health care?” A series of village-level focus group discussions was held to determine the right priorities.

Local men were divided about the relative importance of those essential infrastructure improvements. Government agencies, if asked, would naturally advocate for the activities that aligned with their missions. But to everyone’s surprise, local women said that their top priority was preventing sexual violence. The women were routinely subjected to intimidation and assault and had taken to doing their daily chores in protective groups. That issue had not even been on the radar.

If the researcher had not included village women, the issue might not have come to light at all. The project, if designed without their unique perspective, would have taken a very different course. It might ultimately have been deemed a success while doing little to improve a critical element in the daily lives of half the local population.

### **Kenya, August 2004 through August 2005**

*Ongoing stakeholder involvement in the Analysis of Recent Trends in Fertility and Contraceptive Use, Nairobi, Kenya—Further analysis of the Kenya Demographic and Health Survey*

The 2003 Kenya Demographic and Health Survey documented a stall in progress on key fertility measures and contraceptive use. Why was this trend occurring, and what should be done about it? MEASURE Evaluation worked with local counterparts to apply the Stakeholder Engagement tool to ensure broad involvement and ownership in the analysis. The team knew that if corrective actions were to be effective, a broad range of key decision-makers needed to be involved from the very beginning—not just in approving a study, but also in selecting the issues to be studied.

The process began with a one-day stakeholders meeting of more than 90 policymakers and program managers from the public sector, non-governmental organizations (NGOs), and donor organizations, hosted by the National Coordinating Agency for Population and Development (NCAPD).

There was high-level, active participation from the Ministry of Planning and National Development, the Central Bureau of Statistics, Ministry of Health headquarters, and provincial and district representatives. Representatives from sub-national agencies and the private sector, who are not often involved in the design of national evaluation efforts, were also included. This meeting assembled new and non-traditional stakeholders in the exercise. The workshop was covered by television and print media, which raised public awareness of the issue.

Following the stakeholders meeting, teams of Kenyan researchers were assigned to the six major areas of investigation identified during the meeting. Initial findings were presented at an April 2005 meeting on “repositioning family planning” organized by the NCAPD for members of parliament. At that meeting, a Parliamentary Caucus on Reproductive Health was formed and assumed leadership in the national effort.

A second stakeholders meeting was held in August 2005 to review the full results of the analysis and prepare a Data Use Calendar (another MEASURE Evaluation Data Demand and Use tool). The Data Use Calendar is being used to ensure that the analysis results are actively used to guide decisions on corrective actions to revitalize family planning and reproductive health services in Kenya.

## **8** EXAMPLE APPLICATIONS

Madagascar’s Ministry of Health, Family Planning, and Social Protection (MOHFPSP) was seeking strategies to improve women’s access to the popular injectable contraceptive depotmedroxyprogesteroneacetate (DMPA). In 2006, the MOHFPSP updated its National Reproductive Health and Family Planning (FP) Norms and Procedures to allow community-based workers (CBWs) to provide DMPA services. Before implementing the CBD program, the MOHFPSP partnered with international partners to conduct a pilot study to determine the safety, feasibility, and acceptability of integrating DMPA services into existing community-based distribution of family planning. In an effort to ensure that all key stakeholders were aware of the rigorous design of the pilot intervention, a thorough analysis of relevant stakeholders was conducted. A Stakeholder Engagement Plan was also created to ensure that all relevant stakeholders had a role in the scale up of this important intervention (note: the sample matrices shown are not the actual matrices created in Madagascar).

## Sample Stakeholder Analysis Matrix

**Program issue:** CBD provision of DMPA

**Proposed activity:** Pilot study and intervention to test the safety, feasibility, and acceptability of integrating DMPA services into existing community-based distribution of family planning commodities

**Date:** July 2006

<b>Name of stakeholder organization, group, or individual</b> National, regional, or local?	<b>Stakeholder description</b> Primary purpose, affiliation, funding.	<b>Potential role in the issue or activity</b> Vested interest in the activity.	<b>Level of knowledge of the issue</b> Specific areas of expertise.	<b>Level of commitment</b> Support or oppose the activity, to what extent, and why?	<b>Available resources</b> Staff, volunteers, money, technology, information, influence.	<b>Constraints</b> Limitations: need funds to participate, lack of personnel, political or other barriers.
Government sector						
MOHSP National: Dr. Finar	Responsible for approving changes to the FP service delivery and service delivery guidelines.	Vested interest. Will approve the service delivery change if the evidence supports it.	FP, National FP programs.	Support study.	Highly influential. Staff to train and supervise CBD agents.	MOH staff very busy. Plan meetings 1 month in advance to avoid delays. Will need funds for training events.
MOHSP Regional: Drs. Baku, Ramannonsoa, Raharison, Andriatsiferanarivo, Rafara, Razanakoto	Responsible for implementing and assuring quality of service delivery changes in the regions.	Vested interest. Will support service delivery change with national approval.	FP, regional FP program implementation and monitoring.	Support increased access of FP.	Staff to train and supervise CBD agents.	Will need funds for training events and supervision visits.
National Commodities Storehouse: Dr. Anisoa	Responsible for ordering commodities.	Vested interest. Commodity provision.	Commodity ordering and stock assurance.	Support increased distribution of DMPA and related commodities as long as national ordering and reporting standards are maintained.	Commodities.	Will need funds or donation for additional commodities and related supplies.
Professional Associations						
Malagasy National Association of Doctors: Dr. Ranomenjanahary	National network to unite physicians to work on important public health issues.	Vested interest.	FP provision.	Highly influential with all doctors in the country. Currently DMPA provision is their responsibility. Possible they will be threatened to have lay-health providers fill their role.	Resources: limited.	If not involved early in activity, could negatively affect acceptance of study results.

<b>Name of stakeholder organization, group, or individual</b> National, regional, or local?	<b>Stakeholder description</b> Primary purpose, affiliation, funding.	<b>Potential role in the issue or activity</b> Vested interest in the activity.	<b>Level of knowledge of the issue</b> Specific areas of expertise.	<b>Level of commitment</b> Support or oppose the activity, to what extent, and why?	<b>Available resources</b> Staff, volunteers, money, technology, information, influence.	<b>Constraints</b> Limitations: need funds to participate, lack of personnel, political or other barriers.
Professional Associations						
Malagasy National Association of Nurses: Mime. Rafara	National network to unite physicians to work on important public health issues.	Vested interest.	FP provision.	Highly influential with all nurses in the country. Currently, DMPA provision is their responsibility. Possible they will be threatened to have lay-health providers fill their role. Could negatively affect acceptance of study results.	Resources: limited.	If not involved early in activity, could negatively affect acceptance of study results.
Non-governmental sector						
Women's Associations— Mme. Randriana.	Highly influential. Advocate for women's rights and well-being.	Vested interest. Promote study results if positive.	Medium.	Support improved access to contraception but need to be sure it is safe before supporting DMPA provision by CBD agents.	Access to media, other women's networks.	No funding, possible resistance could stop program implementation.
Other civil society target audiences						
Village leadership	Village chief has strong influence in the village. Need cooperation to implement new service.	Vested interest. Would be responsible for selecting CBD agents and promoting the available product.	Low.	Some leaders support FP provision in their communities.	Influence. CBD agents reside in villages. Access to communities where programs will be implemented.	No funding, possible resistance could stop program implementation.
International donors						
USAID—Mr. Smith	Donor. Currently contributes to national FP program.	Fund study and first wave of intervention implementation (assuming positive results).	International FP programs.	Highly support.	Funds, influence, international experience with CBD or DMPA.	None.
UNFPA—Dr. Kayota	Donor. Currently contributes to national FP program.	Provide commodities and fund first wave of intervention implementation (assuming positive results).	International FP programs.	Highly support.	Funds, commodities, influence.	None.

## Sample Stakeholder Engagement Plan

**Program issue:** CBD Provision of DMPA

**Proposed activity:** Pilot study and intervention to test the safety, feasibility, and acceptability of integrating DMPA services into existing community-based distribution of family planning commodities

**Date:** \_\_\_\_\_

<b>Stakeholder organization, group, or individual</b>	<b>Potential role in the activity</b>	<b>Engagement strategy</b> How will you engage this stakeholder in the activity?	<b>Follow-up strategy</b> Plans for feedback or continued involvement.
<b>Government sector</b>			
MOHSP National: Dr. Finar.	Responsible for approving changes to the FP service delivery and service delivery guidelines.	Lead the Steering committee for the study and intervention roll out. Dr. Finar acts as co-PI for the study.	Via quarterly Steering Committee, stakeholder will stay abreast of study and intervention progress.
MOHSP Regional: Drs. Baku, Ramamonsoa, Raharison, Andriatsiferananarivo, Rafara, Razanakoto.	Responsible for implementing and assuring quality of service delivery changes in the regions.	Quarterly updates via the MOH newsletter. Presentation on activity progress at biannual regional meetings.	Via newsletter and regional meetings.
National Commodities Storehouse: Dr. Anisoa.	Responsible for ordering commodities.	Member of the Steering Committee.	Via quarterly Steering Committee, stakeholder will stay abreast of study and intervention progress.
<b>Professional Associations</b>			
Malagasy National Association of Doctors: Dr. Ranomenjanahary.	National network to unite physicians to work on important public health issues.	Present study rationale and existing international data on safety of CBD of DMPA at annual meeting. Visit at office to discuss activity. Member of Steering Committee.	Via quarterly Steering Committee, stakeholder will stay abreast of study and intervention progress.
Malagasy National Association of Nurses: Mme. Rafara.	National network to unite physicians to work on important public health issues.	Present study rationale and existing international data on safety of CBD of DMPA at annual meeting. Visit at office to discuss activity. Member of Steering Committee.	Via quarterly Steering Committee, stakeholder will stay abreast of study and intervention progress.
<b>Non-governmental sector</b>			
Women's Associations: Mme. Randriana.	Highly influential. Advocate for women's rights and well-being.	Visit at offices to discuss activity rationale and existing international data on safety of CBD of DMPA.	Via MOH newsletter.
<b>Other civil society target audiences</b>			
Village leadership.	Village chief has strong influence in the village. Need cooperation to implement new service.	Visit villages to discuss activity rationale and potential benefits to the community.	Via regional supervision visits from the MOH.
<b>International donors</b>			
USAID: Mr. Smith.	Donor. Currently contributes to national FP program.	Member of Steering Committee	Via quarterly Steering Committee, stakeholder will stay abreast of study and intervention progress.
UNFPA: Dr. Kayota.	Donor. Currently contributes to national FP program.	Member of Steering Committee.	Via quarterly Steering Committee, stakeholder will stay abreast of study and intervention progress.

## 9 IMPLEMENTATION CHECKLIST

### Creating a Stakeholder Engagement Plan

#### Step 1—Identify the need

- 1.1—Identify a potential need or opportunity to better define and improve stakeholder involvement. Specific activities, such as design of a specific research study, or the launch of an advocacy campaign, may prompt the implementation of the stakeholder engagement process.
- 1.2—Determine how the stakeholder engagement process will be implemented to address this need.

Will the tools be used to identify potential stakeholders only (Stakeholder Analysis Matrix) ? Or, will a more comprehensive process be applied where stakeholder roles are also identified and elaborated, and their involvement in the activity managed over time (Stakeholder Engagement Plan)?

These decisions will influence certain aspects of this process, such as how much effort the process will require and who will be responsible for managing the process.

#### Step 2—Identify stakeholders

- 2.1—Coordinate with colleagues working on the activity in question. Convene them to identify the individuals, organizations, and other bodies that will be affected by implementation of the activity. Stakeholders who have the interest, expertise, resources, or influence to be champions for change should be considered with particular interest.
- 2.2—Consider not just the contributors to the activity in question but also the influencers (both positive and negative) and the beneficiaries. A broad range of stakeholders from various levels (national and sub-national) should be considered. Encourage the group to think broadly and outside of the usual counterparts. Ask: In addition to this list, who else needs to be involved in the process?
- 2.3—Identify dynamics among stakeholders. By assessing the interests, knowledge, positions, alliances, resources, power, and importance of various stakeholders you will begin to uncover how they can be engaged in your activity to improve the end outcome.

#### Step 3—Define potential roles for stakeholders in the activity

- 3.1—Consider how the stakeholder can influence your activity in the short and long term. Think about their immediate influence and the influence they have on other potential stakeholders. Different perspectives from a wide variety of stakeholders can enhance the accuracy, appropriateness, and effectiveness of the activities and interventions.

- ❑ 3.2—Determine the level of participation for each stakeholder. Questions posed during this discussion might be: What do we see as each person’s role in this process? What is their expected participation? Some stakeholders may have a vested interest in the activity.

#### **Step 4—Identify the resources stakeholders bring to bear**

Identifying the resources stakeholders bring to your activity may help expand the scope of your activity. Consider what each stakeholder can contribute to the activity. Remember that resources are not always financial. One stakeholder may provide an entry point to high level policy-makers that would be helpful to you in the implementation of your activity. Another may allow you greater public awareness through access to media channels. Yet another may offer technical inputs into the design of your activity. It is Important to identify these resources as they can help you to refine how to meaningfully involve each stakeholder in your activity.

#### **Step 5—Identify the level of commitment of the stakeholder**

The level of stakeholder commitment will strongly affect how that stakeholder cooperates with or hinders your activity. Determine if the stakeholder will support or oppose the activity, to what extent, and why. If the stakeholder is committed to the activity the probability that they will facilitate your work is higher. Many times negative perspectives of stakeholders also influence the success of activities and interventions. Consider who may create barriers to and predict what they may be. By being aware of these potential negative influencers you can develop strategies for handling their involvement.

#### **Step 6—Set the optimum stakeholder group**

- ❑ 6.1—Review the data entered into the Stakeholder Analysis Matrix and discuss the relative priority of stakeholders to involve in the activity.

As more stakeholders are included—with their unique perspectives and priorities—the likelihood of finding inconsistent or competing interests may increase. Their diverse demands may require negotiation and compromise in the activity, which may or may not improve the outcome. The relative value of each person’s involvement versus the added time and costs of expanding the number of stakeholders needs to be considered carefully at the outset and a core group of stakeholders should be identified. The core stakeholders should be engaged throughout the activity implementation, not just at the beginning and end. This can raise awareness of the activity and facilitate the use of data and information produced by the activity.

- ❑ 6.2—Consider identifying ‘tiers’ of stakeholders for different levels of involvement and different times in the activity.

#### **Step 7—Create a Stakeholder Engagement Plan**

- ❑ 7.1—Brainstorm the roles each stakeholder can play in the activity, and define the specifics of how you will engage the stakeholder in each sub-activity.

Start by listing the steps in your activity and discussing whether the stakeholder can contribute to this step. Consider the importance of involving stakeholders in a meaningful way. Activity engagement can build ownership of the data and information generated by the activity.

- ❑ 7.2—Describe plans for continued involvement or communication with the stakeholder, providing feedback on the results and impact of the data activity, and fully acknowledging their contributions.
- ❑ 7.3—Determine a plan for management of the stakeholder engagement process.

An individual or organization should be appointed who is tasked with reviewing the documents and convening activity leadership to review and revise the plan. Ask: How will the process be managed from here on? How often will the Engagement Plan be reviewed and revised? You can help articulate this process and thereby ensure the continued usefulness of the Stakeholder Engagement Plan as a perpetual management tool and not simply a one-time exercise.

- ❑ 7.4—The Stakeholder Engagement Plan is dynamic and flexible. It should be reviewed at various points throughout the activity and stakeholder involvement should be revised based on experiences working with them.

### **Step 8—Track stakeholder engagement throughout the project**

During implementation of the activity, document contributions of stakeholders (both negative and positive) and their impact on how information has been used for decision making. Where possible, include external validation, such as through newspaper articles, newsletters, and memos from finance and planning officials. This effort helps create continued awareness and appreciation of the importance of collaborative efforts and the key role of stakeholder involvement in the implementation of health activities.

## **10 CONCLUSION**

Improving the quality and use of data by building broad-based ownership and perspective into the design, execution, and application of data initiatives.

Data collection systems are often designed and developed with a singular goal. As a result, huge volumes of data are created, but little may actually be used to directly benefit programs and people.

- Does the program or intervention serve all the people it is intended to serve?
- Are we making progress toward improving health and welfare?
- If not, what should be done differently?

The extent to which program managers can answer these questions is oftentimes related to how well data initiatives have incorporated the broad perspectives of key stakeholders—from the highest levels of influence to the people directly affected by the issue under study.

This is where the Stakeholder Engagement tool can be invaluable. Using a straightforward matrix, this tool facilitates a structured process for:

- Identifying stakeholders.
- Defining their potential roles in the activity.
- Identifying the resources they can bring to bear.
- Identifying dynamics among stakeholders.
- Setting the optimum stakeholder group.
- Creating an engagement plan.
- Tracking stakeholder engagement throughout the project.

Through these steps, the tool promotes the key goals of improving the quality and use of data.

- By inviting diverse and relevant viewpoints into design processes, stakeholder engagement ensures that project design thoroughly reflects cultural, political, economic, and social realities. The data will be useful.
- By enabling individuals to gain ownership of the data activity, stakeholder engagement increases their commitment to quality in data collection and increases their trust in and use of data for subsequent analysis and decision making. The data will be used.

Ultimately, stakeholder engagement practices help ensure that new M&E initiatives are designed to deliver real-world benefits, improving the general health and welfare of a population.

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