

Map your network: Practical tools to better understand and connect with your stakeholders





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Project managers and researchers often think of stakeholder engagement and communication as a separate activity, one that sits outside their core work. In reality, engaging with stakeholders from the very beginning of a project is the best way to ensure that research results are acted upon, funding bodies understand the impact of your work and your work is connected to what is happening in the world outside the lab.

To most effectively communicate with stakeholders, we must first understand who they are, what their interests are and how we might reach them. Different audiences process information in different ways, understand the world differently and therefore need communications tailored to them. Relationship network mapping provides a simple – yet powerful - way to visually map your stakeholders and identify the key leverage points for communication.

This workshop will introduce these techniques with real-world case study examples. Through a series of exercises, we will use simple and practical tools that put these ideas into practice in your own projects.

- 1. Who Stakeholders defined
- 2. What Stakeholder engagement defined
- 3. Why Engage stakeholders
- 4. How Some tools
 - Power/interest mapping
 - Network mapping
- 5. When and how to engage
 - Mapping to the research project process
 - Tactics
- 6. More info and references
- 7. Close by noon



HUMAN SPECTROGRAM

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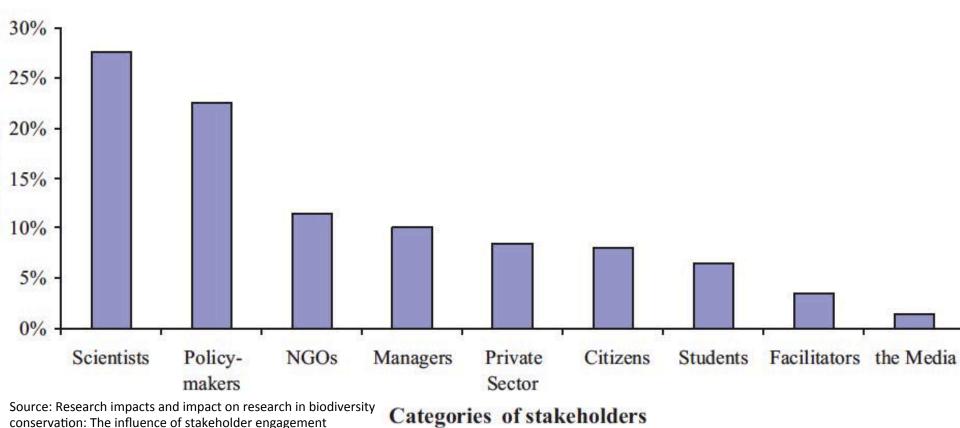
WHO DO WE MEAN BY STAKEHOLDERS?

Health Care

	Non-Health Care	Health Care
Consumers	American people, citizens Children and families Communities, activists Customers General public Local residents Specific audiences (e.g., tribes) Students and their families	Advocates and advocacy groups Caregivers Current and potential service users General public Patients Patient families & friends
Professionals	Criminal justice professionals Education (teachers, academics) Employees Entertainment Environmentalists Human rights Social workers Teachers Urban planning (planners, architects, developers)	Institutions (e.g., cancer centers) Mental health providers Medical students, residents & fellows Professional societies Providers (e.g., doctors, nurses) Public health practitioners Researchers (bench science, clinical public health, social sciences) Social workers
Researchers	Health care researchers	Environmental health researchers
Policymakers and Payers	Employers Government agencies and leaders (local, tribal, regional, State, Federal, and international) Insurers	Clinical guideline developers Employers Funding agencies Government Labor unions
Industry	Shareholders Engineers Suppliers Corporations, businesses	Medical device manufacturers
Nongovernmental organizations (NGOs)	Nonprofits and leaders Venture philanthropists Charities, foundations Academia Trade/labor unions	

Source: Innovative Methods in Stakeholder Engagement: An Environmental Scan

Biodiversity



Rural economy and land use

Rank

Public (50.5)

Private (27.8)

Public (36.6)

Public (44.8)

Public (41.7)

Third (25.8)

Public (26.3)

Third (27.4)

Third (33.0)

Third (23.5)

Private (33.9)

Private (14.1)

Societal (24.2)

Private (25.8)

Private (24.3)

Third (12.6)

Private (5.9)

Societal (9.6)

Third (21.6)

Societal (10.2)

Societal (8.7)

Societal (0.9)

Societal (-)

 Table 1

 Ranking of stakeholder sectors by nature of relationship and contribution to research project (%).

Primary relationship of stakeholder to project

Contributed to project design

Gave feedback on findings

Provided access to research facilities, materials, study sites

Contributed to knowledge production as equal partners

Contributed to objective setting/problem framing

	(N = 1032)	1 st	2nd	3rd	4th
Research subject	42.5	Private (47.4)	Societal (30.3)	Public (17.5)	Third (4.8)
Event participant	32.0	Public (60.3)	Private (17.9)	Third (15.2)	Societal (6.7)
Steering/advisory group	8.1	Public (59.5)	Private (25.0)	Third (15.5)	Societal -
Project partner	5.1	Third (56.6)	Public (41.5)	Private (1.9)	Societal -
Consultee	4.2	Public (58.1)	Private (23.3)	Third (16.3)	Societal (2.3)
Research customer	3.6	Private (91.9)	Public (8.1)	-	
Visitor to project/work shadowing host	2.5	Private (96.2)	Public (3.8)	-	- 6
Other	2.0	Public (45.0)	Private (40.0)	Third (15.0)	=:
Stakeholder contribution to project	% of stakeholders $(N = 1048)$	1st	2nd	3rd	4th
Provided information or views as research subjects	53.6	Private (42.3)	Public (27.7)	Societal (16.2)	Third (13.7)
Assisted in data collection	32.0	Private (46.9)	Public (25.7)	Societal (15.2)	Third (12.2)
Received copies of research findings/outputs	29.6	Private (55.8)	Public (31.0)	Third (11.6)	Societal (1.6)

% of stakeholders

Helped to disseminate findings 3.2 Public (70.6)

Source: Stakeholder engagement and knowledge exchange in environmental research

18.9

18.5

17.7

17.5

11.0

Stakeholder Questions

- Who will be impacted by the project?
- Who will be responsible or accountable for the project?
- Who will have decision authority on the project?
- Who can support the project?
- Who can obstruct the project?
- Who has been involved in this type of project in the past?
- Who can support scaling of your results?
- Who are the policy makers interested in your results? That should be interested?

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WHAT ABOUT STAKEHOLDER ENGAGEMENT?

By "engagement in research," we refer to the meaningful **involvement** of patients, caregivers, clinicians, and other healthcare stakeholders throughout the research process from topic selection through design and conduct of research to dissemination of results. We believe that such engagement can influence research to be more patient centered, useful, and trustworthy and ultimately lead to greater use and uptake of research results by the patient and broader healthcare community.

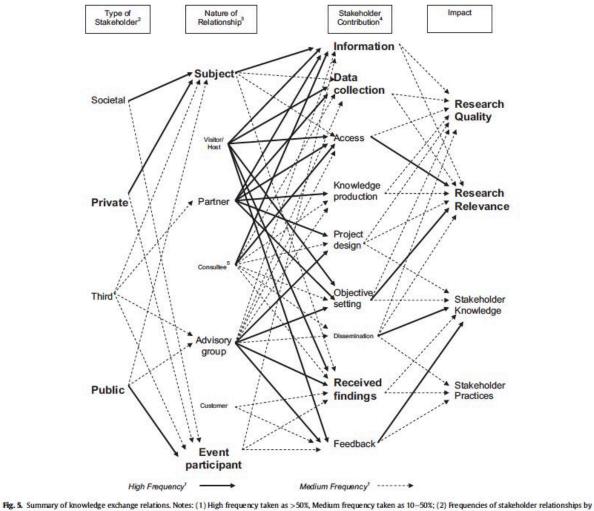
--Patient-Centered Outcomes Research Institute

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Why do it?

"Working with a wide range of stakeholders throughout all stages of a research project has many benefits, including the development of mutual trust, lasting partnerships, capacity building and research results that are well understood by those who stand to benefit."

--Stakeholder Engagement Toolkit for HIV Prevention Trials



Source: Stakeholder engagement and knowledge exchange in environmental research type of stakeholder taken from Table 3; (3) Frequencies of stakeholder contributions by type of relationship based on Table 4; (4) Frequencies of impacts by type of stakeholder contribution based on underpinning data for Fig. 4; (5) Scale of wording is proportional to percentages of stakeholders in each sector and with data in Table 1 and Figs. 2 and 3.

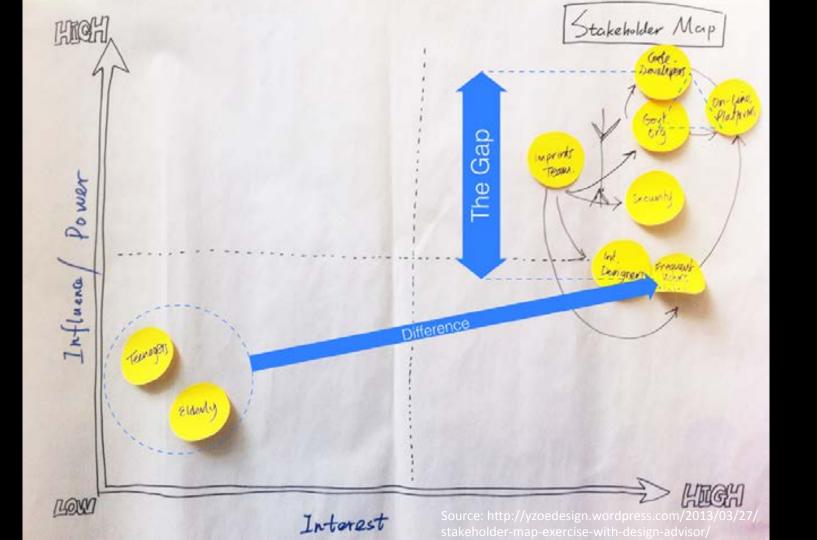
Why do it?

- Identify and Prioritize Future Research Needs
- Effectively disseminate results
- Influence policy
- Future funding

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Some tools

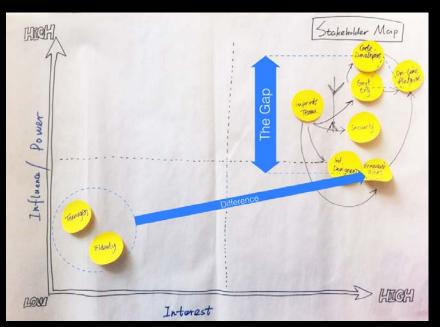
- 1. Power/Interest Map (who are they)
- 2. Policy map (how do you reach them)





POWER/INTEREST MAPPING

Power/Interest Map



- Who will be impacted by the project?
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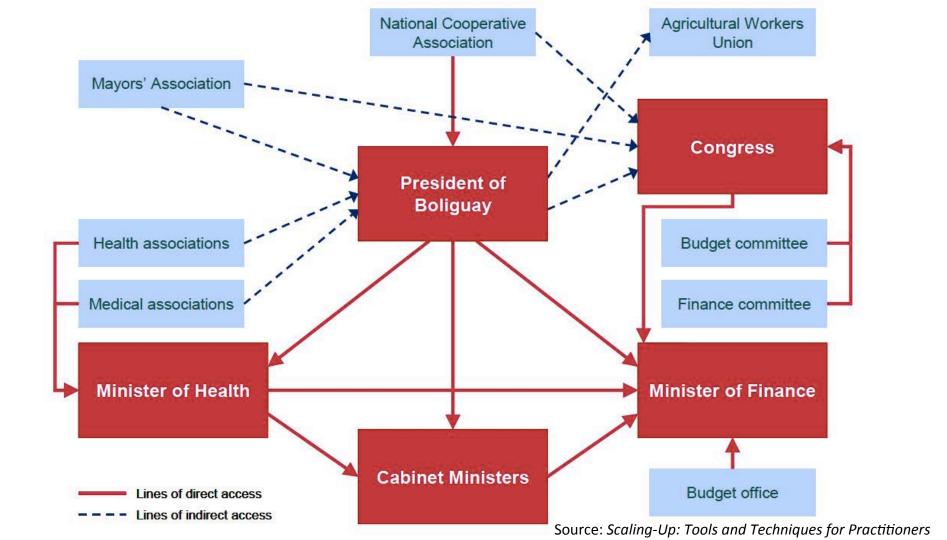




BREAK



POLICY/NETWORK MAPPING



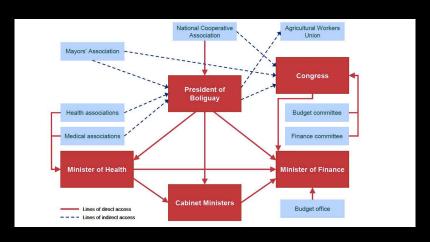
Guiding questions

- What are the different point through with a funding decision or policy passes?
- What formal decisions need to be made for scaling up your research (policy, regulation, law, legislation, etc.)?
- Who are the decision makers (policy makers, political leaders, industry)? Who are the actors in charge of each step?
- In what ways can officials exercise influence over this process? Do they have any particular skills or contacts that might help in this process?
- Are there other actors, though not officially part of the process, who have substantial influence over decision makers?



NETWORK MAPPING

Policy/Network Map



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HOW & WHEN WILL YOU ENGAGE THESE DIFFERENT GROUPS?

When

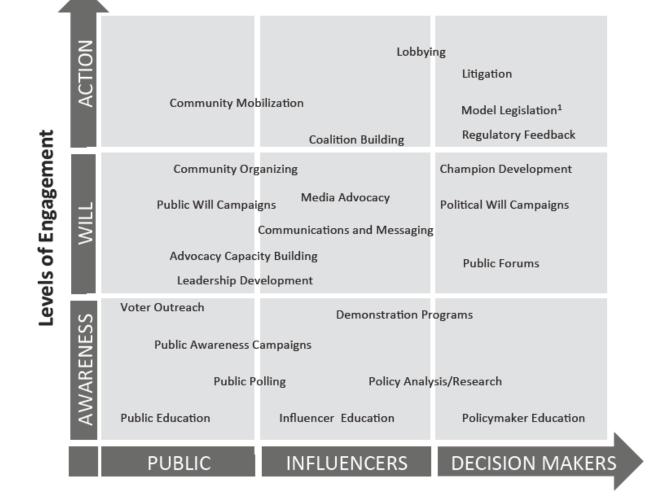
Lifespan of a research project:

- Grant writing phase
- Interim reports
- Final evaluation phase

How

- Advisory group
- In-person meetings
- Blog
- Social media
- Press release

- Conferences
- Formal reports
- Public forum
- Policy maker workshops
- What else?



Source: Center for Evaluation Innovation

AUDIENCES

Making a Plan

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

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	10			
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-Pl for the study.	Via quarterly Steering Committee, stakeholder will stay abreast of study and intervention progress.	
MOHSP Regional: Drs. Baku, Ramannonsoa, 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 s abreast of study and intervention progress.	
Professional Associations	*			
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.	
Non-governmental sector	*			
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.	
Other civil society target audiences	0.00			
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.	
International donors				
USAID: Mr. Smith.	Donor. Currently contributes to national FP program.	Member of Steering Committee	Via quarterly Steering Committee, stakeholder will state 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.

Source: Scaling-Up: Tools and Techniques for Practitioners



BUILDING YOUR PLAN

Engagement Plan

abreast of study and intervention progress.

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

- Who needs to be informed of what, and when?
- Who needs to be consulted about what, and when?
- What tools/processes will you use to engage each stakeholder?
- What message will you use by stakeholder?
- Who is responsible for engaging each stakeholder, and when and how will they do it?



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NEXT STEPS AND MORE INFO

Next Steps

- More workshops coming soon!
- Fill in your feedback forms
- Send us your ideas

References

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CLOSING



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