

Joint Action on Chronic Diseases and Healthy Ageing Across the Life Cycle

GUIDANCE DOCUMENT



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Guidance Document and Questionnaires for CHRODIS-JA Stakeholder Mapping

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Rationale and Guidance

This document provides the rationale as well as guidance in relation to two tasks that we ask you to complete as part of CHRODIS-JA WP2 on Communication and Dissemination, namely 1) a stakeholder mapping exercise and 2) the questionnaire below. The purpose of these tasks is to help us complete the CHRODIS-JA Communication and Dissemination Strategy, that we are in the process of developing and that we will send you by the start of April 2014.

As a CHRODIS-JA associated partner you are automatically involved in the WP2 on Communication and Dissemination and requested to develop your own brief work plan. We will ask you to report back on your dissemination activities on an annual basis, via a short feedback form. Further information about this will be included in the Communication and Dissemination Strategy. Your responses to the stakeholder mapping exercise and the questionnaire will help us improve this strategy, and also serve as an important first step in your process of developing a dissemination work plan.

The CHRODIS-JA Communication and Dissemination Strategy will lay out, in general terms, what outcomes will be disseminated, to whom, by whom and for what purpose. In order to do this, it is important to identify CHRODIS-JA **target audiences, or stakeholders**. These can be **defined as those groups of people, organisations, institutions and individuals that have an interest in the programme outcomes and that you would like to communicate programme outcomes to**. While the terms ‘target audience’ and ‘stakeholder’ could be used interchangeably, the latter refers to those individuals and bodies that are more than simply potentially interested in programme outcomes; they also have the ability to become involved or invested in the programme, and to help it achieve its goals. In the CHRODIS-JA Communication and Dissemination Strategy we will use these terms interchangeably, but focus more on the concept of stakeholders.

There are three questions or considerations to bear in mind when identifying CHRODIS-JA stakeholders.

1. Who are our main stakeholders?

The main target audiences of CHRODIS-JA activities are likely to differ per work package (health promotion professionals, the medical community, policy-makers and politicians, the scientific community, etc). Different aspects of the CHRODIS-JA programme will be relevant and interesting for different audiences, so the approach taken and the nature of the information provided to these different groups should differ. Information that, for example, aims to advise and influence policymakers and politicians must be presented differently than information targeted at the scientific community. Each work-package should therefore develop a clear view of who its target audiences are, in order to tailor the messages and materials that they generate.



2. What is the purpose of dissemination or communication to specific target groups and stakeholders?

One must bear in mind that communication and dissemination activities can have many different purposes. One purpose may be to **raise awareness** about the initiative, so target groups can consult outputs when relevant or further disseminate information to others in their networks. The rationale may also be to build **knowledge**. Another purpose can be to **involve** stakeholders in activities, and to get their input in order to strengthen project outcomes. The aim of communication and dissemination may ultimately be to get interested stakeholders **to act on or apply** outcomes, to change policy and practice. It is therefore important to think through why and how you want to engage specific stakeholders. One method could be to assess what specific stakeholder groups currently think about a certain topic or approach, and what we would like them to think, and to shape messages and materials accordingly.

3. Which specific stakeholders are key?

Communication and dissemination activities are crucial to achieving the outcomes of the Joint Action, and to ensuring that the programme will have a long-term **impact**. When identifying relevant stakeholders, it is therefore essential to consider what outcome and impact you would like the work packages that you are involved in, as well as the Joint Action as a whole, to have. You must then assess which particular stakeholders are key to making this happen, and what kind of information these stakeholders should receive to engage them.

As well as considering the kinds of stakeholders that should be targeted for communication and dissemination activities, it is therefore also important to consider the level of **influence** that stakeholders have, and to focus the most attention on reaching those stakeholders that are most likely to help the CHRODIS-JA achieve its objectives and make a strong impact.

The figures below, by Mendelow¹ can be helpful in understanding the concept of influence:

Power is the **ability to influence objectives** (how much they can)

Interest is the **stakeholder's willingness** (how much they care)

Influence = Power x Interest

Figure 1: Equation of Influence (Mendelow)

¹ Mendelow's Power-interest grid (Aubrey L. Mendelow, Kent State University, Ohio 1991)

<u>Interest</u>			
<u>Power</u>		Low	High
	Low	Minimal effort	Keep informed
	High	Keep satisfied	<u>KEY PLAYER</u>

Figure 2: Identifying Key Stakeholders (Mendelow)

In summary, the rationale for engaging in this stakeholder mapping exercise is not simply to identify who should receive information about CHRODIS-JA, but also:

1. To distinguish between different kinds of stakeholders interested in CHRODIS-JA outcomes, to ensure that dissemination and communication activities are targeted to the specific needs of different categories of stakeholders, in order to get a better response from them;
2. To assess what role different stakeholders can have in relation to the impact of the project, and to identify which stakeholders should receive the most attention, to maximise the impact of the project.

By undertaking the stakeholder mapping exercise and filling out the questionnaire below, we ask you to think through:

1. *Who* would be interested in CHRODIS-JA outcomes;
2. *Why* you think they would be interested and how they will use the information;
3. *Which* of these stakeholders *has the influence* to further disseminate/communicate this information and act on the information obtained;
4. *What* information you will communicate and disseminate;
5. *How, and how often*, you will communicate and disseminate to capture attention, particularly of those stakeholders that you consider to be the most influential in this field.

In the questionnaire below, we would like you to consider the main stakeholders of different CHRODIS-JA work packages, on the basis of an initial list that we have provided. In doing so, we would also like you to consider the purpose of communication and dissemination activities to these groups, and to identify different channels that you can use to convey different messages and materials. We would also like you to start completing the stakeholder mapping excel file that you also received in the message in which you received this document. You are only required to focus on those work packages that you will be leading or will be involved in, although we would of course also appreciate your input relating to the other work packages, too.

The **questionnaire** should be completed by **24 March 2014**, and returned to Anna Gallinat (a.gallinat@eurohealthnet.eu) and Ingrid Stegeman (i.stegeman@eurohealthnet.eu).

The deadline for completing the **stakeholder mapping** files will be **mid April 2014**. Please fill these out to the best of your ability, and provide us with as many contact details as possible, by this date. It is important that you begin to fill out the stakeholder in order to become familiar with this process and to let us know if you have questions or comments on the stakeholder mapping processes. The outcomes will be compiled into a CHRODIS-JA database. In addition, the lists provide a start to identifying those stakeholders that can also be engaged to play an active role in the programme, and that could take part in the Expert and Delphi groups.



Questionnaires

Work Package 5: Good practices in health promotion and prevention of chronic diseases

For WP5, we identified the following types of stakeholders that can be relevant for your work:

- Departments of government bodies (Ministries, Public Health Institutes) focusing on health promotion and chronic disease prevention;
- Departments of government bodies that affect the social determinants of health (e.g. finance departments, social services, transport, urban planning, education, etc.);
- Societies, Associations, Federations, Foundations and Networks and individuals focusing on health promotion and chronic disease prevention;
- Societies, Associations, Federations, Foundations and Networks and individuals in fields that address the social determinants of health (relating to e.g. community development, education, urban planning, sports, cycling, public transport, housing, social services, etc.);
- Other projects and programmes focusing on health promotion and chronic disease prevention and the social determinants of health;
- Policy makers with an interest in health promotion and chronic disease prevention and the social determinants of health;
- Research Institutes, Centers and individual researchers working on health promotion and chronic disease prevention and the social determinants of health;
- Private sector actors.

<p>Is this list of stakeholder groups correct and comprehensive?</p> <p>Should, in your opinion, any of these categories be broken down further?</p> <p>Should any other categories be added?</p>	
<p>Please indicate which of these groups you feel are the main stakeholder groups in relation to the communication and dissemination of WP 5 outcomes?</p>	
<p>Can you think of any stakeholders that could be negatively inclined towards CHRODIS-JA (due to,</p>	



for example, a conflict of interests)? If so, how could this be managed?	
In addition to the formal and public deliverables and milestones listed in Annex I, please list additional products or materials that could be produced in the context of this WP that can be communicated/disseminated to different stakeholder groups (e.g. additional newsletter or journal articles, videos, info graphics).	
Please list newsletters, scientific periodicals or any other publications across the media landscape as well as social media channels (twitter, facebook) that could be used to communicate and disseminate information resulting from this WP.	
Please list major sub-national, national or international events being planned in 2014 and 2015 where information on this work package can be integrated?	
Please list addresses of websites (other than your organisation's) that could include information on and a link to the CHRODIS-JA website?	

Stakeholder mapping

We ask you to think through each group and to provide the relevant names and contact details of organisations or individuals at the sub-national, national, European and international level. This exercise has to be carried out in the attached excel sheet where each WP has their own tab. Please add the necessary rows. If you have provided new categories in question 1 above, please include these too.

If possible, please list those organisations or persons that you consider to be the most important for communication and dissemination purposes, whose take-up of WP5 outcomes is 'key' to its success, at the top of each relevant category, or number them in order of importance, or give them a symbol*.



Work Package 6: Development of common guidance and methodologies for care pathways for multi-morbid patients

For WP6, we identified the following types of stakeholders that can be relevant for your work:

- Departments of government bodies (e.g. Ministries of Health, Social Policy, Finance, Medical and Social Care Institutes) with programmes on the treatment and management of chronic diseases;
- Networks or Associations of, as well as individual health and social service professionals;
- Societies, Associations, Federations, Foundations and Networks focusing on the treatment and management of chronic diseases;
- Other projects and programmes that focus on the treatment and management of chronic diseases;
- Policy makers with an interest in the treatment and management of chronic diseases;
- Research Institutes, Centers and individual researchers working on the treatment and management of chronic diseases;
- Private sector actors.

<p>Is this list of stakeholder groups correct and comprehensive?</p> <p>Should, in your opinion, any of these categories be broken down further?</p> <p>Should any other categories of target groups be added?</p>	
<p>Please indicate which of these groups you feel are the main stakeholders in relation to the communication and dissemination of WP6 outcomes?</p>	
<p>Can you think of any stakeholders that could be negatively inclined towards CHRODIS-JA (due to, for example, a conflict of interests)? If so, how could this be managed?</p>	
<p>In addition to the formal and public deliverables</p>	



and milestones listed in Annex I, please list additional products or materials that could be produced in the context of this WP that can be communicated/disseminated to different stakeholder groups (e.g. additional newsletter or journal articles, videos, info-graphics).	
Please list newsletters, scientific periodicals or any other publications across the media landscape as well as social media channels (twitter, facebook) that could be used to communicate and disseminate information resulting from this WP.	
Please list major sub-national, national or international events being planned or 2014 and 2015 where information from this WP can be integrated.	
Please list addresses of websites (other than your organisation's) that could include information on and a link to the CHRODIS-JA website.	

Stakeholder mapping

We ask you to think through each group and to provide the relevant names and contact details of organisations or individuals at the sub-national, national, European and international level. This exercise has to be carried out in the attached excel sheet where each WP has their own tab. Please add the necessary rows. If you have provided new categories in question 1 above, please include these too.

If possible, please list those organisations or persons that you consider to be the most important for communication and dissemination purposes, whose take-up of WP6 outcomes is 'key' to its success, at the top of each relevant category, or number them in order of importance, or give them a symbol*.

Work Package 7: Diabetes: A case study on strengthening health care for people with chronic diseases

For WP7, we identified the following types of stakeholders that can be relevant for your work:

- Departments of government bodies (Ministries, Medical and Public Health Institutes) with programmes on, or including, diabetes;
- Departments and government bodies with a stake in the prevention, treatment and management of diabetes (e.g. Finance, Social Services)
- Networks or associations as well as individual health care professionals that treat diabetes;
- Societies, Associations, Federations, Foundations and Networks focusing on diabetes and its risk factors;
- Other projects and programmes that focus on diabetes and its risk factors;
- Policy makers with an interest in the prevention, treatment and management of diabetes;
- Research Institutes, Centers and individual researchers working on the prevention, treatment and management of diabetes;
- Private sector actors.

<p>Is this list of stakeholder groups correct and comprehensive?</p> <p>Should, in your opinion, any of these categories be broken down further?</p> <p>Should any other categories be added?</p>	
<p>Please indicate which of these groups you feel are the main stakeholder in relation to the communication and dissemination of WP7 outcomes?</p>	
<p>Can you think of any stakeholders that could be negatively inclined towards CHRODIS-JA (due to, for example, a conflict of interests)? If so, how could this be managed?</p>	
<p>In addition to the formal and public deliverables and milestones listed in Annex I, please list</p>	

<p>additional products or materials that could be produced in the context of this WP that can be communicated/disseminated (e.g. additional newsletter or journal articles, videos, infographics).</p>	
<p>Please list newsletters, scientific periodicals or any other publications across the media landscape as well as social media channels (twitter, facebook) that could be used to disseminate information from this WP.</p>	
<p>Please list major sub-national, national or international events being planned in 2014 and 2015 where information on this WP can be integrated.</p>	
<p>Please list addresses of websites (other than your organisation's) that could include information on and a link to the CHRODIS-JA website.</p>	

Stakeholder mapping

We ask you to think through each group and to provide the relevant names and contact details of organisations or individuals at the sub-national, national, European and international level. This exercise has to be carried out in the attached excel sheet where each WP has their own tab. Please add the necessary rows. If you have provided new categories in question 1 above, please include these too.

If possible, please list those organisations or persons that you consider to be the most important for communication and dissemination purposes, whose take-up of WP7 outcomes is 'key' to its success, at the top of each relevant category, or number them in order of importance, or give them a symbol*.



Work Package 4: Platform for Knowledge Exchange (PKE)

As WP4 is a cross-cutting WP, it should include all of the stakeholders identified for the other technical WPs. We identified the following types of stakeholders that can be relevant for your work:

- Departments of government bodies (Ministries and Institutes of Health and Public Health) with strategies or programmes on the prevention, treatment and management of chronic diseases, including diabetes;
- Departments of government bodies relevant to the prevention, treatment and management of chronic diseases, including diabetes (e.g. Health, Public Health, Social Services, Finance, Transport, Urban Planning, Education);
- Societies, Associations, Federations, Foundations, Networks as well as individuals working in the area of health and social services and focusing on the prevention, treatment and management of chronic diseases and diabetes;
- Projects and programmes focusing on health promotion and the prevention of chronic diseases, as well as the treatment and management of chronic diseases and diabetes and its risk factors;
- Policy makers with an interest in health promotion, prevention, treatment and management of chronic diseases and diabetes;
- Research Institutes, Centers and individual researchers working on the health promotion, prevention, treatment and the management of chronic diseases and diabetes;
- Private sector actors.

<p>Is this list of stakeholder groups correct and comprehensive?</p> <p>Should, in your opinion, any of these categories be broken down further?</p> <p>Should any other categories of target groups be added?</p>	
<p>Please indicate which of these groups you feel are the main stakeholders, in relation to the communication and dissemination of WP4 outcomes?</p>	
<p>Can you think of any stakeholders that could be negatively inclined towards CHRODIS-JA (due to, for example, a conflict of interests)? If so, how could this be managed?</p>	

In addition to the formal and public deliverables and milestones listed in Annex I, please list additional products or materials that could be produced in the context of this WP that can be communicated/disseminated (e.g. additional newsletter or journal articles, videos, infographics).	
Please list newsletters, scientific periodicals or any other publications across the media landscape as well as social media channels (twitter, facebook) that could be used to communicate and disseminate information on the Knowledge Platform.	
Please list major sub-national, national or international events being planned or 2014 and 2015 where information on CHRODIS-JA can be communicated.	
Please list addresses of websites (other than your organisation's) that could include information on and a link to the CHRODIS-JA website	

Stakeholder mapping

We ask you to think through each group and to provide the relevant names and contact details of organisations or individuals at the sub-national, national, European and international level. This exercise has to be carried out in the attached excel sheet where each WP has their own tab. Please add the necessary rows. If you have provided new categories in question 1 above, please include these too.

If possible, please list those organisations or persons that you consider to be the most important for communication and dissemination purposes, whose take-up of WP4 outcomes is 'key' to its success, at the top of each relevant category, or number them in order of importance, or give them a symbol*.



Annex I: CHRODIS-JA deliverables and milestones for communication and dissemination

- Bi-annual newsletters throughout the project

- M8** - Country Reviews on health promotion and chronic disease prevention approaches (existing work, current situation, gaps and needs) – WP5

- M12** - Reports on review of the medical literature and care approaches, administrative databases analyses – WP7

- M18** - Self-assessment tool ready – WP4
- Report on beneficial interventions for management of multi-morbid patients – WP7

- M20** - Expert/policymaker meeting – WP7

- M24** - Series of conference seminars – WP5

- M30** - Help-desk and clearinghouse ready for service – WP4
- Recommendations to improve prevention of diabetes and improve the quality of care for people with diabetes – WP7

- M32** - Expert/policymaker meeting – WP7

- M36** - Report of Final Conference – WP1/WP2
- Information on Peer reviews/study visits – WP5
- Report on recommendations describing health promotion and disease prevention practices – WP5
- Recommendations Reports on applicability and transferability of practices into different settings and countries – WP5
- Information on implementation of an innovative approach for management of multi-morbid patients – WP6
- Reports and common guidelines for care pathways for multi-morbid patients – WP7
- Report on meeting with experts for designing case management programmes – WP7

