

FOCUS ON

Measuring Progress in Healthy Public Policy: Indicators and Tools for Practice



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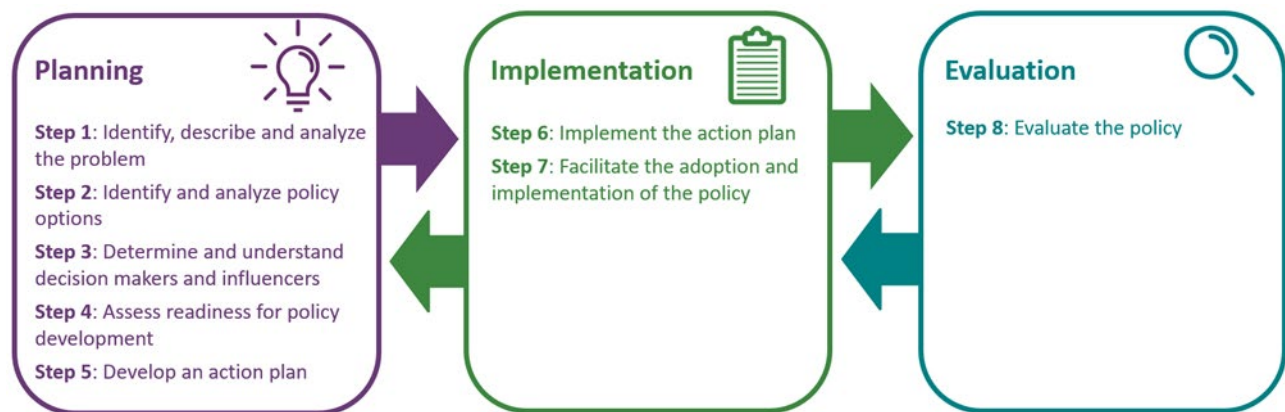
Introduction

Building healthy public policy (HPP) is widely recognized as a cornerstone of public health and health promotion practice.¹⁻⁴ The process of building HPP involves various partners, multiple sectors and numerous iterative steps.^{5,6} As it can also be a lengthy process, it is important to demonstrate the results and achievements of the work in the short-and-medium-term. This Focus On presents a set of measures and tools that can be used to track and communicate progress in building HPP.

Background

HPP aims to improve the conditions in which people are born, grow, learn, work, play, and age.⁷ HPP accomplishes this by creating environments that enable people to live healthy lives by putting health on the policy agenda in a variety of sectors such as housing, education, employment, transportation, the environment and at all levels of government.^{7,8} The policy-making process involves the coordinated action of a wide variety of interest holders working together to define a problem, the use of evidence to identify potential solutions, assessing readiness for potential policy options, and adoption, implementation and evaluation of the policy.⁹ [Figure 1](#) depicts PHO's eight step process for building HPP.

Figure 1: Eight Steps to Building Healthy Public Policies



In practice, the steps and required activities to build HPP are not always linear or discrete as depicted in [Figure 1](#).^{6,10} Rather, they may take place concurrently or in a non-sequential order, rapidly or slowly, and often over a long-time horizon.¹¹ While the ultimate goal of building HPP is the creation and implementation of policy levers such as legislation, fiscal measures, taxation, and organizational change in order to create healthy environments,⁹ additional outcomes can be achieved throughout the process of building HPP. It is the measurement of these outcomes which enables practitioners to demonstrate incremental progress to funders, partners, and communities.^{6,12} Measures at different steps throughout the policy building process also provide information in real time,¹³ which can assist in refining strategies and informing next steps.^{14,15} Illustrating successes in advancing HPP also demonstrates achievements in cases where a policy or policy change is not ultimately realized.^{16,17}

Measuring the HPP process corresponds to the planning phase shown in Figure 1. This is distinct from the policy implementation phase, in which the policy is developed and adopted,⁹ or the evaluation phase, which evaluates the policy and/or its impact.¹⁸ In measuring the process of building HPP we are evaluating the journey rather than the destination:¹⁶ using major mileposts along the way to demonstrate progress made and results achieved.¹⁹

The Ontario Healthy Public Policy Community of Practice (HPP CoP) and Public Health Ontario (PHO) collaboratively undertook a systematic review to identify how public health and health promotion practitioners can demonstrate the effectiveness of their efforts to build HPP. The review was guided by two research questions (RQs):

RQ 1: What measures (such as indicators, milestones and benchmarks) indicate progress towards building HPP?

RQ 2: What tools can support public health and health promotion practitioners in measuring their progress towards building HPP?

Methods

Search Strategy

PHO Library Services designed and executed searches to identify scientific and grey literature. The search strategy included five databases: MEDLINE, CINAHL, SocINDEX, Health Policy Reference Center and Scopus; as well as customized Google search strings. All searches were conducted in July 2024. In addition, an environmental scan was conducted with HPP CoP members and consultations were held with key informants to identify additional literature. One Ontario public health unit tool was located,

which was developed based on A Guide to Measuring Advocacy and Policy, published in 2007 by the Anne E. Casey Foundation.²⁰ For that reason, the research team in consultation with Library Services dated the search from 2007 onward.

Following test searches in two databases, search criteria were broadened to include the term advocacy, a term widely used in the United States to refer to the policy building process. Only literature related to advocacy for a particular policy (often referred to as policy advocacy) was included.

A total of 916 papers from the published and grey literature were retrieved. Title and abstract screening, full-text review and data extraction were done by two authors. Further details of the search strategy are available upon request.

RQ1: What measures (such as indicators, milestones and benchmarks) indicate progress towards building HPP?

Papers were included if: they contained indicators related to the planning phase of the policy development process depicted in Figure 1; and the indicators were relevant for public health and/or health promotion work. Papers were excluded if they were dated prior to 2007; were from a non-OECD country; were in a language other than English or French; were a list of resources, AI generated, commentary or opinion article; or were related to the implementation or evaluation phases of policy development.

Fifty-one (51) papers were included for full text review and of those, 16 papers (eight each of published and grey) selected. It should be noted that although 16 separate papers were included, there was overlap in authorship and content (for example, Julia Coffman was lead author on two papers,^{16,21} and their work was cited in another included paper²²). For this reason, the research team did not weigh indicators by frequency.

Data extraction categories included policy measures, rationale for evaluating the policy building process, and tools used to measure the policy building process. Data extraction was conducted by two reviewers. The lead author reviewed all extracted data and verified all included articles against the data extraction spreadsheet.

Preliminary analysis was conducted by the lead author and refined by the writing team. These results were shared with the HPP CoP and additional provincial networks and national organizations working in the policy space. The outcomes and indicators presented in Tables 1 through 3 were shaped through these consultations.

RQ 2: What tools can support public health and health promotion practitioners in measuring their progress towards building HPP?

Seven papers were identified as having tools related to measuring the process of building HPP. An additional paper, a Handbook of Data Collection Tools,²³ accompanied one of the included papers,²⁰ and was therefore included. One paper cited the Kotter Plus 10-step Public Health Advocacy Evaluation Framework.²⁴ A total of 62 tools were extracted by two authors and examined for:

- **Relevance:** The tool relates to the policy planning or policy building process, and relevant to the Ontario public health context.
- **Feasibility:** The tool or measurement process could reasonably be implemented by a local public health unit.
- **Adaptability:** The tool can be modified or customized for the Ontario public health context.

Results

Outcomes and Indicators

Two hundred and twenty-nine (229) individual measures were extracted from included papers. Papers used a variety of terms to refer to these measures, such as milestone, benchmark, outcome or indicator. To standardize our approach in categorizing these measures, the writing team selected the terms “outcomes” and “indicators.” To assist us in categorizing measures into outcomes and indicators we adapted definitions of outcomes and indicators from papers identified in the literature search:

- Outcomes: short-to-medium-term changes (positive or negative) that result from the policy building process.^{6,22,25}
- Indicators: measurable quantitative or qualitative factors that provide a simple and reliable means to measure the changes related to the process of building HPP.^{25,26}

In addition, we developed plain language definitions for each concept to assist in categorizing the extracted data. Simply put, an outcome broadly describes what will be accomplished (or what has been accomplished) as a result of the policy development work. An indicator measures the achievement of that outcome.

Coding of data was done by two reviewers, with disagreements resolved through discussion. The resulting outcomes and indicators were then grouped into like categories. Preliminary results were shared with the HPP CoP and similar provincial networks as well as with a national policy organization. Following the consultations, the results were refined to reduce duplication, increase clarity, and ensure relevance to public health and health promotion in Ontario. This included the use of consistent terminology such as:

- Policy Issue: the topic or subject of the effort to build HPP
- Policy Options: potential policy solutions for the policy issue
- Intended Audience: those who are most impacted by the policy issue
- Policy Makers: those who make decisions about the adoption and implementation of policy at the organizational, local, municipal, provincial/territorial or national level

Sixty-one (61) indicators measuring 15 outcomes were grouped into three categories; Partnership and Collaboration ([Table 1](#)), Sphere of Influence ([Table 2](#)), and Organizational Capacity ([Table 3](#)).

Tools

Forty-nine (49) tools met the inclusion criteria. Thirty-one (31) tools can be used to measure one or more specific indicator. These were matched to the indicators identified in RQ:1 and are included in Tables 1 through 3. The remaining tools include: guides and step models to evaluate the policy building process (n=6); tools to support the development of logic models and theories of change (n=5); and data collection methods and tools (n=7). These tools are listed in [Appendix A](#). Descriptions of each tool are available by request.

Categorized Outcomes, Indicators, and Tools

The following sections and tables organize the identified outcomes and indicators by category, along with the corresponding tools available to support measurement and assessment.

Partnership and Collaboration

This category of outcomes and indicators describes the development of mutually beneficial relationships with other organizations or individuals.^{16,21} They capture the breadth of work necessary to act as a collaborative throughout the building HPP process and measure deepening relationships and broadening partnerships over time.

Table 1: Outcomes and Indicators to Measure Partnership and Collaboration

Outcome	Indicator	Tools
Established mutually beneficial relationships with other organizations or individuals including the population of interest and nontraditional alliances, such as bipartisan and unlikely allies. ^{16,21,27,28}	- Quantity and/or profile of new partners supporting a policy issue.^{16,21,26,27} - Stronger relationships/formal agreements.^{12,16,17,20,21,29} - Involvement of the public, population of interest and/or other sectors.^{20,27,28}	- Network Mapping³⁰ - System Mapping³¹ - Tracking form: Intensity of Integration Assessment³² - Tracking Advocate and Policymaker Support³³
Increased level of collaboration between organizations or individuals. ^{10,17,19-22}	- Quantity and/or profile of coalitions.^{26,27} - Transparent decision-making processes.²⁸ - The extent to which organizations and individuals' participation is valued by those in the collaboration.²⁸ - Reduction in "siloed" mindset and processes.^{10,29}	- Network Mapping³⁰ - System Mapping³¹ - Tracking form: Intensity of Integration Assessment³² - Tracking Advocate and Policymaker Support³³
Increased alignment among organizations or individuals. ^{20,26}	- Improved alignment on HPP agenda (i.e., agreement on the definition of the problem, common messaging).^{10,16,19,21,29} - Improved alignment of partnership efforts to build HPP (i.e., shared goals, agreement on actions and strategies).^{20,26} - Degree to which diverse perspectives are balanced with common goals.²⁸	N/A – not applicable
Demonstrated collaborative outputs. ²⁹	- Number or quality of collaborative actions such as proposals, projects, evidence, reports, and recommendations.^{16,21,26,29} - Number and/or type of meetings with relevant policymakers.²⁶ - Capacity of partners to select policy instruments and develop execution strategies.²⁷	N/A – not applicable

Sphere of Influence

The term “sphere of influence” was selected to describe outcomes and indicators related to influencing and shifting the awareness of policy makers, the media, and the public. Outcomes and indicators measure visibility of the policy issue, salience (the importance the audience of interest assigns to the policy issue), increased public and political will and a strengthened base of support. The majority of indicators and identified tools relate to this category.

Table 2: Outcomes and Indicators to Measure Sphere of Influence

Outcome	Indicator	Tools
Increased awareness of the policy issue and/or policy options in the audience of interest. ^{6,16,21,22}	- Number of audience members with knowledge of the policy issue.^{6,13} - Percentage of audience members with awareness of policy options.^{6,13} - Quantity and/or profile of audience exposed to new evidence.²⁶	- ECCO Analysis³⁴ - Survey: Increased Public Involvement³⁵
Increased salience (the importance the audience of interest assigns the policy issue or policy options). ^{16,19,21,22}	- Percentage of audience which says that the policy issue is important to them.^{6,16,19-22,26} - Prioritization of the policy issue.^{13,16}	- Tracking Awareness³⁶ - Survey: Changes in Prioritization of Specific Issues³⁷
Increased visibility of the policy issue in the media (traditional and non-traditional). ²⁶	- Media coverage of the policy issue, evidence or options (i.e., quantity, extent of coverage, variety of media “beats,” message echoing).^{6,20-22,26} - Number of spokesperson quotes in the media.¹⁶ - Visibility of the campaign principles and messages.¹⁶ - Awareness of campaign principles and messages among audience of interest.²⁰ - Website activity for portions of website with information related to the policy issue/evidence/options.^{16,21}	- ECCO analysis³⁴ - Composite News Scores: Media Impact³⁸ - Log: Increased Visibility³⁹ - Media Tracking⁴⁰ - Media Scorecards⁴¹ - Media Tracking Form: Increased Media Coverage⁴²
Increase in new champions (high-profile individuals, including policymakers, who adopt a policy issue and publicly advocate for it). ^{16,21}	- Number of new champions.^{5,6,16,19,21,22} - Number of new constituencies/sectors represented among champions.^{16,21} - Champion actions that support the policy issue (i.e. media interviews, visible support).^{16,20,21}	- Champion Tracking⁴³ - Log: Increased Engagement of Champions⁴⁴ - New Champions tracking form⁴⁵ - Self-assessment: Checklist for Mobilization and Advocacy⁴⁶ - Network Mapping³⁰ - Tracking Form: Intensity of Integration³²

Outcome	Indicator	Tools
Strengthened base of support (the grassroots, leadership and institutional support for particular policy options). ^{13,20}	- Number of individuals and organizations who actively support the policy issue and/or policy options.^{6,13,19} - Problems are defined and proposals generated from those who are most affected by the policy issue.²⁸	- Network mapping³⁰ - Tracking Advocate and Policymaker Support³³
Increased public will (increase in the number of individuals who act in support of the policy issue). ^{5,16,20-22}	- Public involvement in the policy issue (i.e., individuals who can be counted on for support or action).^{16,19,21,22} - Attendance at advocacy events (i.e. public forums, marches, rallies).^{16,21} - Number of fans, group members, or followers on social media sites focused on the policy issue^{16,21}	- Log: Increased Public Involvement in an Issue⁴⁷ - Tracking Public Will⁴⁸ - System Mapping³¹ - Meeting Observation Checklist: Changes in Community Members Beliefs about the Importance of a Particular Issue⁴⁹ - Observation Checklist for Meetings⁵⁰ - Tracking Advocate and Policymaker Support³³
Increased political will (willingness of policymakers to act in support of the policy issue or proposal). ^{5,16,21,22}	- Quality of relationships with people who make or influence policy.^{5,12} - Knowledge and awareness of the policy issue by policymakers.^{12,19} - Number and/or profile of political officials who publicly support the policy issue.^{6,16,21,26} - Number of meetings/educative interactions held with policymakers.²⁶ - Number of citations/quotes of the policy issue or policy options in speeches, deliberations, or debates.^{16,21,26} - Number and party representation of bill sponsors/cosponsors, council motions etc.^{16,21} - Requests for information, support and/or related services and level of satisfaction with each/all.²⁶ - Relationships with diverse political parties.²⁶ - Shift in policy priorities among key local policymakers and influencers.¹³	- Bellwether Methodology⁵¹ - Policymaker Ratings⁵² - Log: Legislative Process Tracking⁵³ - Meeting Observation Checklist: Changes in Community Members Beliefs about the Importance of a Particular Issue⁴⁹ - Observation Checklist for Meetings⁵⁰ - System Mapping³¹ - Tracking Form: Intensity of Integration assessment³² - Tracking Advocate and Policymaker Support³³
Shift in social norms (the knowledge, attitudes, and behaviors that compose the normative structure of culture and society). ^{16,20-22}	- Changes in awareness, attitudes, and/or values regarding the policy issue.^{10,13,20,21,26,27} - Alignment of campaign goal with core societal values.¹⁹⁻²² - Changes in public behaviour.²⁰ - Decreased resistance among the public to challenging status quo.^{13,16}	N/A – not applicable

Organizational Capacity

This category of outcomes and indicators measures the capacity of an organization to plan and carry out the process of building HPP.^{13,20,28} This category recognizes that organizations must have a particular skill set along with the staff, leadership, organizational structure and systems for the work. Ten tools to assess organizational capacity were identified.

Table 3: Outcomes and Indicators to Measure Organizational Capacity

Outcome	Indicators	Tools
Increased organizational capacity to advance HPP. ^{16,19,21}	- Staffing, skills and infrastructure sufficient to manage, implement and adapt the strategy to build HPP.^{19,21} - Organizational knowledge about building HPP, mobilizing, or organizing tactics.^{16,17,20,21} - Stability of the organizations involved with policy work.²⁰ - Management capacity and strategic ability of the organization to advance policy work.²⁰ - Number and profile of staff trained to advance the policy issue, evidence and options.²⁶ - Capacity to communicate about the policy issue.²⁰ - Media skills and/or contacts.^{16,21} - Ability to get and use data, as well as the type and relevance of the research products.^{16,21} - Degree to which organization staff/members contribute to the advocacy effort's direction.²⁸ - Organizational and personal capacity for intersectoral work.^{10,29}	360 Degree Critical Incident Debriefs⁵⁴ - Assessment of the Capacity of the Advocacy and Policy Organization⁵⁵ - Self-assessment: Spider Diagram⁵⁶ - Advocacy Capacity Assessment⁵⁷ - Tracking Organizational Changes⁵⁸
Increased organizational visibility and recognition. ^{16,21,22}	- The extent to which the organization is viewed by policymakers as a partner with something to offer.¹² - Number of requests for products or information related to the policy issue, evidence, or policy options.^{16,21} - Number and/or types of invitations to speak as experts.^{16,21} - Number of quotes used in policy deliberations.^{16,21} - Perception of the organization as a credible source on the policy issue/options.^{13,16,21} - Quantity and/or quality of partners' response to the policy campaign.²⁶	- Tracking Organizational Visibility⁵⁹ - Network Mapping³⁰
Increased focus on health equity and the social determinants of health. ^{10,27,29}	- Personal and organizational awareness and understanding of the social determinants of health and health equity.^{10,29} - Framing of the policy issue and policy options consider the diversity of the audience of interest (i.e. affordability, accessibility).²⁷	N/A – not applicable

Discussion

We conducted a systematic review of published and grey literature to identify measures and tools that public health and health promotion practitioners can use to measure their progress towards building HPP. We categorized the extracted measures into outcomes and indicators according to our established definitions. We also extracted a variety of tools which can support the measurement of building HPP, including specific indicators. The vision of this collaborative project was to identify indicators from the literature, which could then be prioritized by the HPP CoP. The systematic review and this knowledge product is the beginning of that process rather than the end result.

Categorizing the extracted measures into outcomes and indicators was a challenging and iterative process which became easier over time as the research team became more familiar with the data and were able to look at all outcomes and indicators as a set. We took an incremental approach to refining the list of indicators: we initially extracted more than 229 indicators which, over the course of several discussions, were refined to the final set of 61. It should be noted that, despite a thorough literature review and approach to identifying and refining the list of indicators, this list is not exhaustive. For example, in the province of Ontario, public health and health promotion practitioners working to build HPP do so at the local level, working with neighbourhoods, local organizations such as workplaces, boards of health, and local/municipal councils. We did not find any measures related this work, such as preparing reports and briefing notes, presenting to council and/or boards of health, and requests or resolutions by council/boards of health.

In analyzing the outcomes and associated indicators, we divided them into three categories: partnership and collaboration; sphere of influence; and organizational capacity. The largest category was sphere of influence, a term that the research team selected to describe the outcomes and indicators related to influencing and shifting awareness with those outside of the partnership and organization. These include policy makers, the media, and the public.

Applying Outcomes and Indicators in Practice

We offer two ways to use the outcomes, indicators and tools presented here: retrospectively or prospectively. A retrospective approach would involve selecting and applying outcomes and indicators to HPP work already in progress. Alternatively, a prospective approach would entail identifying outcomes and indicators as part of the planning stages of the policy building process. The included literature recommended developing a Theory of Change and/or conceptual model/visual map to illustrate how the planned activities will achieve the policy goals.^{6,10,12,13,16,21,22} Two specific types of conceptual models/visual maps cited in the literature include outcome maps,^{13,16} and logic models.^{6,12,21,22} These two tools provide a framework to articulate an overarching goal(s), followed by the expected steps and connection between actions and desired outcomes. Tools to support the development of logic models, outcome maps, and theories of change can be found in [Appendix A](#).

Selecting Impactful Outcomes and Indicators

Once the goal for building HPP and the actions to achieve that goal have been articulated, the outcomes and indicators to measure progress can be selected.²¹ Additional considerations include selecting outcomes and indicators which leverage existing data collection, are feasible to collect from a time and capacity perspective, provide clear and convincing evidence, and use a mix of quantitative and qualitative information.²¹ A further consideration is the importance of selecting measures which are impactful, as illustrated by Devlin-Foltz et al.:

“[We] sometimes forget to distinguish between what can be measured and what is worth measuring. Tracking the number of meetings with [policy makers] is necessary but not sufficient to tell us that we are persuading anyone to create positive policy changes. When evaluators look at proposed measurable objectives, they must ask themselves and their clients the “so what?” question. That is, will achieving this objective tell us something we really need to know?”^{14(p.582)}

For example, counting the number of partners involved in the collaboration and the sectors they represent could help demonstrate the depth and breadth of partnerships and sectors collaboratively building the HPP. Measuring how partners are aligned and how that alignment changes over time can help tell a story of the evolution of the partnership to build HPP. In addition, identifying that the collaborative includes nontraditional alliances and unlikely allies, and demonstrating collaborative outputs such as reports and campaigns, provides a context beyond numbers. Measuring additional outcomes such as increased visibility of the policy issue, strengthened base of support, and increased political will among policymakers demonstrates the breadth and impact of the policy work being undertaken.

This also illustrates the necessity of selecting multiple outcomes and indicators across the three categories. Put another way, selecting a *set* of outcomes and indicators can tell the story of our work and how it develops over time. A recently conducted scoping review identified several criteria which can be used when selecting a *set* of indicators,⁶⁰ which we have customized for the policy making process:

- Select indicators which use multiple data collection methods, such as surveys, document reviews, as well as quantitative measures such as number of meetings and number of media interviews.
- The indicator set should be comprehensive, measuring the range of steps and activities used to build HPP, without being redundant or duplicative.
- The indicator set should include process, output and outcome indicators. Process indicators measure how well the activities and steps have been implemented; output indicators measure reach and quantity; while outcome indicators measure the results of change that occurred.
- Prioritize essential indicators based on criteria such as importance, relevance, and feasibility.
- Ensure that measuring the selected indicators is feasible. Considering what is measurable, what data is available, and what is feasible to measure from a capacity and cost perspective.

It should be noted that in some cases an indicator could be used in more than one outcome or category. For example, the indicator “number and/or type of meetings with relevant policymakers”²⁶ could demonstrate progress towards “demonstrated collaborative outputs” and “increased political will among policymakers and influencers.” In designing the set of indicators, they should be selected according to the overarching goal for the policy work and context.

Limitations and Strengths

While the research team established definitions and achieved consensus through multiple discussions to categorize the measures presented here into outcomes, indicators, and categories it was a challenging process, and others may group them differently. We did not conduct quality assessment of the included literature.

A further limitation is the lack of content related to local and municipal levels of policy work which is in-scope for Ontario public health units. Preparing reports, briefing notes, and presentations to local councils and/or boards of health and resolutions by council/boards of health did not appear in the included literature but are foundational to local public health work.

Strengths of this research include the inclusion of grey literature, representation from Ontario public health units on the research team, as well as the collaborative and consensus-based approach that the research team undertook. Additionally, consultations on the preliminary findings with the HPP CoP and partner organizations such as the National Collaborating Centre for Health Public Policy (NCCHPP) provided insight into the analysis and the outcomes and indicators presented.

Conclusion

The process of building healthy public policies is complex, can be circular, and often has long time horizons. The outcomes, indicators and tools presented in this Focus On will assist practitioners in measuring their progress towards building HPP, thereby demonstrating the impact of their work to funders, partners and the community. While the literature review was conducted systematically, included grey and published literature, and involved a collaborative approach with health promotion and public health practitioners, the outcomes and indicators provided here are not an exhaustive list, nor is it a checklist or a prescriptive approach. Rather, we present these outcomes and indicators as a list of options which can be selected to demonstrate achievement in building HPP. Future directions for this work would include working with practitioners, such as the HPP CoP, to identify additional outcomes and indicators specific to the local/municipal nature of policy work by Ontario public health units, followed by an exercise to prioritize and finalize a set of measurable indicators that would “tell the story” of work to build healthy public policies in the Ontario context.

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Appendix A: Tools To Support Policy Planning and Evaluation

In addition to tools to measure one or more specific indicator listed in Tables 1 through 3, we identified additional tool, such as guides and step models to evaluate the policy building process (n=6); tools to support the development of logic models and theories of change (n=5); and data collection methods and tools (n=7). These tools are listed below.

Workbooks/toolkits for planning and evaluating policy or policy advocacy:

- Advocacy Evaluation Mini-Toolkit: Tips and Tools for Busy Organizations⁶
- A Guide to Measuring Advocacy and Policy²⁰
- A User's Guide to Advocacy Evaluation Planning²¹
- Charting The Waters: A Guide for The Third Sector On How to Evaluate Policy Influencing Work¹²
- Kotter Plus 10-step public health advocacy evaluation framework²⁴
- Monitoring and Evaluation Advocacy: Companion to the Advocacy Toolkit¹⁶

Developing visual/conceptual maps:

- Theory of Change Outcome Map Example⁶¹
- Advocacy and Policy Change Composite Logic Model⁶²
- Chalkboard Project Prospective Outcome Map⁶³
- Developing a Logic Model⁶⁴
- Developing an Advocacy Roadmap⁶⁵

Data collection/measurement approaches:

- Critical Incident Timelines⁶⁶
- Crowdsourcing⁶⁷
- Intense Period Debriefs⁶⁸
- Intercept Interviews⁶⁹
- Measurement Approaches for Interim Outcomes⁷⁰
- Prospective Data Collection Methodologies⁷¹
- Research Panels⁷²
- Snapshot Surveys⁷³

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