

Applying KM Lessons Learned from an Online Discussion Forum

SUMMARY:

The Measurement, Learning & Evaluation (MLE) Project hosted an online discussion forum and a tweet chat between 5-9 November 2012, titled “Advocacy for Family Planning Programs – Beyond the London Summit.” A follow-up survey was conducted, and a number of lessons were highlighted. Namely, a responsive after action review after an online forum led to significant increase in participation and engagement in subsequent forums. In addition, it is important to be adaptable and to focus on format, relevance, language, timing, and promotion in order to conduct successful online events.

DATES OF ACTIVITY:

September – November 2012

TARGET AUDIENCE:

Donor organizations, nonprofit organizations, individual family planning advocates, and family planning program managers

FOR MORE INFORMATION:

Libby Skolnik, KM Program Manager for the Measurement, Learning & Evaluation Project of the Urban Reproductive Health Initiative, Johns Hopkins Bloomberg School of Public Health Center for Communication Programs, sskolnik@jhuccp.org
<http://www.k4health.org/toolkits/km/km-case-studies>

CONTEXT

Harnessing the energy and commitments from the July 2012 London Summit on Family Planning, the Measurement, Learning & Evaluation (MLE) Project hosted an online discussion forum and a tweet chat between 5-9 November 2012, titled “Advocacy for Family Planning Programs – Beyond the London Summit.” The discussion and tweet chat facilitated knowledge exchange on family planning advocacy among the 341 members of the Urban Reproductive Health Community of Practice (CoP) on the Implementing Best Practices Initiative Knowledge Gateway.

MLE is the evaluation component of the Urban Reproductive Health Initiative, a program that aims to improve the health of the urban poor in India (Uttar Pradesh), Kenya, Nigeria, and Senegal. The goal of the MLE project is to promote evidence-based decision-making when designing integrated family planning and reproductive health interventions that reach the urban poor. The Knowledge Management (KM) team of the Johns Hopkins Bloomberg School of Public Health Center for Communication Programs (JHU•CCP) facilitates knowledge sharing among MLE and Urban Reproductive Health Initiative partners and with the global urban reproductive health community more broadly; documents and disseminates best practices about successful urban family planning interventions; and ensures that data and information are available to inform reproductive health and family planning programming at the local, country, regional, and global levels.

SPECIFIC KM ANGLE

A follow-up survey after an online discussion forum on monitoring and evaluation approaches to health programs, held six weeks prior to the family planning advocacy forum, indicated that participants wanted to interact in the discussion forums in French as well as English. Respondents also requested mechanisms to engage the forum participants more in the discussion, with specific recommendations for a more engaging topic. Lessons learned from the moderator included the need to factor in adequate time to prepare with guest experts before starting the online discussion, a longer discussion period to give participants more time to respond to questions, and more promotion beforehand over a longer time period.

An after action review of survey results and feedback from the moderator following the monitoring and evaluation online forum informed implementation strategies and techniques for the subsequent family planning advocacy forum held six weeks later. For example, the advocacy forum incorporated a bilingual element to meet the needs of French and English speakers. In addition, the topic itself was more engaging, especially coming at the heels of the London Summit, and forum experts posed thought-provoking questions, which led to a more dynamic exchange between experts and other forum participants. To further increase engagement and participation, the project added a “tweet chat” component to the online forum activity.

Knowledge Management (KM) Case Study

Using similar discussion questions as those posed on the online forum, all tweets using the predefined “#FPAdvocacy” hashtag were linked together in a virtual conversation.

AFTER ACTION REVIEW

We conducted a follow-up survey in French and English after the advocacy forum with the Urban Reproductive Health CoP members and received an 8% response rate—a significant increase in responses compared with the previous discussion forum. Of those who participated in the forum, 17% also participated in the tweet chat—all of whom thought the tweet chat enhanced their experience in the forum. The tweet chat generated 398,071 impressions and reached an audience of 68,270 “#FPAdvocacy” followers.

All the respondents felt that the forum met (54.2%) or somewhat met (45.8%) its goals of facilitating exchange about family planning advocacy among the urban reproductive health community and capitalizing on the energy surrounding the London Summit. A large majority of respondents reported there was the right amount of discussion. Just under 60% of respondents would have preferred receiving daily digests instead of emails for every member contribution, but the increased rate of participation may justify continuing the real-time communication model despite this finding. Nearly three-quarters of the respondents had either already applied what they learned in the forum to their work or plan to do so in the future. Furthermore, 47% of participants forwarded postings to others.

Of the survey respondents who did not actively participate in the forum, most cited time restrictions as the barrier to their participation. Other survey respondents mentioned that their points had already been made by other forum participants or that they preferred to watch the discussion rather than participate actively.

WHAT WORKED WELL

- Each promotional email, expert post, response, and daily digest was translated to include both English and French. While the dual-language forum is challenging and labor intensive for both the moderator and the translator, it does appear to generate interesting discussion. A substantial

- number of posts were originally in French (47%).
- Family planning advocacy was selected as a topic to help engage family planning stakeholders and capitalize on the energy surrounding the London Summit on Family Planning.
- The moderator immediately disseminated members’ comments as they were sent to the community, generating significant discussion among members. Ten contributors responded directly to another community member’s comment (as opposed to an expert post), demonstrating the value of immediate dissemination of contributions in addition to sending daily digests. The moderator also sent out expert posts at different times of the day and found that the greatest response came from sending posts late at night and early in the morning. The format of the expert posts, which highlighted the questions asked of participants at the top of the email and gave specific instructions for how to actively participate in the discussion, also drove greater numbers of contributions to the forum.
- More time was invested in preparation for the forum, including preparing expert posts well in advance of the forum. In addition, the forum itself spanned a longer timeframe than the previous forum, giving community members more time to respond to posts. We also conducted more promotion ahead of the event to remind community members and family planning stakeholders of the forum.

CHALLENGES

The tweet chat had very active participation from US-based advocacy organizations and provided a good networking opportunity. While we tried to post similar discussion questions on the tweet chat as those posed in the online forum, the tweet chat conversation was not fully structured around those discussion questions due to an error on Twitter that prevented @UrbanRH’s tweets from displaying in Twitter’s search function. The problem has been resolved with Twitter’s customer service, and future tweet chats will benefit from these questions being visible to participants who are following the tweet chat via the “#FPAdvocacy” hashtag.

During the forum, we included posts from two experts each day. In future forums, it may be beneficial to allow more time between expert posts to give community members, particularly those in other time

zones, more time respond. While including two posts each day may have introduced too much material for discussion, the discussion was active and constant throughout the week. Along the same line, immediate dissemination of emails from the community likely generated more constant discussion, but according to survey results, the majority of participants thought that the immediate dissemination of forum postings resulted in too many emails. In the future, the moderator can take this into consideration to balance an active conversation with one that is helpful for community members.

RECOMMENDATIONS

Be adaptable. Online discussion forums provide an interactive and stimulating environment to exchange information and learn from colleagues around the world. However, if the conversation is stagnant or slow, be willing to change your strategy to meet the needs of the community. Also, the use of social media, such as Twitter, for family planning advocacy is an emerging technique for reaching influential family planning stakeholders and should be considered as a relevant communication channel for reaching potentially different audiences.

- **Format** – Lead with questions, seek direct responses.
- **Relevance** – Be topical, timely, and relevant to your audience.
- **Language** – Support participants' native tongue!
- **Timing** – Push through messages so the conversation can occur in real time.
- **Promotion** – Encourage engagement early and often and address technical difficulties.

This case study was prepared by Libby Skolnik, KM Program Manager for the Measurement, Learning & Evaluation Project of the Urban Reproductive Health Initiative, Johns Hopkins Bloomberg School of Public Health Center for Communication Programs.

The Knowledge Management (KM) Case Studies were written by members of the Global Health Knowledge Collaborative and produced by Knowledge for Health (K4Health), with support from USAID's Office of Population and Reproductive Health, Bureau for Global Health. K4Health is implemented by the Johns Hopkins Bloomberg School of Public Health • Center for Communication Programs (JHU·CCP) in partnership with FHI 360 and Management Sciences for Health (MSH). Visit www.k4health.org for more info.