

Toolkits

MONITORING AND EVALUATING THE K4HEALTH TOOLKIT

K4Health Toolkits are strategic collections of curated information resources for health policy makers, program managers, and service providers. Drawing on HIPNet's [Guide to Monitoring and Evaluating Health Information Services](#), K4Health will employ various M&E data collection methods, such as web use statistics and user surveys, to assess the Toolkits' use and usefulness. M&E efforts will focus on both process and outcomes. K4Health will share results with Toolkit managers periodically to increase the use and usefulness of the Toolkits.

View Edit Google Analytics Summary Group Revisions Linkchecker Nodequeue

Home / Maternal Infant Young Child Nutrition - Family Planning (MIYCN-FP) Integration

Maternal Infant Young Child Nutrition - Family Planning (MIYCN-FP) Integration

Start Date End Date [Change Report Dates](#)

E.g., 03/01/2013 E.g., 03/01/2013

Select a start date for report data. Select an end date for report data (no longer than a year).

Visits Over the Past 30 Days



The default setting generates a report of usage over the past 30 days, but Toolkit managers can customize the dates.

This line graph illustrates the **number of daily visits to the Toolkit** over the designated time period. This statistic can help you monitor and evaluate the effect of initial and ongoing promotion and dissemination efforts.

If you do not see visits spiking around the times the Toolkit is being promoted, you might need to rethink your promotion and dissemination strategy. If there are long periods where the number of Toolkit visitors remains low, more vigilant promotion and dissemination of the Toolkit might be required.

Site usage statistics (pictured on page 2) shed light on the extent to which visitors are utilizing the Toolkit and accessing the resources it houses. For example, if the **average time on site** is very short (< 1 minute) with few page views, those who visit your Toolkit are likely not absorbing the information you are offering. If the

percentage of new visits is high and the **proportion of returning visitors** is low, most people who visit the Toolkit once never visit it again. If the **bounce rate** is high (>60%) most people are entering and then leaving the toolkit without viewing any other pages on the site, which might mean you need to revise your landing pages to draw users in or to think about how to better attract your target audience to your site.

Site Usage

168	VISITS	51.79%	BOUNCE RATE
555	PAGEVIEWS	2 min 48 sec	AVG. TIME ON SITE
3.30	PAGES/VISIT	75.60%	% NEW VISITS

Visits: number of unique visits

Pageviews: total number of pages viewed by visitors

Pages/Visit: average number of pages viewed on each unique visit

Bounce Rate: percentage of visitors who enter the site and then leave without viewing other pages within the site

Avg. Time on Site: total time spent viewing pages averaged out over all visits

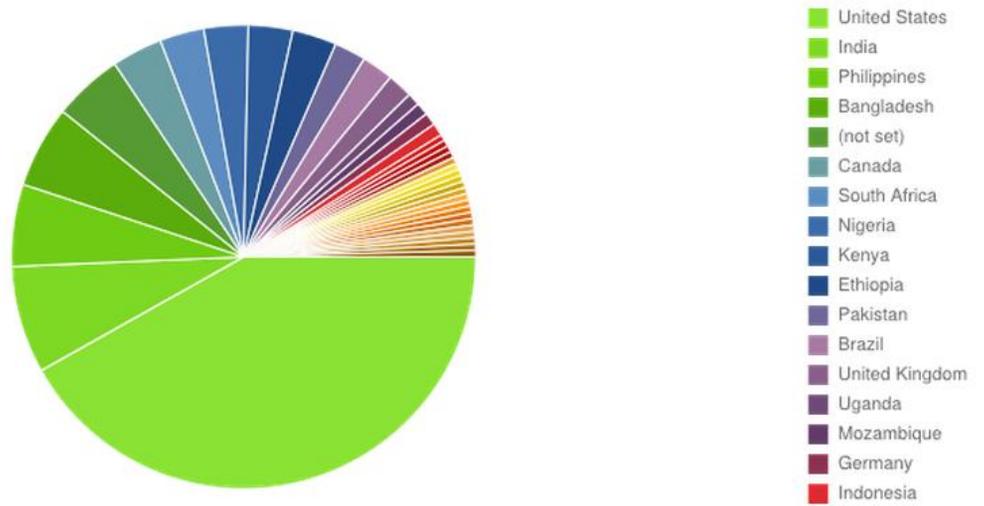
% New Visits: percentage of the total visits coming from new visitors as opposed to return visits

Top Pages

1. [Maternal Infant Young Child Nutrition - Family Planning \(MIYCN-FP\) Integration | K4Health](#) - 148 Views
2. [Social & Behavior Change Communication | K4Health](#) - 43 Views
3. [Sample Job Aids & IEC Materials | K4Health](#) - 29 Views
4. [Capacity Building & Training | K4Health](#) - 19 Views
5. [Country Experiences | K4Health](#) - 18 Views
6. [Monitoring & Evaluation | K4Health](#) - 16 Views
7. [How to Integrate | K4Health](#) - 15 Views
8. [Advocacy | K4Health](#) - 11 Views
9. [Maternal Infant Young Child Nutrition - Family Planning \(MIYCN-FP\) Integration | archive.k4health.org](#) - 11 Views
10. [Formative Assessment Resources | K4Health](#) - 10 Views

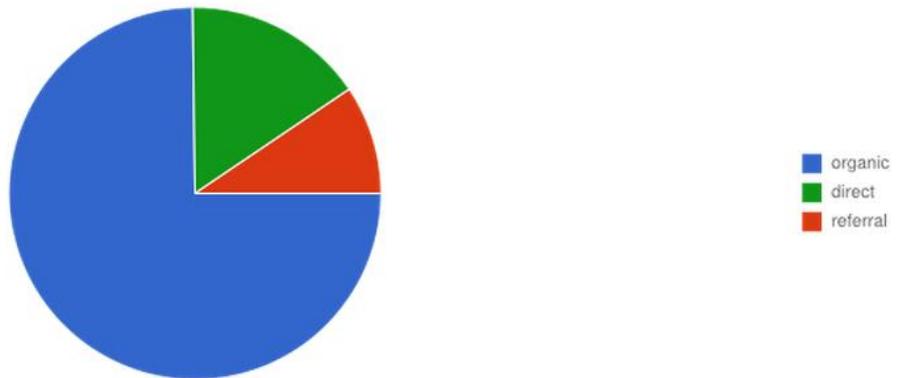
Examining the **most frequently viewed pages** within the Toolkit provides insight into which parts of the Toolkit are being utilized and, more broadly, what the needs are of your audiences. Conversely, a look at which pages and documents are not often accessed can help you decide whether certain pages need to be revised or particular documents should be removed from the Toolkit.

Top Countries



This graph shows **which countries your visitors are coming from**. You can move your mouse over the graphic to see exact numbers for the top 20 countries. Looking at the location of your Toolkit users will help you evaluate whether you are effectively reaching your intended audiences around the world.

Source Types



Another helpful statistic for monitoring and evaluation is the **source of traffic**: are more people reaching your Toolkit **organically** through an unpaid **web search**, a **referral** (link from another site), or by **directly visiting your URL**?

Keywords are search terms visitors used to find your content in a search engine. In the case of "not set" or "not provided," visitors probably clicked a link or entered your address directly instead of doing a search. The **top keywords** that have led users to your Toolkit from an online search shed light on what kinds of information and resources users are seeking and what led them to your Toolkit.

Top Referrals

1. [google](#) - 120 Visits
2. [\(direct\)](#) - 26 Visits
3. [mchip.net](#) - 5 Visits
4. [facebook.com](#) - 4 Visits
5. [ask](#) - 2 Visits
6. [comminit.com](#) - 2 Visits
7. [coregroup.org](#) - 2 Visits
8. [es-mg42.mail.yahoo.com](#) - 1 Visit
9. [esdproj.org](#) - 1 Visit
10. [google.co.in](#) - 1 Visit

Top Keywords

1. [\(not provided\)](#) - 61 Visits
2. [\(not set\)](#) - 46 Visits
3. [child nutrition family planning](#) - 2 Visits
4. [contraceptive technology update](#) - 2 Visits
5. [national counselling cards for community volunteers - uganda](#) - 2 Visits
6. [powerpoint maternal health](#) - 2 Visits
7. [sample job aids](#) - 2 Visits
8. [social and behavioral change communication \(sbcc\) framework](#) - 2 Visits
9. ["activity design" for supplies philippines](#) - 1 Visit
10. ["advocacy brief" dsw](#) - 1 Visit

Referrals are sites that have "referred" your visitors to you. In other words, that is where your traffic is coming from—who is linking to you. A (direct) referral means that the visitor typed in the address and didn't click a link to find your site. Asking relevant organizations to link to your Toolkit from their websites can increase referral traffic to your Toolkit.

User Surveys

In 2011 K4Health conducted a global online survey to obtain feedback about the K4Health website and K4Health Toolkits generally. In addition, in 2012 K4Health conducted in-depth interviews with users in the U.S., England, Switzerland, India, Senegal, Ethiopia, Zimbabwe, and South Africa, focusing on (a) user satisfaction with the Toolkits and b) what knowledge from the Toolkits is being applied. The interviewees provided valuable feedback, much of which is applicable to all Toolkits and can inform the development of new Toolkits and the improvement of existing ones.

User Satisfaction

The assessment revealed that Toolkits are reaching program managers at the global level and that Toolkit users are applying K4Health information to their program activities and initiatives. The majority of respondents indicated that Toolkits were very useful because they offer:

- the ability to download full-text documents
- the ability to browse for resources by programmatic topic
- a targeted set of practical resources geared toward health care providers and managers
- a collection of country experiences and project examples

One user felt the Toolkits are “a great one-stop resource that the community has endorsed,” while another expressed a preference for toolkits that are strategic, step-by-step collections of guidance and indicators rather than those that serve as repositories for large compilations of documents. Many Toolkit users stressed the importance of consistently and continually updating the information in the Toolkits to ensure they are credible, up-to-date, relevant, and engaging.

Among respondents to the online survey, the majority visited the Toolkits seeking an overview on a toolkit topic or training curricula and materials. The interviews revealed that Toolkit users want greater access to information on topics such as:

- M&E indicators
- implementing and evaluating social media campaigns
- practical “how-to” programmatic guidance and examples
- eHealth policies
- women and leadership in developing countries
- lessons learned from developing countries

Also among the findings was that **information overload** can be a barrier to information access in some Toolkits. As a TWG determines the scope of a Toolkit or the inclusion criteria for resources, there is value in limiting the number of resources included in the Toolkit to the essentials so that users do not feel overwhelmed. Respondents also stressed the value of providing an **informative summary** for each resource included in the Toolkit so that users faced with time constraints and information overload can more effectively select and prioritize information.

Knowledge Applied

Respondents applied knowledge gained from K4Health Toolkits to developing written briefs, strategy documents, grants, proposals, field studies and activities, communities of practice, specific program activities and initiatives, PowerPoint presentations, postpartum messages for women, operations research, concepts in data collection, references, and databases of indicators. For example, one Toolkit user reported using the Knowledge Management Toolkit to help his organization develop its own internal knowledge management strategy. Another user used the Behavior Change Communication field guide in the mHealth Toolkit to assist a colleague writing an mHealth grant. As you develop inclusion criteria for resources for your Toolkit and later review and update the Toolkit, it might be helpful to think of how each resource you are thinking of including will be used by your target audience.

Conducting Your Own Survey

Free online tools such as SurveyMonkey (www.surveymonkey.com) make it easy for a TWG to solicit feedback from users of a particular Toolkit. This can be done before the Toolkit is made available to the public to ensure the Toolkit is a comprehensive, high-quality resource before launching it. A user survey can also be conducted after the Toolkit has been published to inform updates or revisions to the Toolkit and plan for ongoing promotion and dissemination efforts. With services such as FluidSurveys (www.fluidsurveys.com), a pop-up survey can be embedded in the Toolkit for easy access to Toolkit users.

Other Steps in the Toolkit Development Process

K4Health offers guidance on completing each step of the Toolkit development process. These guidance documents can assist you with your next steps and with ongoing collaboration to promote, maintain, monitor, and evaluate the toolkit:

[How and When to Establish a Technical Working Group](#)

[Developing a User-Friendly K4Health Toolkit](#)

[Promoting and Disseminating the K4Health Toolkit](#)

[Updating the K4Health Toolkit](#)

Be sure to also take a look at our templates and other tools to help throughout the Toolkit-building process. These include:

- [a sample agenda for an initial Toolkit steering committee meeting](#)
- [an Excel workbook for organizing Toolkit resources](#)
- [a sample online survey](#)
- [a form to obtain feedback about Toolkits in development](#)