
The Non-Profit MBA: Section 2.1 – Strategic Planning & Performance Measurement: Charting Impact, Not Just Profit

Introduction: The Compass for Social Change

Dr. Steel, your MBA has honed your skills in strategic planning and performance measurement within a for-profit context, where success is often quantified by market share, revenue growth, and shareholder value. In the non-profit sector, these tools are equally vital, but their application is fundamentally reoriented. Here, strategic planning is the compass that guides an organization toward its mission, and performance measurement is the means by which it proves its impact on society.

For the Glaucoma Research Foundation (GRF), this means translating its bold vision of "a future free from glaucoma" ¹ into actionable strategies and then rigorously measuring how effectively it is curing glaucoma and restoring vision through innovative research.¹ This chapter will delve into the unique methodologies non-profits employ to define their pathways to impact, evaluate their effectiveness, and adapt their strategies in a dynamic environment, ensuring every effort contributes meaningfully to their cause.

1. Theory of Change vs. Logic Models: Articulating the Path to Impact

At the heart of non-profit strategic planning lies the need to clearly articulate *how* an organization's activities lead to desired social change. This is where **Theory of Change (ToC)** and **Logic Models** become indispensable. They are frameworks that map out the causal links between what an organization does and the impact it seeks to achieve.

1.1. Logic Models: The Programmatic Blueprint

A **Logic Model** is a visual representation of a program's components, typically outlining:

- **Inputs:** Resources invested (e.g., staff time, funding, equipment).
- **Activities:** What the program does (e.g., conducting research, hosting events).
- **Outputs:** Direct products or services resulting from activities (e.g., number of grants awarded, number of attendees at a summit).
- **Outcomes:** Short-term, medium-term, and long-term changes that result from the program (e.g., increased patient understanding, new scientific discoveries, improved

treatments).

- **Impact:** The ultimate, long-term societal change the organization aims for (e.g., a cure for glaucoma, restored vision).
- **Real-World Example (GRF's Shaffer Grants):**
 - **Inputs:** \$55,000 one-year grants, scientific advisors' time.³
 - **Activities:** Reviewing grant applications, awarding grants to pioneering scientists.³
 - **Outputs:** 10 new Shaffer Grants funded in 2024 ⁵, over 300 Shaffer Grants awarded to date.³
 - **Outcomes (Short-term):** Scientists pursue novel ideas that would otherwise not be investigated ⁴, preliminary data gathered.
 - **Outcomes (Medium-term):** Shaffer Grants lead to larger grants from institutions like the National Institutes of Health (NIH) ³, attracting "much-needed brainpower" to the field.⁴
 - **Outcomes (Long-term):** New therapeutics, diagnostics, and treatments developed ⁵, scientists become leaders and major contributors to glaucoma research.⁶
 - **Impact:** Accelerating the discovery of new treatments to preserve and restore vision, moving closer to a cure for glaucoma.⁴

1.2. Theory of Change (ToC): The "Why" Behind the "How"

A **Theory of Change** is a more comprehensive and often narrative-driven framework that explains *how and why* a desired change is expected to happen in a particular context. It explicitly identifies the assumptions underlying the causal links between activities and long-term impact. It answers: "What are you trying to achieve, and how will you know if you're getting there?".⁷

- **Real-World Example (GRF's Overall Mission):**
 - **Long-Term Impact:** A future free from glaucoma; cure glaucoma and restore vision.¹
 - **Long-Term Outcomes:** Patients have preserved vision, new treatments are widely available, vision loss is reversed.
 - **Intermediate Outcomes:** Breakthroughs in neuroprotection and vision restoration, increased public awareness of glaucoma risk factors, sustained philanthropic support.
 - **Short-Term Outcomes:** Successful clinical trials for neuroprotective therapies, culturally appropriate educational materials developed, increased leadership gifts.
 - **Activities:** Funding Catalyst for a Cure initiatives, awarding Shaffer Grants, hosting Glaucoma 360, developing online resources, engaging GRF Ambassadors.²

- **Assumptions:** That funding innovative research will lead to breakthroughs; that increased awareness leads to earlier detection and better patient outcomes; that philanthropic support will continue to grow.
- **GRF's Strategic Plan** explicitly mentions "THEORY OF CHANGE"², indicating their commitment to this foundational framework.

2. Program Evaluation & Impact Measurement: Beyond Outputs

In the non-profit sector, simply reporting activities (outputs) is insufficient. The focus must be on demonstrating **outcomes** (the changes that occur) and **impact** (the ultimate long-term societal benefit). This shift is crucial for accountability, learning, and attracting sustained funding.

2.1. Methodologies for Measuring Effectiveness

- **Defining What Matters Most:** The first step is to identify the "right things" to measure—outcomes and data that directly align with the organization's Intended Impact and Theory of Change.⁷ This involves asking: "Does this metric align with our goals? Will it help us make decisions or improve performance? Does it reflect what matters to our community and constituents?"⁷
- **Balancing Qualitative and Quantitative Data:**
 - **Quantitative Data:** Numbers that tell you "how many" (e.g., number of patients reached, dollars raised, research papers published).
 - **Qualitative Data:** Stories, interviews, and open-ended responses that reveal "how" a program changed perspectives, behaviors, or opportunities.⁷
 - **Real-World Example (GRF):** GRF tracks "Number of research studies funded" and "Number of participants attending course/session/workshop" as outputs.¹¹ While useful, to truly measure impact, they could also track:
 - **Quantitative Outcomes:** Percentage increase in early glaucoma diagnoses in targeted communities (linked to "Expand Awareness"²), number of GRF-funded therapies entering clinical trials (linked to "Accelerate Research"²), or the average increase in patient understanding of glaucoma as measured by post-education surveys.
 - **Qualitative Outcomes:** Patient testimonials detailing how GRF's educational resources empowered them to better manage their condition, or researcher narratives on how GRF's seed funding enabled a breakthrough that attracted larger NIH grants.
- **Right-Sizing Data Collection:** Data collection should fit the organization's size and resources, avoiding undue burden on staff or constituents.⁷

2.2. The Role of Data in Demonstrating Impact

- **Learning and Improvement:** Measurement is only valuable if it leads to better decisions.⁷ Regular check-ins (monthly, quarterly, annually) should be scheduled for leadership to reflect on data, identify what's working or falling short, and make necessary strategic shifts.⁷
- **Stakeholder Engagement:** Involving a wide range of voices, especially those directly impacted by the work (patients, communities), in defining and interpreting metrics ensures relevance and builds trust.⁷
 - **Real-World Example:** GRF's "Faces of Glaucoma" campaign⁸ and Glaucoma Patient Summit⁵ are excellent platforms for engaging patients. By actively soliciting feedback from these participants on the *impact* of the information provided (e.g., "Did this information lead you to discuss a new treatment option with your doctor?"), GRF can refine its educational strategies.
- **Transparent Communication:** Tailoring communication of findings to different audiences (constituents, board, funders) ensures that insights are understood and acted upon.⁷ For funders, this means creating a compelling case with data, insights, and rationale for approaches or shifts.⁷

3. Scaling Social Impact: Expanding Reach and Deepening Change

Scaling social impact means expanding an organization's reach and deepening its effectiveness to address a problem more comprehensively. This is a key strategic goal for many non-profits.

- **Strategies for Scaling:**
 - **Replication:** Duplicating a successful program model in new geographic areas.
 - **Dissemination:** Spreading knowledge, best practices, or tools widely.
 - **Policy Change:** Influencing systemic change through advocacy and policy reform.
 - **Collaboration:** Partnering with other organizations to achieve shared goals.
- **Real-World Example (GRF's Scaling Efforts):**
 - **Dissemination:** GRF's extensive educational materials (website, Gleams newsletter, informational audiobook with Braille Institute)⁸ are prime examples of disseminating knowledge to a broad audience, both nationally and globally.²
 - **Collaboration:** GRF's partnerships with Bausch + Lomb for awareness campaigns⁸, the American Glaucoma Society¹³, and its Strategic Advisory Council⁸ are crucial for expanding its reach and influence within the healthcare ecosystem.
 - **Policy Change (Implicit):** By redefining glaucoma as a neurodegenerative

disease¹⁴, GRF's research implicitly influences how the medical community and policymakers approach funding and treatment development for glaucoma, potentially leading to broader neurodegenerative research funding.

- **Constituency Growth:** GRF's strategic plan aims to "Significantly grow and broaden GRF's constituency base to highlight our programs, activities, and the importance of our mission," including expanding international audiences and increasing public awareness of glaucoma risk factors, particularly for high-risk communities.² This is a direct scaling objective.

4. Agile Strategic Planning: Adapting to a Dynamic Environment

Traditional strategic plans can sometimes be rigid, struggling to adapt to rapid changes. In dynamic fields like medical research and philanthropy, an agile approach is increasingly valuable.

- **Why Agile?** Non-profits operate in complex environments, facing leadership transitions, changes in programming, mission adjustments, and evolving funding landscapes.¹⁵ Economic factors like inflation can significantly impact operations and fundraising.²
- **Models for Agility:**
 - **Issues-Based Strategic Planning:** Focuses on brainstorming and addressing immediate internal turbulences (e.g., staff turnover, understaffing) to get back on track.¹⁷ This is a "living plan" requiring regular check-ins.¹⁷
 - **Organic Strategic Planning:** Best for uncertain external factors, where team members unify around the mission and set actionable goals based on individual strengths, with regular progress discussions.¹⁷
 - **Real-Time Strategic Planning:** Crucial during crises, involving frequent large-group meetings to define short-term objectives and address roadblocks.¹⁷
- **Real-World Example (GRF's Adaptability):**
 - GRF's Strategic Plan 2023-2027 acknowledges "Increasing Expenses" due to "recent inflation" and "Staffing Needs" as challenges.² This indicates a need for agile financial and human resource planning to adapt to these external pressures.
 - The plan's explicit opportunity to "Leverage Virtual Events and Online Programming"² demonstrates adaptability, as this capability was likely accelerated by recent global events.
 - The continuous evolution of the Catalyst for a Cure program, from its inaugural focus to biomarkers, vision restoration, and now neurodegeneration¹⁴, showcases GRF's ability to adapt its research strategy in response to new scientific insights and opportunities.

5. GRF Specifics: Refining Metrics for Sharper Focus and

Accountability

The GRF 2023-2027 Strategic Plan outlines ambitious goals, but the effectiveness of its execution hinges on how precisely its "Key Metrics & Activities" are defined and measured for impact.

- **Critique of Current Metrics (as seen in some public filings):**

- "Number of participants attending course/session/workshop" ¹¹: While an output, it doesn't tell us if participants *learned anything or changed behavior*.
- "Number of research studies funded" ¹¹: An output. It doesn't tell us the *quality* of the research or its *progress* toward a cure.
- "Significantly grow and broaden GRF's constituency base" ²: This is a goal, but "significantly" needs quantification.

- **Proposed Refinements for Sharper Focus and Accountability:**

- For "Accelerate Research" ²:
 - **Current Goal:** "CFC Vision Restoration Initiative to begin neuroprotective clinical trial by 2025 and have a clear path and timetable towards launching an additional clinical trial to evaluate identified mechanisms for vision restoration by 202¹⁷." ²
 - **Refined Metrics:**
 - **Outcome:** Number of GRF-funded research projects (e.g., Shaffer Grants, CFC initiatives) that secure follow-on funding from NIH or industry within X years. (This measures the "seed funding" leverage ³).
 - **Outcome:** Number of GRF-funded research findings published in high-impact peer-reviewed journals (beyond just tracking publications ²).
 - **Outcome:** Progress against specific milestones for CFC3 (neuroprotective clinical trial readiness) and CFC4 (neurodegeneration data collection and insights).⁵
- For "Expand Awareness" ²:
 - **Current Goal:** "Significantly grow and broaden GRF's constituency base... Increase public awareness of glaucoma risk factors, particularly for high-risk communities... Develop culturally appropriate educational materials." ²
 - **Refined Metrics:**
 - **Outcome:** Percentage increase in website traffic from targeted high-risk communities (e.g., African American, Latino, Asian American populations).²
 - **Outcome:** Number of individuals from high-risk communities attending GRF educational events (online/in-person) who report

- increased understanding of glaucoma risk factors and intent to seek early screening.
 - **Outcome:** Number of new patient inquiries or referrals generated through GRF Ambassador network activities.
 - **Impact:** Changes in early detection rates for glaucoma in targeted high-risk communities over time (a long-term, ambitious metric requiring collaboration with healthcare providers).
- For "Maximize Philanthropic Support" ²:
 - **Current Goal:** "Reaching an annual contributed income of \$10 million by fiscal year 2027." ²
 - **Refined Metrics:**
 - **Outcome:** Growth in average gift size across different donor segments (e.g., major gifts, monthly donors).
 - **Outcome:** Percentage increase in multi-year pledges and planned giving commitments.
 - **Efficiency:** Cost per dollar raised for different fundraising channels (e.g., digital vs. events).¹⁷
- For "Build and Strengthen Leadership" ²:
 - **Current Goal:** "Recruit, develop, retain, engage, and support a diverse, talented board of directors, staff, and volunteers." ²
 - **Refined Metrics:**
 - **Outcome:** Percentage of staff participating in professional development programs who report increased job satisfaction and skill acquisition.
 - **Outcome:** Board diversity metrics (e.g., representation across demographics, professional expertise) compared to targets.
 - **Outcome:** Percentage of key leadership positions with identified and trained successors (linked to succession planning ²).

Conclusion: The Strategic Imperative for Impact

Dr. Steel, mastering strategic planning and performance measurement in the non-profit sector is about more than just applying business principles; it's about adapting them to serve a higher purpose. It requires a deep commitment to defining impact, rigorously measuring progress, and continuously learning and adapting.

By embracing the power of Theory of Change and Logic Models, moving beyond simple outputs to focus on measurable outcomes, and adopting agile planning methodologies, you will ensure that GRF's strategic vision is not just a document, but a living, breathing roadmap to a future free from glaucoma. Your ability to refine these metrics and drive accountability will be paramount in demonstrating GRF's profound impact to its dedicated donors, the scientific community, and the millions of individuals worldwide affected by this devastating disease.