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Public Resources Foundation



# Social Impact of Assistance for Capacity Building Provided by the Panasonic NPO Support Fund

SROI Analysis Report:

Social Impact Created by the Allergies Support Network  
as a Result of Capacity Building Efforts



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The Panasonic Corporation and the Public Resource Foundation have conducted this analysis for a quantitative assessment of the assistance offered by the Panasonic NPO Support Fund with the cooperation of the Allergies Support Network. One of the Panasonic Corporation's CSR initiatives, the Panasonic Support Fund provides financial assistance for capacity building that enhances the recipient's ability to help solve social issues. The Allergies Support Network is one of the organisations that receive assistance from the Panasonic Fund.

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## 1. Executive Summary

The aim of this SROI evaluation is to illustrate the social impact of Allergies Support Network (ASN)'s capacity building effort supported by Panasonic. The purposes of the support to NPO's capacity building efforts are;

- 1) Enhancing the organisational capacities, such as management skills, human resources, financial management, fundraising, plan-do-check-assess etc.
- 2) As a result of the capacity building efforts, the organisation creates a wider range of social value.

In this ASN's case, the "input" was the Panasonic support (¥3,500,000 cash and managerial suggestion and advice equivalent to ¥300,000) from 2007 to 2009 to the capacity building efforts of ASN. It enhanced their organisational capacities, and they could offer the "Allergy College" program over the eight years, and generated the value for the participants of the "Allergy College" and children with food-allergies and their families.

When ASN started to receive the Panasonic support, the "Allergy College" program was understaffed. It was run mainly by volunteers and did not have an office. Occasionally, it had only a few participants, and so the program had a deficit. The assistance that was provided for three consecutive years allowed the organisation to rent an office space and to hire employees to work in the program. This also enabled the program to gain top-notch instructors in the field of allergies, who helped the participants to become human resources with expert knowledge. The "Allergy College", which used to be a program in deficit, continued to expand and evolve in terms of its quality. Consequently, the program grew to become the ASN's core business and to generate revenues. All of these achievements have helped the ASN as an organisation to earn trust from external entities.

In addition to the direct effects of the financial assistance, an examination of the program conducted while it was running allowed the staff to continue making the next plans, which also helped to strengthen its organisational capacity. The processes of preparing a written application for assistance, mid-term interviews, and writing reports made this examination possible. ASN's Managing Director says "I believe that the Panasonic NPO Support Fund helped me grow as I exercised leadership in this organisation."

The assistance for the ASN's capacity building had an effect on a particular project within the organisation. This enabled us to calculate the SROI index by focusing on this project. The result showed that the SROI in this assistance generated a social impact that was 8.82 times as much as the financial assistance from the Panasonic Fund, owing to the fact that the assistance helped the program to grow and this growth continued to serve as leverage.

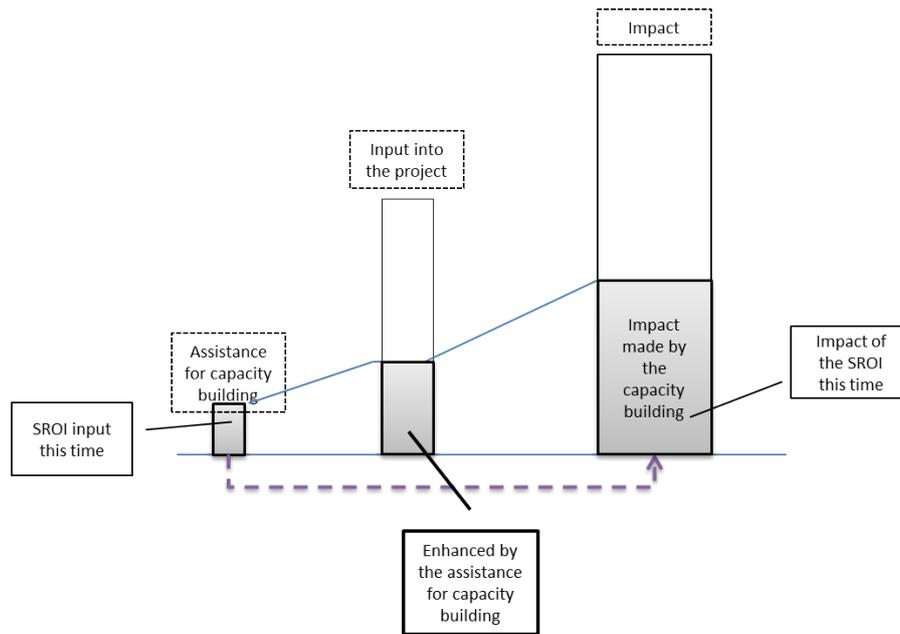


Figure1: Input and Impact

The capacity building efforts generated revenue that helped the program to grow and expand its customer base (i.e., the people who benefit from the program’s offerings). This eventually created a further impact.

There have been many suggestions that the correlation between the capacity building efforts and what may be the outcomes of the efforts is unclear. This research successfully quantified the effects of the capacity building efforts that helped to expand the program and then created a greater social impact, which we believe is a major achievement. We surmise that other cases may present different quantifiable outcomes and impacts. Hence, we should further develop the methodology, in order to cover a wider range of capacity building efforts.

## 2. Introduction

Panasonic NPO Support Fund started to provide financial assistance for capacity building in 2001 that enhance the recipient’s ability to help solve social issues. The Allergies Support Network was one of the organisations that received assistance from the Panasonic NPO Support Fund from 2007 to 2009.

The Public Resource Foundation worked together with the Panasonic Corporation in the evaluation of the capacity building efforts that Panasonic has supported.

The logic of how capacity building efforts impact the society consists of two stages. During the first stage, an organisation receives financial assistance for capacity building (see (1) in Figure 2); and, during the second stage, the outcomes of these efforts by the organisation create a wider range of effects ((2)in Figure 2).

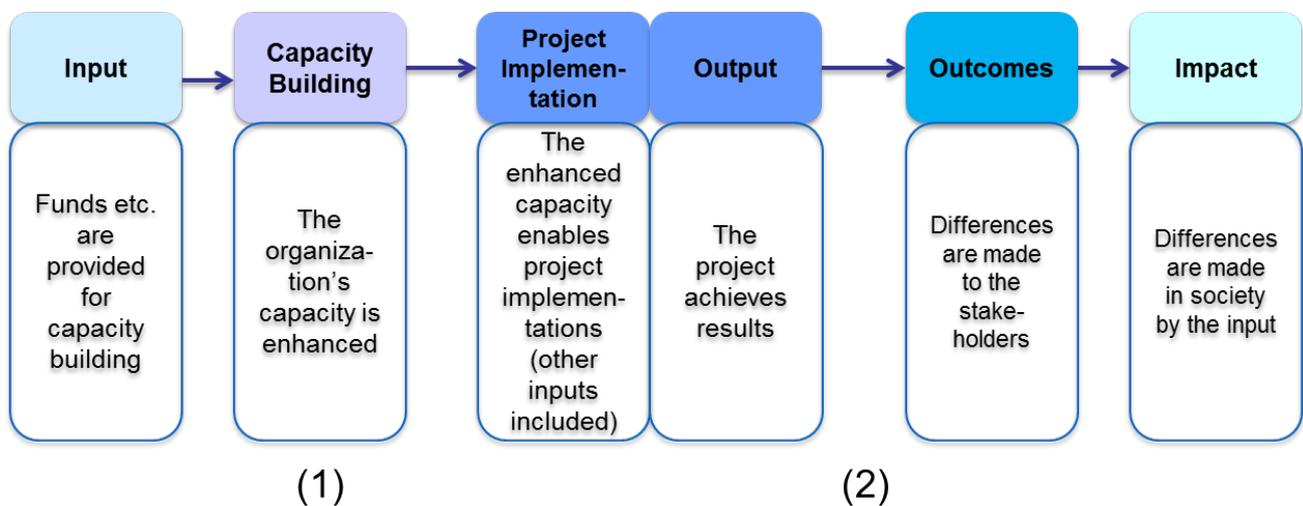


Figure 2: Capacity Building Logic Model

In accordance with this logic, we evaluated what differences the assistance for capacity building had made in the organisation (1), and what outcomes the efforts had achieved (2).

As a group of indicators for Stage (1), we applied the NPO Management Assessment Sheet (hereafter the “Assessment Sheet”) we developed to identify the differences that the financial assistance has made in the organisational capacity and evaluated these differences quantitatively. We compared the organisation’s self-assessments before and after the assistance was provided, in order to quantify the impact the assistance had on the capacity building efforts.

As for Stage (2), we used the Social Return on Investment (SROI) as a method for measuring the social impact of the assistance program and the return on investment that the assistance generated. We also calculated, in monetary terms,

the outcomes (i.e., the social impact of the assistance program) achieved through the organisation's commitment to capacity building.

The ASN received ¥1.5 million in 2007, ¥1 million in 2008, and ¥1 million in 2009 from the Panasonic NPO Support Fund (hereafter "Panasonic Fund") as assistance for its capacity building efforts. This assistance enabled the ASN to rent an office space. The funds also covered personnel costs, remuneration for lecturers, travel expenses, venue fees, and other expenses for running the "Allergy College" program that had been launched in 2006. With this financial help, the ASN enhanced its management skills and to develop the "Allergy College" program into a flagship business that would support the organisation and serve as the primary medium for the people who may benefit from the activities offered by the organisation. ASN's Managing Director says "I believe that the Panasonic NPO Support Fund helped me grow as I exercised leadership in this organisation."

The "Allergy College" is a program that the ASN administers, and is not an official academic institution. The purpose of "Allergy Collage" is that specialists and individuals who work with food-allergic children can acquire knowledge about food allergies and the advanced culinary skills to enhance the quality of life of children with food allergies. The program provides a series of courses primarily for dietitians, cooks, nursery teachers, school nurses and other relevant specialists. These courses are designed to help these individuals acquire knowledge about food allergies, as well as the advanced culinary skills required to prepare food for children with food allergies. The program started in 2006 in Aichi, and during its inaugural year, it offered 19 courses for 100 participants led by five lecturers. Once it started receiving assistance from the Panasonic Fund in 2007, it gained momentum and made significant achievements, including a boost in the annual enrollment to 1,297 in 2014.

The remarkable growth of the program, and the ASN-induced changes in the behavior of the parents and their children with food-allergy and the specialists who deal with allergy-related issues, has led to lower degrees of stress and anxiety in these people, fewer food allergy-related accidents, and other outcomes.

Accordingly, we evaluated the social value of the assistance of capacity building effort by Panasonic.

## Allergies Support Network

The Allergies Support Network (hereafter “ASN”) is a specified nonprofit organisation (NPO) that is composed of people with allergies, their family members, and specialists in healthcare, nutrition, food, childcare, and housing. It acts as an intermediary support organisation that connects people with allergies and their families with specialists in the relevant fields, municipal government bodies and private enterprises.

The ASN started as an association for people with allergies in 1988.

Allergy patients make up 35.9 percent of Japan’s population, when people who are allergic to non-food substances are included. According to the research conducted by the Ministry of Health, Labor, and Welfare<sup>1</sup>, 10 percent of infants, 4 to 5 percent of toddlers and preschoolers, and 2 to 3 percent of school children have food allergies. Therefore, there was a strong demand for nursery and school lunches that were safe for these children, yet no activities were in place to widely impart knowledge about food allergies to the public.

Living with allergies is never easy. An acute allergic response, called anaphylactic shock, can even be fatal as it causes breathing difficulties and lowered blood pressure. Despite this fact, people with allergies, dietitians, nursery teachers, and other specialists seldom have opportunities to acquire accurate knowledge and information about allergies.

The report from Ministry of Education, Culture, Sports, Science and Technology-Japan<sup>2</sup> suggests the importance of measures and training to the school teachers in order to avoid allergy-related accidents at school. The report states that only 20.8% of elementary school prepare the allergy-free school lunch for food-allergic children.

In 2004, the ASN conducted a fact-finding survey at all of the nurseries in the Aichi and Gifu prefectures. The survey results highlighted the reality that these nurseries were having difficulties in preparing appropriate lunches for the increasing numbers of participants with allergies. The results also emphasized the need to train the nursery teachers and dietitians, and other specialists, with the correct knowledge about allergies. After the survey, the ASN organised a program that was offered in cooperation not only with people working for the nurseries, but also people with allergies, their families, and healthcare professionals. In 2006, the ASN launched the 6-month “Allergy College” program which was designed to provide systematic training courses about food allergies. The program offers opportunities for many people to acquire expert knowledge about allergies. It is intended for dietitians, nursery teachers, school lunch cooks, school nurses, parenting supporters, and other specialists who are in a position to help children, as well as the heads of local associations for people with allergies.

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<sup>1</sup> The report of Ministry of Health, Labour and Welfare  
<http://www.mhlw.go.jp/stf/houdou/2r9852000001nfao-att/2r9852000001nfdx.pdf>

<sup>2</sup> “Appropriate measures for food-allergic children in terms of school lunch (2015)”  
([http://www.mext.go.jp/component/b\\_menu/shingi/toushin/\\_icsFiles/afieldfile/2013/08/01/1338331\\_2.pdf](http://www.mext.go.jp/component/b_menu/shingi/toushin/_icsFiles/afieldfile/2013/08/01/1338331_2.pdf))

Since its inception in 2006, the “Allergy College” has had a total of 4,197 participants. 2,769 enrolled in the elementary to advanced courses at the “Allergy College”, 190 in the online courses, and 1,246 in the basic courses for university participants.

FY	Allergy College	“Allergy College” Online Courses	Working Adults among the enrollees	Basic Courses (for participants)	Total Enrollment (working adults + participants)
2006	100	0	100	0	100
2007	250	0	250	0	250
2008	330	0	330	0	330
2009	270	0	270	0	270
2010	313	0	313	0	313
2011	368	30	398	0	391
2012	324	7	331	0	331
2013	363	124	487	428	915
2014	450	29	479	818	1,297
<b>Total</b>	<b>2,769</b>	<b>190</b>	<b>2,959</b>	<b>1,246</b>	<b>4,197</b>

Figure 3: Enrollment in the “Allergy College”

The table below shows an overview of the ASN as an organisation.

Organisation Name	Authorized Nonprofit Organisation Allergies Support Network
Summary	The Allergies Support Network (ASN) is a specified nonprofit organisation (NPO) that is composed of people with allergies, their family members, and specialists in healthcare, nutrition, food, childcare, and housing. It acts as an intermediary support organisation that connects its members with specialists, municipal government bodies and private enterprises.
Address	2-45-6 Oakicho Nakamura-ku, Nagoya, Aichi 453-0042 Japan
Website	<a href="http://www.alle-net.com/">http://www.alle-net.com/</a>
1st Day of Operation	October 1, 1988 Established as an organisation on July 1, 2003 Authorized as a nonprofit organisation on September 1, 2009
Representative	Tatsuo Sakamoto, Director
Primary activities	① Providing support for children with allergies and their families, and for associations of people with allergies ② Imparting scientific knowledge about allergies and offering talent

	<p>development programs (providing information on the ASN website; publishing and delivering newsletters; running the “Allergy College” program)</p> <p>③ Participating in joint research projects pertaining to healthcare</p> <p>④ Providing assistance in anti-disaster activities for children with allergies; helping these children in times of disaster</p> <p>⑤ Developing and promoting products for the safe daily use by children with allergies</p>
Employees	Paid and full-time: 6; Paid and part-time: 8
Finance (FY2014)	Gross earnings: ¥32,080,058; Gross expenditure: ¥35,797,459
Costs covered by the Panasonic NPO Support Fund for capacity building	<p>FYs2007 and 2008, ¥2.5 million in total</p> <ul style="list-style-type: none"> <li>• Remuneration for lecturers, travel expenses, venue fees, printing costs, etc.</li> <li>• Personnel expenses (part of the personnel costs for the full-time and part-time employees)</li> </ul> <p>FY2009, ¥1 million</p> <ul style="list-style-type: none"> <li>• Employee training costs</li> <li>• Wages for part-time employees</li> <li>• Rent, etc.</li> </ul>

### 3. Evaluation Method

#### Logic of the Success Achieved

The success of the ASN’s capacity building efforts enabled the organisation to fully engage in the operation and development of the “Allergy College” program that was launched as a pilot project, and to expand the program as the ASN’s core business. The ASN also became capable of acting as an intermediary for local NPOs that support people with allergies across the country, thereby offering the “Allergy College” program courses outside of Aichi to help increase the number of specialists with expertise in safe food for people with allergies in other prefectures. These developments induced changes in the behavior of the parents of children with food allergies and the specialists who deal with allergy-related issues, helping these people to reduce their stress and anxiety levels, as well as reducing the incidence of food allergy-related accidents, and other outcomes.

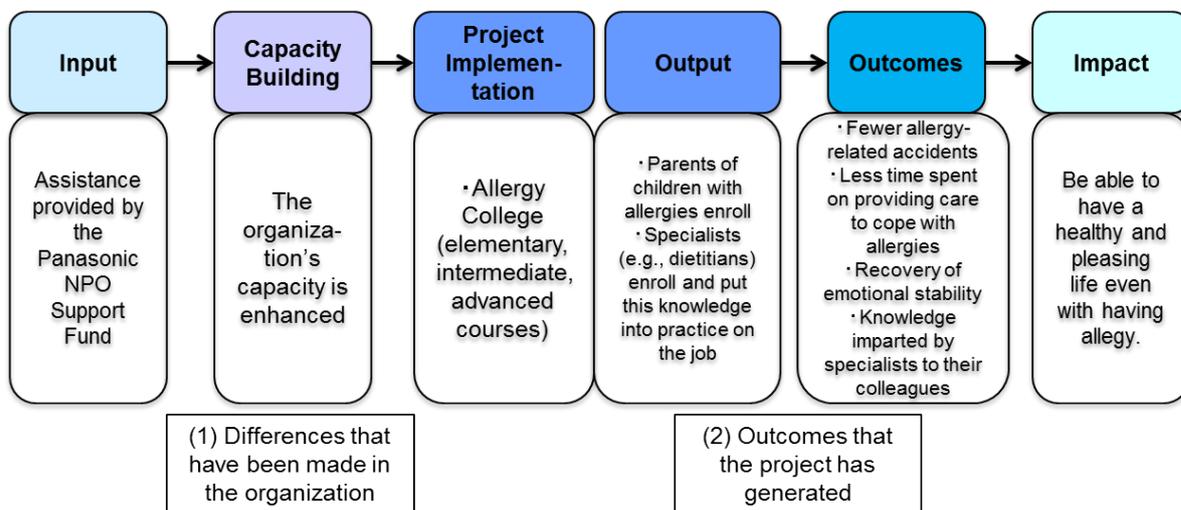


Figure 4: Logic of the Success Achieved by the ASN

#### Evaluating the Impact of the Capacity Building Efforts

To evaluate what differences the assistance for capacity building made in the organisation’s capability (i.e., the impact on the organisation), we applied the Assessment Sheet with a group of indicators to quantify the differences. The evaluation started with a self-assessment performed by an employee who was responsible for managing the organisation. We asked him to remember how the organisation had operated before the launching of its capacity building efforts, and to answer all of the 155 questions on the Assessment Sheet. Then, we asked him to reflect on how the organisation is operating today, after these efforts were made, and to answer the same questions on the Assessment Sheet. This approach required the respondent to look back and assess what the organisation used to be like, which might have made a certain bias unavoidable. Nonetheless, we used this approach, because no data about the organisation’s initial capabilities (in 2007) was available for the evaluation.

The respondent rated the item in each question on a scale of 0 to 3, with “No, not at all” being 0, “Not really” 1, “Probably” 2, and “Yes” 3. We then converted these ratings into the indicators, and compared the ratings of the

pre-capacity building state with the ratings for today’s state. We totaled the ratings of all the categories of organisational capability, and also added up the points in each of the categories, with the highest score of each category being 100.

We also interviewed the respondent who had filled out the Assessment Sheet to discover his opinions about the correlation between the enhanced organisational capabilities and the assistance for capacity building provided by the Panasonic Fund, and evaluated his responses in a qualitative manner. Figure 11 shows the categories of the organisational capability on the Assessment Sheet and the key barometers.

	<b>Category of Organisational Capability</b>	<b>Key Indicators</b>
1	Management Skills	Mission; understanding of what society needs; decision-making; leadership; governance; accountability; risk management
2	Personnel	Staff members’ skills; staff management; recruiting; staff development; volunteer involvement; welfare benefits
3	Financial Management and Infrastructure	Financial management; fundraising; cash flow; stability; profitability
4	Project Portfolio	Understanding of the project strengths and weaknesses; Project outcomes; project plans
5	Project Planning and Development	Setting project goals; looking into a social background; competence analysis; identifying targets (i.e., those who will benefit from the project); designing products and services; profitability analysis

Figure 5

## **SROI Analysis**

We used the Social Return on Investment (SROI) as a method for measuring the social impact of the assistance program and the return on investment that the assistance generated. We also calculated, in monetary terms, the outcomes (i.e., the social impact of the assistance program) achieved through the organisation's commitment to capacity building.

### Definition of SROI (summary)

SROI is a quantitative method used for measuring the value of social activities run by an NPO or a social business. It aims to “visualize” the “social value of the activities” that cannot be measured based on how the organisation is doing financially.

SROI stands for “social return on investment,” yet the aim is not only to calculate the cash value of the impact of the investment but also to form the basis of a discussion regarding the criteria for measuring the social value in itself through a calculation process.

Developed by the Roberts Enterprise Development Fund (REDF) in the United States in 2000, the SROI became a widely-used method in the United Kingdom, the Netherlands, and other parts of Europe. It was acclaimed as a tool for evaluating what effects activities have on a society, as well as for discussing organisational strategies. In 2006, the UK Cabinet Office helped to standardize the SROI evaluation process.

### Desired outcomes of the SROI analysis

- Clarification of the social impact of the project implemented by the organisation, as a way to help the administrative board, staff members, partners, donors, and other internal and external stakeholders have a deeper understanding of the significance of the project
- A solid foundation for the proper impact management, to ensure that the organisation engages in activities according to its priorities and based on its mission, and that the resources invested in each project deliver the intended results
- A clear presentation of key stakeholders that the organisation should work with in order to make the intended differences in the society; discussion generated as to what strategies are vital to make these differences
- Conversations with staff members, partners, donors, and other internal and external stakeholders, to offer them opportunities to become involved in the project planning

### Six steps of the SROI

1. Determine the operations in the project that the SROI will cover and identify key stakeholders
2. List the outcomes of these operations, as a result of the project
3. Examine these outcomes to assess their social value
4. Exclude any factors outside the project, to confirm the real impact of the project
5. Calculate the SROI

6. Report the results to continue using the process that employs the SROI

## 4. The Impact of the Capacity Building Effort

In our effort to quantify the changes in the capability of an organisation that has received financial assistance for capacity building provided by the Panasonic Fund, we asked the head of the ASN's administrative office to answer the 155 questions on the Assessment Sheet about what the organisation had been like immediately before the Panasonic Fund provided assistance in 2007, and then to answer the same questions about what the organisation is like today. Then, we compared the two different sets of answers to quantify the changes the organisation had experienced. The results showed that the ASN's aggregated score across the five categories before the assistance was 31.4 out of 100 points, and that the total shot up to 53.7 after the assistance began. Particularly notable were the following increases: more than twofold in the Project Development and Marketing category; 2.53 times in the Finance category; and 2.24 times in the Personnel category (see Figure 4). Note that for the ratings of the organisational capacity in 2007 it was necessary to rely solely on the internal staff's (i.e., the employees') memory.

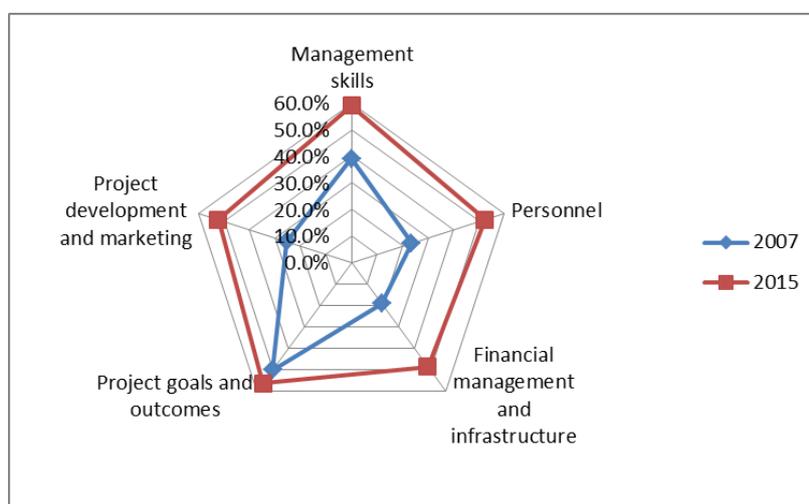


Figure 6: Assessment of the Impact on the Organisation of the Allergies Support Network

The organisational abilities have been assessed as follows:

a Management Skills

The rating of the organisation's management skills (as a percentage) was assessed as 39.0 in 2007, and as 59.1 in 2015, indicating an increase of 20.1 points. In particular, the scores for planning, assessing, and decision-making showed an improvement. In 2007, before the assistance began, the ASN as an intermediary support organisation had just finished creating a network of NPOs across Japan that would support allergy patients. Although the former representative was a highly skilled manager, the ASN lacked the solid planning, assessing, and decision-making structures needed for an intermediary support organisation. The assistance that was provided for the capacity building efforts significantly helped the organisation to enhance its intermediary support functions.

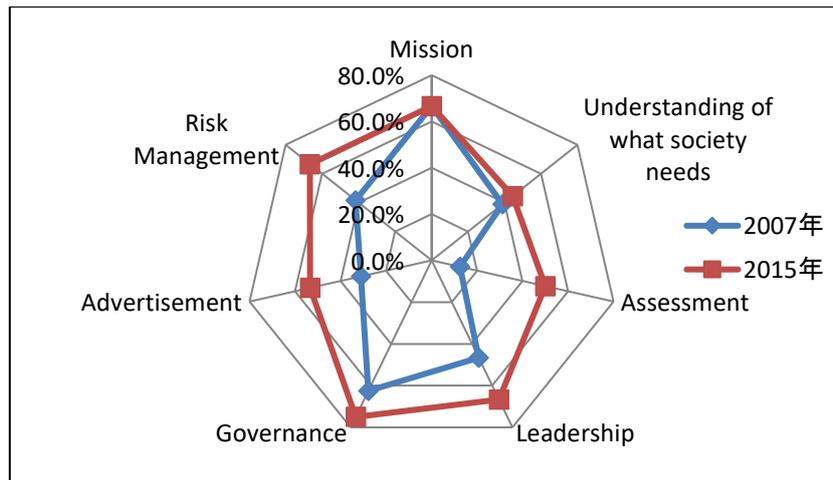


Figure 7: Management Skills

b Personnel

The rating of the organisation’s personnel (as a percentage) was assessed as 23.4 in 2007, and as 52.3 in 2015, which is an increase of 28.8 points. What is notable is the improvement in the organisation’s hiring practices to ensure adequate resources, as well as the better skills and qualifications of the employees. The ratings for talent development and benefits offered also increased by at least 30 percent. These increases in these ratings are largely because the organisation operated with only a few employees in 2007, before the assistance began. The funds it received then helped it to improve its hiring practices and to develop its talent dramatically, which has led to today’s management structure.

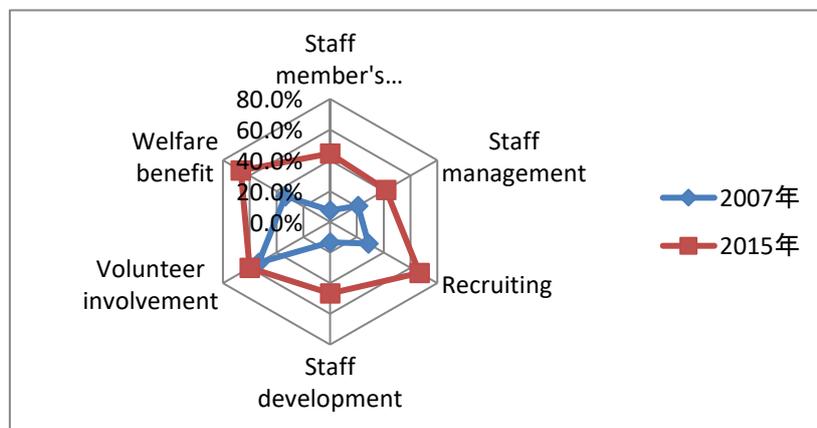


Figure 8: Personnel

c Financial Management and Infrastructure

The rating of the financial management and infrastructure (as a percentage) was assessed as 19.2 in 2007, and as 48.5 in 2015, which is an increase of 29.3 points. According to the interview results, the assistance from the Panasonic Fund helped the “Allergy College” to operate as an independent program. This led to an improvement in the organisation’s fundraising skills, and the ratings for the cash flow, financial stability, profitability, and infrastructure increased from 23.8 percent to 33.3 percent, on average.

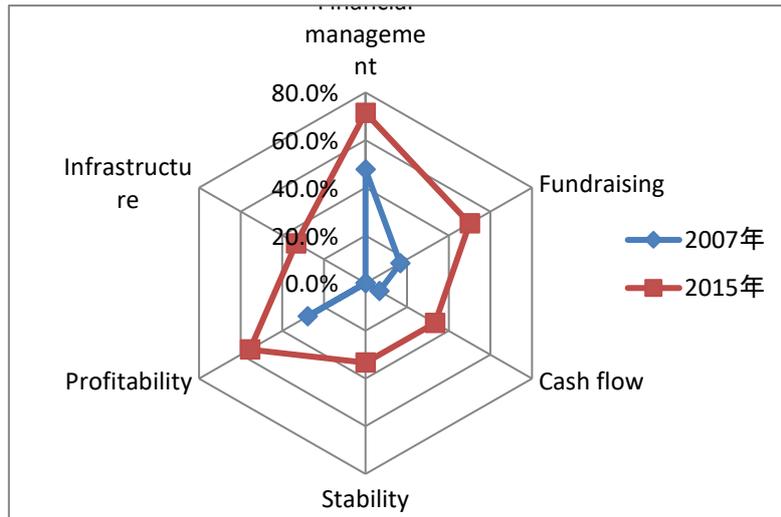


Figure 9: Financial Management and Infrastructure

d Goals and Outcomes of the Program

The rating of the “Allergy College” program operations (as a percentage) was 62.5 in 2007, and this remained the same in 2015.

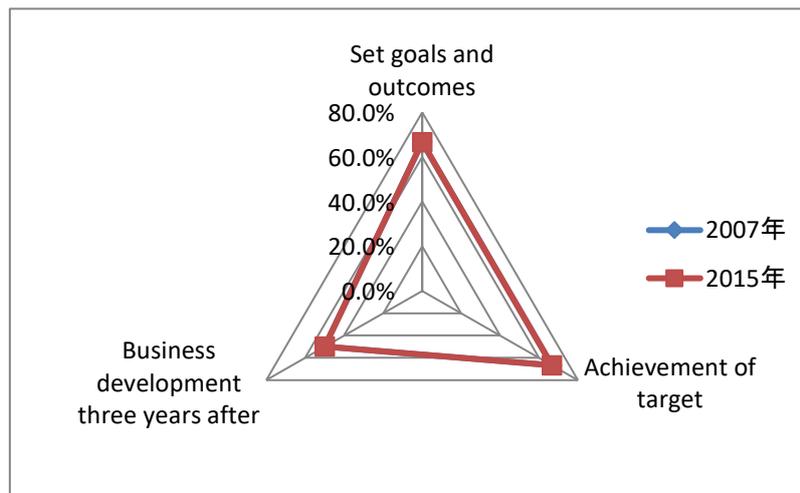


Figure 10: Goals and Outcomes of the Program (“Allergy College” Program Operation)

e Project Planning and Marketing

The rating of the “Allergy College” program operations (as a percentage) was 30.4 in 2007, and this almost doubled to 60.9 in 2015. What is particularly notable is that the scores for project development/planning and assessment/improvement significantly increased. Although the organisation admits that there is still room for improvement, actions such as pre-project planning, post-project overviews (i.e., checking and identifying the issues), and other improvements are beginning to take root. All of this was prompted by the assistance provided by the Panasonic Fund that enabled the support for activities and mid-term follow-ups, as well as the support for pre-activity project planning and the evaluations of projects.

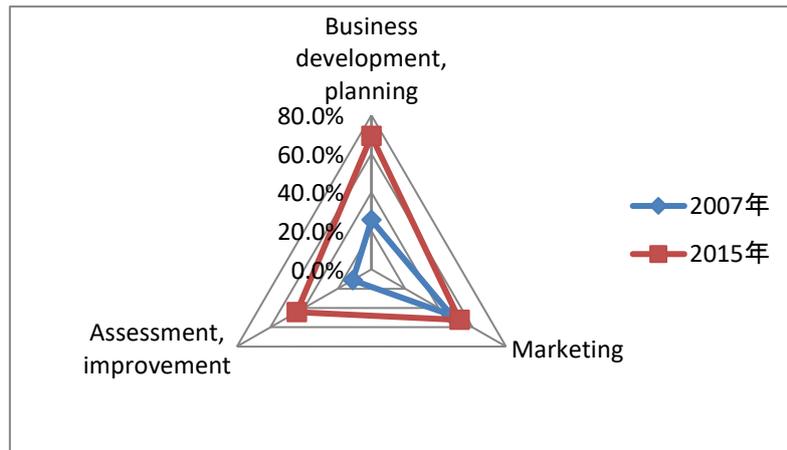


Figure 11: Project Planning and Marketing (“Allergy College” Program Operation)

The ASN received ¥3,500,000 in total from the Panasonic Fund. This assistance helped the organisation to begin earning revenue from the “Allergy College” program in 2008, and the profit from “Allergy College” added up to ¥19,870,446 in FY2014. When the assistance (¥3,800,000) and the aggregated increase in the revenue from the “Allergy College” (¥19,870,446) are compared, we can see that the return on investment was more than 5.23 times the initial investment.

## 5. Scope and Stakeholders

### Scope of the SROI analysis

The assistance provided by the Panasonic NPO Support Fund for the ASN's capacity building efforts had positive effects on this specific program. Consequently, the program began to generate profit, and it then developed an enhanced outcome. Although the ASN runs several primary programs, this SROI analysis is focused on the "Allergy College" program, which has achieved specific results owing to the assistance it received from the Fund. We have used the SROI method to quantitatively measure the outcomes of the expanded program.

The assistance was provided over the three years, from 2007 to 2009. However, we evaluated the impact over eight years from 2007 to 2014, because the impact of the enhanced capacity on the program continued after the financial assistance ended. Therefore, the evaluation does not concern the projected outcomes but the actual ones.

### Identifying and Selecting stakeholders

The following organisations and people may be considered as stakeholders in the assistance provided by Panasonic for the ASW's capacity building and the "Allergy College" program:

- Allergies Support Network
- Panasonic Corporation (the source of the funds provided by the Panasonic NPO Support Fund)
- Participants of the "Allergy College". The participants can be broadly categorized into two groups: parents of allergy patients (236 over the 8 years of the program's operations); and specialists (dietitians, cooks, children's guardians, nursery teachers, school teachers, public health nurses, nurses, people in the restaurant or food business, physicians, and researchers) (2,669 over 8 years).
- Food-allergic children whose family members have taken the "Allergy College" courses
- Food-allergic children interacted by the specialists who have taken the "Allergy College" courses

Other than the above, the ASW employees, supporters, certified experts, management team, and instructors at the "Allergy College", as well as the hospitals, schools, kindergartens, relevant administrative bodies, and other institutions that provide assistance, are also stakeholders. This SROI analysis excludes these stakeholders because the method of their impact on the organisation is unclear, some of them have only a weak impact, or their impact overlaps with that of other stakeholders.

Participants (from 2007 to 2014)		Number
<b>Parents</b>		<b>236</b>
<b>Specialists</b>	(1) Dietitians, national registered dietitians, and cooks engaging in planning or cooking lunches served at nurseries or schools	1,900
	(2) Health or medical service professionals, such as nurses and public health nurses	302
	(3) Nursery and school teachers	312
	Other	155
	<b>Total</b>	<b>2,669</b>

Figure 12: Participants of the “Allergy College” that become the object of this SROI analysis

### Stakeholder Involvements

A summary of stakeholder involvement is shown below.

Stakeholders	Size of group	Material ?	No. involved	How involved
ASN (Board and staff members who involve the administration)	5 board members and 3 staff members	Yes	2 board members and 2 staff members	<ul style="list-style-type: none"> <li>- The head of the ASN’s administrative office answered one set of assessment sheets (with 155 questions)</li> <li>- Then, discussed how the organization enhances thanks to the Panasonic support</li> <li>- Discussed the logic model, case examples, and outcomes of “Allergy College”</li> </ul>
Participants of the “Allergy College”: parents of children with food-allergy	236	Very material	12 + 2	Conducted individual interviews to know the outcome for parents
			18	Online survey on Google Drive
			74	Mailed questionnaires. Reply using the enclosed return envelope
Participants’ Children with food-allergy	236 (the minimum)	Yes		Not directly consulted, but we knew the outcome for them through their parents’ opinion
Participants of	1,900 (involved)	Very	4	Conducted a focus group to know the

the “Allergy College”: specialists	in school or nursery lunch preparations) 302 (engaged in health or medical services) 312 (engaged in day-care or schooling services)	material		outcome of the “Allergy College”
			22	Online survey on Google Drive
			276	Mailed questionnaires. Reply using the enclosed return envelope
Food-allergic children interacted by the specialists	30,799	Yes		Not directly consulted, but we knew the outcome for them through specialists’ opinion
The peers of specialists	10,327	Yes		Not directly consulted, but we knew the outcome for them through specialists’ opinion
ASN (Board and staff members who involve the administration)	5 board members and 3 staff members	Yes	2	<ul style="list-style-type: none"> <li>- Providing feed-back for the ASW Deputy Director and Managing Director and exchanging views</li> <li>- The Deputy Director is a medical specialist of allergy at Aichi Children’s Health and Medical Center. From his comment, we confirmed that the “Allergy College” is very valuable</li> <li>- The final analysis were verified</li> </ul>
Lecturers of “Allergy College”	depends		1	<ul style="list-style-type: none"> <li>- Interviewed to the Deputy Director of ASN, who is a medical specialist</li> </ul>

Figure 13

We collected information and got feedback by the following methods: (See the Appendix for more details)

a Preliminary survey (June 2013)

As preparatory research for the survey, we interviewed 12 parents of allergy patients.

- b Online Survey 1 (July – August 2015)
 

We sent out an online survey (on Google Drive) for the purpose of the SROI analysis to 283 participants (260 specialists and 23 parents of people with allergies) whose email addresses were included in the list of “Allergy College” participants provided by the ASN. However, we did not receive responses from the majority of the participants to whom we had sent the survey. Hence, our employees participated in meetings with the allergy patients’ parents where they interviewed them and asked them to fill out the survey, in order to collect more information and responses for the analysis. As a result, we collected completed survey forms from 22 specialists and 18 parents who had taken the “Allergy College” courses.

The respondents who completed and returned their survey forms are individuals who are supportive of the ASN, and many of them likely engaged in the courses with enthusiasm. This meant that their responses might have certain bias. We also interviewed the ASN Managing Director, Rieko Nakanishi, and decided to subtract 30 percent from the calculated survey result.
- c Interviews with the allergy patients’ parents (February 2017)
 

We interviewed two mothers who had completed the advanced course at the “Allergy College” and who currently work for the ASN.
- d Interviews with ASW employees and the Managing Director (February 2017)
 

We collected information about the “Allergy College” participants, and asked for their comments on the logic model, case examples, and outcomes.
- e Interviews with specialists (February 2017)
 

We interviewed four specialists involved in the ASW (a nursery teacher, nurse, public health nurse and a disaster prevention expert who were also parents of the allergy patients, ASW supporters, and certified experts).
- f Questionnaire by mail (March – April 2017)
 

With help from the ASW, we mailed the survey forms to all the former “Allergy College” participants and received 317 completed forms in return. The collection rate was 30.9 percent.
- g Providing feedback for the ASW Deputy Director and Managing Director and exchanging views (April 2017)
 

We provided feedback about the assistance for the capacity building efforts, survey results, and outcomes of the “Allergy College” program, and asked the directors for their comments.
- h Providing feedback for the ASW employees and specialists and exchanging views (May 2017)
 

We provided feedback about the results of the SROI analysis to the employees, specialists, mothers, and certified experts (NOTE: many of these individuals belong to more than one of these categories) who attended the ASW plenary session, and asked them about the measuring method and the reasonableness of the results. Then we openly exchanged our views and opinions, and they agreed with the final analysis.

## 6. Input

- Panasonic (¥3,800,000)

The ASN received a total of ¥3,500,000 as financial assistance and managerial suggestion and advice (¥50,000 equivalent x 6times) for capacity building from the Panasonic Fund over the three years from 2007 to 2009. As a result, the organisation successfully expanded its “Allergy College” program, and the tuition paid by participants over the eight years from 2007 to 2014 generated revenue of ¥19,870,446 in the aggregate. The Panasonic’s assistance for capacity building (¥3,800,000 equivalent) contributed to the making of this amount.

- Details of the entire value invested in the “Allergy College” program (¥189,452,969)

(1)The hours that the “Allergy College” participants (specialists) spent on providing allergy related service or advice are worth ¥128,112,000. The following are the grounds for the calculation of this amount:

- ✓ Six hours were spent with an average of five people with allergies each annually (the median value of he answers to the survey question).
- ✓ According to the 2014 survey on the basic wage structure, the hourly wage for the specialists is ¥1,600.

(2) The expenditure on the “Allergy College” during the years from 2007 to 2014 (operating expenses + part of the administrative expenses (prorated by the ratio of the operating expenses)): ¥60,340,969

We aggregated the figures from (1) and (2), and then added the ¥1,000,000 provided by Tokai-Rokin in 2006 for the launch of the “Allergy College” as below:

$$¥128,112,000 + ¥60,340,969 + ¥1,000,000 = ¥189,452,969$$

To measure the value of the capacity building efforts by using the SROI, we used the amount of the support from the Panasonic Fund (i.e., ¥3,800,000) as the only input, and excluded the effect of other factors ( $¥189,452,969 - ¥19,870,446 / ¥189,452,969 = 0.895$ ) when we calculated the outcome.

**Total input: ¥3,800,000**

## 7. Outputs and Outcomes

This section describes the outputs and identified outcomes of the “Allergy College”, the indicators for achieving these outcomes, the quantity and the financial proxies identified to value them.

From the stakeholder consultations a range of outcomes emerged for the material stakeholders.

### Parents of children with food allergy (Participants of “Allergy College”)

Output: 236 parents of children with allergies participated the 11-day "Allergy College" courses, and got reliable knowledge and information about food allergies and advanced culinary skills that were adaptable to preparing meals for children with food allergies. They also learn how to select expert doctors and gain access to diverse professionals.

#### **Outcome: Less food-allergy related accidents**

27% of parents who participated “Allergy College” stated the number of allergy-related accidents of their food-allergic children was decreased by acquiring correct knowledge from the “Allergy College”. Some parents said “I could avoid accidental ingestions of my food-allergic child by having correct knowledge at “Allergy College”. I also became to be able to notice before giving some food to my food-allergic child that some harmful additives were contained which were often passed by.” “Since there was a lecture about unsafe incidents in “Allergy College”, I could learn a lot from that and could be cautiously than before.”

Indicator: Saving parent’s time

Duration: One year (based on the fact that the incidence of the accidents did not continue to decrease year by year).

Financial Proxy and values: The work loss hours of parent (Basis: The minimum wage of Aichi ¥871<sup>3</sup> per hour)

#### **Outcome: Elimination of the worries the parents had**

According to the parents, acquiring the correct knowledge about allergies and joining a relevant network eliminated the worries the parents had, and helped them become committed to parenting with a sense of reassurance. The reliable knowledge and information also helped their children’s allergies to improve.

Some of the parents said “I had a hard time because I didn’t know the causes and treatment of allergies even though we went to a doctor. There were a lot of information in a book or internet, I didn’t know which were good for my child. I wasn’t enjoying to be with my child. It gave me stress, I was tired, and emotionally unstable.” “When I attended the “Allergy College”, there were other parents who had the same worries as me, and specialists who consider warmly for food-allergic children. It encouraged me very much. I also knew at “Allergy College” how to select a good doctor. I found a good doctor who specialized in allergy, and it reduced my mental strain.”

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<sup>3</sup> Aichi Prefecture <http://www.pref.aichi.jp/soshiki/rodofukushi/0000006115.html>

In a questionnaire, we asked parents “By attending the college, what is your assessment of the value equivalent to the emotional stability that you gained?” The median of the answers selected was ¥100,000.

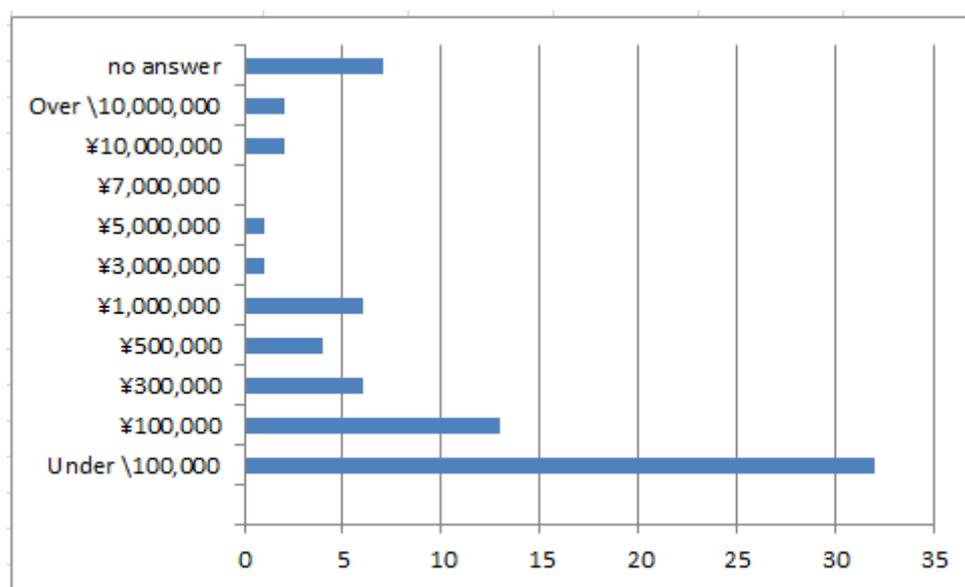


Figure 14: The number of response

### Negative Outcomes

8% of the parents felt regretful because they could not spend weekends with their family because of the participation for the "Allergy college".

Indicator: number of parents who feel regretful

Financial Proxy and values: The expenditure for leisure (Basis: The average of annual expenditure for leisure: ¥136,383 per family<sup>4</sup>)

### Parents of children with food-allergies (non-participants of “Allergy College”)

Output: The parents of children with food-allergies got good advice from 302 specialists, such as nurses, public health nurses, nursery school teachers, who participated the "Allergy College".

### Outcome:Psychologically stability

By having advice from specialists, such as nurses, public health nurses, nursery school teachers, parents' concerns were solved, and they became more psychologically stable (by eliminating the worries the parents had, and helping them become committed to parenting with a sense of reassurance). Each specialist interacted 38 parents who had food-allergic children a year according to the questionnaire. 41% of them said they could reduce mental strain of the parents of food-allergic children by learning from the “Allergy College”. A public health nurse said, “I sometimes accept consultations from parents at the venue of periodic health examination of babies or Regional

<sup>4</sup> Cabinet Office [http://www8.cao.go.jp/shoushi/shoushika/research/cyousa21/net\\_hiyo/pdf/gaiyou.pdf](http://www8.cao.go.jp/shoushi/shoushika/research/cyousa21/net_hiyo/pdf/gaiyou.pdf)

Child Raise Support Center. They didn't know what they should do when they found that their child had food-allergy. I sometimes gave information about good doctor, good treatment, how to cook the allergy-free meal for their children, and so on.”

Proxy: The median of the answers selected (value converted into money) in the survey

### Specialists who participated the “Allergy College”

Output: 2,669 specialists participated "Allergy College" and got reliable knowledge and information about food allergies and advanced culinary skills that were adaptable to preparing meals for children with food allergies.

#### **Outcome: Career development and satisfaction**

The specialists told the expertise in allergies they had acquired helped broaden the areas in which they could become actively involved, helped develop their careers, and enabled them to be supportive for a wider range of people. In a questionnaire, we asked specialists “By attending the college, assuming that you experienced positive changes, what is your assessment of the value equivalent to those change?” The median of the answers selected was ¥50,000.

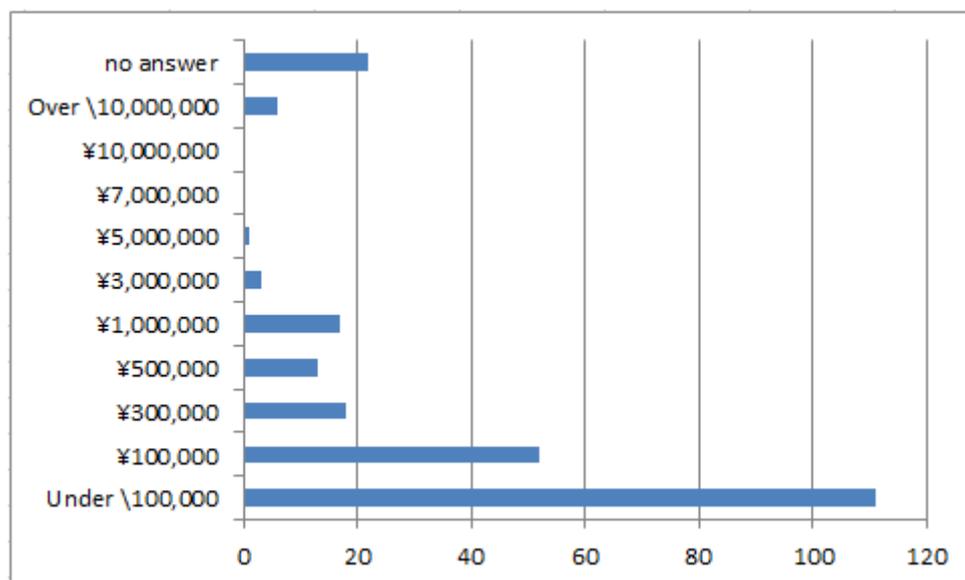


Figure 15: The number of response

### Children with food-allergy

Output: We considered each of 236 parents who participated the "Allergy College" cared their food-allergic child. The parents' responses to the questionnaire revealed that, in many cases, their children's allergy symptoms

improved and the children began to have higher self-esteem and a more positive attitude toward life after their parents started to apply what they had learned from the “Allergy College” to their home situations.

**Outcome: Less food-allergy related accidents at home**

27% of parents stated the number of allergy-related accidents was decreased by attending the “Allergy College”. So 64 children avoided allergy-related accident.

Indicator: Number of children who would have allergy-related accident

Financial Proxy and values: Cost of medical hospital admission (Basis: A medical doctor states ¥92,000)

**Outcome: More self-confident and less distressed**

Some parents said “I told the correct information which acquired from “Allergy College” with confidence to my son with food-allergy. He understood how he had to deal with his allergy. He used to have to be patient and it was hard for him, but now, he has a positive attitude, because he knew he lived supported by everyone. In addition, he could have a proper treatment of allergy, because we met a good doctor. His symptom is much better than before. It makes us happy.”

The fact that parents and children became able to “live a normal life” also seems to have helped improve the relationships between them. However, it is impossible to quantitatively measure this spillover effect. We are also faced with the issue that, since many of the food-allergic children were infants, it was impossible to ask them about the value through a survey. Hence, we defined the value for the children of the “Allergy College” participants as equivalent to the feeling of their parents. In a questionnaire, we asked parents on behalf of their children “By attending the college, what is your assessment of the value equivalent to how much your child has become more optimistic and fostered better self-esteem?” The median of the answers selected was ¥100,000.

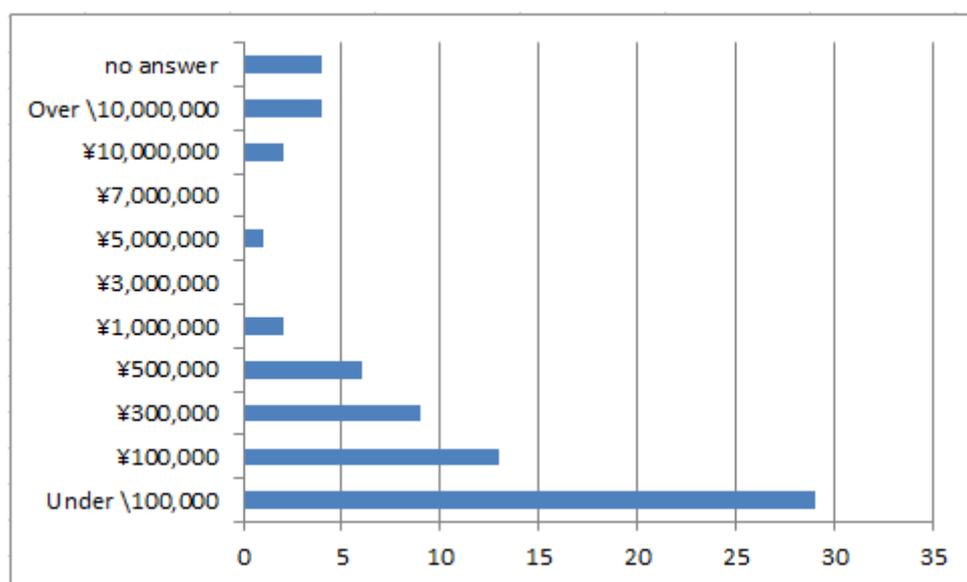


Figure 16: The number of response

Output: Food-allergic children at nursery school were provided food properly by 270 teachers, 1,422 dietitians and 478 cooks who participated the "Allergy College".

**Outcome: Less allergy related accidents at nursery school**

270 teachers, 1,422 dietitians and 478 cooks participated the "Allergy College". 56% of them stated the number of allergy-related accidents were decreased by attending the "Allergy College". In the most conservative case, every teachers and cooks came from same nursery school with dietitians, so at least one food-allergic child of each 796 nursery schools (1,422 x 56%) avoided allergy-related accident.

Indicator: Number of children who would have allergy-related accident

Financial Proxy and values: Cost of medical hospital admission (Basis: A medical doctor states ¥92,000))

Output: Food-allergic children at nursery school or school were able to have the same meals as other children eat, because 1,900 of 2,669 participants of "Allergy College" were involved in school or nursery lunch preparations, and learned advanced culinary skills that were adaptable to preparing meals for food-allergic children.

**Outcome: Not feel excluded or different**

When we met the ASN employees to give feedback on the analysis and to collect their comments, they emphasized the importance of serving the same school lunch for all children, instead of providing just a few food-allergic children with specially prepared meals. They told us that ensuring food-allergic children would enjoy the same lunches as their classmates had been the major goal of the ASN. Parents and school teachers stated food-allergic children were able to eat the same meal as others and hence don't feel excluded or different. 23.6% of specialists who were involved in school or nursery lunch preparations reported that their workplace (schools and nursery schools) changed by utilizing what they learned at "Allergy College". Each of them prepare lunch for 11 food-allergic children in average.

Indicator: Number of food-allergic children who ate same meal as others at nursery schools or schools

Financial Proxy and values: Annual membership fee to attend a local kids' program a charity provides (Basis: A minimum membership fee ¥24,000 per year<sup>5</sup>)

We also envisaged the following as early outcomes: increased knowledge about allergies; more occasions for the parents to go out; less time spent on the prevention of allergy-related accidents (i.e., on food preparation and children's skin care); reduced food expenses; reduced medical expenses (decreased frequency of hospital visits). However, we had to remove these possibilities because they overlapped or were offset by the other outcomes, or because they had little effect.

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<sup>5</sup> "The cultural station for kids" which aims to foster self-esteem of children <http://www.kodomobst.org/member>

There are also some other outcomes that have not been included. Since there are some participants of the “Allergy College” from local governments, they might influence the policies concerning the antiallergic school lunch. The lecturers of the “Allergy College” might also influence the policies by becoming committees of some local government’s allergy commissions. However, it was not possible to confirm the cause and effect relationship, so we did not count this outcome.

In addition, as a specific example, there was a nursery school that stockpiled 3 days’ worth of instant rice for 10 food-allergic children to prepare for disasters, at the advice of a specialist who had attended the “Allergy College”. In order for school lunch centres, which collectively prepare meals for several schools, to better accommodate food-allergic children, efforts are being made to encourage the attendees to join committees to address the issue of allergies at various schools, and several instances have been reported where this has been successful (all according to the interviews with the specialists). In addition, cases have arisen where workplaces have recognized the expertise of the “Allergy College” and treat it as an equivalent to governmental public training, so that the tuition is provided as training costs (based on the interviews with the specialists and staff members).

## 8. Social Return Calculation

### Dead Weight

In general, the parents did not receive any specific prevention training regarding allergy-related accidents. So, the Dead Weight for parents are 0%. While they may increase their knowledge about this area through books and online resources, we considered this in (the context of) attribution.

The reason that Dead Weight for parents of children with food allergies (non-participants of "Allergy College") is 50% is as follows;

The parents' concerns were solved, and they became ore psychologically stable, because they got good advice from specialists, such as nurses, public health nurses who participated "Allergy College" and acquired the correct knowledge of food-allergy.

Some other factors that led specialists to improve their practices can be found. Among specialists engaged in health or medical services, as doctors had their own professional learning opportunities such as Japanese Society of Pediatric Allergy and Clinical Immunology, they rarely attended "Allergy College". However, as per research study by the Jikei University School of Medicine (2016)<sup>6</sup>, most of the midwives and nurses who worked with child care facilities or schools had the similar training that other professionals working for school meals received. Therefore, 50% dead weight was set.

The reason that Dead Weight for children who could eat the same meals as others and hence don't feel excluded or different is 20.8% is as follows;

According to the Ministry of Education, 20.8% of elementary schools have already prepare special replacement meal for food-allergic children for school lunch<sup>7</sup>.

The reason that Dead Weight for allergy related accident is 50% is as follows;

According to the research of the Ministry of Internal Affaires, about 50% of nursery schools have food-related accidents. This means 50% of nursery school do not have accidents without having intervention.

### Attribution①

The effect excluded from that of the assistance from the Panasonic Fund (i.e., 89.5 percent) was subtracted from the outcome of the "Allergy College" program. The 89.5 percent was calculated based on the proportion ( $\text{¥}189,452,969 - \text{¥}19,870,446 / \text{¥}189,452,969 = 0.895$ ) excluded from the effect of the assistance from the Panasonic Fund (profit of  $\text{¥}19,870,446$  from the "Allergy College" program generated owing to the capacity building efforts) in the entire value that was invested in the "Allergy College" program (worth  $\text{¥}189,452,969$ ).

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<sup>6</sup> Jikei University School of Medicine (2016). Field Survey of Allergic Disease Morbidity, Status of Children and Allergy Prevention in Child Care Facilities: Survey Report.

<sup>7</sup> [http://www.mext.go.jp/b\\_menu/shingi/chousa/sports/018/shiryo/\\_icsFiles/afieldfile/2013/06/05/1335638\\_1.pdf](http://www.mext.go.jp/b_menu/shingi/chousa/sports/018/shiryo/_icsFiles/afieldfile/2013/06/05/1335638_1.pdf)

- Details of the entire value invested in the Allergy College program (¥189,452,969)
  - (1) The hours that the Allergy College students (specialists) spent on providing advice and guidance are worth ¥128,112,000. The following are the grounds for the calculation of this amount:
    - ✓ Six hours were spent with an average of five people with allergies each annually (the median value of the answers to the survey question).
    - ✓ According to the 2014 survey on the basic wage structure, the hourly wage for the specialists is ¥1,600.
  - (2) The expenditure on the Allergy College during the years from 2007 to 2014 (operating expenses + part of the administrative expenses (prorated by the ratio of the operating expenses)): ¥60,340,969

We aggregated the figures from (1) and (2), and then added the ¥1,000,000 provided by Tokai-Rokin in 2006 for the launch of the Allergy College as below:

$$¥128,112,000 + ¥60,340,969 + ¥1,000,000 = ¥189,452,969$$

### **Attribution②**

The reason that Attribution② for parents of children with food allergies (non-participants of "Allergy College") is 82% is as follows;

According to survey, 4 of 22 (18%) specialists said the knowledge from "Allergy College" was more effective than other information source. This means specialists and parents of children with food allergies have access to the information from their friends, other charities which support patient, local government, school, book, hospital, newspaper and internet. So, we considered the attribution is 82%.

The reason that Attribution② for nursery school is 78.8% is as follows;

According to the research of Ministry of Internal Affairs, 78.8% of nursery schools provide training to avoid food-allergy related accident.

### **Sensitivity Analysis and Verification of Results**

This section applies a sensitivity analysis on the impact assessment and describes the verification process

The results presented in this SROI evaluation are based on assumptions and variables according to available evidence including qualitative data on the experience of stakeholders.

We have undertaken a sensitivity analysis to test these assumptions and variables given that there are areas of the base case that could be derived from imperfect evidence.

First of all, if this SROI would not have been evaluation of the ASN’s capacity building effort supported by Panasonic, the SROI index of “Allergy College” was 1.68 (see figure 17).

	Input	Attribution①	Total Present Value	SROI
SROI of capacity building	¥3,800,000(assistance of Panasonic NPO Support Fund)	89.5%	¥33,514,968	8.82
SROI of the “Allergy college” program	¥189,452,969 (entire value invested in the Allergy College program)	0%	¥334,838,584	1.68

Figure 17

#### Attribution②

If the attribution for all outcomes are 50% or more, the SROI of the “Allergy College” will be ¥0.95 : ¥1. The SROI of capacity building will be ¥4.99 : ¥1.

#### Deadweight

If the deadweight for all outcomes are 50% or more, the SROI of the “Allergy College” will be ¥1.10 : ¥1. The SROI of capacity building will be ¥5.75 : ¥1.

#### Outcomes

If only 50% of outcomes of specialists achieved, the SROI of the “Allergy College” will be ¥1.37 : ¥1. The SROI of capacity building will be ¥7.20 : ¥1.

If only 50% of outcomes of children achieved, the SROI of the “Allergy College” will be ¥1.32 : ¥1. The SROI of capacity building will be ¥6.94 : ¥1.

If only 50% of parents’ concerns are solved and more psychologically stable, the SROI of the “Allergy College” will be ¥1.51 : ¥1. The SROI of capacity building will be ¥7.92: ¥1.

#### Financial Proxy

In the value of less food-allergy related accident, if every accident requires the medical hospital visit instead of hospital admission, the value will be ¥20,000 instead of ¥92,000. In this case, SROI of the “Allergy College” will be ¥1.50 : ¥1. The SROI of capacity building will be ¥7.90 : ¥1.

The sensitivity analysis shows that if the already conservative values used in the analysis are reduced even further, the SROI index of the “Allergy College” does not fall below 0.95, and the one of capacity building does not fall below 5.44. This value would be achieved if the deadweight all outcomes was 50% or more, meaning the unlikely situation that half of the outcomes would have happened without any intervention. Even in this worst case scenario the capacity building effort at ANS is unlikely to return less than ¥4.99 : ¥1 invested.

### Calculation of Social Return

The inputs were ¥3,800,000, and the impact was ¥ 33,531,726 as is shown on the impact map. If the interest rates were set as equivalent to those of the government bonds at a discount rate of 5 years (0.05% per annum), the present value of the impact would be ¥33,514,968. As a result, the 5 year social return would be 8.82.

The assistance for the ASN’s capacity building had an effect on a particular project within the organisation. This enabled us to calculate the SROI index by focusing on this project. The result showed that the SROI in this assistance generated a social impact that was 8.82 times as much as the financial assistance from the Panasonic Fund, owing to the fact that the assistance helped the program to grow and this growth continued to serve as leverage (see Figure 18).

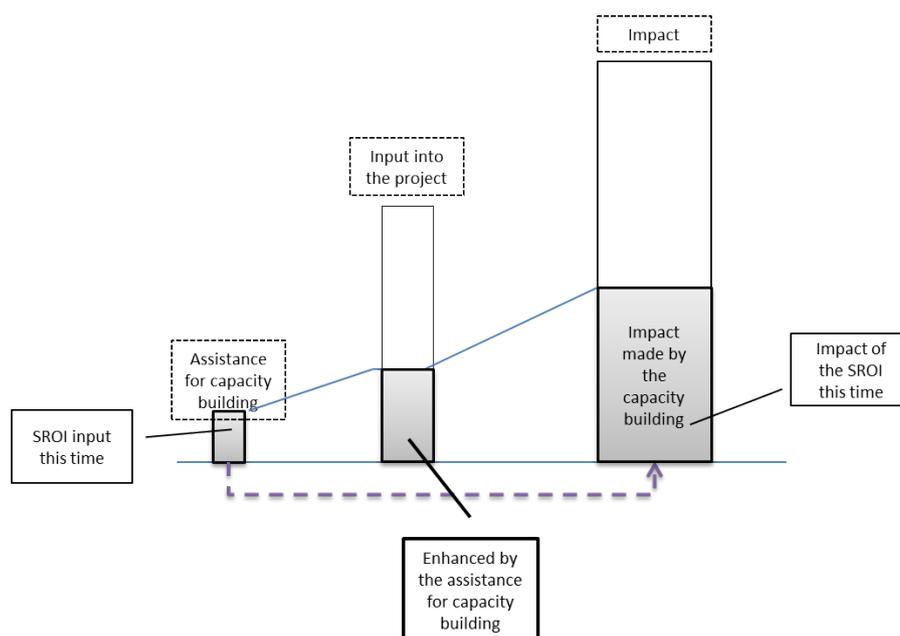


Figure 18: Input and Impact

The capacity building efforts generated revenue that helped the program to grow and expand its customer base (i.e., the people who benefit from the program’s offerings). This eventually created a further impact.

There have been many suggestions that the correlation between the capacity building efforts and what may be the outcomes of the efforts is unclear. This research successfully quantified the effects of the capacity building efforts that helped to expand the program and then created a greater social impact, which we believe is a major

achievement. We surmise that other cases may present different quantifiable outcomes and impacts. Hence, we should further develop the methodology, in order to cover a wider range of capacity building efforts.

## **9. Conclusions and Recommendations**

### **Analytical Results of the SROI Measurements**

As has been shown thus far, the “Allergy College” program has a great impact, and the efficiency of the social investment indicates a high numerical value. The Panasonic NPO Support Fund, which was allocated for the purpose of the capacity building in the initial deployment phase of this project, can be assessed as having delivered a highly effective form of assistance.

Among the calculated impact, particularly high levels were indicated for the emotional value it created for the parents who attended the “Allergy College”, their children, and the patients with whom specialists interacted. Its total value was calculated in a monetary amount of ¥16,703,137. This is equivalent to 49.8% of the total monetary result (¥33,531,726). The ASN continuously offers the “Allergy College”, and by imparting the latest and most-advanced knowledge to a large number of professionals and parents, it is noteworthy that the parents have gained a higher sense of security and the children have increased their feelings of self-affirmation. Similarly, the professionals themselves have gained a high value by attending the college, with a monetary value that is calculated at ¥12,330,780. It is evident that results such as an expansion of their scope of activities, career growth, and their feelings of pride and joy in helping others were all highly evaluated. As was already mentioned, evaluating the monetary value of such factors is not easy, but we believe that a certain level of trust is ensured by basing the results on the survey responses from more than 300 participants.

The overall ripple effect of the “Allergy College” can be said to have been significant. The specialists and parents of food-allergic children who are committed to the ASN have responded that the estimated results are generally reasonable.

### **Factors Resulting in a Large Impact**

Here, we would like to consider the factors from carrying out the “Allergy College” as a program for the past 8 years that have resulted in a large impact.

First, the fact that the issue of food allergies is a major concern for the patients and their families, as well as for the specialists, is a large factor. For the patients suffering from allergy symptoms, and the family members who sought effective remedies and relevant information but were often unsuccessful, the courses which have offered to contribute to a solution to such problems have been greatly welcomed. If so, it is believed that such a factor provides the motivation to pay tuition up to a certain amount worthwhile.

Secondly, the scale of the “Allergy College” program being large and the quality being very satisfactory is another factor. Approximately 2,669 specialists, including dietitians, cooks, children’s guardians, nursery teachers, school teachers, public health nurses, nurses, people in the restaurant or food business, physicians, and researchers have attended the “Allergy College” over the period of 8 years, with that figure being significantly higher than that of the parents (236 in 8 years) of the patients (children). The capability to develop highly specialized programs that will

satisfy such individuals was likely due to the level of expertise of the ASN itself being so high. Specialists related to allergies, and the parents of patients alike were able to gather together and a program was developed with a clear focus set on the relevant issues.

Third, the fact that ASN positioning the “Allergy College” as a key program and worked for it in a concentrated manner can be considered a contributing factor. The “Allergy College” program was started with the assistance of Tokai-Rokin in 2006, one year before the involvement of the Panasonic NPO Support Fund. However, at that time it was unable to stand on its own as a project and its future was uncertain. Under such circumstances, it was decided to provide assistance through the Fund for the purpose of capacity building, and with the cost of labor for the ASN supplied by the fund for 3 consecutive years, the organisation’s operations were strengthened and its efforts became dedicated to the “Allergy College” program. The chance was also afforded to implement program enhancements. That operations at the beginning of the “Allergy College” were enhanced, which led to the financial independence of the project, and thereafter, it is believed to have also supported the creation of a base which will attract funds from a variety of organisations. In addition, the ASN functions as an intermediary support organisation country-wide for the advocacy of allergy patients, and by partnering with NPOs in regions including Niigata, Chiba, Kyoto, and Okinawa, a favorable flow has been established that has enabled an increase in the number of participants of the “Allergy College”.

### **Suggestions from this Research and Issues Going Forward**

From what has been outlined above, it is possible to obtain suggestions regarding how the funding should be provided. One issue is that both the timing and the content of the funding is very important. In this case, providing the funds at a time when the project and the organisation were striving to succeed, without severely limiting the way in which the funds were to be used, led to a very effective outcome from the assistance. The funds provided from Panasonic for 3 years were not so large in terms of the monetary amount, but this timely funding led to a momentum which can be said to have enabled the project to evolve. Secondly, a dialogue between the side providing the funds and the recipients of the funds is important. For the organisational checkup, interim interviews regarding the utilization of the funds, the requirement to create reports and applications for the funds in the 2nd and 3rd years, etc., as well as Panasonic’s provision of suggestions and advice regarding the issues, allowed ASN to review the project and look into what features were being improved and what were not. ASN feeling like they were “brought up by the NPO Support Fund” (Managing Director) is a result of such an accompanying style of support.

Although small in scale, ASN is an organisation that is nationally known in the allergies field. However, there seems to be no reference to the organisation’s mid to long-term goals on its website. Although there may be a mid-term plan in place internally, at the very least it is not being shared widely. In terms of the organisation’s record of activities, isn’t it about time now to set mid to long-term goals? These may be that Aichi Prefecture, the hometown to ASN, should become a model case and raise the level of the standards for the whole country; or that the number of food-allergic children should be decreased; or that the wasteful removal of food allergens should be eliminated (according to the interview with the Managing Director). By setting a clear goal, a logic path leading to that goal will also become apparent.

## Appendix 1

### The summary of preliminary survey

#### 1. The first interview with the parents of children with food allergies

Prior to the survey of the “Allergy College” participants, we conducted interviews with the parents of food-allergic children to ensure the validity of the survey items, including the hypotheses for the outcomes.

- ① Date: Friday, June 5, 2013
- ② Conducted by: Motoo Murata
- ③ Targets: Members of an association for parents of food-allergic children in Midori-ku and Tempaku-ku, Nagoya
- ④ Interviewees: 12 parents of children with food allergies
- ⑤ Key findings:
  - The major benefits that they gained from the activities offered by the ASN were a lower incidence of allergy-related accidents, a reduced burden of providing at-home care for the food-allergic children, and a decreased level of stress and anxiety.
  - The parents of the children with food allergies experienced increases or decreases in their medical expenses, frequency of hospital visits, and hours spent on providing care. We cannot acquire this type of information through the survey from specialists (e.g., dietitians) who have taken the “Allergy College” courses.
  - The survey questions for the specialists should be different from those for the parents of food-allergic children, even though these respondents are all “Allergy College” participants. The specialists are a mix of dietitians, cooks, guardians, nursery teachers, school teachers, public health nurses, nurses, people in the restaurant business and food business, physicians, and researchers. The same survey questions will work for all of these specialists.

#### 2. The second interview with the parents of children with food allergies

In conducting the 2nd survey of the “Allergy College” participants, interviews were carried out to confirm the validity of survey items, such as the outcome hypotheses.

- (a) Date: February 1, 2017 (Wed)
- (b) Coordinator: Yukie Taguchi
- (c) Target: Mothers of children with allergies who have completed the Advanced Course of the “Allergy College” Program
- (d) Respondents: Two parents of allergy patients
- (e) Main results
  - The hardest aspects of having a child with allergies

Not knowing what makes the condition worse, not knowing the proper skin care techniques, emotional stress from condescending remarks when out and about, not enjoying parenting, lack of sleep, overall stress, fatigue, emotional instability, etc.

- Changes after attending the “Allergy College”
  - I learned the causes of allergies and hints for improvements, which led to an improvement after trying them.
  - Both my child and I slept better, and this marked improvement led to a more positive attitude. It saved me to know that I was not alone.
  - My field of vision expanded thanks to the “Allergy College”.
  - I learned how to choose the right doctor.
  - Proper knowledge about which food items to avoid allows us to eat a greater variety of food.
  - I came to understand the difficulties faced by the nurseries and schools, and our communication improved as a result. Etc.
- Benefits for the children
  - They learned to be accepting of their own bodies.
  - Until now, they had always endured frustrating situations and had to hold back, but the increased optimism of the mothers led directly to changes in the children as well.
  - They actively chose to treat the allergy with immunotherapy, and thanks to a great doctor the symptoms improved dramatically.
  - The children were able to gain knowledge about food safety.

### 3. Interviews of the specialists

In conducting the 2nd survey of the “Allergy College” participants, interviews were carried out to confirm the validity of survey items, such as the outcome hypotheses.

- (a) Date: February 18, 2017 (Sat.)
- (b) Practitioner: Yukie Taguchi, Takaetsu Amenomori
- (c) Target: Specialists who have completed the Advanced Course of the “Allergy College” Program
- (d) Respondents: A public health nurse, nursery teacher, nurse, and a disaster prevention worker (one individual each)
- (e) Main results
  - Public health nurse: One in 10 infants is said to be a child with allergies, and roughly 10-20 people come to me for advice at places like child care support centres.
  - Nursery teacher: Accidental ingestions occur at the nursery. We are committed to raising

awareness in the workplace through efforts such as providing the latest information in the form of materials that are handed out at meetings and morning gatherings. The parents are sometimes too overly concerned, leading to false allergy conditions, and they provide allergy-free meals when this is unnecessary.

- Nurse: The number of pediatricians specializing in allergies is extremely limited, and the level of expertise among nurses is low. Personally, the “Allergy College” became the impetus for me to study even harder and become certified by the Japanese Society of Allergology.
- Disaster prevention worker: We conduct activities in various situations to educate people about allergies in times of disaster.
- Nursery teachers, nurses, and doctors should know more about allergies, and yet the numbers of those attending the “Allergy College” are limited. The Basic Act on Allergic Diseases Measures was established, but large medical disparities exist.

#### 4. Online survey of the parents of food-allergic children

(a) Period: Friday, July 3 – Tuesday, August 2, 2015

(b) Process:

- (i) In cooperation with the ASN, Motoo Murata, Yoshimi Ishiguro, and Matsunami (the operator) conducted an online survey on Google Drive.
- (ii) After a plenary session organized by the Tokai Allergy Network on August 2, we asked the participants in the session to fill out the survey.

(c) Targets: 23 parents of food-allergic children whose e-mail addresses were registered in the list of the “Allergy College” participants provided by the ASN; 16 parents who attended the plenary session of the Tokai Allergy Network

(d) Respondents: 18 (2 respondents completed the initial online survey; 16 completed the onsite survey)

(e) Key findings:

- (i) The number of times that their food-allergic children needed treatment at a hospital due to accidents attributable to allergies decreased, by a median of one per year, after the parents had enrolled in the “Allergy College” (from 18 valid responses).
- (ii) The number of accidents in which their children suffered allergic reactions that were not treated at a hospital decreased, by a median of two per year, after the parents had enrolled in the “Allergy College” (from 18 valid responses).
- (iii) Findings pertaining to the time and cost for coping with the allergies
  - 1) The time spent on preparing meals (i.e., selecting and cooking food) that was safe for their food-allergic children decreased, by a median of 0.5 hours per day, after the parents’ enrollment in the “Allergy College”.

- 2) The time spent on skin care and applying medicine to the affected areas remained the same after the enrollment.
  - 3) The frequency of hospital visits dropped by 0.8 times after the parents' enrollment.
  - 4) Their medical expenses remained the same after the enrollment.
  - 5) Their food expenses decreased by ¥500 per month after the enrollment.
- (iv) Fourteen of the respondents answered "Yes" and three answered "No" to the question, "Did your enrollment in the "Allergy College" prompt you to join a different association for people with allergies or for parents of food-allergic children?"
- (v) The 14 respondents above were asked to answer some additional questions. These questions and their answers are as shown below:
- 1) "Allergy College" courses helped me to increase my knowledge about allergies."  
Agree: 13; Somewhat agree: 1; Disagree: 0
  - 2) "Allergy College" courses helped to reduce my concern about food allergies."  
Agree: 12; Somewhat agree: 2; Disagree: 0
  - 3) "I get to go out more often."  
Agree: 11; Somewhat agree: 2; Disagree: 1
- (vi) Channels of information about how to cope with allergies, other than the "Allergy College", included: friends; local NPOs that support people with allergies; administrative agencies; schools; books; medical institutions; newspapers; websites; local associations for people with allergies, etc.
- (vii) Three of the 15 valid responses said that the "Allergy College" courses were much more helpful than the other channels. Ten people, 1 person, and 1 person said that the courses were "as helpful", "less helpful but were of help", and "not helpful", respectively.

5. Survey of the "Allergy College" participants who are specialists

- (a) Period: Friday, July 3, 2015 – Tuesday, August 11
- (b) Process:
  - (i) In cooperation with the ASN, Motoo Murata and Matsunami (the operator) conducted an online survey on Google Drive.
  - (ii) The ASN's Managing Director, Rieko Nakanishi, phoned and e-mailed the specialists
- (c) Targets: 260 specialists whose e-mail addresses were registered in the list of the "Allergy College" participants provided by the ASN
- (d) Respondents: 22 (6 respondents completed the initial online survey; 16 completed the phone and the e-mail surveys)
- (e) Key findings:
 

Differences the specialists made for food-allergic people by having gained more knowledge:

  - (i) The survey asked the respondents about the number of people with allergies who seemed to have experienced changes after the specialists had imparted their knowledge acquired from the "Allergy

College” courses. The median from 16 valid responses was 5 (their answers ranged from 2 to 6,000).

(ii) Then, the survey asked the respondents about what changes the food-allergic people (or their guardians) had experienced. The following are the responses and the percentage of the respondents who selected them:

- 1) Lower incidence of allergy-related accidents: 33%
- 2) Decreased frequency of hospital visits: 7%
- 3) Increased food expenses: 3%
- 4) Decreased hours spent on providing care: 7%
- 5) Reduced stress and anxiety: 47%

Differences the specialists made for their peers by having gained more knowledge:

(i) The survey asked the respondents about the number of their colleagues (specialists) who seemed to have experienced changes after the specialists had imparted their knowledge acquired from the “Allergy College” courses. The median from 15 valid responses was 7.5 (their answers ranged from 1 to 949).



- I was distressed because I was told that child allergy was attributed to his or her parents.
- I did not know how to select expert doctors.
- It was so time consuming to prepare lunch and snack from the scratch.
- Food expenditure was high due to the necessity for taking care of allergies.
- It was difficult to establish a good relationship with nurseries, kindergartens, and schools.
- There were many incidents related to food allergies.
- There was an accident of food allergies because of lack of knowledge.
- Other ( )

Q5-2. What improvements or good points did you experience by attending the “Allergy College”? (Please check all that apply.)

- I was able to see an expert doctor.
- I was able to understand appropriate care for my child’s allergy, which improved my child’s symptoms.
- I figured out the cause of my child’s allergy and the symptoms were improved.
- ※ If you answered “symptoms were improved,” to what level were symptoms improved? (Please check only one.)
  - A little bit improved     Significantly improved     Extremely improved
  - Almost cure     Completely cure
- Nurturing my child became more enjoyable.
- My child became more positive. (e.g., He became to manage his allergies well. He started taking treatments.)
- I was able to save time to prepare for meal. (I used to make meals for \_\_\_\_\_ times but it was decreased at \_\_\_\_\_ times )
- I had a good communication with nurseries, kindergartens, and schools.
- As I decreased the number of allergy-related incidents, the number of hospital visits decreased. (My child used to do hospital visits \_\_\_\_\_ times annually, but it decreased at \_\_\_\_\_ times.)
- I was able to save food expenditure. (I used to spend \_\_\_\_\_ JPN monthly, but it decreased \_\_\_\_\_ JPN.)
- I gained network that consists of peoples who work for food allergies.
- I started participating in a new patient group.
- None.
- Other ( )

Q5-3. By attending the college, what is your assessment of the value equivalent to the emotional stability that you gained? (Please check only one.)

- Under ¥100,000     ¥100,000     ¥300,000     ¥500,000     ¥1,000,000     ¥3,000,000
- ¥5,000,000     ¥7,000,000     ¥10,000,000     Over ¥10,000,000     Other ( )



Q6-5. By attending the college, assuming that you experienced positive changes, what is your assessment of the value equivalent to those changes? (Please select only one.)

- Under ¥100,000    ¥100,000    ¥300,000    ¥500,000    ¥1,000,000    ¥3,000,000  
 ¥5,000,000    ¥7,000,000    ¥10,000,000    Over ¥10,000,000    Other (                      )

Thank you so much for your cooperation.

# Appendix 3

## NPO Management Assessment Sheet

Part I. Understanding the current state of organizational management skills							
<p>Let us take a look at how the mission is shared within your organization, how the PCDA cycle is working towards achieving the mission, and how leadership and governance (=organizational management and operation) are functioning to allow for the organization to operate with full effectiveness. [*PCDA stands for plan, do, check, and action, and represents the cyclical and continuous improvement of operations.]</p> <p>As you assess your organization, please consider the following points carefully and check the answer that best fits your organization.</p> <p>- For each question, please choose one answer that best fits between "Strongly Agree" and "Strongly Disagree." If you cannot answer or cannot judge the content of the question, please choose "Cannot Answer."</p> <p>- There are 53 questions based on 7 different perspectives on organizational management. Please provide your answer for every question.</p> <p>- As you assess your organization, please take as objective a look at the current state of the organization as possible.</p> <p>- If any of the questions are unclear or if you have any comments in regards to your answers, please write in the space provided after each section.</p>							
<b>A</b>	<b>Mission</b>		Strongly Agree	Agree	Disagree	Strongly Disagree	Cannot Answer
1	There is a documented mission statement. (*A mission statement describes what the organization does toward what goals.)						
	<i>*Please write the mission statement if it exists.</i>						
2	The mission is understood and shared among the leadership (*1) and staff (*2).						
3	Leaders and staff can explain the mission in their own words.						
	*1: Leadership includes decision-makers who are in charge of the organization, such as board members and directors. *2: Staff includes both full-time and part-time employees who work for the organization. **Some may fulfill both roles as leader and staff.						
	■ Please add comments to the above questions and answers, if any.						
<b>B</b>	<b>Understanding social problems and needs, and taking an objective look at the organization</b>		Strongly Agree	Agree	Disagree	Strongly Disagree	Cannot Answer
1	The mission takes into account the background of the social problem, its origins, and changes in the social environment that surrounds it.						
2	President/director, leaders, and staff members can explain the strengths and weaknesses of the organization.						
3	Third-party opinions have been sought to identify challenges and to plan for effective solutions (e.g. conducting research studies, seeking expert advice, etc.)						
4	The organization understands what is happening in the local area or in its sector of activity through local networks and through the network of funders and supporters.						
5	The organization works on advocacy. (Advocacy refers to appealing to society with the goal of actualizing a specific public						
6	The organization always understands the beneficiaries' needs, and its programs reflect their needs.						
	■ Please add comments to the above questions and answers, if any.						
<b>C</b>	<b>Planning, assessment, and decision making</b>		Strongly Agree	Agree	Disagree	Strongly Disagree	Cannot Answer
1	Medium-term goals and plans foreseeing the next three years have been set in order to realize the mission.						
2	Medium-term plans are set from the perspective of bringing concrete change (or social outcomes) to society.						
3	The organization has specific indicators to measure the achievement of medium-term goals.						
	<i>*Please describe the indicators, if they exist.</i>						



5	The organization is doing enough to communicate to the larger society the significance of the social issues and activities that it is engaged in.					
6	The organization is making an effort to gain understanding and support from society through holding informational meetings and other events for affiliated parties and the general public.					
7	The organization actively utilizes the suggestions and complaints of members, funders, and beneficiaries to improve its					
8	The organization actively communicates with its supporters, such as members and funders.					
♦Questions about collaborative action		Strongly Agree	Agree	Disagree	Strongly Disagree	Cannot Answer
In implementing its programs, the organization has or engages in the following, whenever necessary:						
9	Cooperative and collaborative connections with government, public agencies, corporations, and other sectors					
10	Cooperative and collaborative connections with regional organizations (such as neighborhood councils) and civic and intermediary support organizations (such as other NPOs)					
11	Collaborative advocacy with civic and intermediary support organizations (such as other NPOs)					
12	Transfer of approaches and know-how for the sake of widely spreading the organization's activities					
13	Policies and standards in collaborating with other organizations					
♦Questions about information disclosure (accountability)						
14	The organization clearly discloses information mandated by law (e.g. bylaws, organizational charts, etc.)					
15	The organization discloses its accounting report.					
■ Please add comments to the above questions and answers, if any.						
<b>G Other (organizational culture, risk management, etc.)</b>		Strongly Agree	Agree	Disagree	Strongly Disagree	Cannot Answer
1	There is an organizational culture and a platform to discuss matters freely.					
2	Decision-making process is clear and open to the staff.					
3	Opinions from staff members are actively utilized.					
4	Staff members are actively given authority.					
5	The organization understands what the potential serious risks in its operation are.					
6	The organization has established a response for these risks in advance.					
7	The organization takes preventative measures against loss of data and information leaks.					
8	The organization has established a privacy protection policy, and developed a system to protect personal information.					
■ Please add comments to the above questions and answers, if any.						
<b>Part II. Understanding the current condition of the organization's human resources</b>						
Are the staffing structure and positioning conducive to achieving the mission? Does the organization support staff growth and create an environment where staff can perform to the best of their ability? Let us take a look.						
As you assess your organization, please consider the following points carefully and check the answer that best fits your organization.						
- For each question, please choose one answer that best fits between "Strongly Agree" and "Strongly Disagree." If you cannot answer or cannot judge the content of the question, please choose "Cannot Answer."						
- There are 37 questions based on 5 different perspectives on human resources. Please provide your answer for every question.						
- As you assess your organization, please take as objective a look at the current state of the organization as possible.						
- If any of the questions are unclear or if you have any comments in regards to your answers, please write in the space provided after each section.						
A	Qualities and skills expected of the staff	Strongly Agree	Agree	Disagree	Strongly Disagree	Cannot Answer
Do you think the staff members currently have the following skills and qualities?						
1	Empathy with the mission					
2	Conceptualizing and planning skills in order to materialize the mission					
3	Expertise necessary to develop programs and activities					



F Employee benefits, etc.		Strongly Agree	Agree	Disagree	Strongly Disagree	Cannot Answer
1	Procedures and usage of social insurance (health insurance and welfare pension) and labor insurance (workers compensation insurance and unemployment insurance) are appropriate.					
2	Individual staff members can take appropriate paid vacation, compensatory holidays, parental leave, or other holidays off that best match their work or personal situations.					
3	A system is set up to make sure the staff members can lead a healthy work life, such as regular health check-ups and giving considerations for workplace stress.					
<b>Part III. Understanding the current state of the organization's financial management and infrastructure</b>						
Financial health of an organization is indispensable for its stability. Deterioration of financial conditions may begin with something trivial that develops into a critical operational problem when it has not been dealt with. Therefore, let us take a look at your organization's current financial conditions, starting at the level of everyday operations.						
As you assess your organization, please consider the following points carefully and check the answer that best fits your organization.						
- For each question, please choose one answer that best fits between "Strongly Agree" and "Strongly Disagree." If you cannot answer or cannot judge the content of the question, please choose "Cannot Answer."						
- There are 33 questions based on 5 different perspectives on financial management and organizational infrastructure. Please provide your answer for every question.						
- As you assess your organization, please take as objective a look at the current state of the organization as possible.						
A General financial management		Strongly Agree	Agree	Disagree	Strongly Disagree	Cannot Answer
1	Operational resources, such as personnel and funds, have been effectively assigned in order for the organization to produce results.					
2	Of the total operational expenses, more than 80% is spent on nonprofit activity programs.					
3	Finances are managed according to a budget approved by the general assembly or the board meeting.					
4	The organization has an accounting specialist on staff (including staff members in dual appointment who also serve in another capacity), or can consult an external specialist for advice as needed.					
5	The organization undergoes an external audit.					
6	The organization has a grasp of the income and expenditure separated into operational and management departments.					
7	The organization has calculated and understands the monetary value of volunteer labor and donated non-monetary items.					
B Funding		Strongly Agree	Agree	Disagree	Strongly Disagree	Cannot Answer
1	The organization has diversified funding sources.					
2	The organization has created fundraising plans.					
3	The organization has a fundraising specialist(s) on staff (including staff members in dual appointment who also serve in another capacity), or has fundraising collaborators.					
4	The organization is making an effort to secure funds in support (such as donations, membership fees, investments, etc.) from those who are sympathetic to the organization.					
5	The organization has created and managed a list of members and funders.					
6	Throughout the past three years, funds in support of the organization have increased.					
C Financing		Strongly Agree	Agree	Disagree	Strongly Disagree	Cannot Answer
1	The organization has compiled a funds timetable and engages in fund management.					
2	The organization is not experiencing difficulty in financing.					
3	The organization has an understanding of the income and expenditure amounts every month.					
4	The organization has an understanding of the timeframe between the accrual of accounts receivable and their collection.					
5	The organization has discussed responses in case of a funding shortage prior to its occurrence.					
D Stability		Strongly Agree	Agree	Disagree	Strongly Disagree	Cannot Answer
1	Throughout the last three years, capital (net asset) has not decreased.					



[Program #4] Strengths:						
Weaknesses:						
<b>B</b>	<b>Program outcomes and achievement indicators</b>	Strongly Agree	Agree	Disagree	Strongly Disagree	Cannot Answer
1	For each program, specific outcome goals and indicators have been created. (*Outcome indicators include positive changes in society, improvements in social conditions, changes in the target group, etc.)	Prog.1				
		Prog.2				
		Prog.3				
		Prog.4				
2	Are there any programs that need improvements?	Yes	No	Don't Know		
	<i>If yes, what are they?</i>					
3	Are there any programs that you think are necessary in the future but have not been undertaken yet?	Yes	No	Don't Know		
	<i>If yes, what are they?</i>					
<b>C</b>	<b>Understanding program outcomes and their future</b>	Strongly Agree	Agree	Disagree	Strongly Disagree	Cannot Answer
1	For each program, outcome goals have been achieved.	Prog.1				
		Prog.2				
		Prog.3				
		Prog.4				
2	Is there a clear vision for the development of each program three years into the future?	Yes	No	Don't Know		
		Prog.1				
		Prog.2				
		Prog.3				
		Prog.4				
	■ Please add comments to the above questions and answers, if any.					
<b>Part V. Understanding the current state of operational effectiveness</b>						
Let us take a look at program development, planning, and marketing for each of your programs.						
*Please provide your answers for the same four programs that you listed in Part IV.						
*When you are asked about your "target group," please think about how this statement applies to your current and potential clients, beneficiaries, and/or program participants.						
As you assess your organization, please consider the following points carefully and check the answer that best fits your organization.						
- For each question, please choose one answer that best fits between "Strongly Agree" and "Strongly Disagree." If you cannot answer or cannot judge the content of the question, please choose "Cannot Answer."						
- There are 23 questions based on 3 different perspectives on program effectiveness. Please provide your answer for every question.						
- As you assess your organization, please take as objective a look at the current state of the organization as possible.						
- If any of the questions are unclear or if you have any comments in regards to your answers, please write in the space provided after each section.						
■Major Operations						
Describe the programs below. (*Please fill in the names and descriptions of the same programs as you did in Part IV.)						
Program #1						
Program #2						

\*For the questions below, when you are asked about your "target group," please think about how this statement applies to your current and potential clients, beneficiaries, and/or program parti

A Program development and planning			Strongly Agree	Agree	Disagree	Strongly Disagree	Cannot Answer
1	Each program has specific quantitative goals.	Prog.1					
		Prog.2					
		Prog.3					
		Prog.4					
2	Each program has indicators for reaching the goals.	Prog.1					
		Prog.2					
		Prog.3					
		Prog.4					
3	For each program, there is a concrete plan to reach the goals.	Prog.1					
		Prog.2					
		Prog.3					
		Prog.4					
4	For each program, achievement is measured regularly.	Prog.1					
		Prog.2					
		Prog.3					
		Prog.4					
5	In terms of the social problems related to each program, changes in the social environment and policy trends have been researched and understood.	Prog.1					
		Prog.2					
		Prog.3					
		Prog.4					
6	The organization has a specific means to understand the needs of target groups for each program (e.g. survey research, etc.).	Prog.1					
		Prog.2					
		Prog.3					
		Prog.4					
7	The organization is aware of its competitors, understands how different it is from them, and is making an effort to achieve advantage.	Prog.1					
		Prog.2					
		Prog.3					
		Prog.4					
8	For each program, specific details of the target group have been clarified (e.g. age, gender, place of residence, family structure, hobbies, creed, use of time, etc.).	Prog.1					
		Prog.2					
		Prog.3					
		Prog.4					
9	For each program, staff are assigned according to the program plans.	Prog.1					
		Prog.2					
		Prog.3					
		Prog.4					
10	In program plans, it is feasible to raise program development funds and other funds necessary. (For example, even if the program was launched as a result of a single-year grant, additional funds have been raised to continue the program.)	Prog.1					
		Prog.2					
		Prog.3					

11	The organization understands the cost efficiency of programs based on realistically estimated calculations.	Prog.1							
		Prog.2							
		Prog.3							
		Prog.4							
12	In order to increase program outcomes and effects, the organization obtains resources by utilizing collaborations and networks with other organizations. (*Resources include expertise, human resources, spaces, etc.)	Prog.1							
		Prog.2							
		Prog.3							
		Prog.4							
13	The organization is engaged in activities to raise funds and to obtain resources that are necessary to continue to develop its operations.	Prog.1							
		Prog.2							
		Prog.3							
		Prog.4							
<b>B</b>	<b>Marketing</b>		<b>Strongly Agree</b>	<b>Agree</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>Cannot Answer</b>		
1	Services (or merchandise or programs) provided are appropriate and meet the needs of the target group.	Prog.1							
		Prog.2							
		Prog.3							
		Prog.4							
2	Services (or merchandise or programs) provided are of sufficient quality and function.	Prog.1							
		Prog.2							
		Prog.3							
		Prog.4							
3	In order to respond to changes in the needs of the target group and to solve newly arising problems in the region, consistent efforts are made to improve and to develop services (or merchandise or programs).	Prog.1							
		Prog.2							
		Prog.3							
		Prog.4							
4	Services (or merchandise or programs) provided are priced at a level that would allow for enough income to be secured for the operation to continue. (*Pricing includes amounts received from service recipients as compensation, and also in cases where services are provided through commissioning and grants.)	Prog.1							
		Prog.2							
		Prog.3							
		Prog.4							
5	The content of services (or merchandise or programs) provided and the method of delivery are easy to use for the target group.	Prog.1							
		Prog.2							
		Prog.3							
		Prog.4							
6	Services (or merchandise or programs) provided are publicized appropriately according to the characteristics of the target group. (*Publicity here includes all PR venues such as free and paid advertisements, hosting seminars and parties, direct mailing, undertaking campaigns, and putting out news releases.)	Prog.1							
		Prog.2							
		Prog.3							
		Prog.4							
7	List of the members of the target group has been created and is used for client management. (The list not only includes names and contact information but also keeps track of when and how the information has been used, and can be used for more effective methods of approaching the client base.)	Prog.1							
		Prog.2							
		Prog.3							
		Prog.4							

<b>C</b>	<b>Evaluation and improvement</b>		<b>Strongly Agree</b>	<b>Agree</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>Cannot Answer</b>		
1	Income and expenditure goals have been proposed based on evaluation, and performance is regularly checked.	Prog.1							
		Prog.2							
		Prog.3							
		Prog.4							
2	Reasons for the disparity between plans and outcomes have been analyzed and reflected in the following planning process.	Prog.1							
		Prog.2							
		Prog.3							
		Prog.4							
3	Regular reviews have been set up to see if the services (or merchandise or programs) provided meet the needs of the target group, and to reflect the review results on the following planning processes.	Prog.1							
		Prog.2							
		Prog.3							
		Prog.4							