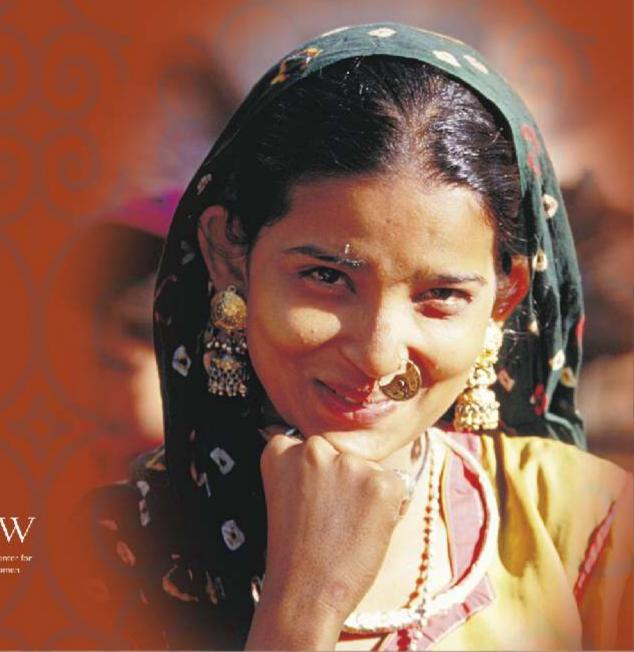


A Measure of Success:

Building Monitoring & Evaluation Capacity in Small, Community-Based Programs

Lessons Learned from Three Youth Reproductive Health Programs in India





outh reproductive and sexual health has become a priority for policy-makers, researchers and programmers in many developing countries. While numerous nongovernmental organizations (NGOs) are working - often successfully - to address youth's health needs, few have the data they need to show these programs are making a difference. Their limited financial and human capacity hinders systematic monitoring and evaluation (M&E) of their programs.

To help address this problem, ICRW partnered with three NGOs in India to shore up their M&E capacity (see Box 2). From July 2003 to July 2007, with funding from the John D. and Catherine T. MacArthur Foundation, ICRW and the partners worked collaboratively to plan and implement simple and affordable M&E approaches for their current and future adolescent reproductive health projects. The goal was to build sustainable systems for M&E that strike the right balance between scientific rigor and the constraints of small, field-based NGOs.

What follows is a summary of the processes used, key achievements, challenges and questions that arose in building program M&E capacity for these NGOs. We hope that these lessons will help catalyze discussion among various stakeholders - NGOs, partners providing M&E guidance and donors - on how to build sustainable M&E capacity among small NGOs.



CRW followed a three-stage process to develop a sustainable M&E system for the program NGOs (see Box 1):

- (1) Build a strong partnership;
- (2) Plan and implement a simple and affordable M&E system that builds on existing capacity; and
- (3) Use M&E data as it becomes available.

Box 1: Monitoring and Evaluation Capacity Builds on Three Key Stages

ICRW and partners used a three-stage process to build monitoring and evaluation (M&E) capacity in their programs.

Stage 1: Build a Strong Partnership

- Launch the partnership early
- Learn about your partner
- Be open to partner's ideas and constraints

Stage 2: Plan and Implement M&E

- Think systematically
- Focus and prioritize
- Weave M&E into the program and plug M&E gaps
- Implement and manage the M&E

Stage 3: Use M&E Data

- Early
- Effectively
- Frequently

Box 2: India Partners' Work Focuses on Youth Reproductive, Sexual Health

ICRW worked with three partners in India to build their M&E capacity. Each partner's work focused on different aspects of youth reproductive and sexual health.

Gujarat: In-school program on reproductive and sexual health and rights
Partner organization: International Society for Research on Civilization Diseases and
on Environment (the Gujarat AIDS Awareness and Prevention Unit - GAP)
Target group: Girls and boys in grades 8 and 9 in 40 schools in Ahmedabad city and
rural districts of Anand, Nadiad and Surendranagar in Gujarat.
Project aim: To increase the awareness and understanding among in-school youth
about sexuality, reproductive health, gender issues and HIV through a self-sustaining
process of training school teachers and peer educators in public schools.
Key M&E findings: Participating adolescents were interested in all in-class sessions.
Baseline-endline evaluation showed increased knowledge of sexual and reproductive
health as well as a more positive perception of sexuality and gender equality.

Drishti: School-based intervention to improve youth reproductive health and life skills in Rajasthan

Partner organization: Ritinjali

Target group: Girls and boys from grades 7 to 12 in 14 schools in Kota and Jhalawar districts in Rajasthan.

Project aim: To test a pilot project to improve life skills, increase reproductive health knowledge, and create an enabling environment in schools for girls and boys. Key M&E findings: A cadre of teachers who can address youth reproductive health and sexuality was built. The program also created a space for teachers, parents and adolescents to talk about these issues. Participating youth showed increased knowledge about the human body, masturbation, hygiene, gender roles and stereotypes, and substance abuse.

Yuva Shakti: Community-based youth sexual and reproductive health intervention in Karnataka

Partner organization: Samraksha

Target group: Married and unmarried boys and girls, their communities and health service providers in six slums of Bangalore city in Karnataka.

Project aim: To address sexual and reproductive health needs of youth by improving their knowledge, sensitizing their parents and key community members to the importance of reproductive health for youth, and improving youth-friendly services. Key M&E findings: A minority of survey respondents reported participating in the Yuva Shakti program; however more than half the participants reported that participation enabled them to get correct information about reproductive health issues. Awareness increased on issues such as sources of contraception and the appropriate age at marriage. Reproductive health practices improved with a drop in deliveries attended by untrained practitioners and an increase in condom and IUD use.





nvesting time to build a strong partnership based on mutual respect and trust is crucial because it forms the foundation of capacity building.

Launch the partnership early. M&E capacity building and implementation are likely to be most effective if incorporated from the inception of program design. This way both partners can develop the program and M&E components, and the partner providing M&E assistance has an opportunity to provide input into both program and M&E design.

The partnerships discussed here were not formed until after the programs were designed. M&E capacity building is still possible at this stage; ideally, however, the partnerships would have begun earlier so that the M&E goals could have informed program design.

It is important early in the partnership to understand some key characteristics about the program partners and to be open to their ideas and constraints. This process paves the way to building partners' M&E capacity, and convincing the partners that M&E will improve their programs without unduly reducing their resources.

Learn about your partner. ICRW identified three key characteristics important to understanding the partners' work and priorities vis à vis M&E:

- (1) Overall capacity, such as the size of the partner organization, its field presence, available staff for M&E and funds to hire staff for M&E
- (2) Senior staff's ability to articulate program goals and approaches
- (3) Program's priorities, including desire to invest in M&E

ICRW developed an institutional capacity assessment questionnaire to obtain the necessary information (see Box 3) and tailored it to a particular project for each partner. This specificity allowed the partner to describe, and ICRW to concretely gauge, capacities, priorities, constraints, approaches and needs pertaining to M&E. While the questionnaire revealed a broad spectrum of capacity and mandate to conduct systematic M&E - ranging from minimal capacity or mandate to a strong desire to systematize M&E processes - several common constraints and opportunities emerged.

Constraints

- Partners were not able to clearly articulate all program goals and objectives or realistic project implementation timeframes and activity plans.
- Though monitoring was conducted to some degree, typically it was more informal than ideal, with manual data collection that partners acknowledged as onerous.
- Part of the reason for lack of planning (both project and M&E) was that partners were stretched to implement even program deliverables, let alone add in-depth program planning.
- Current M&E lacked systematic, rigorous quantitative evaluation of program impact.
- Partners typically did not have dedicated staff for M&E work.
- Frequent staff turnover limited retention of capacity that was built.

Box 3: Institutional Capacity Assessment Questionnaire Helps Highlight Key Information

Pick a project that the NGO has implemented in last two to three years that is similar to the one you plan to assess and that includes a research element. Then ask the following questions:

- (1) What was the goal(s) of the project?
- (2) What was the target population? Rural/urban? Men/women/both? Youth? Other?
- (3) What were the desired objectives and outcomes of the project?
- (4) What were the project activities undertaken to achieve the desired objectives and outcomes?
- (5) What was the project management structure?
- (6) Who were the project team members, decision makers, implementers?
- (7) What were the research activities? Why were they done?
- (8) How were data generated? What was done with data/information generated? How was the research documented?
- (9) What were the biggest challenges, strengths and opportunities in doing this research?

Opportunities

- Partners acknowledged that they needed technical assistance to systematize monitoring and program management.
- Partners were eager to sustain, replicate and scale up existing activities and begin interventions at new sites. They also recognized the potential role of M&E in achieving their goals.
- The donor expressed interest in adding systematic monitoring and evaluation to the programs, providing ICRW and the program partners an M&E mandate.

Based on existing capacity, constraints and opportunities, ICRW planned the partners' M&E capacity building accordingly.

Be open to your partner's ideas and constraints. To ensure that collaboration with partners is built on mutual understanding and appreciation of their ideas and working constraints, ICRW used the following guidelines to set the tone for a participatory, interactive and transparent engagement process:

- Openly discuss the interests, philosophies, roles and responsibilities of all players in the partnership. Key to this was clarifying that ICRW's role was to build partner capacity to conduct M&E, not to conduct the M&E for them.
- Learn about partners' existing monitoring systems and tools and their perspective on the benefits and costs of program M&E.
- Emphasize strengthening and systematizing what the NGO is already doing, rather than creating new work.
- Explain that evaluation is not abstract research but rather an objective way of confirming what a program NGO may instinctively know through its experience.
- Emphasize that M&E need not take significant resources away from program implementation.

The process of partnership building took nearly nine months, much longer than anticipated and clearly longer than generally can be afforded in efforts to scale up such capacity building. However, ICRW's experience has served to distill the essential steps so that other capacity-building organizations can cover them more quickly.







nce the foundation of a strong partnership has been laid, partners can begin to plan and implement the M&E. To this end, ICRW worked with the partners to think systematically, focus and prioritize goals and objectives, integrate M&E into programs, plug M&E gaps, and implement and manage M&E.

ICRW's goal was to design a sustainable M&E approach based on these underlying principles: Build on what exists and keep it simple and affordable.

Think systematically. In learning about the partners, it became clear that they often did not have the tools or time to plan their goals and activities as systematically as they would wish. ICRW was not tasked with providing assistance in program implementation. However, a work plan for program implementation was needed before program M&E could be undertaken. Therefore, ICRW worked with the partners to better articulate program plans, desired outcomes, anticipated milestones and operational plans. In each case, ICRW worked with existing program and staffing plans to build in the following:

- (1) A program matrix, which included:
 - A detailed breakdown of goals, objectives and activities; and
 - For each activity, detailed tasks, time, input and resources needed, and the name of the person responsible.
- (2) A Gantt chart, which laid out the timeline required for each task to be undertaken.
- (3) Staffing requirements to gauge whether staff have the skills, time and resources they need to fulfill their responsibilities and tasks.

Focus and prioritize. Each partner had multiple goals, objectives, activities and tasks, which is common among community-based NGOs. At the same time, they did not have the human and financial resources to intensively

monitor and evaluate every aspect of their program. ICRW and partners prioritized what to monitor or evaluate based on what would be practical, limited to crucial aspects of the program, and consistent with the partner's priorities and constraints. As part of this process, ICRW asked the following questions:

- Which of the following approaches (or what combination) should partners focus on: program monitoring, outcome evaluation or impact evaluation? (See Box 4 for definitions.)
- What outcomes and activities were absolutely essential to monitor or evaluate to achieve the partner's mandate?

Box 4: Which Monitoring and Evaluation Approach Is Right for You?

Program Monitoring: A management tool to track program performance against what was planned or expected according to predetermined standards.

Outcome Evaluation: An in-depth examination of activities, components and strategies intended to achieve a specific result.

Impact Evaluation: An outcome evaluation that focuses on the broad, longer-term impact or results of a program.

Source: Adapted from UNFPA (March 2004) Program Manager's Planning, Monitoring and Evaluation Tool Kit. www.unfpa.org/monitoring/toolkit/tool1_glossary.pdf

All three partners elected to conduct program monitoring and outcome evaluations, but not impact evaluation, which generally is used to provide information on programs' longer-term impact. Their decision was based on the following reasons.

Reasons for focusing on program monitoring

- Monitoring is key to the partner NGO's primary role of implementing programs;
- Staff skills and time allow for a manageable amount of more systematic monitoring; and
- Given that staff had some monitoring experience, they likely would be amenable to building further capacity to systematize monitoring.

Reasons for focusing on outcome evaluations, rather than impact evaluation

- It is unrealistic to expect impact in the short timeframe of these projects;
- Program setup does not allow for a rigorous impact evaluation without control sites; and
- Staff skills, time and resources do not allow for rigorous impact evaluation.

M&E was conducted on a subset of outcomes and project locations so that partners could assess program performance, outcomes and future program needs without being overwhelmed with too much data.

Weave M&E into programs and plug M&E gaps. From the processes above, ICRW and partners developed complete program matrices. They also better understood both what the partners would monitor and evaluate, and the time, staff and financial commitments involved for program and M&E implementation. At this point, however, M&E was still separate from program implementation. Integrating M&E into program implementation involved three steps:

- (1) Create a monitoring and evaluation framework similar to the program matrix created earlier, which included:
 - Activities to be monitored and indicators, data sources and data collection methods for each activity;
 - Who would collect the data, when monitoring would occur and its duration; and
 - How the data would be used.
- (2) Merge program and M&E timeframes into an integrated Gantt chart with M&E activities added in and program timelines adjusted for monitoring activities.
- (3) Identify and address gaps in staffing, training and resources (See Table 1).

Issue	Gap	Solution
Staff capacity	Few staff were trained in research skills.	 Train partner staff in basic M&E on the job, including how to: Progress logically from program goals to objectives, outcomes, outputs; specify required inputs; develop and measure indicators; Field test, modify and implement instruments; Conduct, transcribe and analyze qualitative research Prepare and use simple spreadsheets to computerize manage and analyze quantitative data; Use data to feed back into programs, document processes and disseminate findings; and Create opportunities for partners to network with similar NGOs that have M&E experience so partners can see the process firsthand.
Insufficient monitoring tools	Existing monitoring tools were often weak or did not match program activities or objectives.	Modify existing instruments rather than create new ones, where possible, or suggest simple alternative tools that could be utilized by staff, given capacity.
Lack of technology	Partners had minimal technology and funds for effective data management.	 Train staff to use electronic instead of hard-copy data management systems wherever logistically and financially feasible. Provide staff access to and train them to use statsistical software such as SPSS.

Implement and manage M&E. With program and M&E frameworks and timelines complete, staff trained, and systems set in place for data management, ICRW worked with partners to finalize M&E tools, implement them, and enter and code the data. ICRW chose tools based on the same principles of using what exists, and keeping it simple and affordable. While each partner used multiple tools (see Box 5), each instrument was structured to be brief, clear and easy to code.

Box 5: Projects Used Different Monitoring and Evaluation Tools

Partners selected the following M&E tools for program monitoring and outcome evaluation:

For the in-school interventions run by Ritinjali and GAP:

- Gantt charts
- Structured, self-administered pre- and post-session questionnaires:
 - □ Teachers' and peer educators' training
 - In-class assessment by students of NGO project team's, teachers,' and peer educators' facilitation skills
- Observation checklist for classroom sessions
- Anonymous question box for student questions
- In-class question-and-answer sessions
- Focus group discussion field guide
- Process documentation guide

For the community-based intervention run by Samraksha:

- Gantt charts
- Checklists to monitor activities
- Community mapping
- Pre- and post-intervention questionnaires for awareness-raising sessions
- Structured quantitative baseline and endline surveys
- Focus group discussion field guide
- Process documentation guidelines





ffective M&E uses data early, effectively and frequently in program design and implementation.

To improve partner perception about the relevance of M&E data, ICRW introduced the use of data at the start of the programs. Baseline data analyses were used to improve program design. Continuous program monitoring data were used to improve program implementation, articulate and modify program objectives, and assess progress against activities and outcomes in partners' program matrices. Data from evaluations of teacher or field staff trainings were used to improve future training content, while evaluation of the process of implementing questionnaires in one phase was used to improve questionnaires for follow-up phases (see Boxes 6 and 7 for specific examples of how partners used M&E data). ICRW also worked with partners to present results at external meetings to donors, academics and government officials, as well as to get follow-up funding.



Box 6: Monitoring and Evaluation Data Strengthens Programs

Program partners quickly applied what they learned through their M&E data to improve the quality of their program activities, as illustrated in the examples below.

- Gujarat AIDS Awareness and Prevention Unit (GAP): Baselineendline analysis in the program's first year showed a poor understanding of gender equity issues among eighth grade students. The program incorporated gender equity more intensively in the curriculum for future cohorts.
- GAP: Baseline-endline analysis, process documentation and data from question-answer sessions indicated high interest among adolescents in reproductive and sexual health. These topics were covered more in-depth in future sessions.
- <u>Samraksha</u>: Community mapping and qualitative needs assessments highlighted deep-seated, often inequitable, gender differences in adolescents' expectations and experiences. These differences were highlighted in awareness campaigns.
- Samraksha: Baseline data showed that 43 percent of girls in the sample were married before 18. Consequently, Samraksha made increasing awareness of age at marriage a key focus area for its program and a key indicator to assess.
- <u>Ritinjali</u>: Baseline-endline findings were used to drop indicators that did not work in the first phase and to sharpen the focus of their follow-on, scale-up phase.

Key Achievements

By the end of the three-year project, ICRW helped establish some degree of institutionalized M&E for the three partner organizations. This success resulted from the strength of the partnerships, effective planning and implementation of sustainable M&E in an interactive manner, and ICRW's ability to demonstrate the value of M&E data, which led to partner buy-in. The three key achievements were:

- (1) An increased recognition of the value of M&E. Partners better appreciate the value of systematizing processes for M&E and integrating program and M&E frameworks. Partners now are investing in building M&E capacity by sending staff for periodic training on topics like statistical literacy and data management. They also are hiring staff specifically for M&E.
- (2) Increased partner confidence in using M&E. Program staff have become comfortable conducting monitoring and evaluation and are more confident to discuss M&E and convince other NGOs of its importance.
- (3) Ripple effects that led partners to replicate their own enhanced capacity. Within their own programs, partners are using their new M&E skills such as instrument development and computerized management of data. Partners also are poised to serve as M&E trainers for smaller NGOs.

Table 2: How ICRW Addressed Project Challenges

ICRW encountered and addressed several challenges in the process of building partnerships and M&E systems for the program partners.

Challenge

How challenge was addressed

Program and M&E designed separately
The program designs for all three groups were
funded and developed prior to any M&E
development. As a result, partners saw M&E as
an "add-on" rather than as an integral part of a
program.

Convinced partners that M&E is not an add-on but rather a useful part of programming by using M&E data to improve program design, monitor and modify program implementation, and design follow-up phases.

Resistance from program partners to the introduction of M&E

Partly because M&E was introduced after programs were funded and partly because M&E was not explicitly in the partners' mandates, some partners initially resisted the extra effort required to systematize and institutionalize M&E.

- Built a strong partnership to create trust and demonstrate appreciation of partner mandate, constraints and potential.
- Used a participatory approach to guide partners to understand the value of M&E and of investing in building M&E capacity.

Emphasizing M&E vs. program activities
Though ICRW's mandate and expertise did not include programmatic input, we recognize that M&E is only as good as the program content and had to assess how much program input to provide.

- Provided input on critical aspects of programs but retained focus on M&E input.
- Linked partners with other resources for other program inputs.

Turnover in ICRW project staff
The composition of the ICRW team changed during the project. This caused some confusion about roles and responsibilities and posed a challenge for maintaining a strong partnership.

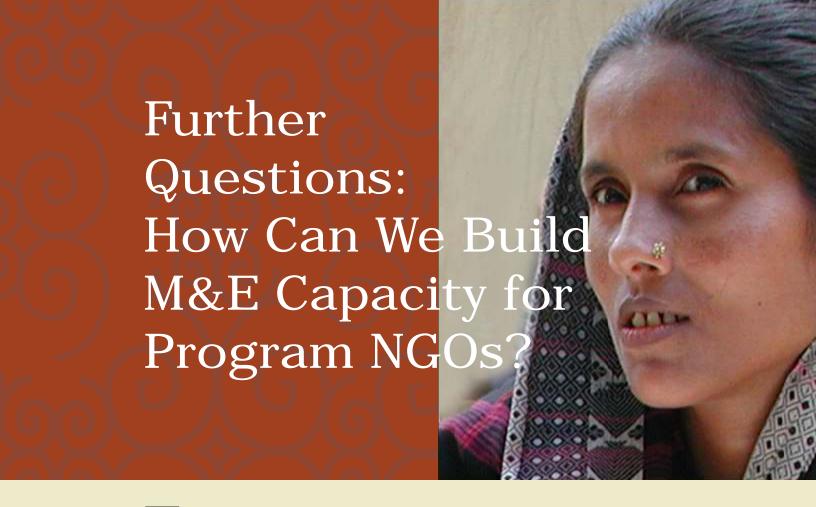
- Systematized internal program management.
- Discussed with partners changes in the ICRW team, implications for ICRW technical support, and any problems partners experienced or anticipated.

Continued limited capacity among partners because of too few staff and frequent staff turnover.

ICRW has no means to address this constraint. Partners are trying to address it by training new staff based on ICRW training.







his project has demonstrated that it is possible to build capacity among small, programmatic, community-based NGOs to conduct basic monitoring and outcome evaluation. However, the experience raises questions that the key players in such an endeavor -program partners, partners providing M&E assistance and donors- need to consider.

- (1) Should capacity-building for small NGOs concentrate on program monitoring and, at most, outcome evaluation rather than trying to build capacity for impact evaluation? On the one hand, many small NGOs do not have evaluation in their mandate and do not have the skills or resources to conduct rigorous impact evaluation. On the other hand, impact evaluation is the final judge of whether a program "works."
- (2) To what extent can or should standardized approaches and tools be created for M&E capacity building among small NGOs versus a more customized approach? On the one hand, the large range of small NGOs makes standardization tricky; on the other, resources are too limited to allow for customizing such capacity building on a large scale.
- (3) How can various stakeholder expectations from M&E be harmonized? NGOs may not want to add in-depth M&E to their already heavy program burden unless it can help them improve their program quality and implementation. Organizations providing M&E assistance may expect more capacity to be built than is possible given starting potential. Donors may require grantees to demonstrate impact on indicators in a timeframe that is not feasible given program timelines, partner capacity and available resources.

(4) How can program and M&E funding and development be integrated?

M&E capacity building and implementation are likely to be most effective if the partnership between the program and the organization providing M&E assistance is established before the program is designed. However, this integration can pose additional challenges to the implementing organizations and the donor, requiring more up-front planning from the former and a greater financial commitment from the latter.

Box 7: Benefits of Monitoring and Evaluation Data Extend Project Boundaries

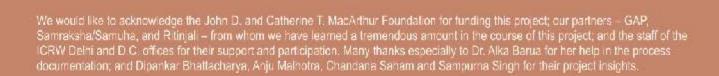
- <u>Ritinjali</u>: Ritinjali will serve as a resource group to assist with M&E capacity building efforts for other smaller NGOs.
- GAP: Findings from the program have been used to publish books on sex education for peer educators and to advocate with the state government.
- <u>Ritinjali</u>: Ritinjali used M&E data from its study in a proposal to scale up its efforts; it received funding from the Rajasthan state government.
- GAP: GAP was invited to share its M&E insights to help other NGOs implement similar in-school interventions.
- <u>Samraksha</u>: The team presented M&E findings at international conferences and community events organized by other programs within Samraksha.

Conclusion

ICRW's experience shows that investing time to foster a relationship and work closely with a program partner to develop skills and experience is an effective way to build M&E capacity. On a larger scale, however, such an intensive level of engagement may not be feasible.

The process described in this report points to one possible model for building sustainable M&E capacity: tiered capacity building. This model would use M&E experts to train a small number of field-based NGOs based on the intensive ICRW capacity-building approach demonstrated here. These fully trained NGOs then could form a cadre of trainers to further train other NGOs in a less intensive manner and would be available to other NGOs as an M&E resource. Given the need for and benefits of building capacity among NGOs, particularly for program monitoring and outcome evaluation, donors should consider the merits of such an approach.





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