AIDS ACTION EUROPE

MONITORING AND EVALUATION ON HIV AND AIDS

A DO's and DON'Ts Reference

20071208/IW/VER

Amsterdam, July 2007

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GlaxoSmithKline Positive action working with communities affected by AIDS

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Content

1 Why this Guide?

AIDS Action Europe is a Pan European partnership of non-governmental organisations (NGOs) that aims to work towards a more effective response to the HIV and AIDS epidemic[1]. Monitoring and Evaluation provide the tools to allow the network and its over 200 member organisations to track in how far they individually and collectively achieved this stated aim.

AIDS Action Europe membership is diverse in terms of size and type of activities. Some of the NGOs focus on treatment; some concern themselves with lobbying for better policies. Some work at the national level, while others work locally or on specific topics. This guide provides common concepts, approach, language and definitions, in order to facilitate internal communication within the network and within individual members. It does not pretend to be the begin-all and end-all discussions around monitoring and evaluation. It intends to bring monitoring and evaluation back to basics and to give members and other NGOs a handle on some of the basic aspects, based on their own identity and responsibility. NGOs should resist bureaucracy whilst remaining consistent with funding agencies' definitions and satisfy their accountability requirements.

This guide follows from the AIDS Action Europe best practice seminar on monitoring and evaluation on November 23-25, 2006 in Amsterdam. It intends to capture lessons learned from the seminar, as well as to provide seminar participants and other NGOs with some tools that will facilitate their monitoring and evaluation processes. Throughout the guide experiences with monitoring and evaluation from seminar participants are highlighted.

This seminar is part of a series of European best practice seminars that are organised under the project 'European Partners in Action on AIDS'. This project aims to strengthen knowledge, capacities, discussion and exchange among HIV-related NGOs in Western and Eastern Europe in order to encourage concerted action and the acceleration of innovation in their approaches in the fight against HIV and AIDS. Please visit www.aidsactioneurope.org if you wish to learn more about AIDS Action Europe and the other European best practice seminars.

The guide was made possible with the financial contributions of the European Commission and GlaxoSmithKline's Positive Action Programme.

We hope that this guide will contribute to the strengthening of NGO capacities to develop effective but at the same time simple and clear monitoring and evaluation systems that allow them to measure the impact of their activities in the fight against HIV and AIDS. Reactions on this guide are welcomed.

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2 Importance of Monitoring and Evaluation

Two reasons why Monitoring and Evaluation have taken such a flight in recent years are:

- NGOs, social movements, and advocacy groups are becoming more and more professional and result driven. They realise that a systematic approach to monitoring and evaluation makes good management sense. It provides managers with insights about the results of their actions and allows them to steer their projects in the right direction.
- An increasing demand for accountability. Funding agencies are under increasing scrutiny of the rising critical public opinion about the effectiveness of social change projects. Funding agencies need information to demonstrate results, in order to justify their budgets.

Monitoring and evaluation have an important role in our project management. We measure our output to get answers to our questions: how many condoms and leaflets did we distribute? How many calls were answered on our helpline? How many users of our target group were reached? Has condom use increased this year and for what percentage? You have to know answers to all these questions when planning actions for next year, when making financial constructions, for any part of future project planning, for improving the policy. Monitoring and evaluation tools help us to answer questions like what's the difference between our input and output? How effective we were, and not just cost effective? What was the outcome? What was the impact? What is working, what is not? What are the needs of our users? Monitoring and evaluation many times means just observing, estimating when you can't count or measure concrete output. So you have to be present in the field, get in touch, be simple, don't complicate too much, use logic and a common sense approach.

Miran Šolinc, ŠKUC-Magnus, Slovenia

Evaluation is a key factor of effective work and an important function of management. How can you understand that things are going and are done well? By monitoring the process, measuring output and evaluating outcome, and comparing to benchmarks. If you do not know how to evaluate your work, you do not know if you are doing good or bad. Are you on the right track or spending resources for nothing? It seems logical and simple. But it is not so easy for an NGO where you do not produce material things which you can count. Although to be productive you should evaluate, measure and control staff performance, the impact of campaigns or effectiveness of your prevention work. You should be creative and apply original methods. Much experience and practice in evaluation is accumulated in older and larger Western NGOs and international organizations. We are looking for opportunities to learn from more experienced colleagues in order not to spend time and resources seeking for the best methods for monitoring and evaluation practices. The Monitoring and Evaluation seminar in Amsterdam was such an opportunity for me. "What gets measured gets done. Anything can be measured, and if it can be measured it can be improved. If you can't measure it you can't manage it"1. And in the HIV/AIDS field it is extremely important. With our limited resources we should manage much. Monitoring, evaluation, making conclusions and then following with improvements is the way how we can become more effective.

Ruta Kaupe, DIA+LOGS, Latvia

[1] "How to be an even better manager", 6th edition, Michael Armstrong, Kogan Page, London and Sterling, VA 2004.

3 Definitions

One of the problems faced by organisations is ambiguity of concepts and confusion about terminology. What is an 'output' and how is it different from an 'outcome'? What is a 'result', a 'milestone' a 'benchmark' or an 'indicator'? What does 'effectiveness' mean and how is it different from 'impact'? (see section 6.3, endnote 9 for definitions)

Although it is important that NGOs design monitoring and evaluation systems which address their own information management agenda, it is also important to recognise that ultimately we are all accountable to our funding agencies, so we need to see how they define terminology. NGOs addressing the HIV/AIDS epidemic access a number of different funding sources. Private funders, like the SOROS Foundation, may have their own specific requirements, so it is important to look into this.

There is an increasing tendency to coordinate monitoring and evaluation terminology and systems. Funding agencies, developing countries and UN agencies agreed to three core principles – known as the "Three Ones" (One agreed AIDS action framework, One national AIDS coordinating authority, One agreed national monitoring and evaluation system) - to better coordinate the scale up of national AIDS responses[2]. One of the "Three Ones" goals is to create one agreed country-level monitoring and evaluation system, with standardised indicators and surveillance. As monitoring and evaluation systems are defined at country level and hence will differ from context to context, it is not possible to go into much detail here. NGOs may want to discuss internally and with other actors, how their own monitoring and evaluation needs and systems can be harmonised with that of other actors in their country.

The Three Ones initiative is linked to the Millennium goals[3] on aid harmonisation, which is an initiative of the Organisation for Economic Cooperation and Development Assistance Committee (OECD/DAC). A working group 'DAC Working Party on Aid Evaluation (WP-EV)' developed a glossary of key terms in monitoring and evaluation[4]. Many donors are a member of OECD/DAC, including the World Bank and the Global Fund, and have signed up to these definitions.

OECD/DAC defines:

Monitoring as a continuing function that uses systematic collection of data on specified indicators to provide management and the main stakeholders of an ongoing (development) intervention with indications of the extent of progress and achievement of objectives and progress in the use of allocated funds;

Evaluation as the systematic and objective assessment of an on-going or completed project, programme or policy, its design, implementation and results.

There is a lot to discuss about what it says in these definitions, but there are two interesting issues that are sometimes forgotten, when designing monitoring and evaluation systems.

The first one is the use of the term 'indication' in the monitoring definition. It does not say 'proof'. Monitoring does not pretend to provide scientific proof. It merely seeks to find indications, whether or not we are managing our project in a way that facilitates the achievement of objectives. This is important as many monitoring systems are overdeveloped and overly complicated in the quest for scientific proof. Proof is the domain of research and requires much more in terms of methodology and the quality of data, than necessary for monitoring and evaluation.

The second issue is that of the intended users of monitoring and evaluation: 'Management and Main stakeholders'. We need to remind ourselves that we collect information for the daily management of what we do. The academic community may be part of your stakeholders, but the main stakeholders of any HIV/AIDS intervention are those infected or at risk of infection with the virus. Not to say that science does not have an important role to play, but monitoring and evaluation systems of projects do not primarily exist to service research needs. Where there are needs for information to be scientifically sound, it is recommended to commission a piece of (operational) research, in addition to the information generated by your monitoring and evaluation system.

The Sexual Health Centre (SHC) has adopted the RADAR Logic of the European Foundation for Quality Management (EFQM). This is a self-assessment tool to measure where we are on the path to excellence, identifying gaps and areas for improvement and stimulating solutions. SHC has chosen this approach because it can be integrated into our policy, values and strategy. It involves self-assessment (which improves staff buy-in) and builds on the existing strengths of the organisation while focusing on continuous improvement.

Each team draws up a value added statement on the difference to the organisation (or clients or society) that their work makes and the RADAR is devised based on this.

RADAR stands for Results, Approach, Deployment, Assessment and Review.

***Results** are the impact, the strategic goals set for each area of work by each team, along with management, focusing on performance indicators, clients (customers), people (staff and volunteers) and society.*

***Approach** looks at how the results are achieved*

***Deployment** sets the time frame for completion and identifies who will undertake the work*

***Assessment** (quarterly, for example) looks at whether the result was achieved*

***Review** looks at what we have learned, what we need to change, why things are working or not working and sets the actions for the next steps, which leads to a reviewed RADAR for the next quarterly review.*

Deirdre Seery, The Sexual Health Centre, Ireland

4 Principles

Taking the purpose of monitoring and evaluation information into account, we can identify the following principles for any monitoring and evaluation system.

4.1 Keep it simple

Only collect information that you know is going to be used for management purposes. Again, it is not necessary to collect huge and complex data sets, if you know that you do not have the capacity to consolidate and analyse them anyway. If others make demands on you to do so, make sure you include the costs and human resource requirements in your funding applications and separate them from your monitoring and evaluation systems and budget. It is important for all stakeholders to recognise that data collection consumes financial and human resources, which compete with resources available for treatment and advocacy.

On the other hand, if you do have the capacity to base your decisions and management on large data sets, there is nothing to prevent you from doing so. But be aware of the danger of bureaucracy just around the corner. Unused information = bureaucracy.

Do: collect only information you know you will use for making decisions or communication.	**Don't: try to scientifically proof you changed something.**

4.2 Use Information collected

A second principle is based on the ethical consideration that those collecting and those communicating information rightfully expect that its implications are acted on by those receiving that information. It can be demotivating for data providers if their efforts to collect and communicate information make no difference in terms of strategic support. Many organisations have experienced that the quality of information deteriorates in terms of reliability and completeness, when reports are not seen to be acted on.

Do: agree and commit with those reporting to you beforehand how you will act on their report	**Don't: ignore a report that you asked for**

4.3 Responsibilities

You cannot be held accountable for things you are not responsible for or you never agreed to. That is why it is important to define your responsibilities and seek agreement with others. Usually the ministry of health and its implementing agents are finally responsible for the quality of health care and therefore for the quality of treatment of HIV/AIDS patients.

AIDS Action Europe wants to work towards a more effective response to the HIV and AIDS epidemic. The objectives in its work plan are defined as 'influencing European and International HIV/AIDS policies, strengthening the exchange of best practices and lessons learned and improve skills of European NGOs and improving cooperation and exchange between AIDS Action Europe members'. That is all it can be held accountable for and essentially that is all it needs to collect data and qualitative information on for its monitoring and evaluation systems.

Funding agencies generally appreciate it if you approach them with your own Monitoring & Evaluation agenda and pro-actively present a monitoring and evaluation system based on your appreciation of who should be responsible for what and a system that is designed for your purposes and organisation. What matters to them is that you are transparent about your results.

We use monitoring and evaluation in all our projects. It's the only way to see if our work is necessary and has any effects. Last year the National AIDS Centre established the new National Programme for Combating AIDS and Preventing HIV Infections for the period 2007-2011 and assumed global and interdisciplinary monitoring and evaluation of the Programme's implementation. Our Foundation receives funding from the AIDS Centre so we have to respect this Programme which defines that monitoring and evaluating is based on the following three elements:

** Epidemiological monitoring – allows for trends and epidemic dynamics to be observed; enables obtaining knowledge about HIV infection and other sexually transmitted diseases;*

** Monitoring of social phenomena - behavioural, essential for effective prevention, enables observing social behaviour on a wider scale;*

** Monitoring of the implementation of projects and tasks – enables more effective allocation of funds, points to new activity areas.*

The Programme underlines also that data collection and its analysis in terms of monitoring and evaluation is not only a practical solution, but also the State's duty, giving the guidelines and commitments that Poland has accepted as a member of the United Nations and its agencies and as a European Union member.

Magdalena Ankiersztejn-Bartczak, Foundation of Social Education, Poland

5 Constructing a Monitoring Framework

In order to comply with the need to be systematic, you will need to develop a monitoring and evaluation framework. The purpose of this is to link monitoring and evaluation to the objectives of your work. Of course there are other things you may want to monitor as well (for instance organisation development, staff performance, cash flow, vehicle use etc.), but in this guide we exclusively look at how we can monitor the extend to which we are achieving our objectives. This framework is generally referred to as the logical framework and widely used as planning, monitoring and evaluation tool. It can also serve as a reference for internal and external communication (including advocacy).

A logical framework consists of a table of four columns and four rows.

The columns are:

1. Objectives and activities (what the project is designed to change, usually formulated in terms of a positive change in the situation of the beneficiaries of your project)
2. Indicators (measure the extend to which you have achieved your objectives)
3. Sources of verification (usually records, registration forms and other ways to collect the indicator information)
4. Assumptions (the responsibilities that others have in relation to the various objectives). This column can also be used as a checklist for advocacy issues, or an advocacy strategy.

The rows are hierarchical and refer to:

1. activity,
2. result (specific objective),
3. project purpose, and
4. overall objective.

The respective achievements are defined in terms of:

1. implementation (activities),
2. output (specific objective),
3. outcome (project purpose) and
4. impact (overall objective)

For more information on this please refer to section 6.4.

The process of building this type of monitoring framework is not easy and requires knowledge of the steps involved and facilitation skills. You may want to ask your donors to allocate a budget for hiring a consultant with the required skills to help you develop a monitoring framework.

For this guide we have chosen the logical framework (logframe). Not only does the logframe represent a monitoring framework, it also allows you to differentiate between various types of evaluations, and links monitoring and evaluation to an inclusive planning exercise, bringing actors together around a commonly agreed set of objectives. There are of course many other monitoring and evaluation frameworks that you could choose. The logframe however is being used by many organisations worldwide.

There are important advantages to making planning a stakeholder- inclusive process. Those participating in a planning workshop contribute their analysis and also listen to others and their analysis. This creates ownership and bonds a team around a commonly agreed plan. You may want to hire the services of a trained facilitator, so you can participate freely in the discussions yourself.

Do: plan as a team, approach it as a process.	**Don't: develop the different steps of the monitoring framework by yourself as an individual.**

The planning process towards constructing a monitoring framework takes place in six steps.

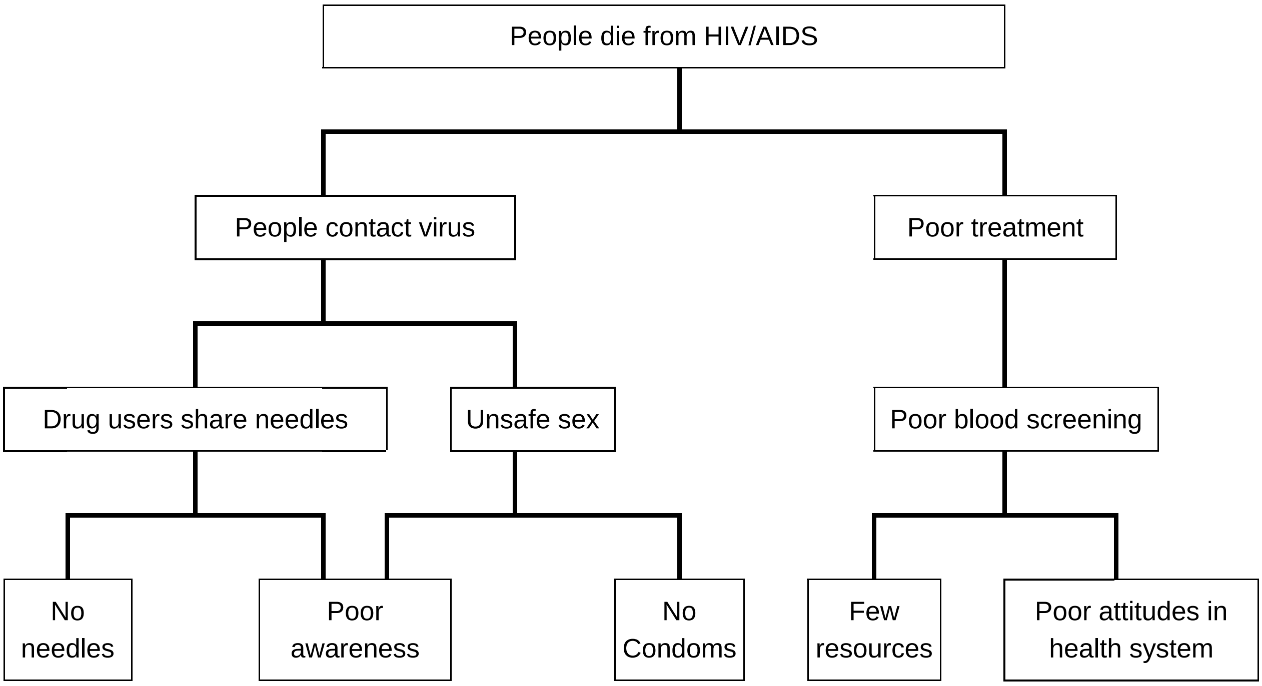
5.1 Step 1: Brainstorm Problems of your Target Population.

During this exercise the team, possibly with the help of a facilitator, expresses their ideas about the problems of the target population freely and without any preconceived structure. Write the problems on pieces of paper and stick them randomly on a board or the wall. It is advised to allow ample time for this. If people disagree on whether something is a 'problem', opt for inclusion, by asking opponents to accept someone else's analysis. A simplified example of an outcome of step one might look thus:

- People contact virus
- Poor treatment
- No condoms
- Poor attitudes in health system
- Few resources
- People have unsafe sex
- People die from HIV/AIDS
- Drug users share needles
- People are not aware of the risks
- Poor blood screening

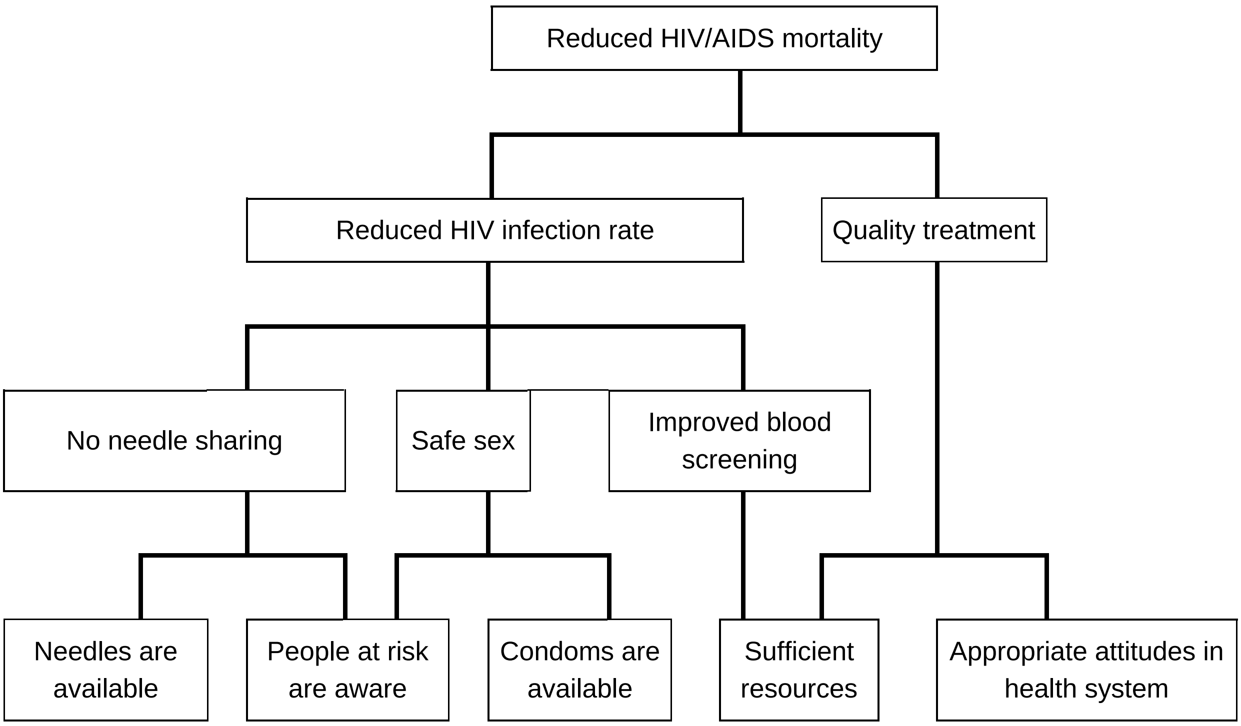
5.2 Step 2: Link Problems in causal Way (‘Problem Tree’)

The team decides the cause and effect relationships between the identified problems of the target population and creates a problem tree:



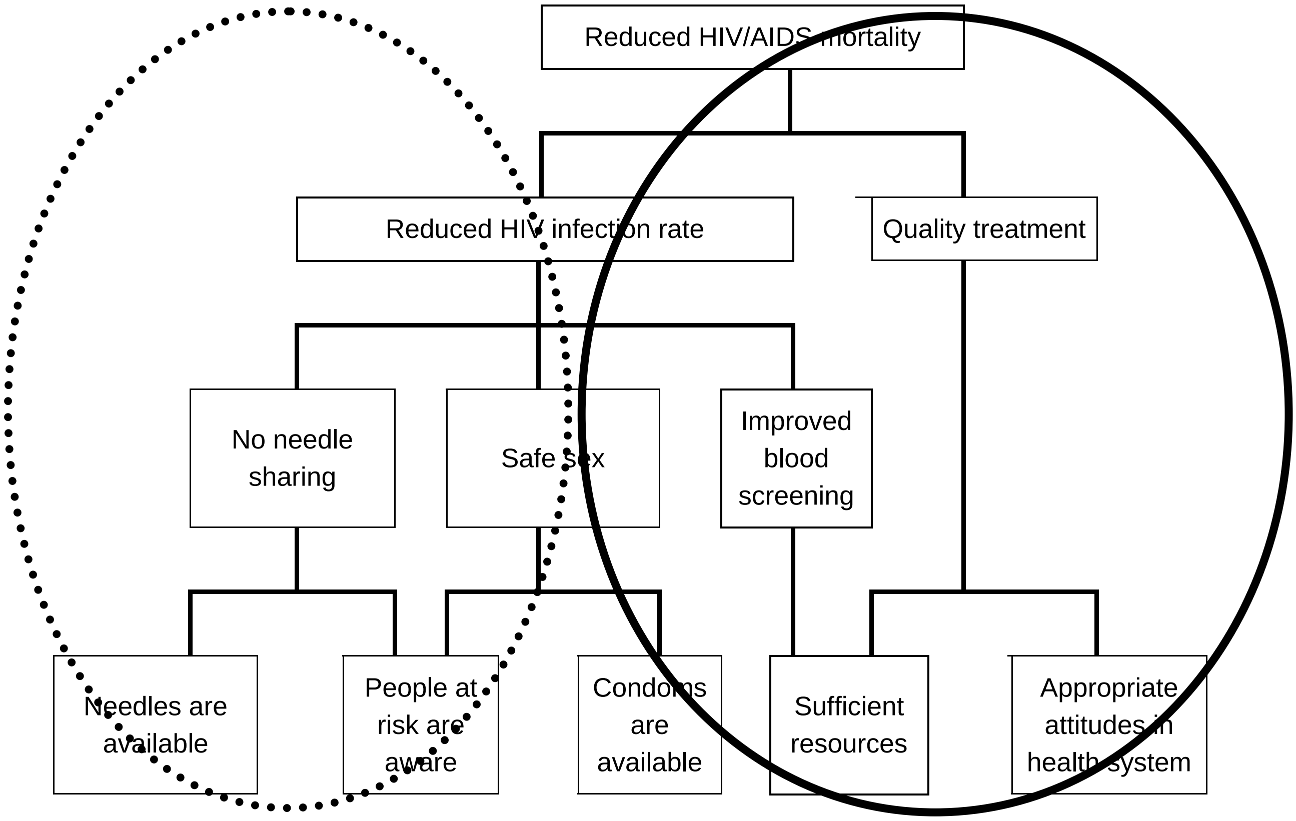
5.3 Step 3: Convert Problem Tree in Objectives

The facilitator helps the group convert the problem tree, into a system of positive achieved outcomes: a hierarchy of objectives.



5.4 Step 4: Cluster

The team decides on the basis of the mission, mandate or strategic plan, which problems it sees as its responsibility to address. This step is important as it defines each participating organisation's responsibilities in relation to the objectives of the project. It also allows you to ensure that actions are consistent with identity and mandate. We will see later that this also helps clarify action and provides a basis for advocacy towards other stakeholders.



The dotted line encircles the problems addressed by the organisation, the black circle those of other actors and stakeholders. It is advisable to include your partners in the planning workshop so that they can express their views and commit to taking responsibilities.

Do: be specific about your responsibilities in relation to the objectives.	**Don't: assume that participating external individuals have an organizational mandate.**

5.5 Step 5: Build the 'Intervention Logic' and check this

The arrows connect the logframe cells in the following way: '**IF** there are sufficient resources **THEN** you can successfully implement an awareness campaign and distribute needles. **IF ALSO** condoms are available, **THEN** people will have safe sex and stop sharing needles. **IF ALSO** there is an improved screening of blood, **THEN** we will reduce HIV infection. **IF ALSO** the quality of treatment improves, **THEN** we will reduce AIDS mortality.

Objectives(Action)	Indicators	Sources of Verification	Assumptions(Advocacy)
Overall Objective THEN Reduced Aids Mortality			**IF ALSO** Quality treatment (including drugs).
Project Purpose THEN Reduced HIV infection rate			**IF ALSO** Improved blood screening and Improved attitudes in health system.
Specific Objective THEN People have safe sex and do not share needles.			**IF ALSO** Condoms and needles are available.
Activities THEN Awareness Campaign and needles distribution.			**IF** Sufficient Resources are provided.

Your actions are in this example to conduct an awareness campaign and distribute needles in order to encourage people to have safe sex and stop sharing needles. If 'assumptions' are defined as the issues that others have to take responsibilities for in order for us to achieve our objectives, this column can now also be used as a checklist for 'advocacy'.

We now have what is commonly referred to as the intervention logic, the two outer columns of the logical framework. In logframe-language we 'assume' that others make condoms available, improve blood screening and improve the quality of treatment. But we don't really just assume. If we see that others are failing in their responsibilities, we remind them; we advocate that they improve their performance; in other words, we hold them accountable for what we agreed to be their responsibilities. Others may hold you accountable for the successful implementation of the campaign and the successful distribution of needles among drug users.

In this way we plan and monitor our action and advocacy in an integrally linked way to achieve our overall objective.

5.6 Step 6: Develop 'Indicators' and 'Sources of Verification'

This is not an easy step. In order to indicate (not scientifically proof) to what extent we are achieving our objective, indicators need to comply with the SMART criteria.

S	Specific	Specific requires the indicator to refer to a specific area or target population (AIDS patients in Ukraine).
M	Measurable	Measurable refers to the possibility to score on a scale, either quantitative or qualitative. This will require either a target or a baseline (Mortality reduced by 15%)
A	Achievable	Is it possible to achieve the proposed improvements, is it too ambitious? Is 15% a feasible target, given the timeline and the nature and complexity of the problems?
R	Relevant	Is it necessary to include this indicator or are other indicators more essential?
	Reliable	If different people collect the same information, would they obtain the same result?
T	Time bound	By when do you expect to achieve the change? This needs to be related to 'achievable'. (in three years from now= 2010)

To make your life easier you may want to check the standard indicators developed by a number of key actors, as a reference[5]. This saves you from spending time and other resources whilst greatly increasing you credibility in the eyes of some of your key partners as well as complying with their accountability requirements. The ' Thee Ones' initiative was launched to define one set of indicators in each county in order to facilitate coordination and communication around monitoring and evaluation in each country.

A SMART indicator at the impact level might be formulated as follows: 'AIDS related mortality in Ukraine will be reduced by 15% in 2010'. It is important to understand that impact indicators measure the combined effect of your actions and those of others. Or to put it in another way, they measure the combined effect of your actions and your advocacy strategy. In this way you ensure that you also have a basis for holding others accountable for their part of the job, whilst being transparent about your own responsibilities.

At the 'activity' level we do not define indicators. Activities are simply undertaken and do not need to be measured. Activity planning over time is often added in an additional 'gant-chart' A gant-chart is a matrix which shows when the various activities will be implemented. Usually the horizontal X-axis is time (usually months or weeks) and the vertical Y-axis presents the various activities. The added value of a gant-chart is that it allows you to see which activities need to be undertaken first, in order to implement others later. For example an awareness campaign may need to be implemented before a needle exchange programme, as people may need to be made aware of the dangers of needle sharing in order to motivate them to participate in the needle exchange. Instead of indicators for the activities we specify the inputs required to undertake the activities. The sources of verification column contains the costs or budget. Some donors require activity reports, so it is important to keep records of meetings, logbooks of campaign activities or numbers of needles distributed.

Sources of verification are simply the records from which we collect the data. Often these are existing references as others are already collecting the information, for instance the Ministry of Health will keep certain records. It is possible that you need to develop your own, especially when you implement certain services yourself.

Logframe example to be used for monitoring

Objectives	Indicators	Sources of Verification	Assumptions (Advocacy)
Overall Objective Reduced AIDS Mortality	AIDS related mortality in Ukraine will be reduced by 15% in 2010.	Ministry of Health figures	Quality treatment (including drugs)
Project Purpose Reduced HIV infection rate	< 15000 new cases in Ukraine in 2010	Ministry of Health figures	• Improved blood screening • Improved attitudes in health system
Specific Objective People have safe sex and do not share needles	Retail condom sales, increase by 25% within 12 months from project start	Manufacturers, distribution and retail records	Condoms are available
	Input	**Budget**	
Activities Awareness Campaign Needle distribution	• Research • Design • Campaign materials • Salaries • Transport • Other costs • **Total**	25000 5000 20000 45000 12000 5000 **112000**	Sufficient Financial and Human Resources

It will not be easy to find quality data and it is important to alert those responsible for generating them to any problems you observe as part of your advocacy strategy. Sometimes it is not possible to find an indicator that measurers an outcome directly, especially when we try to measure changes in attitudes or behaviour. If there is an established and proven correlation between an input and an output, the input can serve as a ‘proxy’ or ‘process’ indicator for the output. For example, only if we know that handing out condoms for free outside a night club, will lead to use, we can use the number of distributed condoms or needles as a proxy indicator for increased use of condoms/needles.

Do: be SMART about your indicators and look for existing or generally agreed ones.	Don't: use proxy indicators, unless you can proof that they accurately and reliably measure outcomes.

5.7 Information and Data Collection for Monitoring

The planning process described in the previous section has generated a framework for monitoring. Monitoring is basically nothing more than collecting data and information for the indicators, using the sources of verification. This sounds easy, but it is possible that you will encounter problems with the quality of data. This is no reason to stop monitoring. Even if data are incomplete or unreliable, they may still give you the indication you are looking for. If problems persist and you believe that you are not really monitoring the results of your work, it is time to see if you can make your indicators SMART-er. If this is not possible you may need to redefine your objectives. But if you do so, you need to go back and check the logic of your entire plan. Again, if scientific proof is required, it is advisable to commission research.

Do not just collect data, but also stories. If your action is for people infected and affected by HIV and AIDS, their personal stories are powerful reminders of what lies behind the cold facts. These personal stories may not need to be captured to convince funding agencies, but monitoring information can also be integrated in campaigns for the general public, who may not be aware of the personal tragedy of people who do not have access to life saving drugs, or who are being stigmatised by their own communities. It is perhaps good to remind yourself that you will need to obtain people's consent before you can use their personal accounts for these sorts of purposes.

It is perfectly legitimate to include qualitative information and to illustrate your findings with anecdotal information. 'Random observation' is a perfectly legitimate source of verifying whether you achieve your objectives. However, try to be as systematic and methodological about this as possible in order to enhance the credibility of your conclusions, for instance through triangulation. Triangulation is a method for verifying findings through the use of different methods or sources of information in order to double or triple check[6].

Some people perceive logical frameworks as stringent and inflexible. Logical frameworks are not there to tell you what to do and what not to do. They are merely a reference for team and stakeholder communication, a communication tool about planning, monitoring and evaluation. Nothing more, nothing less.

In APRAD each project includes a monitoring and evaluating phase. The lessons learned during the implementation of different projects are integrated to improve the management of all the activities and the services offered. Monitoring and evaluation means having a general overview of the information collected by the clients themselves, by the social and medical activities organized, by the round tables and by the workshops or surveys handled.

APRAD has designed a simple recording system to ensure adequate information in order to monitor and evaluate the projects with accurate data. In these terms we have created our own data base for registration of all data of clients frequenting the Centre. Also, the most important function of this system has been to record every previous exchange; identifying whether a person exchanging needles is a new client or someone who has previously visited the centre, recording how many of each item are distributed and received, recording how Hepatitis B vaccinations are done and how HIV rapid tests are executed.

We have designed also a daily list in order to register all the clients (new or not) frequenting the centre per day, and below each IDU is given the number of sterile syringes taken and the used ones brought back, and also the condoms distributed. This allows us to record how many IDUs access the services (number of new clients), number of visits (new or regular clients), number of needles and syringes given out (with separate categories for all other items such as condoms, leaflets, sterile water, filters, tourniquets), and the number of needles and syringes received for safe disposal. The exchange rate can also be calculated from these figures (divide the number of needles and syringes given out by the number received: express as a percentage). Other information can assist us to see whether we are reaching drug users in different parts of the city, of both sexes, etc.. Every Friday the multidisciplinary team gathers together to discuss the difficulties faced, the new cases and the possibility reaction in the days after. APRAD has also implemented weekly and monthly reports to have an accurate information on the clients, on the services offered, on the activities organized.

Rezarta Meneri, APRAD (Albanian Association for Prevention and Rehabilitation from Aids and Drugs), Albania

6 Evaluation

The functions of evaluation are mostly defined as learning and accountability. Evaluations almost always serve both these purposes to a degree, but there will be differences in emphasis. Learning and accountability are important aspects of how you use the results of your evaluation. The degree to which they dominate the agenda of any evaluation, has implications for the design of the evaluation itself.

Evaluation quality has traditionally been equated with the quality of the methodology, again reflecting an aspiration to be ‘scientific’. Some people argue that evaluation is only as good as its usefulness, as they observe many good quality evaluations end up in the bottom of the drawers of the desks of executive decision makers. In response to this an interest in ‘utilisation’ is developing[7]. Like monitoring, evaluation is at best a form of applied research in support of management and its future as a credible tool for organisational change depends largely on finding ways to make them more useful to managers. In this section, we will briefly look at some of the dilemmas and discussions around different types of evaluations and the implications for design and use.

6.1 Internal or External?

One of the most common discussions is about whether an evaluation should be internal or external. For instance, if we would like to evaluate a project of which the management responsibility is with the project coordinator and the implementation team, an external evaluation is undertaken by anyone who has no direct or formal responsibility for achieving the objectives of the project.

The following diagram allows you to explore some of the factors that play a role in this discussion. In essence they can be related back to the dynamics of the two main functions of evaluation: learning and accountability[8].

Evaluation function or purpose	Management Responsibility	Evaluation Type
Learning Participation Ownership		Self evaluation or internal debate
	Internal	Facilitated self evaluation or workshop
	External	Evaluation by advisor, peer review.
Audit Independence Accountability		Fully external evaluation or research

Do: base your evaluation design on the purpose of the evaluation.

Don't: just hire an external expert, without exploring whether you really need one.

If an evaluation is commissioned to give account of how money was spent and to demonstrate that results were achieved as agreed between for instance an implementing organisation and a funder, the tendency will be more towards external evaluation. In its most extreme form an external (health) auditor will go through the books and reports and tick off previously agreed criteria. There will be less need to participate in the implementation of the evaluation for the subjects, other than as sources of information. After all, they have already agreed on performance criteria beforehand.

Another reason to involve external experts is when you lack the technical expertise or you would like to solicit a 'second' opinion. This is fine as long as the evaluation's scope is on the technical aspects. If you include management or policy issues, you will need to make sure that the external expert understands the limits of your mandate, management style and organisational culture. This is why many organisations prefer a combined internal/external approach.

Remember that evaluations are there for learning something about your work. There are different types of evaluation, ranging from complex, multi-facetted studies, involving expensive experts, using huge data sets to simple, after-action self evaluations without external input, other than the originally agreed plan.

Do: keep it simple: opt for self evaluation and be conscious about complex studies.

Ensure that self evaluations don't become self justification exercises, without much critical content.

We usually do external evaluations only if we are asked to do so. Audits, supervision and simply external evaluators are a luxury and an NGO can not allow to do it regularly. Pressure for monitoring and evaluation comes in a majority of cases from external side (donors), but we have also found ourselves in such critical situations that we asked for external help and evaluation. We experienced a problem when we hired a new nurse. To find a nurse with social empathy for sex workers was very difficult. There were many discussions in the team because of this situation and we asked for external help and paid nice money for this help. This external evaluator provided us with the space for less emotional and more constructive discussions and the possibility to create a future for the whole team. When you are in crisis and also if you are for example underestimating or do not recognise real danger, it is time for an external evaluator.

Hana Malinova, Bliss without Risk, Czech Republic

6.2 Qualitative or Quantitative?

Evaluation is often associated with 'measuring', implying a quantitative (numbers) exercise. Findings that can be indicated in a quantified way are perceived to be more robust and more convincing in the eyes of some decision makers. Data need to be collected and analysed.

However, data collected in resource poor and complex environments need to be looked at with care. Even if we are not trying to scientifically prove anything, we still need to consider the reliability and accuracy of the basic information. In addition to this, factors influencing human behavioural change interact in a complex way, making attribution a precarious exercise.

People's perceptions can be a legitimate measure and perhaps describe more accurately changes in human behaviour, than quantitative data do. But the main problem with qualitative methods and information is a perceived lack of rigour. In order to make qualitative analysis more robust a strong degree of discipline is required in open ended interviews, random visual observations and ad hoc communications. One way of doing this is to base the methodology design on triangulation.

It can be very illustrative to include personal stories of people living with HIV next to figures. Anecdotal information can be a very powerful illustration of dry numbers. In the end we are talking about people and their needs.

Do: triangulate qualitative and quantitative sources of information and methodologies.	Don't: rely on just one source or type of information: always verify.

6.3 Evaluation Criteria

Evaluations go further and deeper in their analysis and reflection, than monitoring. In order to give some guidance to this process, OECD-DAC developed criteria[9], which have been largely adopted by evaluation experts.

Relevance

This is about the extent to which your activities are consistent with your organisation's policies, working principles and strategic aims. Relevance also refers to the question whether the project, programme or policy addressed the needs of the target population. In evaluating relevance, it is useful to consider the following questions:

- To what extent are the objectives of the programme still addressing the needs of the population
- Are the activities and outputs of the programme consistent with the organisations policies and mission statement?
- Are the activities and outputs of the programme consistent with the intended impacts and effects?

Effectiveness

Effectiveness is a measure of the extent to which your activities achieve your stated objectives. In the logical framework this is about the relation between activities, specific objectives and project purpose. In evaluating the effectiveness of a programme or a project, it is useful to consider the following questions:

- To what extent were the objectives achieved?
- What were the major factors influencing the achievement or non-achievement of the objectives? (attribution)

Efficiency

Efficiency measures the outputs in relation to the inputs. Originally, it is an economic term, signifying that the objective is achieved, for the lowest possible cost. An evaluator would normally compare alternative approaches to assess whether the work was undertaken in the most efficient possible way. As we will see, in the logical framework the focus is on the relationships between costs (budget), inputs and activities. When evaluating the efficiency of a programme or a project, it is useful to consider the following questions:

- Were activities cost-efficient?
- Were objectives achieved on time?
- Was the programme or project implemented in the most efficient way compared to alternatives?

Impact

Impacts are the positive and negative changes produced by your work, directly or indirectly, intended or unintended. In the logical framework the focus is on the overall objective. Impact evaluation involves the main effects resulting from the activities on the overall aims of the health system, including the activities of other stakeholders in term of reducing HIV/AIDS mortality or improving the quality of life of those infected with HIV (see next section). The examination should be concerned with both intended and unintended results and must also include the positive and negative impact of external factors, and on groups other than the target population of the project. When evaluating the impact of a programme or a project, it is useful to consider the following questions:

- What has happened as a result of the programme or project?
- What real difference has the activity made to the beneficiaries?
- How many people have been affected?

Sustainability

Sustainability is concerned with measuring whether the benefits of an activity are likely to continue after donor funding ends. When evaluating the sustainability of a programme or a project, it is useful to consider the following questions:

- To what extent did the benefits of a programme or project continue after donor funding ceased?
- What were the major factors which influenced the achievement or non-achievement of sustainability of the programme or project?

Programmes should consider all aspects of evaluation. Unfortunately, evaluation processes most often are being performed in a "planning-completion" manner. The character of the programme will determine which aspects of evaluation should be the most important.

If for example it is a simple, short-lasting educational programme, which is being realized with the aim of improving the information level, then relevance, effectiveness, as well as efficiency are of primary importance. Those are the programmes which are focusing to satisfy specific needs of the target groups. It is important to identify whether the real needs are identified, and if the way of fulfilling these needs is adequate. For example, if the long-term education of professionals for everyday growing problems is to be performed, then cost-efficiency is not achieved. However, when talking about intervention programmes in the community, the most important issues are:

** Impact: what has happened as a result of the programme. How the situation has changed for the target group and if any measurable effect (influence) has been made.*

** Sustainability: the possibility of programme continuation, even beyond the end of funding.*

Dragan Ilic, JAZAS Belgrade, Serbia

6.4 Logical Frameworks and Evaluation

Evaluations can take place at many levels. The logical framework is a useful tool to differentiate and to clarify some of the terminology.

An overall objective is an outcome of the work by a group of actors (e.g. ‘the health sector’) and impact is measured at this level. These actors contribute to the overall objective. Sometimes impact is defined in even broader terms, for instance ‘a healthy nation’, ‘well being for all’, ‘a fairer world’ or ‘an end to suffering and indignity’: mission statements, focussing on the broader aims, which not one single actor can be held responsible or accountable for. Indicators at this level are known as ‘impact indicators’. Achieving other objectives of high degree of complexity (e.g. reducing AIDS mortality) is also commonly referred to as ‘impact’. Impact evaluations mostly require a team of (technical) experts.

Evaluations of the project purpose typically focus on the responsibilities of one particular actor. Indicators at project purpose level and known as ‘output indicators’. A typical and classic example is an End of Project Evaluation. Mid term evaluations also often focus on the project purpose, although policies are also often time-bound and hence can also be evaluated prior to the expected end. This might generate recommendations to steer a project in the right direction, prior to the expected end.

Output evaluations focus at the ‘specific objective’ (‘result’) level. Specific objectives mostly concern the various technical components of a project and hence look at the performance of a technical aspect of the project. These are measured by ‘output indicators’. These types of evaluations can be more easily undertaken by the implementing team, a self evaluation or an ‘after action review’, with or without the help of an external facilitator.

Impact evaluations are often complex and expensive, and perhaps less needed on a regular basis. Again, those actors who possess the resources to see what the collective effect is from a range of stakeholders would be the most logic donor and commissioner of impact evaluations.

7 Concluding Remarks

Monitoring and Evaluation are to a large degree common sense activities. A lot of the mysticism and confusion stems from existing definitions acquiring new meaning, due to the popularity of the disciplines. Monitoring and evaluation have been used to describe other processes in order to justify resources used for processes like Operational and Scientific Research, Assessments, Explorations, Reviews, Staff Appraisal, Audits etc. It is important to stay close to basics in order to make monitoring and evaluation useful and meaningful.

There are a few important issues to take away with you:

It is important that NGOs use common concepts, language and definitions, when referring to monitoring and evaluation in order to reduce confusion and facilitate communication. For this guide, we have chosen OECD terminology, in order to facilitate one important purpose of a monitoring and evaluation system: accountability to your funding agency.

It is important to be aware and explicit about your (organisation's) responsibilities. You need to protect yourself against unfair accountability through monitoring and evaluation. Donors, authorities and NGOs all have their own role to play and it's important that they each recognise their own and that of their partners. A stakeholder-inclusive planning process can help.

It is equally important to collaborate with your partners in monitoring and evaluation and planning. This not only helps clarifying responsibilities, but also creates ownership, clarity and respect for each partner's unique and distinct role. Indicators measure the combined effect of the actions of all other stakeholders and cannot be used to hold a single actor accountable for the outcome of the actions of all.

It is important to be systematic in your approach. For this guide we have chosen the logical framework as a system. It allows for differentiation between various types of evaluations, but also link monitoring and evaluation to an inclusive planning exercise, bringing actors together around a commonly agreed set of objectives.

Evaluations can be very costly, so some NGOs will have to prioritise very carefully and devise a low cost learning strategy. At the minimum level NGOs should review their project purpose and specific objectives, regularly. This does not necessarily need to involve expensive consultants. Self evaluation (possible facilitated by an external person) is a perfectly legitimate way of learning. If there are more stringent accountability requirements requested by donors, make sure that you include the costs in your project proposal.

Monitoring is not just a numbers game. Personal stories and other qualitative illustrations can greatly enhance the value and contextualise quantitative monitoring information.

We believe that monitoring and evaluation must be an essential part of all major activities in the field of public health. And it is crucial for achieving the goals of the HIV epidemic response, decreasing the rate of growth of the epidemic and improving the quality of life of PLHIV. The Russian NGO 'Community of PLHIV' works in four major fields in terms of monitoring and evaluation:

** Monitoring and evaluation of governmental activities in the field of HIV/AIDS on national and regional levels (national strategy, law, funds, standards, protocols etc.)*

At present there is no national strategy to fight HIV/AIDS and no national treatment protocols. Some decisions made by the governing structures during the last year contradicted the interests of patients. Thus monitoring and evaluation of national activities to fight HIV/AIDS and response to those activities is a matter of concern. We work as a watchdog conducting an "unofficial" monitoring of the governmental decisions and activities, their quality and use of funds in terms of human rights and interests of patients, involving where necessary, relevant public authorities.

** Monitoring and evaluation of existing services for PLHIV and risk groups at the national and regional levels*

National mechanisms of monitoring and evaluation in the field of HIV/AIDS-related services are weak and not transparent. Feedback from recipients of the services can be a powerful instrument of assessing the effectiveness and the quality of services. Information about services is gathered through the network of community-based organisations. Though by now this work is not done systematically and mechanisms for this kind of monitoring and evaluation are not fully integrated, monitoring and evaluation of available services is one of the four strategic objectives within M&E activity.

** Internal monitoring and evaluation of resources that Russian community-based organisations have and effectiveness of their use.*

Internal monitoring and evaluation of resources and activities of the network of patient organisations are important for making those activities as effective as it is possible.

** Monitoring and evaluation of project activities realized by partner organizations and progress within the terms and conditions of concrete projects.*

Sergey Smirnov, Community of People living with HIV, Russian Federation

8 References and Links

- In addition to the references below, these are some useful links:
- Guidelines for effective use of data from HIV surveillance systems (2004)
  http://data.unaids.org/Publications/IRC-pub06/JC1010-UsingData_en.pdf
- Guidelines for Second Generation HIV Surveillance
  http://data.unaids.org/Publications/IRC-pub01/JC370-2ndGeneration_en.pdf
- Guidelines on construction of core indicators (2005)
  http://data.unaids.org/publications/irc-pub06/jc1126-constrcoreindic-ungass_en.pdf
- Intervention mapping
  www.interventionmapping.nl
- Strategic Information/ Monitoring and Evaluation Field Officer Website
  http://www.globalhivevaluation.org/
- The “Three Ones” in action: where we are and where we go from here
  http://data.unaids.org/publications/irc-pub06/jc935-3onesinaction_en.pdf
- Fulfilling reproductive rights for women affected by HIV/AIDS
  A tool for monitoring
  http://www.ipas.org/publications/en/MDGHIV_E06_en.pdf
- “There’s nothing you could do if your rights were being violated”, Monitoring Millennium Development Goals in relation to HIV-positive women’s rights
  http://www.ipas.org/publications/en/MDGMON_E06_en.pdf

A compilation of interesting documents is included in the reader on monitoring and evaluation that was prepared prior to the European best practice seminar last November. You can download the reader at:
http://www.aidsactioneurope.org/uploads/tx_windpublications/Reader_M_E_Seminar.pdf

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[1] Mission Statement on AIDS Action Europe’s website:
http://www.aidsactioneurope.org/fileadmin/files/About_us/organisational_documentation/aae_mission_paperdec05_eng.pdf
[2] http://www.searo.who.int/LinkFiles/Strategic_Alliance_and_Partnerships_7a_The_Three_ones_in_Action.pdf
[3] http://www.who.int/gb/ebwha/pdf_files/EB117/B117_12-en.pdf
[4] http://www.oecd.org/dataoecd/29/21/2754804.pdf
[5] WHO, UNAIDS, The Global Fund, USAID, US Department of State, OGAC, CDC, UNICEF, MEASURE Evaluation and the World Bank: Monitoring and Evaluation Toolkit for HIV/AIDS, Tuberculosis and Malaria. Second Edition, January 2006 (ISBN 92-9224-029-3)
[6] For more information see: Michael Quinn Patton: Qualitative Research and Evaluation Methods
(ISBN 0-7619-1971-6)
[7] Recommended reading: Michael Quinn Patton’s classic: ‘Utilization Focused Evaluation’
(ISBN 0-8039-5265-1)
[8] Peter Giesen: UFED
[9] http://www.oecd.org/document/22/0,2340,en_2649_34435_2086550_1_1_1_1,00.html