

Always room for improvement? Inter-agency guidelines for M&E

by Tom de Veer

When water supplies cannot be guaranteed, refugees are dying, and more are fleeing into the camps every day, how can the development of guidelines for monitoring and evaluating agencies' sanitation programmes be a crucial exercise in saving time and lives?

IMMEDIATELY FOLLOWING THE genocide of 1994, fleeing Hutus — mainly women, children, and the elderly — too weak to cross Rwanda's border, settled in refugee camps in the French military (later UN)-protected zone. One of the camps, Kibeho, had 60 000 inhabitants, rising to 100 000 after three months; Ndagò sheltered approximately 20 000 people, which rose to a figure of 45 000.

By early 1995, when the author began working in the camps for Oxfam, the sanitation programmes had monitoring systems in place which included the measurement of indicators such as the number of latrines produced and used; camp population size; and the number of deaths. In addition, programme managers and hygienists checked — but in an unstructured way — on levels of cleanliness and open defecation. The health and sanitation situation appeared to be acceptable: mortality rates were low and decreasing, while latrine coverage remained stable at around 1:50 people.

Questions

Some questions remained unanswered, however:

- Mortality rates were low, but how could one determine the extent to which sanitation programmes contributed?
- Could the results be achieved more efficiently?
- Was the work being done back in programmes' country offices and headquarters efficient?

There were other information needs in the camps: were programme staff properly protected when spraying against vectors? Was the distribution of materials efficient and theft-proof? What material and human

resources were available as contingency measures, and how long would it take to put these into action? These concerns only related to daily programme-management — additional information was necessary for accountability to donors, for adapting organizational procedures and structures to field conditions, and for improving future programmes.

Developing indicators

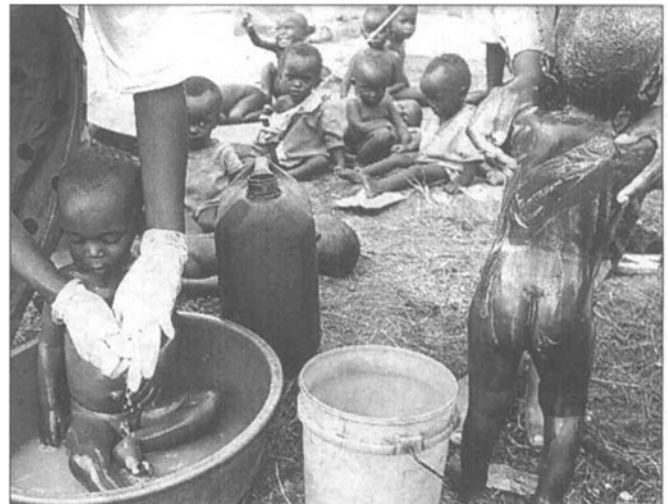
In persuading Oxfam to authorize the development of an improved monitoring and evaluation (M&E) system — to be experimented with in the sanitation programmes, it was argued that an improved monitoring and evaluation system would benefit the

programmes and, once installed, was likely to save time, while the

knowledge and experience built up should have positive repercussions for M&E in future programmes.

Lists of indicators for each part of the programme, and experiments were set up for measurement. The goal was not only to look at which indicators should be measured, but also to assess what was practically possible, given the limited time and resources available. It became obvious that several indicators needed adapting — while others were not significant. For the sanitation programme, the final monitoring system incorporated the following indicators, which were reported on every week:

- distances travelled by cars and trucks and their fuel consumption;
- financial, materials, and equipment administration (including cross-checks to uncover theft);



Bath-time for children in Goma.

Jenny Matthews

Lack of information on hygiene behaviour — an example

From the information available, it was impossible to determine whether hygiene education within the camp was effective. Were the messages the right ones? Were they being transmitted effectively? The only way to find out was to learn more about people's behaviour, but hygiene indicators were not measured in the camp and there was no baseline information about their original behaviour. Perhaps the staff's efforts had little effect, which would mean a waste of time, effort, and money, as well as a missed opportunity to enable people to improve their hygiene behaviour in the long-term.

- number of female and male staff;
- number of camp inhabitants;
- mortality rates;
- morbidity rates for the worst sanitation-related diseases;
- number of latrines produced and in use;
- hygiene-behaviour observations by hygienists (irregular, unstructured, and highly subjective, but still useful. For example, most hygienists believed that, despite their efforts, hardly anyone washed her or his hands after going to the toilet);
- general camp cleanliness; and
- the amount of time that programme staff spent on

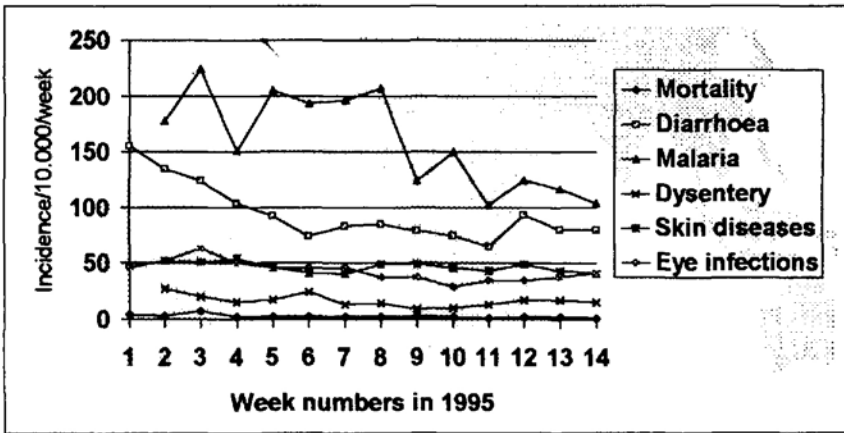


Figure 1 shows the steady drop in deaths and sickness in the camps.

providing hygiene education, and being trained to improve their skills.

Figure 1 shows clearly that the incidence of death and disease were low, and decreasing. But there were no standards to judge against. Standards for mortality were obtained from an Oxfam publication.¹ Due to lack of time and knowledge, indicators on vector control (how does one measure the efficiency and effectiveness of spraying, what are the quality standards?); solid-waste; hut, road, and waterpoint drainage; hygiene behaviour; safety for spraying; contingency issues; and the hygiene of cattle-slaughtering could not be included.

Figure 2 shows that, as more and more people moved into the camp, the staff:refugee ratio declined. Because the programme activities appeared to keep step, the indications are that the programme was becoming more efficient.

Findings

- A lot of the information needed to manage the programme on a daily basis does not merit reporting, for example the amount of fuel used for pumping water.

- The most time-consuming part of the programme manager's M&E responsibilities is processing the data for reporting; the actual measurement was largely done by programme staff. Initial M&E training also requires a substantial input from the manager, and monitors must be monitored.

- Once the system was reasonably well developed and staff had some experience, much of the information reached the programme manager

almost automatically, ensuring a rapid reaction.

- Several important indicators took time and energy to measure, for example, counting the camp population, while other indicators, such as fuel use, were easy to measure.

- It was concluded that programme managers needed a management tool to guide them in setting up an adequate but easy M&E system for countering problems, saving time, and increasing efficiency.

Crisis management

An emergency situation arose in April 1995, when Rwandan soldiers entered

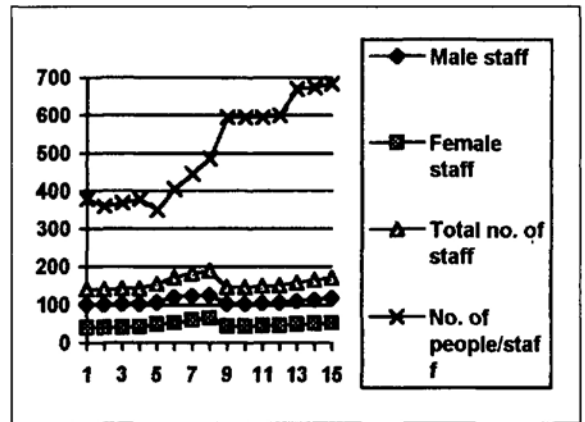


Figure 2. Although the staff/refugee ratio population decreased, the quality of services would appear to have remained high.

the camps and herded people into very small spaces with few water and sanitation facilities. Local staff were prevented from working, so three Oxfam engineers had to organize water provision for 250 000 people. For the six-day occupation, there was only time to provide water; sanitation was not attended to. Any longer, and there would have been mass epidemics.

This experience did ensure, however, that the indicators which could and should be measured in crisis situations were decided on: the amount of water delivered, its turbidity, and residual chlorine levels. If the occupation had continued, however, a major effort would have been needed, both to step up activities to relieve the people's needs, and to measure more indicators about water use — although the water delivered was relatively clean, it became contaminated by dirty containers, by people walking in the remains of storage tanks, and through unhygienic handling. Water quality and



A soldier looks on as Rwandan refugees queue for the tapstand. When a new emergency arises, sanitation programme staff have no choice but to concentrate on maintaining water supplies.

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quantity parameters must be monitored in an emergency.

Self-assessment

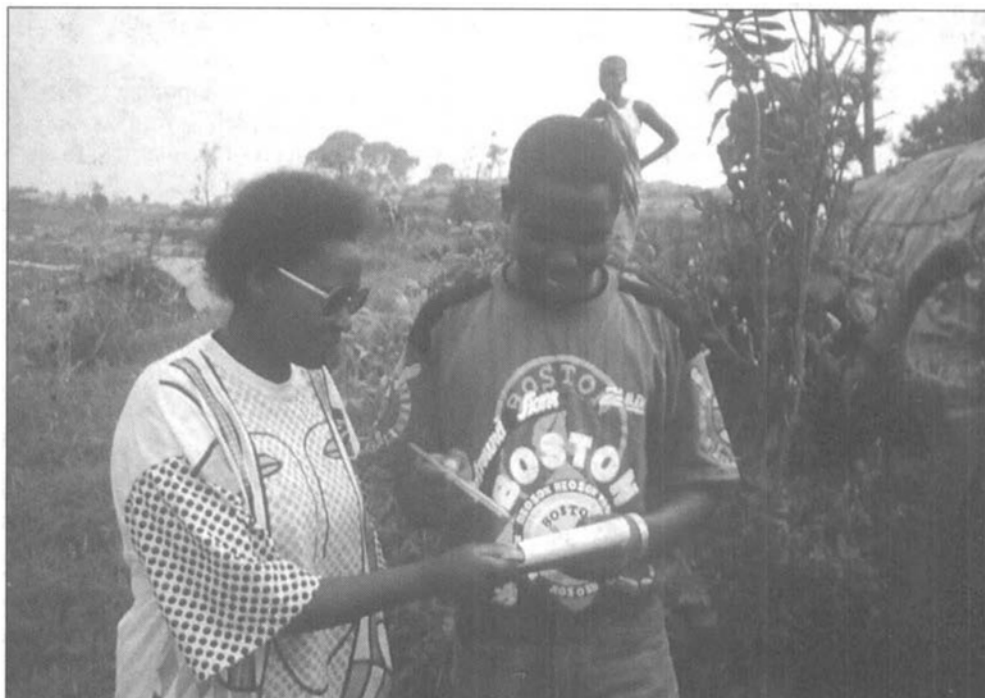
Between November 1995 and May 1996, the author worked with 12 agencies — Oxfam, MSF-Holland, MSF-France, DRA, ECHO, ODA, RedR, ICRC, IFRC, Unicef, UNHCR, and AICF — to determine what further developments were needed: what M&E and sanitation systems did they use? What were their ideas and beliefs? What developments did they want? The assessment comprised a review of relevant literature, a questionnaire completed by each participating organization, an analysis of guidelines and evaluation reports from several of the agencies, plus individual feedback. The main findings were:

- In camps, many factors hamper the proper execution of M&E, in particular the lack of time, and insecurity. But there is considerable room for improvement, including raising staff awareness, motivation, and skills, for example, through training staff in or employing those with skills in the 'social' side of W&S; improving management tools for M&E; introducing structural methodologies for programme planning, and improving organizational structures to optimize the use of available information.

often include formats for reporting. They all contain valuable information, although many are fairly general. Many also have a high abstraction level. Several guidelines included lists of indicators covering parts of the information needed for daily management and programme evaluation, and

by an organization is quickly gaining importance in business and, in many cases, certification such as ISO 9000 is demanded by clients: a trend soon to arrive in the 'aid business'?

- People still have little experience of subjects related to the M&E of W&S programme in camps, for example, the



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Evaluation will improve if fieldworkers are suitably skilled, and trained appropriately.

were used as the basis of an initial outline of specific generic guidelines on the M&E of W&S programmes in camps, included in the final report.

- Donor agencies' guidelines for funding applications contain M&E and reporting conditions. These are often

M&E of 'efficiency' and 'sustainability' and hygiene behaviour.

- Many of the reports contained important programme information. It was clear that different kinds of report reviewed different programme aspects, and in varying detail.

- The use of information needs attention. This could be done by improving or implementing certain organizational structures/procedures, such as measures to ensure optimum report use, and introducing mechanisms for continuous assessment of the appropriateness of existing organizational structures on the basis of available information. These are important at all levels.

References

1. Mears, C., and Chowdhury, S., *Health Care for Refugees and Displaced People*, Oxfam Practical Health Guide No. 9, Oxfam, Oxford, 1994.
2. A tool for programme development that, if properly used, can form a basis for the evaluation process.

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Monitoring and evaluation: the agency recommendations

- Develop simple, clear, and comprehensive monitoring, evaluation, and reporting guidelines specifically for water and sanitation in camps, based largely on existing guidelines, and staff experience and know-how. If possible, the implementing, donor, and support agencies will collaborate on collating the information, which should be supplemented by additional investigations where needed, and the results field-tested. One organization could act as co-ordinator.

- Develop training courses on monitoring, evaluation, and reporting for staff of implementing and donor agencies.

- Employ staff with water and sanitation expertise, who have the necessary 'social' skills in participation, hygiene education, and monitoring, evaluation and reporting. For implementing agencies these criteria should apply to fieldworkers, while donor agencies may require appropriately skilled staff both in the field and in their offices.

- Proper planning is imperative — some organizations have useful experience of structural methodologies such as the Logical Framework Analysis.²

- Almost all organizations have and/or use some M&E guidelines, which also

quite general, however, and could be further specified.

- M&E can also be looked at in a larger context: quality control. The introduction of formal quality-control structures for all processes executed