

INDICATORS FOR CHANGE

**DECENTRALISED POVERTY MONITORING AND
EVALUATION:**

**AN OPERATIONAL
MANUAL FOR DISTRICT ASSEMBLY
AND REGIONAL STAFF**

Prepared by the

**Regional Planning & Coordinating Units
Of Upper East, Upper West & Northern Regions as part of the
District Capacity Building Project of the
Ministry of Local Government and Rural Development
and the
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ABBREVIATIONS

CSC	-	Community Score Card
CSO	-	Civil Society Organization
CRC	-	Citizen Report Card
DBO	-	District Budget Officer
DA	-	District Assembly
DCD	-	District Coordinating Director
DCE	-	District Chief Executive
DDMCI	-	District Development Management Capacity Index
DFO	-	District Finance Officer
DISCAP	-	District Capacity Building Project
DPCU	-	District Planning and Coordinating Unit
DPMG	-	District Poverty Monitoring Group
DPO	-	District Planning Officer
FGD	-	Focus Group Discussion
GE	-	Gender Equality
GES	-	Ghana Education Service
GDO	-	Gender Desk Officer (District Level)
GPRS	-	Ghana Poverty Reduction Strategy
GSS	-	Ghana Statistical Service
M&E	-	Monitoring and Evaluation
MLGRD	-	Ministry of Local Government and Rural Development
MOFA	-	Ministry of Food and Agriculture
NCWD	-	National Council on Women and Development
MDAs	-	Ministries, Departments and Agencies
NDPC	-	National Development Planning Commission
NDAP	-	National Decentralization Action Plan
NGO	-	Non-Governmental Organization
PA	-	Poverty Assessment
PO	-	Partner Organizations

PPM&ED	-	Policy, Planning, Monitoring and Evaluation Division (Ministry of Food and Agriculture)
RCC	-	Regional Coordinating Council
REPO	-	Regional Economic Planning Office
RPCU	-	Regional Planning and Coordinating Unit
RPMG	-	Regional Poverty Monitoring Group
SWOT	-	Strengths, Weaknesses, Opportunities and Threats
ToR	-	Terms of Reference

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1 INTRODUCTION

This Manual has been designed to be a practical guide to the implementation of a Decentralized System for Poverty Monitoring and Evaluation. It provides you with guidelines and tools for carrying out decentralized monitoring and evaluation of poverty reduction in your District and Region.

Who are the Partners?

This Guide has been prepared by the Regional Planning and Coordinating Units (RPCUs) of the three Northern Regions, as part of efforts to operationalize the National system for monitoring and evaluating the Ghana Poverty Reduction Strategy, under the auspices of the National Development Planning Commission (NDPC). Technical assistance and training for the completion of this Manual has been provided by District Capacity Building Project (DISCAP), an initiative that aims to strengthen governance for poverty reduction and water supply management in the 24 Districts of Ghana's three Northern regions: Upper East, Upper west and Northern¹. The Institute for Local Government Studies (Tamale campus) and the National Development Planning Commission (NDPC) contributed to the conceptual thinking and the delivery of the first training module during which the framework for this manual was developed.

The Decentralized M&E System aims to engage Districts in a monitoring and evaluation exercise that will measure their progress in poverty reduction efforts. The System has 3 components:

- ☑ ***Status of Poverty*** – This component will measure the progress of Districts on 20 core indicators that have been identified as the primary indicators to measure achievements related to the GPRS. Implemented primarily by the Districts this component will give a snapshot of these indicators on an annual basis, and over time provide a record of achievement for each District. It will also identify those key issues that are affecting a District and allow for specific programming to be undertaken that will address the gaps. As well as providing information to NDPC regarding progress on the GPRS, the data collected will be incorporated into the District's planning process allowing for targeted efforts that recognize the difference between Districts.

- ☑ ***Regional Harmonization of District Status of Poverty Reports and Assessment of District Development Management Capacity*** – This component provides guidelines for the Region to collate, harmonize and present the District Status of Poverty Reports to NDPC. Key information will be pulled from these reports and presented to NDPC, thus presenting a Regional picture of development. In addition, Regions will also engage in an assessment of District Development Management Capacity. This assessment will look at different components of the DA to determine what performance gaps, if any, exist. Over time, the Region will be able to utilize this information to guide interventions and harmonize capacity building efforts, ensuring that Districts receive the specific training necessary for their situation as opposed to an approach where all Districts receive the same training.

¹ DISCAP is funded by the Canadian International Development Agency and the Ministry of Local Government and Rural Development and is overseen by a project steering committee composed of regional partners and stakeholders.

- ☑ **Community Assessment of Poverty** – The GoG, specifically the GPRS, has expressed its commitment to engaging citizens, particularly the poor, in discussions and planning around poverty reduction programmes. Giving a “voice” to the citizens of the country is a critical step in development planning, yet it is one that requires concerted effort and organization. The community assessment of poverty will engage citizens and communities in a discussion on poverty utilizing the Community Score Card approach. Communities will be given the opportunity to identify their own indicators and rate them in a specific sector. They will engage in an interface meeting with the service provider and other stakeholders to discuss the findings and develop strategies for the way forward. This information will inform District development planning, and will be reported to the Regional and National levels.

While this guides have been prepared for Districts and Regions in Ghana’s North, it is fully in line with National standards set out in the Government of Ghana’s National Decentralization Action Plan and the National Development Planning Commission’s guidelines for decentralized monitoring and evaluation of the Ghana Poverty Reduction Strategy (GPRS).

Before we get started, here are answers to some basic questions you may wish to ask.

1.1 Questions and Answers About The Manual

1.1.1 What Is the Purpose of This Manual?

The purpose of the manual is to guide the staff of District Assemblies and Regional Coordinating Council, their Government colleagues and partners in civil society, to assess progress in reducing poverty in their districts.

1.1.2 What Is Monitoring and Evaluation?

Monitoring and Evaluation (M&E) are terms that both mean judging the value or worth of ‘something’. In poverty reduction programs monitoring and evaluation assess over time the extent of change in key indicators of poverty, for example, of child malnutrition, educational prevalence attainment, extent of disease and general societal wellbeing. Monitoring usually refers to continuously assessing short-term change, while evaluation generally involves periodically conducting assessment of long-term change. The main purpose for monitoring and evaluation is to enhance **learning** and promote **accountability for development results**.

1.1.3 What Is New About The Manual?

- ◆ The first thing that is new about this Manual is that the M&E process is led by District Assembly staff. This role is consistent with Ghana’s decentralization and poverty reduction policies. Regional government staff harmonize M&E efforts across Districts, focusing on more strategic issues, and provide a link with central government.
- ◆ Second, these Manuals build on a common set of poverty indicators for the whole country as developed for the Ghana Poverty Reduction Strategy, and is the first effort in the country to operationalize the guidelines set out by NDPC.

- ◆ Third, another set of qualitative indicators assess the management and accountability performance of District Assemblies and their administrations. Continuously assessing this capacity is crucial to the success of decentralization and poverty reduction.
- ◆ Finally, the manual also provides District staff with guidelines and tools for local government officials to work with civil society organizations and communities to produce community “score cards” on District level poverty reduction and management.

1.1.4 Why Monitor and Evaluate Poverty?

District and Regional government personnel always have many responsibilities and heavy workloads. However, there are six important reasons for allocating time and resources to poverty M&E:

1. It is **National policy**. Ghana’s decentralization, poverty reduction and development planning policies for the country as a whole mandate District Assemblies and the Regional Coordinating Councils to coordinate decentralized M&E;
2. By tracking the results of development interventions, and identifying areas of need among citizens, M&E help local governments to **plan and manage their medium-term development priorities and programs more effectively**.
3. The nature of poverty is local; individuals and households experience it directly. **District Assemblies are the best-positioned units** in today’s decentralized governance system **to assess and respond to poverty at the local level**.
4. Districts can **negotiate more financial resources** from both central government and external agencies, by using M&E to **demonstrate achievement, outstanding issues and needs in poverty reduction**.
5. **M&E shows citizens that local government is being professional and accountable**. M&E data enables Districts in particular to respond, and to be seen to respond to citizen concerns.
6. **Citizens have the opportunity to express their views** on the performance of government, and exercise their demand for accountability from their local government.

1.2 Outline of the Manual

As mentioned above *Indicators for Change* has four sections. The sections have been designed so that they provide practical steps to guide stakeholders through the M&E process. Section 2 specifically targets the role of DAs, Section 3 targets the Regional stakeholders, and Section 4 targets the CSOs who will be carrying out the community assessment. The three are combined into this document so that all the stakeholders have an understanding of the National context, as well as the role and responsibilities of the other partners in the process.

For your first reading, we suggest that you start with Section One and work your way through all the sections. After you have reviewed the entire manual you can then select the parts that are most relevant to you. Then consult your District and Regional colleagues on next steps. After that, it is up to you to take action.

Section One outlines the National context for M&E. The goal of this chapter is to provide DAs with a background in M&E more generally, so that you can understand the role of local government in the entire process. The GPRS is discussed as well as guidelines presented by NDPC (2003) for Decentralized M&E. This Manual has built on those guidelines, adhering to National policy.

Section 2 outlines the processes involved at the District level, specifically the collection of data on the GPRS indicators, analysis of the data and integration of the results into the District Development Plan.

Section 3 presents guidelines for the RPMG in harmonizing District M&E Reports and assessing the management capacity of Districts to carry out poverty reduction programming (leading to the development of capacity building programs to fill any performance gaps).

Lastly Section 4 *outlines the methodology to be used for the community assessment* portion of the M&E exercise and is targeted towards implementing CSOs. Although the community assessment is to be carried out by CSOs the DA has a critical role to play, both as a participant and as a supporter in organizing the assessment.

Annex A contains tools that may be useful throughout the M&E exercise. Annex B presents sector specific District Development Management Capacity Indexes.

The Manual has been designed with you the reader in mind. All Sections have been designed to be user friendly and present different case studies, examples and tips to help you carry out your work. The hope is that M&E will become an integral part of the development planning process. The simplified presentation of the material is to make it as easy as possible, and to demonstrate that there are real benefits to M&E. Benefits that go beyond reporting requirements of external partners, and focus on the internal use of data to improve programming and reduce poverty.

Remember, M&E is only a useful exercise if you make it that way. Data and information are helpful only so far as you make them helpful. It is the analysis of the data, and what you do with it that is important.

Good Luck! And Have Fun!

2 DECENTRALIZED POVERTY M&E SYSTEM

This section is an outline of the context for M&E in Ghana. The aim is to familiarize the user with the national level strategy and policies in order to better understand the system being proposed at the District level. Here, the key policies that are guiding M&E, as well as the purpose of the Decentralized M&E System are presented. The institutional arrangements for decentralised M&E are discussed, including the NDPC proposed structures. The final chapter in Section Two explores gender issues in M&E.

2.1 Context of Poverty – Targeted Development

Ghana's current development strategy, *The Ghana Poverty Reduction Strategy 2002-2054*, seeks to enable Ghana to reduce poverty drastically and promote growth in critical poverty priority areas. Improved governance through the decentralization of authority and responsibility to the District level is a key element of the Government of Ghana's (GoG) development and poverty reduction strategy. According to this strategy, decentralization will involve the transfer of functions, powers, means and competence to the District Assemblies from the Central Government Ministries and Departments such that development becomes the shared responsibility of central government, local government bodies, parastatals, NGOs, communities and individuals.

With the decentralization of authority and responsibility for the planning and delivery of social services to the District level, DAs are being restructured for their new role. However, the new structures and operational guidelines have not been fully developed and tested. It is recognized by both government and donors that a concerted effort is required to strengthen institutional capacities and skills levels at the District level if District Assemblies are to effectively assume their expanded governance role. Equally significant has been the urgent requirement to strengthen the planning, coordination, monitoring and evaluation functions of the Regional Coordinating Councils (RCCs) and their corresponding secretariat, the Regional Planning Coordinating Units (RPCUs). This will prove particularly important for the monitoring of poverty reduction interventions in the Regions, Districts and Communities.

Box 2.1

Goal and Objectives of The GPRS (2003-2004)

The goal of the Ghana Poverty Reduction Strategy is "to create wealth by transforming the economy to achieve growth, Accelerated poverty reduction and the protection of the vulnerable and excluded within a decentralized, democratic environments" by:

1. Ensuring sound economic management for accelerated growth;
2. Increasing production and promoting sustainable livelihood;
3. Direct support for human development and the provision of basic services;
4. Providing special programmes in support of the vulnerable and excluded;
5. Ensuring good governance and increased capacity of the public sector; and,
6. The active involvement of the private sector as the main engine of growth and partner in nation-building.

Ghana Poverty Reduction Strategy Document

2.1.1 Towards an M&E System for GPRS

The present GPRS document refers to plans for a National M&E system and indeed the plan has been produced and circulated. National poverty indicators have been outlined covering all the sectors (with the exception of MOFA and Environmental Health which are yet to be included) that would constitute the core of the National M&E system. Recently, (in August) guidelines for a District-based M&E system were developed for discussion, in which twenty (20) indicators to be tracked at the district and regional levels are outlined. The main GPRS themes for which indicators are expected to cover are:

- Macro economic stability;
- Production and gainful employment;
- Human resource development;
- Vulnerable and excluded; and,
- Good governance.

There are two key National policies that the decentralized M & E system is designed to address. The first policy is the 2002 Ghana Poverty Reduction Strategy (GPRS). The goal of the GPRS is *"to create wealth by transforming the economy to achieve growth, accelerated poverty reduction and the protection of the vulnerable and excluded within a decentralized, democratic environment."*

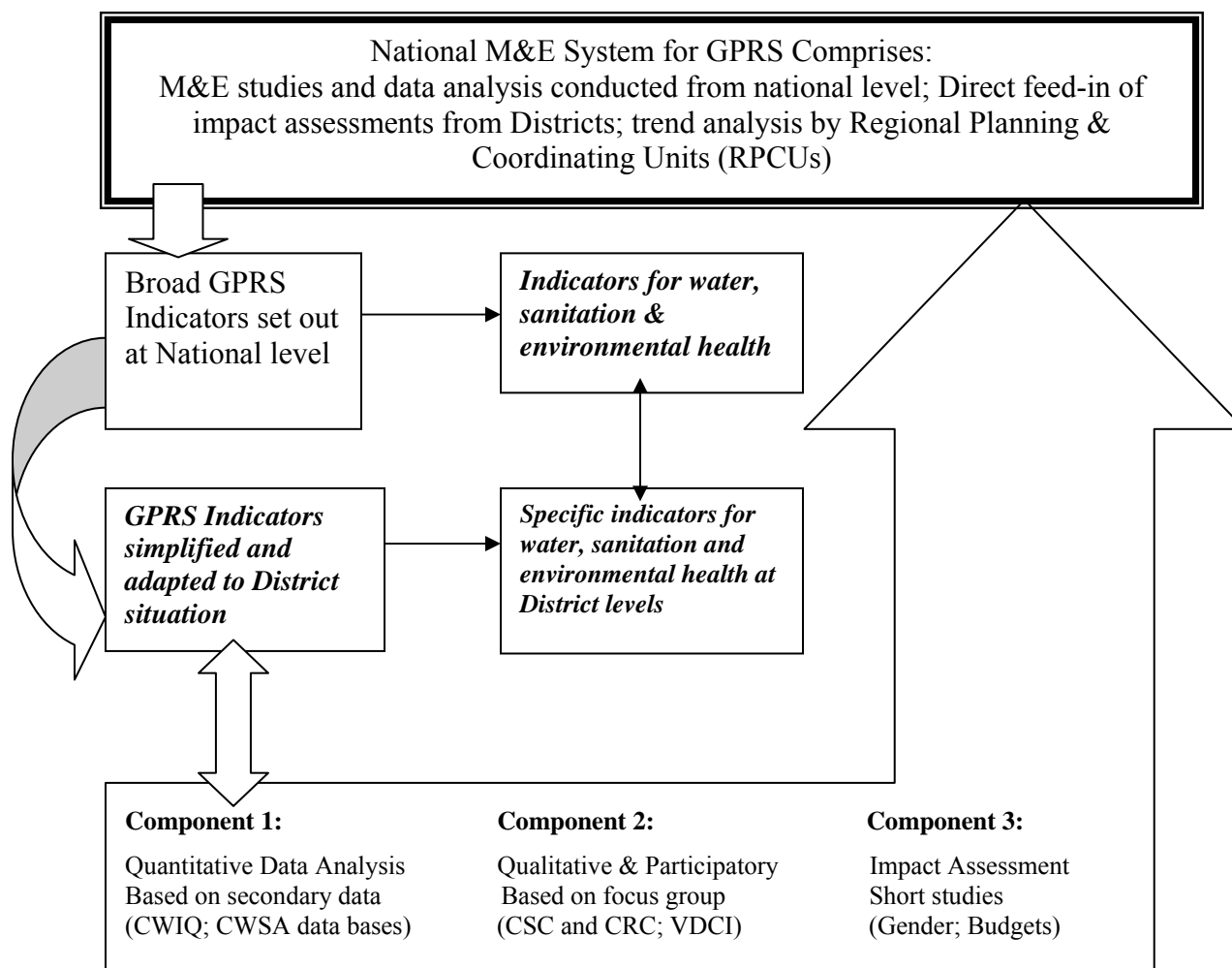
A strong and active role for local government is an important part of the Strategy. The GPRS advocates a vision for decentralization that promotes *"responsive and accountable governance at the local levels that allows effective participation, equity in resource allocation, and effective delivery of services, especially for the poor."* The GPRS process is further discussed in Chapter 3.

The second relevant National policy is that of the 2003 National Decentralization Action Plan (NDAP). Among other things, the plan aims to:

- support decentralization implementation and *monitoring*;
- strengthen *District-level financial management and accountability*;
- strengthen the *functional and governance performance of District Assemblies*;
- strengthen *decentralized coordination and monitoring and evaluation at the Regional level*;
- support the institutionalization of *popular participation in the planning and budget cycle*.

It is therefore in line with National policy that the RPCUs of the three Regions in Northern Ghana are presenting these Manuals to guide the process of implementing an M&E exercise at the District level.

Figure 2.1 Relationships and Flow of Information in Decentralized M&E System



2.1.2 Purpose of the M & E System

The purpose of the decentralized poverty monitoring and evaluation system is to help Regions and Districts to monitor progress on poverty reduction in their jurisdictions within a common National framework of indicators and reporting guidelines.

As the National Development Planning Commission has noted: "Monitoring is not an inspection, neither is it an audit or an inquiry; it is the process of assessing whether people are getting satisfactory services or not, to identify the problems and to provide solutions for the interest of the people. In all, M & E in the Districts provides District authorities, the government, development partners and the general public with better means for learning from past experience, improving service delivery, planning and allocating resources, and demonstrating results as part of accountability to key stakeholders." (NDPC: 2003)

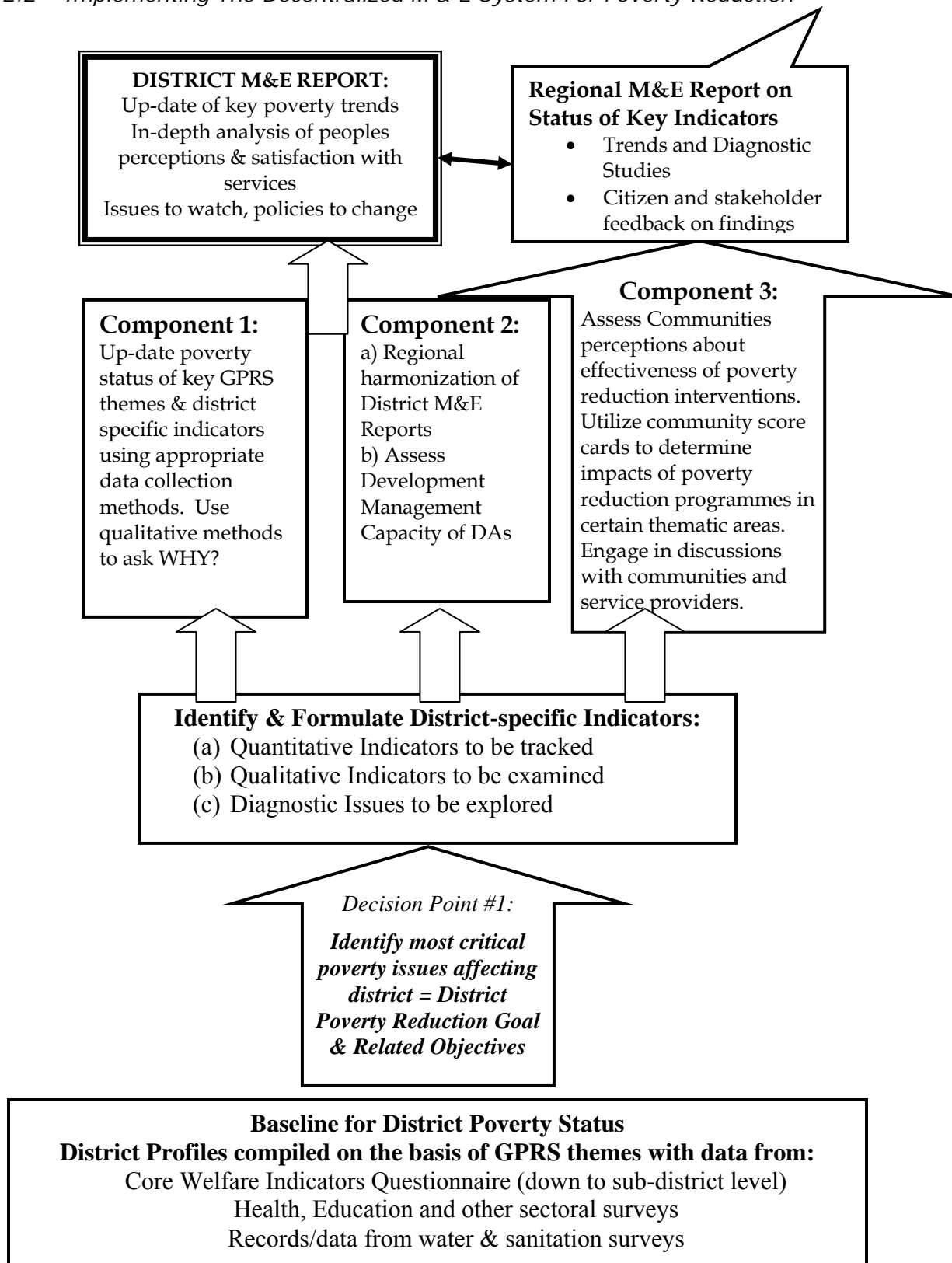
2.1.3 Components of the M&E System

There are three main components of the decentralized M&E system as it is proposed here:

1. ***Status of Poverty.*** This component consists of the following sub-components: 1.1) collection and reporting of a nationwide set of 20 “core indicators” associated with the GPRS to be tracked by all Districts; 1.2) compilation of a register of basic data on all poverty reduction interventions in the district; 1.3) production of a District profile summarizing demographic, socio-economic and infrastructure data for each District. Primary and secondary sources of data are to be used by Districts to fulfill National obligations. Among key sources of data are decentralized agencies of sector ministries, the Ghana Statistical Service (including its Living Standards Surveys and the National Census), donor agencies and non-governmental organizations.
2. ***District Development Management Capacity Assessments and Harmonization of District Status of Poverty Reports.*** Regions, Districts and the District Capacity Building Project will work together in the three northern regions of Ghana to carry out institutional capacity assessments of District Assemblies and their administrations in terms of their general development management capacity and also their financial management capacity. A tool called the District Development Management Capacity Index (D2MCI) will be used in this component. The results of this assessment will be used to enhance capacity building efforts at the District level. In addition, the Regions will be responsible for collating, harmonizing and presenting the District M&E Reports to the National level.
3. ***Community Assessments of Poverty Reduction Interventions and Services.*** Using participatory evaluation methods, and contracting out to locally based CSOs, Districts will support community assessments of the effectiveness and efficiency of poverty reduction interventions and services. Among the methods to be used in this component are “Community Score Cards” (CSCs) and participatory expenditure tracking, through the use of group interviews and focus groups, open-ended interviews and other qualitative tools.

Model 2.2 presents the process for decentralized M&E. The steps and decision points are outlined, the process incorporating the above 3 components within the decentralized M&E system. The model emphasizes both quantitative and qualitative data and shows how the two interact. Again this model demonstrates how information gathered at the District level is analyzed and then rolled up to the Regional and eventually National level. This process is discussed in detail in Section 3 of this document.

Model 2.2 – Implementing The Decentralized M & E System For Poverty Reduction



2.1.4 Institutional Arrangements for the M&E System

The institutional arrangements for the decentralized poverty M&E system involve three levels: a) the M&E Division of the National Development Planning Commission, b) the Regional Poverty Monitoring Group (RPMG) established and coordinated by the Regional Planning and Coordinating Unit; and c) the District Poverty Monitoring Group (DPMG), established and coordinated by the District Planning and Coordinating Unit. The District body feeds its information and analysis upwards to the Regional level which in turn, provides reports. In effect, the decentralized M&E system makes the RPCU and the DPCU, as the centers of activity at the Regional and District levels respectively.

REGIONAL POVERTY MONITORING GROUP (RPMG)

The Regional Planning and Coordinating Units (RPCUs) have the primary mandate for monitoring all projects and programs operating at the Regional level, and supporting Districts to plan and implement projects and programs. The RPCUs, routinely convene relevant institutions to undertake various monitoring functions. Currently, the RPCUs in the three Northern Regions already have core staff dedicated to M&E. In order to remain in line with the National guidelines, a RPMG should be established that reaches beyond the RPCU to co-opt members of other Regional institutions whose mandates relate to data gathering and processing for poverty reduction or those institutions that are already collecting data on their specific activities (e.g. GES, CWSA). These include representatives of the coalition of NGOs and key civil society organizations (CSOs) engaged in poverty reduction related programs. Since the RPMG would include representatives of key MDAs, they would easily have the authority to collect information from the decentralized departments at the District level. The RPMG will be responsible for the oversight of the decentralized M&E process in the Region, while the RPCU remains primarily responsible for coordinating outcomes of the M&E.

DISTRICT POVERTY MONITORING GROUP (DPMG)

This is an important group in the M&E process since key data are to be collected at the District level where key GPRS Projects should be implemented. Being on the front-line of GPRS activities the Group's input would be critical for meaningful GPRS M&E at the National level. The District group is required to feed Regional institutions with the necessary information for onward transmission to the M&E Division of the National Development Planning Commission (NDPC).

Composition of the DPMG

The DPMG will be constituted by the core DPCU staff, co-opting additional members not exceeding 10. This composition will combine the M&E strengths of the District Assemblies, Decentralized Departments and Civil Society Organizations and will address some capacity issues identified at the District level. There should be gender balance in the composition of the unit. Possible members for the DPMG include:

- The core membership of the District Planning and Coordinating Unit;
- Representatives of key departments of the District Assembly (Water Supply and Sanitation, Health, Education, Agriculture, Social Welfare, Community development etc.);
- A representative of NGOs and CSOs involved in poverty reduction work in the District. Where there are many groups doing active work in the district, at least two members should be appointed to the Group by the Civil Society and NGO coalition in the district;

- The District Gender Desk Officer (GDO);
- A representative of the Traditional Authorities;
- A representative of the Private Sector selected from a coalition of District level trade associations such as the Association of Ghana Industries, Association of Small Scale Industries etc. ; and
- Chairperson of the Development Sub-Committee of the DA.

Role of the DPMG

The role of the DPMG will be to:

- Review existing baseline data on poverty indicators;
- Update District baseline data;
- Liaise with RPCU to agree on goals, indicators and targets;
- Monitor progress of projects and programmes in the District;
- Collect and collate feedback from the Sub-District levels for onward transmission to RPCU;
- Create public awareness about GPRS at the District and Sub-District levels;
- Provide support to GSS to undertake district level CWIQ;
- Provide key input in the policy development process based on the results of the M&E;
- Provide bi-annual District poverty status reports and make recommendations for policy review. (NDPC: 2003)

2.2 Gender Issues in M&E

Gender equality, men and women enjoying the same status, has emerged as a primary issue to be considered in all levels of the poverty reduction process. It is internationally recognized as both a basic goal of development and fundamental to sustainable growth. The World Bank's report, "Engendering Development," showed that societies discriminating by gender pay a high price in terms of their ability to develop progressively and reduce poverty. (World Bank: 2001) Accordingly, it is necessary to not only mainstream gender in the planning and implementation phases in projects/ programs, but also in monitoring and evaluation.

It is only through M&E that the impact of projects on the lives of women can be understood. This is an important step in determining whether or not programming goes beyond involving women at a basic level to impacting the power relations between men and women thus addressing women's strategic needs. It is not enough to assume that women have benefited from projects simply because they were involved. It is possible to include women as beneficiaries yet actually have a negative impact on their lives by creating more work for them, or by reinforcing current negative stereotypes.

Integrating gender equality into M&E means assessing how an intervention has contributed to the achievement of results in improving the lives of women and men. This involves:

- Creating the right conditions to assess gender equality, such as:
 - Targeting questions;
 - Allocating sufficient resources;
 - Finding appropriate facilitators;
 - Defining relevant methodologies.
- Outlining lessons learned so that interventions in the future can benefit from past experience.

The presence of the Gender Desk Officer in the DPCU will help to facilitate the monitoring of gender equality goals. However all members of the DPMG need to be conscious of the gender dimensions of the plan, the results, and the M&E exercise itself. In the Appendices, where several M&E tools are presented, gender dimensions are discussed and basic methods for including both women and men are presented. These methods supplement the general collection of quantitative data on a gender disaggregated basis.

Box 2.2

Tips for Conducting Gender Sensitive M&E

- Allocate appropriate time and resources to assess gender equality results
- Include a gender specialist on the M&E team
- Design a process that encourages women to participate in equal numbers and quality as men e.g. meetings with male and female facilitators scheduled in an appropriate place (close to home) at an appropriate time (not meal time)
- Develop gender sensitive indicators to measure both qualitative and quantitative results
- Utilize data sources that support the collection of sex-disaggregated data

How to Perform Evaluations:
Gender Equality. CIDA: 2001

Box 2.3 presents some examples of questions that can be used in focus groups and group meetings to monitor the impact of an intervention. In this case we are not evaluating a particular project, but the overall impact of all the programs in the District. These questions can be used at both the District and community level where deemed appropriate.

Box 2.3

Sample Questions to Explore Gender Results

- ◆ Does the District have the policy and institutional framework to promote gender equality in development activities?
- ◆ Have DA staff received gender mainstreaming training?
- ◆ To what extent has the program 1) advanced women's equal participation with men as decision-makers, 2) promoted the rights of women and girls, and 3) increased women's access to and control over development resources and benefits?
- ◆ How many women and men participated as stakeholders?
- ◆ What is the level of input of women and men at different levels (government, NGOs, local stakeholders) in the program?
- ◆ Did women and girls face any particular constraints or obstacles in their participation? If so, how successful were the interventions in addressing these constraints?
- ◆ To what extent were women, girls, men and boys consulted with regard to their needs, priorities and problem definition?
- ◆ To what extent were the needs and priorities of women, girls, boys and men reflected in the investment solution and overall design?
- ◆ How have the relationships between men and women changed throughout the intervention?
- ◆ Are funds being allocated and access for gender activities?

2.2.1 Gender Sensitive Indicators

In order to measure the impact of development projects on men and women gender sensitive indicators should be developed from the outset of the project, with targets being stated at the same time.

Gender sensitive indicators examine changes in gender relations over time. They measure the specific impacts of the projects on women and men at the different implementation levels of the project (ie. National, institutional, community, personal). They can also highlight areas of activity where women are the majority actors, but that are largely invisible by mainstream indicators.

Box 2.4

Examples of Gender Sensitive Indicators

- Average income of women and men
- Number of woman members of the WSDB
- Percentage of DA budget allocated to gender activities
- Percentage of DA that is female, percentage of Executive Committee that is female
- Number of women and men

Gender sensitive indicators can be important political tools as they can be used to advocate for change and advance agendas of women's empowerment.

Gender sensitive indicators go beyond gender disaggregated data (see 2.2.2) Gender sensitive indicators strategically explore the changing relations between women in men over time. These indicators will look specifically at the impact of the project on men and women, how the program has affected these two groups differently and can address gender relations at the institutional, community and household levels.

2.2.2 Gender-Disaggregated Data

The value of gender disaggregated data is that they can be analyzed to determine how the effects of a project or program affect men and women differently. They can also contribute to the DA's ability to calculate the amount of the budget that being spent directly on women (e.g. percentage of girls enrolled in school versus boys allows the DA to calculate the amount of money spent per girl and per boy).

By determining how women and men are affected differently by projects the DA can correct some actions that exclude women, and also act to ensure that the most vulnerable are protected. Projects often have unexpected results, gender disaggregated data can help the DPMG to understand some of those results.

Gender disaggregated data should be available from most of the MDAs, particularly as they relate to the GPRS indicators. Where the data are not already gender disaggregated, the MDAs should start taking steps to do so.

Box 2.5 Example of Gender Disaggregated Data and Its Use

Gender disaggregated data on the number of visits to the hospital for men and women will give an indication of the differing impact of health programming on men and women. Areas where there is a large gap between men and women (boys and girls) should be further explored with qualitative questions to determine why the gaps exist. In the example above it is important to know why for every five men visit the hospital only two women do. Is it because women are attending and receiving health care through mobile clinics? Or is it because women generally treat themselves at home utilizing local methods? The answers to these types of questions will help to determine the way to proceed in addressing the gaps in gender disaggregated data.

2.2.3 Involving Women in the M&E Exercise

In planning and carrying out the M&E exercise, it is important to include women at all levels. *The DPMG should make an effort to ensure that 30% of its membership is women.* This can be done by actively targeting women in the departments who are to be members, and not insisting that the Head of Department be the representative. Women's participation on the DPMG will work towards women's issues being visible, and account for women's needs and schedules when planning activities.

Women also need to be active participants in focus groups, interviews, and particularly during the community assessment. When planning the community assessment care should be taken to ensure that meetings are planned in a location and at a time that is convenient for women. For example, a meeting at 7:00 in the evening at the local clinic is not convenient for women, since they are cooking and preparing the children for bed. However, a mid-morning meeting when children are in school may be more convenient for them.

Lastly, the collection of data and information gathered is not a gender neutral process and is subject to gender bias and gender laden cultural attitudes. Facilitators of the M&E process should be trained in gender sensitive data collection methods, and those analyzing the data should be aware of potential gender bias, in themselves as well as the data.

During the data collection exercise, the facilitators must be skilled in encouraging all participants to communicate. Organizing separate male and female groups is one way to ensure that women will participate. However, this does not change the gender dynamic in the community. If facilitators encourage both men and women to take turns speaking, or to use a methodology such as a talking stick that is passed around a circle – each person speaking when they hold the stick - then women are more likely to express themselves in a mixed group. The minute taker should record whether or not the comment was made by a man or woman utilizing letters or symbols (e.g. ♀ for women, ♂ for men). Recording comments in this way will allow the DPMG to analyse the data with a gender lens as the group will know what concerns were raised specifically by women.

3 THE DISTRICT M&E PROCESS

Now that we know who is involved it is time to jump into the M&E exercise. This section of the manual outlines the different steps that you will go through in implementing the M&E system. The goal of this section is to give you a practical guide for you to follow. The attached annexes present a number of tools and reference documents that will be of use to you throughout the exercise.

**Model 3.1
Steps in the M&E Process**



A final note on the M&E process is that although Steps 4, 5, and 6 are presented as separate steps, they are, in fact connected and will likely occur simultaneously. The results from the different steps will have to be cross checked with each other. And it is likely that some data collected from one step will be further explored in a subsequent step. They are presented here as distinct steps in order to simplify the presentation of the process.

3.1 STEP 1 – Planning the M&E Exercise

The M&E exercise is process that will involve a series of consultations with different institutions and individuals. In order for the exercise to be implemented effectively the DA has to commit time and resources to it. Furthermore, it should be planned carefully to ensure that all stakeholders are involved and that all appropriate data are collected and analyzed.

To achieve this, the DPCU should set out a plan at the beginning of the exercise and validate it with the DA. The plan should include:

- a) Outlining targeted results and associated indicators;
- b) Determining who will be responsible for collecting what data;
- c) Identifying the methodology to be used for data collection;
- d) Scheduling of the exercise taking into account the annual planning cycle (the M&E exercise should be implemented and completed the quarter before the annual plan is developed);
- e) Budgeting for all aspects of the exercise and having it approved by the DA;
- f) Developing a timeline for when each individual activity is going to take place;
- g) Designing a strategy for analyzing the results;
- h) Developing a dissemination strategy; and
- i) Validating the strategy with the DA.

Keep in mind the five questions - **WHO, WHAT, WHY, WHEN, HOW?** - throughout the exercise.

Box 3.1

Checklist for M&E Plan

Does our plan answer the following questions:

- What are our poverty reduction goals?
- How are we going to measure progress (i.e. what are our indicators?)
- What is the M&E exercise going to cost and who will pay?
- When is the best time to carry out the exercise?
- How are we going to collect the data?
- Who is going to collect the data?
- What are we going to do with the data?
- Who are we going to share the information with?
- What action should/could result from this work?

3.2 STEP 2 – Identifying the Results

The starting premise for this step is to ask: What are we trying to measure or assess?

At the beginning of the M&E exercise, it is important for the DPCU to look at the District's development goals, as defined in the Annual Plan and the Medium-Term Development Plan (MTDP). The M&E exercise should explore the District's progress towards these goals, in addition to the GPRS goals, as previously discussed. If there are goals that have been defined by the District that are not present in the NDPC and GPRS documents, these goals

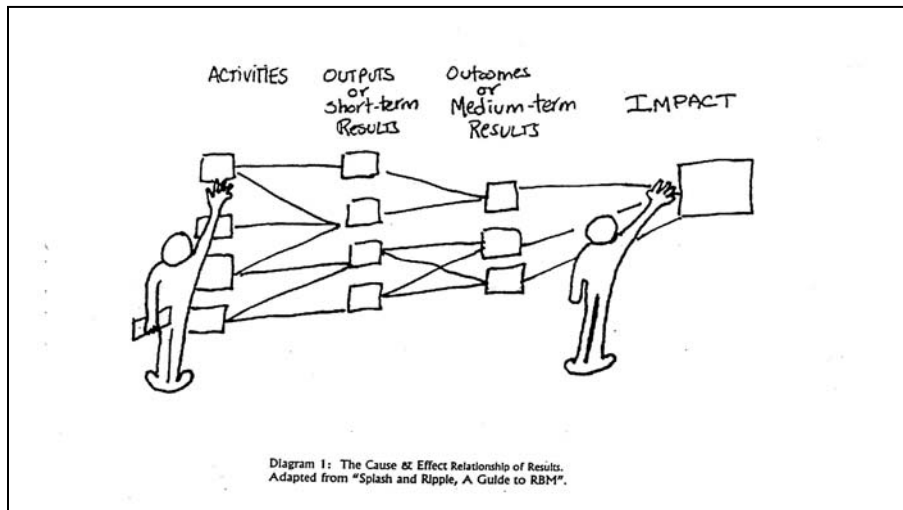
should be incorporated into the M&E exercise at this point. After all, these goals have been designed specifically to meet the District's needs. And, in order for the DA to be accountable to its constituents, these goals must be included.

All plans outline what we hope to achieve. The GPRS sets out certain goals for Ghana as a whole. The District MTDP sets out what is to be achieved at the local level. Ideally, the two have similar goals. In M&E, we are seeking to determine the progress that has been made towards achieving those goals. To do that we look at **results**. Results can be short term (outputs), medium term (outcomes), or long term (impacts). The diagram below illustrates what is called a results chain. As you can see from the diagram achieving the long term goal, or impact, can only be achieved by systematically achieving short term and medium term goals. So we start with activities and monitoring their outputs, over time move towards outcomes (what occurs as a result of the outputs), and finally to the impact.

A RESULT is a measurable development change resulting from a cause and effect relationship.

RBM Handbook on Developing Results Chains, CIDA: December 2000

Figure 3.1



Not a lot has been said in this section regarding how to select desired results, because it is assumed, for this exercise, that you have already gone through a process of setting goals at the District level. The focus here is on monitoring progress towards those results. However, it is worth noting here that there are different kinds of results, and that the first step in the M&E process is articulating what those desired results are.

Box 3.2

An Example of a Results Chain

Community X was experiencing a problem related to water. The nearest bore hole was located 5 km away. This distance was creating all kinds of problems for the community as the walk to and from the borehole took up a long time, as well as a lot of energy. Women and children were spending 3 to 5 hours a day collecting water. In order to save time and energy, some compounds decided to fetch water from a nearby stream. Although this saved time the children from these households began to fall sick on a regular basis. Other households continued to go to the borehole, but the women were finding that they were being harassed by some men from a neighbouring community on their way home and were concerned for their safety. As the problems worsened, the traditional leader called a meeting to discuss the problem. At the meeting both men and women were given the time to voice their concerns. After discussions, the community decided to appeal to the District Assembly for a borehole. Six months later a borehole was situated in a central spot for all the houses, a WATSAN committee composed of both men and women was formed, and potable water was now available for the community.

The results chain in this case was as follows:

Outputs – Borehole was drilled, increase in availability of productive time for women and children, increased safety for women.

Outcomes – Children performed better in school because they had more energy and were sick less often.

Women were able to generate more income for the family due to decreased time spent on fetching water and caring for sick children.

Impact – Increased health of the community including decreased child malnutrition, and decreased incidence of diarrhea.

Decrease in poverty from better use of productive resources.

3.3 STEP 3 – Establishing Indicators

One of the main features of any poverty reduction plan is the establishment of targets. In the M&E process, we need to establish indicators for assessing the progress or otherwise towards achieving these targets. The main question to ask is: What are the sign-posts to lead us where we are going?

Once the desired results have been identified, it is necessary to determine ways to measure our progress towards those goals. Otherwise, we may find ourselves implementing programs that do not give the desired impact. Or, we may not have the evidence to prove that all the hard work we are doing has made a difference.

Indicators help us measure whether or not results are being achieved. They provide evidence that a result has been achieved or to provide a signal that progress is being made towards the achievement of a result. Alternatively, indicators can also help us to highlight areas of concern. An indicator can highlight an area of concern that we can then explore in more depth to determine why the disturbing result is occurring, and then take corrective action.

Indicators must be directly related to the result they are measuring. For example, if the desired result is increased participation in women in District Assemblies, the indicator cannot be # of female teachers. The proper indicator would be the % of women elected/appointed to the Assembly.

Box 3.3

Defining Indicators:

- Needs local input from project stakeholders and beneficiaries;
- Various opinions and expectations need to be taken into account;
- Indicator selection is easier when results are clear and well defined;
- To keep it simple 2-3 indicators per result is sufficient;
- Baseline data are essential to measure change.

RBM Handbook on Developing Results Chains. CIDA: 2000

With respect to indicators, more is not better. The number of indicators used should be kept small and be limited to stated priorities, otherwise the scope of the exercise becomes too large. If too much information is collected it will be difficult to analyze and becomes less useful.

Box 3.4
Gender Sensitive Indicators

...measure gender-related changes in society over time, point out how and in what ways development programs and projects have met their gender objectives. Their usefulness lies in their ability to point to changes in the status and roles of women and men over time, and therefore to measure whether gender equity is being achieved.

There are two types of indicators, both of which are essential for providing a well rounded picture of progress towards results. **Quantitative** indicators have a numerical value attached to them, such as the # of boreholes in the district, the % of District Assembly staff that are women, or the level of income per year by sex. **Qualitative** indicators reflect people's judgments, opinions, perceptions and attitudes of a given situation or subject. Some examples of qualitative indicators are: reasons why the borehole is underutilized, the quality of participation of women assembly members, or perception of the management capacity of the District Assembly. Annex A presents numerous tools for collecting both qualitative and quantitative data.

Sources of Data

It will be important when you start analyzing the data collected that you understand the source of the data. Ideally, you will collect data from more than one group of people (e.g. different levels/types of staff members and different genders) as well as reviewing documents or interviewing. By having these different sources of data, you are able to collect opinions and numbers, but you will also be able to compare them to one another to cross-check their reliability. Not all data will be 100% accurate. By having more than one source of data, you can compare the information received from different sources to reduce inconsistencies and confirm results. Therefore, when you are defining indicators, also outline the sources of the data to be collected.

Classifying or Disaggregating Indicators into Types

To ensure a well-balanced focus on the various types of indicators, Districts will classify the comprehensive list of (core and district-specific) indicators into Process Indicators; Output Indicators; Outcome Indicators; Impact Indicators and Proxy Indicators. See Box 3.5 for definitions of the various types of indicators.

Box 3.5

What Is An Indicator?

An indicator is a unit of information --- quantitative on qualitative – that provides a simple and reliable measure of change or performance

IFAD, 2002

What are the different types of Indicators?

Output Indicators: as they reflect physical evidence of target achievements at the early stages.

Outcome indicators as they refer to intermediate targets;

Impact Indicators as they describe progress towards the over-all objective of the strategy;

Making Indicators SMART or OVI:

Indicators for whatever sector or area can be difficult to assess when they are not properly formulated. It is important to make the indicator Specific, Measurable, Achievable, Realistic and Time specific – that is SMART. Simply, it can be made Objectively Verifiable.

The task for the DPMG is to refine each indicator to respond to the SMART or OVI criteria/principle.

Targets

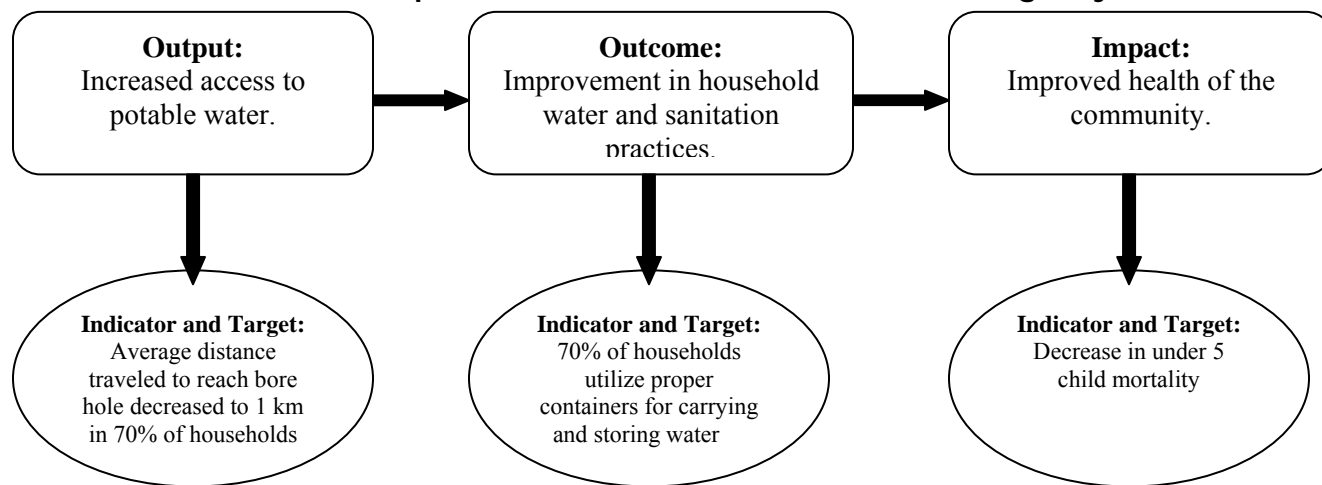
Once the indicators have been defined we need to set targets. It will take time to achieve the desired results and as the results chain presented above illustrates the process is one of small steps. It is therefore necessary to set out targets of what can be achieved in the desired time frame (most likely in one year periods). Targets should be realistic and quantifiable statements of what is to be achieved. The progress towards the target is what will be measured and what you will be accountable for in the M&E exercise.

Box 3.6
A SMART Indicator for the Regional Level
 75% of Water Development and Sanitation Boards in the Region will have accurate, transparent financial record keeping systems within one year.

The target should be a concrete number, should represent real progress towards the goal, but not be impossible to achieve. These targets should be set when the annual planning exercise is undertaken and should be validated with all stakeholders.

Below is an example of a results chain and the related indicators and targets for a water project that drills boreholes in a District.

Model 3.2 Example of Results Chain for Bore Hole Drilling Project



Baseline Data

It is important that, at the beginning of the M&E exercise, we collect baseline data. Baseline data are important as they give us our starting point from which to measure that change. Without a baseline, we can not determine the progress made. The collection of data on the indicators that is done in the first year will be the baseline.

Indicator Matrix

In order to manage the information regarding the indicators including presentation of national and district specific indicators, information sources, and current status and emerging trends the following matrix can be used. As you read through the following steps, you will better understand how to complete the columns.

Table 3.1

Sample Matrix on Indicators

Core District Indicators (from NDPC and GPRS)	District-specific Indicator (modifications and additions)	Information Source	Current status	Emerging trends or Variances

This matrix will be useful when the District is identifying gaps in the national level indicators. It is also a useful tool for managing the data as a wealth of information can be taken in a glance.

3.4 STEP 4 – GPRS and National Level M&E Requirements

The first step in the M&E exercise should be to gather data required by the national level. This is an obvious first step because the indicators are well defined and most of the data should be easily available. The GPRS indicators are largely quantitative and encompass several different sectors, including health, education, and water and sanitation. Where possible, this information should be gender disaggregated (See Section 2.2.2 for further information on gender disaggregated data). These data should be available in existing reports and can be collected by the different DPMG representatives from the specific sector.

The 20 GPRS indicators that are listed in the following box have been identified at the National level to be appropriate indicators for monitoring the poverty reduction efforts in Ghana. All Districts in the country will be reporting on these indicators. The indicators have been put into a table that can be used to record data. Columns for gender disaggregated results have been included as well as for a source of data and comments. If the indicator is not one that can be disaggregated put the result in one column and write not applicable (NA) in the other. For example, “length of feeder roads that are motorable” can not be gender disaggregated, whereas “doctor/patient ratio” can.

The first two columns are for the baseline status of the indicator. This will be the first year that the information is gathered and will remain constant over the years. The current columns refer to the status of the indicator in the year the exercise is being done. The baseline year and current year should be indicated on the table. This table can form the basis of the report to be submitted to the Regional/National level.

Box 3.7

Potential Sources of Data

- ⇒ National Census results from Ghana Statistical Service (GSS)
- ⇒ Ghana Living Standards Survey (GSS)
- ⇒ Ghana Demographic Health Survey (GSS)
- ⇒ Data for decentralized departments
- ⇒ Data from programs of NGOs and international development partners

The data collected will be rolled up first to the regional level and then to the national level. At the end of the exercise Ghana will be able to present an overall picture to development partners, and each region and District will be able to identify their areas of progress and of concern.

The GPRS indicators are also a natural place to start as they will provide a basic photo of development and poverty in the District. From the data collected the DPMG will be able to identify areas of concern and of good performance, and will then be able to explore these issues more fully in the community assessment and focus groups.

Table 3.2 -- National Indicators

	Indicator	Baseline Men (20??)	Baseline Women (20??)	Current Men (20??)	Current Women (20??)	Variance	Source of Data	Comments
1	Food price inflation							
2	% Length of feeder roads that are motorable							
3	Doctor / patient ratio							
4	Child malnutrition (emphasis on poorest regions)							
5	Infant mortality rate							
6	Gross enrolment ratio in pre-school and basic schools (primary/JSS)							
7	Survival rate to P6 / JSS 3							
8	Percent of deprived basic schools (primary/JSS) improved, with emphasis on the 3 Northern regions							
9	Percent of trained teachers in pre-schools and basic schools							
10	Reduction in the reported cases of Guinea worm / Bruili Ulcer							
11	Percent of household with access to safe water							
12	Percent of households with access to adequate toilet facilities (flush or KVIP)							
13	Immunization coverage (DPT3)							
14	Proportion of supervised deliveries							
15	Number of new functional water systems constructed							
16	The number of functional Water and Sanitation Boards; District Water and Sanitation Committees.							
17	HIV Prevalence							
18	Accessibility of services							
19	Access of extreme poor to services							
20	Local safety and security institutions in place							

3.5 STEP 5 – District Specific Indicators

This step involves “painting the local picture”. As each District has its own particular concerns and specific goals during the planning phase it may be determined that the national level indicators do not adequately capture all the information that is necessary to monitor progress on these specific poverty reduction goals.

If, when you were reviewing your goals, you discovered some that differed from those represented by the GPRS indicators, it is necessary at this point to develop an indicator that will address those District-specific goals. The indicators for water and sanitation, environment, gender, education and health, will likely be the ones that Districts currently focus on.

Defining District-specific indicators implies

- moving from the general to the specific;
- localizing the qualitative aspects by engaging citizens and other stakeholders of civil society;
- incorporating gender considerations in the District M&E framework.

Although these indicators do not have to be reported on at the national level, it is important to do so, as this may fill a gap in the GPRS indicators. If there are several Districts reporting on the same indicator that is not covered by GPRS, perhaps the NDPC will have to revise their list. It is also important to report on all indicators in order to give an accurate picture of development in the District.

The District-specific indicators can be entered into the matrix presented in Step 3, and can be either qualitative or quantitative.

3.6 STEP 6 – Community Assessment of Poverty Reduction Effectiveness²

The community assessment represents a critical step in the M&E exercise. However, this component will be carried out by a CSO in order to allow both DAs and communities to participate in the exercise. The community assessment is a method of engaging the DA and community in a dialogue that aims to result in improved poverty reduction programming.

The section below outlines the rationale for a community assessment and the basic roles of the District and the Region. Volume III of the Decentralized M&E System is intended for CSOs and is a Stepwise Guide for implementing a community assessment.

Box 3.8

Example of a District Specific Indicator

District A has defined gender equality as one of their primary goals for poverty reduction. They have been working to institutionalize gender issues into the DA. The following district specific indicators were developed to monitor progress in this area:

- Percentage of men and women members of the District Assembly.
- Percentage of DACF spent on gender positive projects.
- Number of DA staff who have attended gender mainstreaming courses.

² In order to test this tool in the case of the 24 District in Northern Ghana, the Organizational Development Specialist of DISCAP will support the REPO's to pilot the tool.

Why is Community Assessment of Poverty Reduction Necessary?

Communities are the target beneficiaries of poverty reduction interventions and efforts at the local levels. By implication therefore, they will be the ones that are affected most by any changes- negative or positive.

Citizens at the community level still lack a 'voice'. Through community assessments, perceptions and 'feelings' about service delivery as well as the effectiveness of poverty reduction interventions will be elicited using the Community Score Card (CSC).³ Among other things, the findings and perceptions will be used to promote accountability at the local level, thus, making service providers more responsive to the perceptions and 'feelings' of service users.

The goal of the community assessment is to improve service delivery, hold providers accountable, and promote interaction between service users and providers for shared decision making and responsibility. CSC, the methodology to be used of the community assessment, is different from traditional research methods as it relies heavily on focus groups to generate critical information (Refer to Annex B for a detailed outline on process and application of the methodology).

In the Decentralized M&E System a shared approach is being adopted where various relevant stakeholders have specific roles to perform in order to ensure that the exercise is carried out effectively. The relevant stakeholders include: RPMG; DPMG; CSOs, and Communities.

Regional Roles:

1. Provide legitimacy to the CSO to conduct assessments in the region;
2. Participate in interface between Users and Providers'
3. Follow-up on recommendations for improved service delivery and other commitments to action; and
4. Support others actions where needed.

District Roles:

1. Provide legitimacy to the CSO to conduct assessments in the district;
2. Support the CSO where required (e.g. logistics, meeting arrangements);
3. Participate in interface and make commitments to improving service delivery; and
4. Present recommendations to general assembly and appropriate agencies for consideration.

3.7 STEP 7 – Producing the District M&E Report

This step involves bringing together the different data collection and data analysis efforts in the M&E process. NDPC requires that the District submit the following reports on an annual basis: District Profile, Development Project/Programme Register, Reference List, and a Narrative Progress Report. Therefore, the overall District M&E Report should include the following sections:

- Table of Contents
- District Profile

³ The Community Score Card methodology presented here is based on "Community Score Cards: A Short Note on the General Methodology for Implementation." Prepared by Janmejy Singh and Parmesh Shah. See Reference List for full details.

- Sub-component reports (Status of Poverty, Report on Community Assessment)
- Development Project/Programme Register
- Narrative Progress Report
- List of Findings and Recommendations
- Reference List.

A description of each section of the report is below. Ideas for what to include in each section are presented.

Table of Contents

This table lists all the different sections of your report and the page numbers where each section can be located. It is a guide to the document that allows readers to move easily to the section they are interested in.

District Profile

This section gives the reader a picture of the situation in the District and incorporates the following information: demographic information, economic information, infrastructure, local agricultural conditions, education, health, other. (e.g. population, employment statistics, geography, etc.)

Sub-component Reports

Although indicated as separate chapters, the sub-component reports are crucial to cover the entire spectrum of the decentralized M&E system. These sub-component reports include:

- The Status of Poverty Report
- Community Assessment of Poverty Report

Status of Poverty

This chapter is a mainly quantitative report, providing an up-date of the key indicators outlined in the GPRS indicators. The chapter could include a table, providing time-series data up-dates (if available). The Table 3.3 depicts an example of what could be contained in this chapter.

Table 3.3 Sample Table for Status of Poverty Report

	INDICATOR	Status as at Baseline (specify date)	Current status in M&E period (specify date)	Variance	Comments
1	Food price inflation				
2	% Length of feeder roads that are motorable				
3	Doctor / patient ratio				
4	Child malnutrition (emphasis on poorest regions)				
5	Infant mortality rate				
6	Gross enrolment ratio in pre-school and basic schools (primary/JSS)				
7	Survival rate to P6 / JSS 3				
8	Percent of deprived basic schools (primary/JSS) improved, with emphasis on the 3 Northern regions				

	INDICATOR	Status as at Baseline (specify date)	Current status in M&E period (specify date)	Variance	Comments
9	Percent of trained teachers in pre-schools and basic schools (primary/JSS)				
10	Reduction in the reported cases of Guinea worm / Bruili Ulcer				
11	Percent of household with access to safe water				
12	Percent of households with access to adequate toilet facilities (flush or KVIP)				
13	Immunization coverage (DPT3)				
14	Proportion of supervised deliveries				
15	Number of new functional water systems (boreholes, wells, pipes etc.) constructed				
16	The number of functional Water and Sanitation Boards; District Water and Sanitation Committees; Community Water and Sanitation Committees.				
17	HIV Prevalence				
18	Accessibility of services				
19	Access of extreme poor to services				
20	Local safety and security institutions in place				

A narrative summary is also useful to provide clarity to the data presented in the chapter. This summary could include explanation of variances, qualitative indicators that were used to further explore the quantitative issues, discussion of performance gaps and information on District Specific Indicators.

Community Assessment of Poverty Report

The Community Assessment of Poverty Report will be written by the CSO, but included in the report submitted to the RPMG. This report will presented the findings of the Community Score Card, the findings of the Provider Self-Evaluation and the report from the Interface meeting. Including this report in the documents submitted to the RPMG will ensure that community voices are heard at higher levels of government.

District Project/Programme Register

This section presents a register of all projects and programs that are currently operating including their objectives and the sector they are operating. This register should be updated semi-annually with details on each project/programme such as start-time, costs, location, source of funding, expected completed data, etc. A copy of a Project Profile Form can be obtained from the NDPC.

Narrative Progress Report

The analysis of the data will be presented in this section. The report should “include an update on progress made during the year toward the achievement of goals and objectives in the MTDP and highlight issues and problems identified. The reports shall also contain an update of key poverty trends and an in-depth analysis of people’s perceptions and satisfaction with services.” (NDPC: Draft 2003) This report will flow out of and synthesize the findings from the Status of Poverty Report and the Community Assessment Report.

Recommendations

As the final section of the report the way forward should be discussed here. This section should include recommendations flowing out of the Status of Poverty Report and the Community Assessment Report. Recommendations regarding future development interventions and capacity building needs could also be included. Critical to the flow of information upwards this section will provide the Region with the key information that the District wants to communicate to the National level.

Reference List

A reference list of all data sources utilized in the M&E exercise should be included here.

3.8 Step 8 – Post-Reporting – The Real Impacts of M&E

Now you've collected all the data, filled out all the reports and sent those that are relevant for the National level. But wait! The purpose of the M&E was not just to produce a report that satisfies national needs, or your own reporting requirements. The question now is how to utilize and interpret the data so they become meaningful to you and your constituents at the District level. As noted in the Introduction, there are several reasons to monitor and evaluate poverty. As a reminder, they are:

- ◆ To identify areas of need among citizens, and to help DAs manage and plan their MTDP more effectively.
- ◆ To assess and respond to poverty at the levels where it is felt the most, individual and household.
- ◆ To demonstrate achievement, outstanding issues and needs in poverty reduction processes, and to utilize that information to negotiate more financial resources.
- ◆ To enable DAs to respond to citizens' concerns.

This final step presents a methodology for analyzing the data so that DAs are able to respond to the issues and act on them, as well as ideas of how to disseminate the results.

Analysis and Identification of Key Areas

Once the raw data are collected and collated into reports, it is the job of the DPMG to make sense of the data. Data alone are not useful. However, data become very useful when they are interpreted and analyzed in order to provide information on the context for poverty reduction in the District, to highlight key areas of concern and spark further discussions and explorations in those areas, and to identify strategies/interventions to improve the situation.

The first thing you should do is to highlight areas where the District is excelling and other areas where the District is lagging behind. The areas where things are going well are important indicators because they can be presented as achievements for the District and congratulate people for a job

Box 3.9

Utilizing Achievements to Provide Information on Identifying Successful Strategies

Following the M&E exercise, District A discovered that they scored above their set target on the GPRS indicator “percent of households with access to adequate toilet facilities.” When asked, the DEHU was able to explain that they had mobilized the Area Councils to carry out a public education campaign on the benefits of KVIPs. The DEHU trained artisans in rural areas on how to build KVIPs utilizing local materials. Once the community understood the benefits, they agreed to provide lodging, food and a small allowance for the artisans in return for their services. Community members also provided labour. Through this process a large percentage of houses were able to construct KVIPs. The DPMG judged this to be a good strategy and incorporated into the action plan in areas such as fencing boreholes to keep animals out.

well done. They can also be examined to see what types of activities are producing results. Box 3.9 presents an example of how this process works.

After identifying achievements, the critical areas of concern should be defined. These are areas where the District is not performing well, either on the GPRS indicators or in the eyes of its citizens. If an issue is an area of concern for citizens, but the District is performing well on the GPRS indicator side of the same issue, the corrective action may simply be to let people know about this performance. It is a gap in perception.

If, on the other hand, there is no indication that the District is performing well, then the results need to be addressed. This is particularly true if it is an area that is included in the MTDP. Once an indicator has been highlighted for concern, further exploration should be taken on that issue. For example, in the data collection exercise it has been discovered that there has been an increase in guinea worm cases over the prior year. Further exploration is needed to determine where the cases are located, what behavioural practices in that area are influencing the increase in cases, what interventions are currently in place, etc.. Further exploration should lead to a strategy to address the gap.

The reports from the data collection process need to be analyzed in a systematic way in order to feed those results into the Annual Plan and MTDP. Each indicator should be examined and the appropriate action should be taken depending on the findings. Any findings or commitments resulting from this exercise should be incorporated into the Annual Plan and MTDP as well as disseminated widely across the District. It is through this systematic analysis that the data collected become useful in planning for the future.

Dissemination of Results and Reports

After compiling and analyzing the data the next important step is to disseminate that data. Many stakeholders gave their time and energy to share their experiences and knowledge, and they deserve the same respect that they have shown you.

Sharing the results with stakeholders (both institutional and community levels) increases the accountability and transparency of the DA, as well as displaying commitment to poverty reduction. Furthermore, it will encourage the commitment of stakeholders to the poverty reduction strategies that come out of the M&E exercise if they are fully involved.

A dissemination strategy should be prepared and allocated the necessary resources at the beginning of the M&E exercise. The following list is a brainstorm of potential dissemination activities:

- Use grassroots media to get the information summarized and broadcast for the communities to hear. Organize some time with the local fm station to go and talk about the M&E exercise, the results, and future actions. Radio is listened to widespread in the Districts and represent the first source of information for citizens at the local level. Inform citizens of when the interview will air through local information networks. Local newspapers, such as RUMNET's paper "*The Northern Advocate*," can also be used to spread information across the three Northern regions.
- National press and television can be used to reach a National level audience and make policy action swift.

- ☑ Meet with the representatives of area councils, and women leaders from all the areas, to discuss the findings. Task those individuals with taking the message back to their communities.
- ☑ Hold community meetings at several central locations throughout the District. Ensure that meetings are held in locations and at times that are accessible to women. Present the findings and then engage citizens in a discussion about what they can do at the local level to reduce poverty. An example could be a commitment to storing water in clean containers with proper covers, and washing hands with soap to decrease the incidence of water borne disease.
- ☑ Invite institutional and traditional (including women leaders) stakeholders to a formal meeting where the results will be discussed, critical areas identified, and actions decided upon. When actions are decided upon, it is important to attach a time line, a responsible person, and a budget to the action to make sure that the action will happen and that someone is accountable. Minutes from this meeting should be typed up and distributed widely.

There are many other ways to get the word out; these are just a few. The DA should feel free to design any other dissemination strategies that they feel would work in their particular context. The important thing is to **GET THE WORD OUT!**

3.9 Summary

This manual has provided a context for M&E at the District level, but within National level parameters. It has outlined National Requirements for M&E that are required by the NDPC, as well as providing information to help Districts make the M&E exercise relevant to their needs and situation at the local level. Furthermore, it provided details on the following steps to follow in carrying out an M&E Exercise:

STEP 1: PLANNING THE M&E EXERCISE

- Outline the details regarding the **what, who, where, why and how** of the M&E exercise.

STEP 2: IDENTIFYING THE RESULTS

- What are we trying to measure or assess?
- Review the MTDP. What are the District's goals? Are we progressing towards them?
- Does our results chain make sense?

STEP 3: ESTABLISHING INDICATORS

- How do we measure our progress towards achieving results?
- Do our indicators relate directly to the desired results?
- Are our indicators gender sensitive?
- Have we set targets?
- Are our indicators SMART?

STEP 4: GPRS AND NATIONAL LEVEL M&E REQUIREMENTS

- Were we able to gather data on all the indicators laid out by NDPC?
- Are our data gender disaggregated?
- What are the sources of our data?

STEP 5: DISTRICT SPECIFIC INDICATORS

- What issues are relevant to our District that are not captured in the GPRS indicators?
- Have we reported on these indicators to ensure the gaps are captured at the National level?

STEP 6: COMMUNITY ASSESSMENT OF POVERTY REDUCTION EFFECTIVENESS

- Have we supported the CSO in organizing the community assessment?
- Have we provided honest information about our performance on the indicators?
- Did we engage in meaningful dialogue with stakeholders during the interface meeting?

STEP 7: PRODUCING THE DISTRICT M&E REPORT

- Have we completed all the sections of the report?
- Did we highlight specific areas of concern to the District?
- Were realistic recommendations formulated?

STEP 8: POST REPORTING – THE REAL IMPACT OF M&E

- Did we analyze the data thoroughly?
- Have the findings of the data collection exercise been integrated into the Annual and Medium Term Development Plans
- Were Best Practices identified and strategies identified to be utilized in other areas?
- Were gaps acknowledged and addressed?
- Were the results of the M&E disseminated widely across the District?

The **Next Steps** in the process are for Districts to read the Manual in detail, particularly all members of the DPCU. Members of the DPCU will be invited to attend a workshop on the Manual delivered by DISCAP. This training will better prepare the Districts to carry out the exercise, set out time lines and schedules, and clarify any questions the DPCU has about the exercise.

Following the training the DPCU will meet to determine who will participate on the DPMG, provide them with a copy of the Manual and invite those people to a meeting. The DPCU will lead the entire DPMG through an exercise to understand the M&E Process based on the steps and information provided in the Manual. During this meeting the DPMG will determine the way forward and develop a detailed timeline for execution of the exercise.

Throughout the exercise DISCAP staff will be available to provide support and expertise where needed, particularly as this will be a first time experience with M&E for some Districts.

In conclusion, it is the intention of this Manual to provide Districts with a resource to guide them through the M&E process, as well as provide some understanding of the National context. It is hoped that after reading the Manual there is a better understanding of how M&E can be useful for Districts when it is done in a holistic manner, and not just a few statistics gathered for the benefit of outsiders.

4 THE REGIONAL M&E PROCESS

The role of the Region in the Decentralized M&E System is to develop a Regional snapshot of the status of poverty in the region. They will synthesize all the information that is collected and analyzed in the Districts, identify trends and common issues, and report on the critical issues affecting the Region. The Region will also identify key interventions that are having a positive impact on poverty reduction efforts, and report on the Development Management Capacity of the Districts.

There are 5 main steps that the RPMG must undertake within the M&E System.

Model 4.1 Regional Steps in M&E



It is important to note that the Region and District will work closely together throughout the Regional process. The Region is essentially building upon the work of District and a collaborative relationship between the two should be built. The Region provides the link between the District and NDPC, and it is through them that the poverty reduction priorities of the Districts and their citizens will be presented at the National level.

4.1 STEP 1: Assessing District Development Management Capacity And Analyzing Capacity Building Needs

The purpose of this step is to assess the District Development Management Capacity (DDMC) of individual districts. By this we mean the capability of the district to plan, implement, account for and report on expenditures of interventions aimed at reducing poverty in that District.

As more and more development programs are implemented through the DA it becomes more and more important to measure the capacity of the institution. By monitoring DDMC, the following results will be achieved:

- 1) Identify areas for improvement that will allow the District to achieve better results in poverty-reduction programming;
- 2) Provide the Regional Administration with information to allow them to better plan capacity building programmes that will match the needs of the Districts; and
- 3) Identify Best Practices that can be replicated in other Districts.

It is important to note that the purpose of this exercise is not to judge or punish the District, but to better understand the management needs, with the goal of improving poverty reduction programming.

The RPMG will measure DDMC utilizing the District Development Management Capacity Index. This tool has been developed to guide the Regions in their assessment by identifying key indicators and the units for assessment. This tool is explained in Section 4.2.

4.1.1 Assessment Process

A meeting should be held between District officials (DCE, Presiding Member, DPCU members) and representatives of the RPMG to explain the process. (The RPMG will divide themselves amongst the Districts. Not all RPMG members need to go to each District. However, for continuity sake one member of the RPCU should go to each District. It is suggested that 3 RPMG members visit each District.) It is important for the District to understand the nature of the exercise so they do not feel threatened. RPMG will then utilize individual interviews, small focus groups, and analysis of documents to provide them with adequate information to make the assessment.

Once all the information on the District is collected the RPMG will convene a meeting to compare scores and calculate an average score for the District. Those members who have scored lower or higher than the majority will have to explain their reasons to ensure that the group agrees on the score.

Members of the RPMG then need to analyze the scores to identify areas for improvement for individual Districts. They can also identify Regional trends during the same analysis period. This can be a simple exercise by determining what indicators the District scored low on. The information needs to be utilized by the RPMG in the following way:

- ⇒ Identify critical gaps in each individual District;
- ⇒ Determine why those gaps exist;
- ⇒ Develop a strategy to address those gaps;
- ⇒ Convene a meeting with the Districts, relevant development partners, and relevant government authorities to disseminate the strategy;
- ⇒ Implement the strategy.

Based on the analysis and general regional capacity profile, the RPMG will be able to develop and propose specific capacity building programmes for the Districts. These will target particular personnel with critical role in managing poverty and development related activities, or at identified Units with capacity deficiencies/gaps.

An overall capacity building plan for the Region should be developed out of this analysis. This plan should be realistic and not necessarily address all gaps at the same time, but focus on a particular set of gaps each year. By focusing the plan it is more likely that it will be supported by Government and development partners. As this plan is required as part of the institutional arrangements under the GPRS monitoring, it will receive substantial attention by government and other development partners. See Step 4 for further details on how to develop and present the capacity building plan.

The development partners can play a key role in the dissemination and implementation stages of the analysis. If a Region can identify key capacity building needs, it is possible that development partners can support the Region (and Districts) in filling the gaps. In this way, capacity building programmes can be targeted specifically at the needs of the District and Region. This is also related to the Decentralization Secretariat's efforts to harmonize Human Resources Development efforts at the District level.

4.2 The District Development Management Capacity Index

The primary tool for the assessment is the District Development Management Capacity Index (DDMCI). This index is composed of two sub-indexes: one sub-index that measures general, or core, development management capacity, and a second sub-index that measures financial management capacity of the district. Figure 2.1 is the sample format to use to collect the data.

Figure 2.1 sets out the sub-index on core management capacity. The ten indicators in the sub-index are rated from 1 to 5, with one as the lowest value and 5 as the highest value. Selection criteria have been provided for each indicator. These criteria provide guidelines at levels 1 and 5. The administrator of the matrix should use his/her discretion in determining the exact position of the DA. The management capacity of four District units is assessed by the sub-index: the District Administration (generally encompassing the decentralized departments), the District Planning and Coordinating Unit (DPCU), and the Finance unit. Scores for these three units are then totalled and averaged for a final sub-index score for each indicator and then for all indicators combined. The DPCU for this exercise is composed of the DCD, DPO, DBO, and GDO. The Finance Office is composed of the finance officers. The budgeting capacity is evaluated within the DPCU, while the finance office refers to financial accounting and reporting on actual expenditures.

Figure 2.2 sets out the sub-index on financial management capacity. Again, each of the ten indicators is given a rating from 1-5. Four units are assessed: the District Assembly, the DPCU, the budget office, and the finance office. In this index, as it focuses specifically on financial management capacity budget office is considered separate from the DPCU. This will enable the administrator to explore the specific capacity of each officer and determine training needs and other gaps. Scores for each are averaged and totaled for a sub-index total.

Box 4.1

Questions to Consider

- What core competencies are required for the staff of each Unit to perform their job?
- What is the picture like for the Districts? Matching '*what ought to be*' with '*what is*'?
- What capacity building efforts are currently in implementation? What areas are they targeting?

The total average scores for each sub-index are then totaled and averaged once more, for the overall D²MCI score.

Fig 4.1 District Capacity Index

Core Management Capacity Indicators	District Admin.	DPCU	Finance Office	Average Score	Comments
1.1 Qualifications of personnel (1-5) 1 = most staff do not have the required education 5 = all staff have the required education levels, some exceed					
1.2 Staff Compliment (1-5) 1 = there are numerous key positions that are unfilled 5 = all positions in the DA Administration are filled					
1.3 Skills & Knowledge (1-5) 1 = most staff do not have the requisite skills and knowledge to complete basic job tasks 5 = all staff have requisite skills and knowledge to complete even advanced job tasks					
1.4 Availability of Funds (1-5) 1 = Funds available do not meet basic cost requirements 5 = Funds available meet basic costs, as well as enable the DA to carry out all activities in development plan					
1.5 Timely Access to Funds (1-5) 1 = Funds arrive up to 12 months behind schedule 5 = Funds arrive on schedule					
1.6 Leadership (1-5) 1 = Leadership is not adequate to address development needs due to low motivation, corruption, or lack of qualification 5 = Leadership is dynamic and motivates the DA staff and members to work together for long term development					
1.7 Management (1-5) 1 = The full complement of management is not available, and what is present does not have the skills to direct DA activities 5 = Management is technically skilled in all components					
1.8 Workload (1-5) 1 = Workload is so high that staff have to work overtime to complete even basic administrative tasks 5 = Staff are able to complete their jobs within regular working hours					
1.9 Motivation/Incentives (1-5) 1 = Basic central government Motivation/Incentives exist but are not accessible 5 = GoG and development partner motivation/incentives are easy to access					
1.10 Equipment/Facilities (1-5) 1 = Office space, furniture, and technology are not adequate to serve all staff 5 = All staff have access to appropriate office space, furniture and technology					
Total (10-50)					

Figure 4.2 – District Capacity in Financial Management Index

Financial Management Capacity Indicators	District Admin.	DPCU	Financial Office	Average	Comments
2.1 Resources spent only on approved activities (1-5) 1 = Resources are spent at the discretion of management and not in pre-approved areas 5 = Resources are spent as detailed in the Annual and Medium Term Development Plans					
2.2 No cost overruns (above 5%) (1-5) 1 = Projects and activities run consistently over budget 5 = There are no cost overruns above 5% on any project					
2.3 Information on financial inputs and expenditures is disseminated to key stakeholders in the Administration and Assembly (1-5) 1 = Only the finance (or accounts) officer has information concerning financial expenditures 5 = Financial reports are shared with other departments, units within the DA					
2.4 Information on financial inputs expenditures is disseminated to citizens 1 = Citizens are not aware of the financial situation of the District Administration 5 = Financial information is shared freely with citizens					
2.5 Projects completed in proposed time frame (1-5) 1 = Projects are never completed on time 5 = Projects are always completed within proposed time frame					
2.6 Timely submission of complete financial reports (1-5) 1 = Financial reports are submitted well after due, and after they are considered relevant 5 = Financial reports are always submitted on time					
2.7 Competence and integrity of files (1-5) 1 = Records are not accurate and contain many flaws and errors 5 = Records are accurate, are accountable to national standards and contain no errors					
2.8 Clear accounting for revenues (1-5) 1 = Accounting system is not reliable and financial documents prepared are not understandable by the reader 5 = Accounting system is totally reliable, and reports are translated into a form that is understandable by management					
2.9 Efficient collection of revenues (1-5) 1 = Revenue collection efforts bring in insufficient revenue, in an untimely manner 5 = Revenue collection efforts are consistent, regular, and sufficient to cover costs					
2.10 Audit reports available (1-5) 1 = No audit reports available in office for any year 5 = Audit reports are filed well and multiple copies can be produced for each year					
Total (10-50)					

Box 4.2

Utilizing the DDMCI at the RPCU

Region A has been approached by a development partner who would like to provide financial and programming support to a District through the DA system. The partner would like to select a DA to participate in a program where the DA manages the funds of the program directly, as well as determines the programme themes. The RPCU has been approached to do a needs assessment of the targeted DA with respect to ability to manage development programs and budgets. The development partner will then use this information to plan their interventions.

The DA had completed their annual M&E exercise 2 months prior to the request for information from the development partner. The RPCU used the reports submitted from the District, particularly the list of poverty reduction programmes and their anticipated results. The District specific indicators also gave the RPCU a good idea of what areas were of particular importance to the DA. This information enabled the RPCU to provide the partner with critical development areas in the District, but did not supply information on the management capacity.

The RPCU then retrieved the file on District Development Management Capacity that has been kept for the past two years. The officer was able to review the DDMCI for the last two years and identify the major problems the District was facing. These problems included: inadequately trained finance officers resulting in poor financial record keeping, however with no cost overruns, and no Deputy DCD that resulted in a work overload for the DPO and DBO, but a strong motivation level of the current staff, and a clear long term development plan. The DA had demonstrated improvement in completing reports on time and allocating spending effectively.

A report was compiled that reflected the needs of the District and provided to the development partner. The report provided the basis for negotiations between the central Ministry in Accra, the District, and the development partner that resulted in the creation of a poverty reduction program that met the needs detailed by the District, accompanied by a human resources strategy that trained 5 officers in financial management and record keeping, a system of incentives that built upon staff motivation levels that included sponsorship to short courses, and financial benefits. In addition, new furniture and computers were provided to improve the efficiency of the skeletal staff. Computer training was provided to administrative staff who were then able to produce reports for the DPO and DBO freeing up some of their time. In the medium term the District became a more appealing place to work and a Deputy DCD and additional planner requested transfer to the District.

4.3 Incentives to Improve

By measuring DDMC over time it is anticipated that scores will increase with ongoing capacity building efforts of both development partners and NDPC. This increase in scores could provide the Districts with increased availability to development funds, by proving their improved management capacity and thus ability to spend funds in a reliable and transparent manner.

4.4 Sectoral Sub-Indices's

Sub-indices on District capacity may be developed in certain sectoral or thematic areas, depending on the priorities of the District. Indices on Water and Sanitation Services Management and Gender Mainstreaming Management are presented in Annex B for the RPMG and DPMG to use and to serve as an example. Indices that relate specifically to a sector are more detailed and may require more feedback from the DA as to the status of the sector. It may be difficult for the RPCU to know any one sector in detail. As District Management Capacity improves the District may be able to administer these matrixes themselves and use them in their own M&E Analysis.

4.5 STEP 2: Provision of Technical Support to Districts throughout the Data Collection Exercise

One of the key activities under poverty monitoring and evaluation at the District level is the collection and updating of baseline data. The primary indicators to be reported on are the core GPRS indicators as defined by the NDPC. This is a set of 20 indicators that cut across all sectors and measure both outputs and outcomes. In addition, the Districts are encouraged to add District specific priority poverty indicators to the list. This exercise, although District-driven, requires technical support or expertise from the RPMG.

4.5.1 Identifying and Bridging Capacity Gaps at the Districts

Regions are required to provide technical support to Districts within their jurisdiction by evaluating and supporting their capacity gaps and needs for M&E. It is possible that some of these gaps will be identified through the DDMCI, as above. In addition, the RPMG should use their knowledge of the District's capacity to collect and analyze information, as well as the availability of the information required to report on the core GPRS indicators to determine what other modes of support are required.

Section 3 of this Manual has been designed to guide Districts through the collection, analysis, and dissemination of data. In addition, DPCUs have also participated in a training course on the same. It is hoped that most of the capacity gaps will be filled through this training. However, the RPMG will have to provide support on an as needed basis to the Districts. This could include the following:

- ⇒ Participating in DPMG planning meetings,
- ⇒ Establishing realistic targets,
- ⇒ Participating in dissemination sessions,
- ⇒ Providing technical expertise related to the analysis of the data,
- ⇒ Contribute to the development of the District profile, and
- ⇒ Review of District Development Plans to ensure that results are fed back into the plan.

The District is to complete the Decentralized M&E exercise on an annual basis. This should be done at the appropriate time in order to flow the results into the Annual Plan and Budget of the District, ideally the quarter before the Annual Planning and Review exercise. The RPMG is responsible for providing the District with a schedule and a list of deadlines for when the exercise is to be completed and reports handed in to the RPMG. They will also monitor the District's progress throughout the M&E exercise to ensure accuracy of results and accountability to the citizenship.

4.6 STEP 3: Analysis and Collation of District M&E Reports

Once the Districts have completed the M&E Exercise and forwarded their reports to the Regions it is the Region's task to prepare a Regional Report on the Status of Poverty and progress on poverty reduction. The Regional Report (outlined in Step 4 below) should identify key trends in poverty that cut across the Region, and should highlight issues of concern. Recommendations for development planning in the future should be addressed. This preliminary step of analysis and collation of District reports prepares the Region with an understanding of what is happening in Districts, highlights key points to be raised in the

Regional report, and prepare summaries of District reports that can be forwarded to the National level.

4.6.1 Reviewing and Streamlining District M&E Data

The RPMG is mandated to receive, collate and evaluate all District M&E results. The Group will verify all inconsistencies emerging from the data through the following ways: a) workshops where DAs will be submitting their input and output indicators; b) going to the field to cross-check; and c) visiting project sites to assess GPRS progress.

4.6.2 Developing and Sharing A Common Framework for Data Analysis

While it is important to encourage District peculiarities to come to the forefront, it is equally critical for the RPMG to set the platform or framework for data analysis. This is meant to promote uniformity such that certain common denominators prevail while ensuring that variations are not widespread. The Regions should enter the data from the Districts into a spreadsheet that will produce a summary of the indicators and an average for the Region.

Regions may also want to outline some processes for the Districts to guide them in their data collection such as the steps in a gender analysis, or the importance of gender disaggregated data.

4.6.3 Identifying Potential Areas for Regional Actions

Subsequent and prior to National policy actions, it is critical for Regional institutions and development partners (Donors) within Regions to collaborate in determining core areas to tackle (in the interim). The RPMG should analyze the summary of data for all Districts and identify the key areas for intervention.

<p style="text-align: center;">Box 4.3 Questions to Consider</p> <ul style="list-style-type: none">▪ What, if any, trends are there that cut across Districts?▪ Where do the major variances exist between Districts? Why do they exist?▪ Are there common themes that can be identified?▪ Have the Districts utilized the common Decentralized M&E process?▪ What are the critical areas for intervention?▪ Who are the key partners and stakeholders in the Region?
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For example, one Region may be experiencing a high incidence of guinea worm and identify this as an area for action. This identification of priorities will help guide the Region in planning and coordinating of development interventions.

4.7 STEP 4: Production of a Regional M&E Report

As mentioned above the goal of the Regional M&E Report is to provide a summary of the District reports and highlight key trends in poverty and identify/recommend areas for action. After the collation and analysis done above, the findings will be incorporated into the Regional M&E Report. The objective of the Regional report is to provide a picture of poverty on a Regional level. This will involve highlighting trends that cut across the Region, identifying critical areas of need, and sharing information on current poverty reduction efforts. A summary and analysis of the findings of the DDMCI for each District should be included, as well as the capacity building plan to address identified gaps. In addition, the report will include a summary of the findings on the core GPRS indicators for each District and key issues raised in the District reports.

The Regional M&E Report should have the following sections:

Table of Contents

Executive Summary

A short synopsis of the main findings of the report. It should summarize the background to the report, highlight the critical areas for intervention, and list recommendations.

Introduction

The methodology utilized by the Districts, the analytical process undertaken by the Regions, and the main uses of the report should be presented here. A brief outline of the remaining sections of the report can also be presented.

Trends in Poverty in Region A

This section will present the major findings of the District reports. Any issues that cut across the Region should be presented here.

Critical Areas for Intervention

In the analysis of the District reports it should become obvious which areas require intervention. This is where those issues that are well below target or National average should be raised. It may be a Regional issue, but may also be one specific to a District, but is of particular importance because of its negative impact on citizens. For example, if there is a particularly high rate of infant mortality in a specific District this issue needs to be flagged for central government so the appropriate authorities can take action.

Summary of Current Poverty Reduction Programmes

This summary will describe the poverty reduction programmes currently being implemented in the Districts by development partners and NGOs. Regional programmes should be highlighted first, followed by District specific initiatives. This section will give NDPC and the Decentralization Secretariat a concise summary of poverty reduction efforts that will help to harmonize efforts and avoid duplication. If there are any Best Practices that the Region feels would be useful to the National level they can be described briefly in this section.

Box 4.4	
Sections in Regional M&E Report	
1.	Table of Contents
2.	Executive Summary
3.	Introduction
4.	Trends in Poverty in Region
5.	Critical Areas for Intervention
6.	Summary of Current Poverty Reduction Programmes
7.	District Development Management Capacity Issues
8.	Regional Governance Capacity Building Plan
9.	Report on Community Assessment
10.	Recommendations
11.	Annexes

District Development Management Capacity Issues

This section will highlight the critical issues raised by the DDMCI. While capacity building issues will be addressed in the next section, issues related to staffing, government employment conditions, and structural issues should be highlighted here so the central government can be aware of them.

Regional Governance Capacity Building Plan

The capacity building needs highlighted by the DDMCI should be summarized here with a strategic plan for action. As indicated above this plan should be focused and achievable. It should not be a blanket plan, but one that addresses specific needs. For example, the plan should reflect Districts A, B, and C need of capacity building in proper financial reporting procedures, and Districts A, D, and F's weak planning function, and the overall need across all Districts for increased knowledge of how to be accountable to citizens.

Report on Community Assessment

It is extremely important that the voice of the citizens be reflected in this report. The GPRS and other documents produced by NDPC and the Decentralization Secretariat indicate they are interested in bottom up planning and to do so they must hear from the rural communities. This section should summarize the approach utilized, the themes and sectors focused upon, and the general findings.

Recommendations

This section will highlight the RPMGs recommendations for future development projects and programmes based on the above analysis.

Annexes

The annexes will include the District tables that report on each indicator, the District summaries that highlight critical gaps and issues in each specific District, and the summary of the findings of the DDMCI.

A Final Word

Although there are several critical components of the report it will be necessary for the RPMG to be precise in their analysis and present the main points. The report should not be too large, otherwise it is unlikely that the information will be read and put to use. It should be short and succinct, yet still provide the reader with accurate, useful information.

Remember, it's not quantity, but quality!

4.8 STEP 5: Utilization of Results

Just as it is critical for the Districts to utilize the results of the M&E exercise in their Annual Plans, it is also critical for the Regions to do the same. As RPCUs become the focal point for the coordination and monitoring of poverty reduction programmes in the Region it will be more important than ever to utilize the data collected in the M&E exercise effectively. This means analyzing the data and then incorporating the findings into the planning exercise.

Section 3.8 provides some guidelines on how to analyze data and integrate findings into plans. The job of the RPMG is a difficult one as they must balance the District peculiarities with the overall Regional situation. In addition, the Region plays a coordination and oversight role, not an implementing role.

The findings of the District M&E exercise provide the RPMG with technical information on the District's performance and highlight areas where the RPMG can provide technical support. For example, if the number of maternal deaths in District A is low (2 per 100) and District D is high (12 per hundred) that information can be shared with the Regional Health Services who can then explore the situation to determine why the difference exists and how they can

<p>Box 4.5 What to do with the data?</p> <ul style="list-style-type: none"><input checked="" type="checkbox"/> Highlight Best Practices<input checked="" type="checkbox"/> Promote exchanges between Districts<input checked="" type="checkbox"/> Target development interventions<input checked="" type="checkbox"/> Base plans on actual not perceived need<input checked="" type="checkbox"/> Provide specific technical support where needed<input checked="" type="checkbox"/> Avoid duplication of projects/ programmes<input checked="" type="checkbox"/> Oversee District's progress on commitments<input checked="" type="checkbox"/> Ensure Regional plans are in line with the situation in the Districts

intervene in District D. Not all Districts are equal, and the findings of the M&E exercise can help Regions to recognize the differences and where the needs are.

In addition, the Region can share their knowledge of practices across the Districts. For example, if one District has developed a particular strategy for addressing the low enrolment of girls in primary school and JSS, the Region can share that information with other Districts and promote exchange of Best Practices. They can link up those Districts who are weak in one area with those who are strong in the same area.

With the increased involvement of the RPCU in development projects they are well poised to influence the direction of

interventions. By properly analyzing and summarizing the District M&E reports the Regions should be able to direct interventions in the necessary directions. This will avoid duplication of projects, as well as more targeted and therefore successful interventions.

Regions can also provide an oversight role to ensure that the District lives up to the commitments that it makes to the citizens in the dissemination activities.

As with the Districts the important thing is to utilize the information and integrate the findings into future plans and programmes.

4.9 Summary of Regional M&E Process

In conclusion, the role of the Region in the Decentralized M&E process is multi-faceted and highly contextual. The Region needs to be flexible in determining when and where they need to provide oversight, and what type of technical support they can provide. They also need to look at the big picture, identifying variances, but focusing mainly on key trends and common themes.

STEP 1: ASSESSING DISTRICT DEVELOPMENT MANAGEMENT CAPACITY and ANALYZING CAPACITY BUILDING NEEDS

- What performance gaps exist in terms of the District's capacity to management development programming?
- How can the performance gaps be addressed?
- How can we target the specific needs of the Districts?

STEP 2: PROVISION OF TECHNICAL SUPPORT TO DISTRICTS THROUGHOUT THE DATA COLLECTION EXERCISE

- In what areas do the Districts require oversight?
- How can we ensure the integrity of the data collected?
- What are the Districts goals? Are they reflected in the M&E?

STEP 3: ANALYSIS AND COLLATION OF DISTRICT M&E REPORTS

- What are the key trends that cut across the Districts?
- Are there any major variances? Districts that are experiencing far different results than others?
- Who are the major stakeholders and partners?

STEP 4: PRODUCTION OF A REGIONAL M&E REPORT

- What is important to pass on to the National level?
- What are our recommendations for future development interventions?
- How are we proceeding against the GPRS?
- What are the perceptions of the citizens of the Region?

STEP 5: UTILIZATION OF RESULTS

- What are the best practices?
- What development interventions are necessary to progress in poverty reduction efforts?
- How do we avoid duplication in programming efforts?
- Are the results obtained from the M&E reflected in our plans? If not, how can they be integrated?

Collaboration between the three levels of government will only enhance poverty reduction efforts in Ghana. These relationships need to be cultivated in order to create an atmosphere of trust, openness and collaboration. If this is achieved then progress on poverty reduction efforts will evolve.

5 COMMUNITY ASSESSMENT OF POVERTY REDUCTION EFFECTIVENESS

The overall goal of poverty reduction programmes is to improve the lives of the poor: socially, economically and politically. Yet so often development projects/programmes fail to engage the “poor” at any point during the planning, development, or monitoring and evaluation processes. This is usually a result of time and financial constraints. However, it has been recognized that one of the key aspects of successful development programmes is this dialogue with citizens.

This component of the Decentralized M&E system, the community assessment, aims to engage communities in a discussion regarding the impact of poverty reduction programmes on their lives. One of the main objectives of this approach is to generate dialogue between service providers and service users, with the end goal of improving poverty reduction programming. Other objectives include increased transparency and accountability of local government authorities and citizens at the community level being empowered to have a ‘voice.’

This manual presents a detailed stepwise process of how to conduct a community assessment using the Community Score Card (CSC)⁴ methodology.

5.1 What is the Community Score Card (CSC)?

The community scorecard process is a means by which community members assess the performance of public services and interact with the service providers to express their concerns. The scorecard results from various sectors, various communities and from various Districts can also be compiled to allow for comparison and healthy competition. The ultimate goal is to influence the quality, efficiency and accountability with which services are provided.

5.1.1 Features of the CSC Methodology

1. It uses the “community” as its unit of analysis, thus focusing on accountability at the local/facility level. In this respect, it differs from the traditional/conventional surveys, which use individuals as the unit of analysis;
2. There must be a definite and almost immediate feedback mechanism built into the execution. This is done by means of an “interface meeting” between the service users and the providers (such as the local government agencies/bodies).

To apply the CSC methodology effectively, the Civil Society Organisation (CSO) or Group will require a mix of skill and information about the following:

- Understanding of the socio-political context of governance and the structure of public service delivery at the decentralized level;

⁴ The approach presented here is based on the note prepared by J. Singh and P. Shah of the Social Development department of the World Bank. See references for full details.

- Technical competence of an intermediary group like a local NGO to facilitate the process;⁵
- A strong publicity campaign to ensure maximum participation from the community (users), service providers, and other local stakeholders, and
- How to establish systems at the local level to institutionalize and sustain community-driven poverty monitoring.

5.1.2 Stages of the Methodology

The methodology being adopted for the community assessment of poverty reduction effectiveness is summarized as follows:

Box 5.1 Step-Wise Approach to CSC⁶
<ol style="list-style-type: none"> 1. Preparation for Community Engagement 2. Organization of Community Engagement 3. Developing and Completing an Input Tracking Matrix 4. Community Scoring of Performance 5. Provider of Self-Evaluation Scorecard 6. Interface Meeting between Community and Service Providers 7. Creating a Mechanism for follow-up on Recommendations and Actions

This Section of the Manual is organized slightly differently than the two previous sections. Due to the level of detail involved, the community assessment process has been divided into stages, and then those stages present the steps involved. All the steps involved in each stage are outlined in detail. These steps are meant as guidelines for the implementing CSO or the Partner Organization to facilitate effective implementation of the community assessment exercise.

Prior to the implementation of the Community Score Card exercise the implementing CSOs (including their appointed community facilitators) will complete a training workshop in utilizing the CSC methodology. This training will be participatory in nature and will include some test exercises in order to ensure that facilitators are skilled in the approach.

5.1.3 Relationship with DA

Although it is a CSO that carries out the community assessment it is critical that a positive relationship be developed between that CSO and the DA. One objective of the assessment is to create dialogue and this can not be done if the DA feels they are being judged, or that they are being excluded from the exercise. The CSO should visit the DA and meet with

⁵ While this Manual focuses on building technical competence for CSC, it is important for the Implementing CSO to possess competence in other participatory techniques/tools.

⁶ Each of the stages, including the detailed components, is simplified in the following description.

senior management before the assessment commences. Senior management of the DA will then assign specific people to assist in the organization of the assessment where applicable. Information should be fed back to the DA on a regular basis so they are not caught unaware at any time. This cordial relationship will help to ensure that the results of the community assessment are considered and integrated into the District Development Plan.

5.2 STAGE 1: Preparation for Community Engagement

The preparatory phase is very important for the total success of the exercise. If the necessary preparatory activities are not done well, the implementing team will encounter many challenges or difficulties.

Step 1: *Identifying the Scope of Assessment*

To identify the scope of assessment, you need to consider the sectors or services that are to be assessed. Priority poverty reduction areas have been outlined in the Ghana Poverty Reduction Strategy (GPRS) to serve as a guide. The community assessment exercise will cover such services as:

- Water and Sanitation and related Gender issues.

<p>Box 5.2 Steps in Preparatory Groundwork</p>
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- | |
|---|
| <ol style="list-style-type: none"> 1. Identifying the scope of the assessment 2. Collecting Supply-Side Information 3. Outline Anticipated Performance Indicators 4. Determine the geographical unit and coverage 5. Identification and training of facilitators 6. Involving other partners 7. Preliminary Data Review and Stratification of Community by Usage |
|---|

Decide within the sector/service, what specific facilities or services offered to assess. For example, within the water and sanitation sector, the Group may focus on availability of and access to good drinking water, sanitation practices, water and sanitation facilities, etc.

Step 2: *Collecting Supply-side Information*

The implementing team needs to collect supply-side information on the sector or service that is to be assessed. This is important for establishing service delivery mandate and community entitlements. These will be used as a basis for tracking inputs and actuals. Collection process for supply-side information includes:

- Reviewing national and sector policy documents on the service. This is meant to establish service delivery mandate, scope and coverage;
- Holding discussion with service providers to determine and ascertain inputs 'promised' and actual allocation or transfer;
- Providing the information to the community (focus group) as their entitlements. Note also that, the data will be used to fill or complete an input-tracking matrix (as part of stage 4).

Step 3: *Outline Anticipated Performance Indicators*

Once the services or sectors are identified, the priority poverty indicators to be targeted should be tentatively discussed and noted. The community will develop the actual performance indicators during the focus group sessions.

Step 4: *Determine the Geographical Unit and Coverage:*

Based on available human and material resources, one or more communities could be selected for the assessment. Ideally, a village or settlement that is cohesive should be selected, so that defining the members of different villages as a 'community' becomes both realistic and acceptable. A maximum of four (4) have been approved for each of the three (3) pilot districts. A criteria needs to be developed to help determine which communities get selected out of the lot. The criteria may include: level of deprivation, accessibility, and homogeneity.

Step 5: *Identification and Training of Facilitators*

The CSC model is heavily dependent on the quality of facilitation and mobilization. Ideally, people or groups with experience in facilitating participatory methods should be engaged for the task. These facilitators need to be trained on the methodology or the model and how to organize the exercise. The selected Partner Organizations (POs) should be identified, contracted and trained to conduct the assessment.⁷ After the training, which should take at least four (4) days, three (3) days for actual training and one (1) day for field practice or testing, the team should be provided with the manual and relevant background information.

Step 6: *Involving Other Partners*

The involvement of traditional leaders, members of local governments, workers at the service facilities in the area, community volunteers, and staff from NGOs in each of the villages is also important. The level and stage of involvement should be clarified and agreed upon particularly during the training for the CSO.

Step 7: *Preliminary Data Review and Stratification of Community by Usage*

To achieve a meaningful CSC or monitoring within the community, it is necessary to identify patterns of usage. This includes finding out first who uses what services, how much, and what the demographic and poverty distribution of usage is. While much of the data collection is done by means of focus-group interactions in the community gathering described below, this preliminary information will greatly enhance the efficiency and quality of the focus groups that are created.

This initial stratification can be done by two means:

- 1) Either through field visits and informal interviews by the facilitating team, or
- 2) By using existing social/poverty mapping data collected by previous participatory exercises, for example, the CWIQ findings.

Box 5.3

Questions to Consider in Preparatory Groundwork

1. *Are facilitators available and committed to undertaking the assessment?*
2. *Is the community experienced with participatory methods?*
3. *Does a social or poverty mapping of the community exist?*

The stratification will also give a first glimpse at the usage issues and performance criteria that one can expect to generate through the exercise.

⁷ Specific Terms of Reference have been prepared for each Partner Organization. A copy of the ToR is provided as an Annex.

5.3 STAGE 2: Organization of Community Engagement

Step 1: *Mobilizing Community*

The community assessment exercise is only effective when there is broad participation by community members. For this reason, the meeting must be preceded by full-scale mobilization of people in the community through awareness and sensitization campaigns. The local methods of calling people to a meeting could be explored and used by informing them about the purpose and benefits of the exercise. If a large segment of the community participates in the process, the first step towards success will have been achieved.

Step 2: *Logistics of Gathering*

The organization of the gathering will also involve certain decisions about logistics such as:

- 1) Deciding the venue for the gathering based on a sense of the number of participants that will take part and how accessible it is;
- 2) Procuring materials for the gathering – flip chart stand and paper, pencils, Public Address system (optional), blackboard (optional), etc.

Box 5.4
Steps in Organization of Community Engagement

1. Mobilizing Community
2. Logistics of Gathering
3. Plenary Gathering to Explain the Context and Focus of the Assessment

Step 3: *Plenary Gathering to Explain the Context and Focus of the Assessment*

Box 5.5

Have you thought about...

- What steps can or should be used to achieve high level of community involvement? For example: FM/Radio, Traditional methods such as beating the Gong gong, using the Sub-Districts and Unit committees where they are functional.
- Have the stakeholders, community members, local authorities and other service providers seen or accepted the need for the assessment? If not, what is holding them back?
- Are the logistics ready in case more than the expected number of people show up?
- Are there sufficient facilitators for both the exercise and to handle the possibility of overwhelming numbers?

An introductory plenary meeting of all participants should be convened to explain the nature and purpose of the poverty monitoring exercise. The project or service selected for performance assessment should be explained, and the methodology to be followed should be presented with the aid of a simple diagram or other visuals such as flow charts.

Ensure clarity and in-depth understanding of the exercise among the participants before you proceed.

5.4 STAGE 3: Developing and Completing an Input Tracking Matrix

An input tracking matrix is a simple tool for determining what inputs have been given to a community and what has happened to those inputs. The input tracking matrix provides the basis for the community score card in that it provides the information on what is to be scored, essentially it defines the parameters for the discussion. It gives community members an idea of what they are supposed to have, which then leads to a discussion on

whether or not the community received the inputs, and if they did what they are being used for.

Step 1: *Decide and Explain Which Inputs are to be Tracked*

The first step in generating the input tracking matrix is to explain to the plenary meeting, the particular services or projects that are going to be tracked and why. These inputs will be researched by the implementing CSO. Examples of inputs in Water and Sanitation include but are not limited to:

- Type and number of water sources;
- Water facilities available;
- Training of WATSANs;
- Provision of spare parts.
- Number and membership of WSDBs.

In order to collect the supply-side information in advance the inputs that are to be tracked have to be determined in advance of the community gathering. However, at this point the community should be asked if they have any indicators to add. This is important as it gives the community the chance to express how they perceive poverty in a particular sector. Their definition of an appropriate way to determine if water and sanitation facilities are adequate may be different than the service provider. Allowing communities to add indicators can provide valuable information to the service provider by increasing the understanding of the beneficiaries view of the problem.

Box 5.6
Steps in Developing and Completing Input Tracking Matrix

1. Decide and explain which inputs are to be tracked.
2. Give the Plenary Meeting Information on Entitlements
3. Formation of Focus Groups
4. Fill the Input Tracking Matrix
5. Recording Data
6. Inspection of Physical Project Outputs or Inputs (optional)

Step 2: *Give the Plenary Meeting Information on Entitlements⁸*

In order for the community to be able to track the inputs of a facility, project or service, they need to be informed about what their entitlements are. That is, what inputs are they supposed to have? These entitlements should be expressed as target quantities of the inputs identified earlier. Knowing such entitlements is in itself a source of empowerment for the community, and enables them to decide upon input indicators more easily.

For example, in the case of type and number of water sources a community should be told how many bore holes were allocated according to the service provider. In the following step, the community will discuss whether the entitlements were received and whether or not they are being utilized.

⁸ This step pre-supposes that the information about entitlements is available to the facilitating team. For services such as Water and Sanitation, Health and Education, these may be available in the respective sector or sub-sector policies. Alternatively, the levels of inputs for that particular facility provided for in the current annual budget can be used if sector data are not available. Without knowing what was supposed to be there, one cannot compare the actual levels of inputs with what was promised to citizens.

Note The information on entitlements has already been collected. It was collected at the preparatory stage where the service providers were consulted and the relevant sector documents reviewed.

Step 3: *Formation of Focus Groups*

Drawing from your experience in community stratification, if more than twenty (20) community participants respond to the invitation, it will be best for the facilitation team to divide them into randomly selected groups of not more than 15-20 participants. The classification can be done on the basis of usage and non-usage, or other forms that are convenient for promoting participation and generating good responses. However, in case the number is up to 20, the input tracking exercise can be done with all the participants.

Step 4: *Fill in the Input-Tracking Matrix*

The facilitating team will request (ask for) and record the data on each of the inputs that have been stated. Wherever possible, each of the statements of the group's member should be substantiated with some form of concrete evidence (receipt, account, actual drugs or food, etc). One can triangulate or validate claims across different participants, as well. Anecdotal evidence should be written in the remarks column as shown in the format below.

Table 5.1
Format for Recording Input Details

Name of input	Entitlement (or planned)	Actual	Remarks/ Evidence

Step 5: *Recording Data*

After recording the input entitlements, actual and evidence, team members will record the information together with the discussions. The raw data generated belongs to the community and should never be taken away by the team. The team can extract what they need and leave behind the community's property.

Step 6: *Inspection of Physical Project Outputs or Inputs (optional)*

In cases involving the scrutiny of a physical infrastructure project, the last stage can be an inspection of the project output to see if it is completed and is of satisfactory quality. PRA tools, such as the transect walk, could be used for this purposes. One can also do this in the case of some physical inputs like quantity of water supply equipment, number of sanitation facilities such as toilets, rubbish disposal containers and dumps, and many others.

Box 5.7

Have you thought about...

- *Is the data on entitlements complete? Are official records/accounts available?*
- *Does the list of input indicators correspond with available official information?*
- *Have the claims and number of participants been validated or backed by different members of the community?*

5.5 STAGE 4: Community Scoring of Performance

Step 1: *Divide Gathering into Focus Groups Based on Usage*

As with the input tracking, the CSO should classify or group participants in a systematic manner. One way of doing it is, to form focus groups according to usage of the service being evaluated. This will ensure that there is a significant number of users in each of the focus groups because without this critical mass, the usefulness of the data will be limited. Each group should further have a heterogeneous mix of members based on age, gender, and occupation so that a healthy discussion can ensue. Ideally, the initial focus groups

formed for the input tracking, taking usage into account, can be used for the community scoring process. In Water and Sanitation, for example, groups center around:

Box 5.8 **Steps in Community Scoring of Performance**

1. Divide gathering into focus groups based on usage.
2. Develop adequate performance criteria.
3. Scoring of indicators and benchmarks by focus groups.
4. Summarizing the group scores.

- Men Users
- Women Users
- WATSANs
- WSDB
- Non-users (Adults who themselves and / or their children are not using the water facility being assessed).

Step 2: *Develop Adequate Performance Criteria*

Each of the focus groups now needs to go through a discussion of the service/sector/program/institution under scrutiny and brainstorm to come up with a set of indicators with which to evaluate the facility and services under consideration. A methodology for generating group indicators is outlined as follows:

First Task: Using the following guiding questions, help the group to brainstorm on what they will use to assess the facility or project.

- How will someone know that this facility or service is operating well?
- How do you judge the performance of the facility or service (what specifically do you look for)?

Second Task: List all issues mentioned and assist the group to organize the information under broad headings. The facilitating team must also ensure that everyone participates in developing the indicators so that a critical mass of objective criteria is brought out. If too many suggestions come up, (which will be the case) then they must ask the focus groups to prioritize – usually 5-8 indicators is optimal. The final set of indicators that will be used is decided after a general discussion within the group.

Note: In addition to the group-generated indicators, the evaluation team as a whole should agree on a set of standard indicators (about 3) for each facility, project or service. The 20 District Indicators, plus a few being developed by DISCAP on Water and Sanitation, could be standardized. Community assessment of facilities based on these standardized benchmarks could then be used to aggregate and or compare results from different facilities or projects, and also compare performance over time.

Box 5.8 provides an example of indicators that could be generated for *Water and Sanitation Services*.

Box 5.9 Sample Indicators for Water and Sanitation Sector

Access to safe/potable water in rural areas

- Adequacy of facilities delivered
- Population not served
- Affordability in terms of tariff
- Quality of water in terms of taste,
- Reliability in terms of functioning systems and down time

Adequacy of Water Supply Facilities

- Water sources (Dams, Piped-schemes, Boreholes, etc)
- Spare parts

Quality of Water Supply Services

- Equipment and spare parts;
- Established support institutions;
- Staffing (number, qualification)
- Reliability of service

Access and Affordability

- Access to facility or service in terms of distance and travel time
- Affordability in terms of cost

Adequacy of Sanitation Facilities

- Types and number of sanitation facilities
- Number of domestic toilets
- Number of Institutional toilets

Sustainability of Water and Sanitations facilities

- Community WATSANs formed
- Water And Sanitation Development Board (WSDB)
- Participation by women in water and sanitation support structures (WATSAN and WSDB)

Attitude of staff of WATSANs or WSDB

(separate male and female, and mix)

- Politeness
- Punctuality
- Commitment
- Treatment of Users

Note: Sufficient time must be given to the groups for this stage. The facilitators should make sure that they do not try to influence or suggest criteria beyond providing and explaining the national/district benchmarks.






Step 3: Scoring of Indicators and Benchmarks by Focus Groups

Different methodologies can be adopted to score the group-generated indicators and National/District benchmarks. Whichever methodology is adopted, however, the team must ensure that it

- Helps achieve consensus;
- Is usable in a resource-poor environment;
- Minimizes outside influence;
- Is easy to use;
- Ensures credibility of results; and
- Fosters participation.

First Task: There are numerous methods that can be used to score performance on the indicators. If the method outlined here is not appropriate the CSO can develop one of their own. The methodology proposed here is to use the following criteria, scoring system and symbols to assess each indicator or benchmark of the facility or service performance:






Figure 5.1

Criteria	Facial Expression	Score
Very bad		1
Bad		2
Just OK		3
Good		4
Very Good		5

This method is useful because it is simple, pictorial, and fun. Another methodology could involve using stones or cereals/grains to rate with 1 stone = poor to 5 stones = fantastic.

Second Task: After explaining the scoring procedure to the group, draw the following format (see Figure 5.2) either on a flip chart or on the ground. Then ask each participant to vote for a given indicator or benchmark by placing one mark (for flip chart users), a grain or stone (for drawings on the ground) in the column that he/she feels she/he rates the performance. For example, if the group member feels that the attitude of personnel was bad, then he or she will place the stone in the second column or tick the second column.

Figure 5.2
Format for scoring community generated indicators

		<i>Very Bad</i>	<i>Bad</i>	<i>Just OK</i>	<i>Good</i>	<i>Very Good</i>	<i>Remarks</i>
<i>Indicator or Benchmark</i>	Votes:	1 	2 	3 	4 	5 	
<i>Practice Indicator</i>	Votes:						
<i>Availability of staff</i>	Votes:						
<i>Availability of ambulance</i>	Votes:						
<i>Availability of drugs</i>	Votes:						
<i>Availability of furniture</i>	Votes:						
<i>Attitudes of staff</i>	Votes:						
<i>Treatment of pupils patients</i>	Votes:						

The following guiding questions should be used to generate responses to complete the remarks column as shown in the format above.

- Why did you give this rating (especially for very good and very bad scoring)?
- What is responsible/what is the problem?
- What can be done to improve the situation?

Step 4: *Summarizing the Group Scores*

First Task: A summary table (See Table 5.2) of the indicators of each focus group should be prepared for presentation to the interface meeting. The easiest way to summarize the scores is to calculate the average score. The option is explained below with specific examples.

Table 5.2

Indicator or Benchmark	Average Score (out of max. of 5)
Access to safe/potable water in rural areas	
Adequacy of Water Supply Facilities	
Quality of Water Supply Services	
Access and Affordability	
Adequacy of Sanitation Facilities	
Sustainability of Water and Sanitations facilities	
Attitude of staff of WATSANs or WSDB (separate male and female, and mix)	

Second Task: Calculating Average Scores:

This requires that you calculate the average score for each indicator. To do this, follow these steps:

- Take the number of votes (i.e. the number of ticks, marks, stones etc., depending on what was used to score) in each column and multiply the number by the corresponding score.
- Add these up to arrive at a total.
- The average is obtained by dividing this total by the number of people that voted. An example is shown below with this scenario:

A focus group discussion involving 15 Water Users regarding Water and Sanitation Development Board (WSDB) in the community scored one of the indicators as shown in the table below.

Table 5.3

Indicator	1. Very Bad	2. Bad	3. Just OK	4. Good	5. Very Good	Total	Average
Attitude of Water Board Members (votes given)	5	6	4	-	-		
Calculation of total score	5x1=5	6x2=12	4x3=12	0	0	29	29/15=1.9

Illustration:

Average score for the indicator: *Attitude of Board Members*, is 1.9, implying it falls between very bad and bad. Only one decimal place in it is shown in the result to avoid providing a false appearance of precision in the estimate of the average.

Third Task: Securing Explanation/Evidence to Support Ranking

After every one has assessed the facility or service based on a given indicator or benchmark, calculate the average score as explained above. Discuss the results with the group. For instance, in order to draw people's perceptions better, it is necessary to ask the

reasons behind both low and high scores. This helps explain and provide valuable evidence and useful examples regarding service delivery. The rationale for the score will also be useful in the interface meeting.

Fourth Task: Recording Data

The facilitation team should copy the outputs, what ever they need to take away, rather than removing the flip charts. The District and Sub-District Authorities as well as other traditional and opinion leaders in the community could serve as the custodians of the outputs.

Fifth Task: Obtaining the Group’s Suggestions for Reforms / Improvement

The process of seeking user perceptions alone would not be fully productive without asking the community to come up with its own set of suggestions as to how things can be improved based on the performance criteria they came up with. The whole exercise is geared towards improving the services. Guiding questions to ask may include the following:

- What can be done now to improve the service?
- What support is needed from the community to improve the service?
- What needs to be done for the community to be able to do that?
- What support is needed outside the community and within?
- How and when will support be obtained?

Box 5.10

Have you thought about...

- *Do the focus groups have sufficient number of users? Are women being represented?*
- *Are the performance criteria objectives?*
- *Was there sufficient participation of community members within groups in discussing performance criteria to use*
- *Were some members dominating the discussion while others were quiet?*
- *Was sufficient time given for group discussion?*
- *Did facilitators avoid biasing views?*
- *Are the scores representative or do they reflect personal biases of a few?*
- *Are the high and low ranks backed by material/anecdotal evidence?*
- *Does the community have a clear idea of improvements need in the light of their scores?*

Sixth Task: Summarizing the Focus Group Outputs

The scores of the different focus groups should be summarized for presentation to the interface gathering, as in the table below.

Table 5.4

Comparison of Average Score and/or Assessments of different groups:

Indicator or Benchmark	User Groups		
	Parents	Pupils	Non-Users
Adequacy of Water Supply Facilities			
Adequacy of Water Supply Facilities			
Quality of Water Supply Services			

The above table would be completed to show all voting results from all groups. For National/District benchmarks, where all groups voted on the same criteria, the results of the different user groups can be placed side by side to allow a comparison of how the different groups have scored and/or assessed the facility or project. The results for group-generated indicators/or indicators would be recorded in only one column, unless by coincidence two or more groups generated and voted on the same indicators. The composite table would be a useful input for dialogue between the different groups during the interface meeting.

5.6 STAGE 5: Provider Self-Evaluation Score Card⁹

The provider self-evaluation is the component of the community performance monitoring process that tries to draw out the perspective from the supply-side. The exercise is similar to the community scoring, as described above. It will usually have to be undertaken separately from the community gathering, unless one can get enough staff members from the facility, or District Assembly representatives to attend the gathering. Then one can go for both at the same time. The steps in undertaking the provider self-evaluation are given below.

Step 1: *Selecting and Contacting Facilities*

The first step is to choose which facilities or services will undertake the self-evaluation and contact the staff there, so that they are available for the exercise and make proper arrangements. The decision regarding the service provider to undertake the self evaluation should be closely related to the indicators decided upon by the community. For example, if it is a rural community and the indicators relate to bore holes there is no need to evaluate the Water Board who manages the Small Town System. A more appropriate service provider would be the DWST.

The success of the self evaluation depends to a large extent on the receptiveness of the staff at the facility, and so there may be a need for some advocacy and explanation to them regarding the purpose and use of the performance monitoring process.

Box 5.11
Steps in Provider Self-Evaluation Score Card

1. Selecting and contacting facilities
2. Ensuring adequate participation
3. Deciding on Performance Indicators
4. Provider Scoring of Data
5. Reflection and Explanation of High/Low Scores
6. Recording Data
7. Suggestions for Reform/Improvement

Step 2: *Ensuring Adequate Participation*

Since the facility staff will normally be busy with their duties, it is important to set out a time in advance for completing the exercise, so that an adequate number of staff participate. Ideally, at least half of the facility staff should be involved in the self-evaluation for them to be adequately represented.

Step 3: *Deciding on Performance Indicators*

As with the community, the facility staff need to go through a brainstorming session to come up with their own set of performance indicators. These should then be classified in a manner that is easily comparable with the indicators chosen by the community. The relevant National benchmarks should also be included in addition to the indicators developed by the group.

⁹ This will likely be the District Assembly; hence, assessing their capacity for development management could be linked to the Provider self assessment.

Step 4: *Provider Scoring of Data*

As in the community gathering, the staff of the facility – be it a school or health clinic – need to vote on each of the indicators they came up with, plus the national benchmarks. This is done in exactly the same way as was done in case of the CSC.

Step 5: *Reflection and Explanation of High/Low Scores*

The facility staff also need to be asked to reflect on why they gave the scores they did, and to also come up with their own set of suggestions for improving the state of service delivery. The guiding questions given earlier would be useful. The facilitators could also go further and ask the providers what they consider to be the most important grievances from the community's perspective, and then compare and see the extent to which the deficiencies are common knowledge¹⁰.

Step 6: *Recording Data*

The data from the self-evaluation is also recorded in the form of a scorecard, with the chosen performance indicators and national benchmarks as the rows and the scores as the columns. An example of a provider self-evaluation by WSDB members is shown in the page to follow.

Table 3.6
Example of a Self-Evaluation Scorecard by WSDB members

	<i>Indicator</i>		<i>1. Very Bad</i>	<i>2. Bad</i>	<i>3. Just OK</i>	<i>4. Good</i>	<i>5. Very Good</i>	<i>Remarks</i>
1.	<i>Management of the Water System</i>	Votes:						
1.1	<i>Qualified staff</i>	Votes:						
1.2	<i>Punctual staff</i>	Votes:						
1.3	<i>Adequate staff</i>	Votes:						
1.4	<i>Cleanliness around water source</i>	Votes:						
1.5	<i>Good relations between the Board members and water users</i>	Votes:						
1.6	<i>Adequate Water supply to Users</i>	Votes:						
1.7	<i>Infrastructure and equipment</i>	Votes:						
1.8	<i>Adequate equipment</i>	Votes:						
1.9	<i>Construct additional pipe systems</i>	Votes:						
2.	<i>Capacity to serve large number of Users</i>	Votes:						
2.1	<i>User satisfaction</i>	Votes:						
2.2	<i>Staff motivation and incentives</i>	Votes:						
2.3	<i>Career advancement opportunities (promotions)</i>	Votes:						

¹⁰ If the facility staff are aware of the complaints the community have of them, it is an indication that the problem is not information gaps, but bad incentives.

The categories above can easily be compared with those in the community scorecard for Water Supply Services.

Step 7: *Suggestions for Reform /Improvement*

The staff at the service facility should also be asked about reforms or suggestions they have for improving the quality and efficiency of the services they provide. These too can be compared with the suggestions of the community to see to what extent the demands for reform are common.

Box 5.12

Have you thought about...

- *Have appropriate arrangements been made for the conduct of the self-evaluation?*
- *Have the Board members been informed?*
- *Are the Board members forthcoming, or do they require an incentive to participate?*
- *To what extent are the problems regarding service delivery common knowledge?*
- *Why then have changes not been made?*
- *Are Board members aware or do they have an idea about what perceptions the community might have of them?*
- *Are there large differences in the performance criteria of the providers and the community? If so, then there is a problem of perceptions and aligning of incentives and goals.*

5.7 STAGE 6: The Interface Meeting: A Feedback to Service Providers

This stage in the community performance monitoring process holds the key to ensuring that the feedback of the community is taken into account and that concrete measures are taken to remove the shortcomings of service delivery. Therefore, the steps given below need to be given adequate attention.

Step 1: *Preparing Both Parties for Meeting*

Both the community and providers need to be prepared for the interface meeting. They should therefore be sensitized about the feelings and constraints of the other side. This ensures that the dialogue does not become adverse, and that a relationship of mutual understanding is built between client and provider. The sensitization task can be done through a series of orientation sessions with members of both sides, and through sharing the results of the two scorecards.

Step 2: *Ensuring Adequate Participation from Both Sides*

This will require mobilization at the community level, and arrangements so that facility staffs are able to get away from their duties and attend the meeting. One can further involve other parties, like local political leaders and senior government officials in the interface meeting to act as mediators, and to give it greater legitimacy.

Box 5.13

Steps in The Interface Meeting

1. Preparing both parties for meeting
2. Ensuring adequate participation from both sides
3. Invitations to people out the community
4. Facilitating productive dialogue and coming up with concrete reforms
5. Reporting of discussions and minutes of gathering

Step 3: *Invitations to People Outside Community*

People from outside the community like Councillors of the Area Councils, facility staff, NGO workers, etc will also need to be invited for the interface meeting (described below). Here a decision on how the exercise will be scheduled has to be taken. For instance, will the interface be carried out on the same day that the input tracking and community scoring exercise are done, or later on following a provider self-evaluation? The choice will determine when to call the outside parties, and what kinds of arrangements will be required for their participation.

Step 4: *Facilitating Productive Dialogue between Groups and Coming Up with Concrete Reforms*

Once both groups (Users and Providers) have gathered, the implementing team facilitates dialogue between the community and the service providers and helps them come up with a list of concrete changes that they can implement immediately. Strong facilitation is required to ensure that:

- A positive and constructive tone is maintained throughout the dialogue.
- Negative comments should be acknowledged, but personalized abuse should be discouraged.
- At all times, the focus should be on joint searching for constructive solution to identified problems.

This will give credence to the entire process from both the community and provider's perspective, and make it easy to undertake such exercises in the future. Senior government officials and /or politicians present can also endorse the reforms.

Step 5: *Reporting of Discussions and Minutes of Gathering*

The primary data from the meetings include not just the input-tracking matrix and scorecard, but also a brief report of the discussions that ensued during the gathering. In particular, all statements used as evidence for input tracking, and explanations or examples given for the scoring process, should be noted down and summarized in the remarks column. A separate comprehensive report detailing out all the evidence given should be included in the narrative report of the discussion.

A committed member of the facilitating team should keep the minutes of the community gathering. Ideally, this person should not have to facilitate directly, so that he/she can pay attention to the discussion and note all the important points raised.

Box 5.14

Have you thought about...

- Are important decision-makers from both sides ready and able to attend the interface meeting?
- Is the atmosphere productive and cordial? Or is getting adverse?
- What commitments for change have been offered at the end of the meeting?
- Is there a consensus about the need to do the exercise on a regular basis or not?
- Is the facilitating group independent and neutral?

5.8 STAGE 7: Creating a Mechanism For Follow-Up on Recommendations and Actions

The entire exercise is not worth undertaking if recommendations are not followed up for actual implementation. The follow-up arrangements are at two levels- community and Districts.

Step 1: Constituting Community Action Group

Prior to the interface, the implementing team should identify a number of community leaders to constitute a committee that will be called a 'Community Action Group' (CAG). Its membership will include:

- An opinion leader;
- Female spokesperson or *Magazia*;
- Representative of the Area Council;

The role of the committee will include:

- Following-up on decisions and commitments at the interface meeting to ensure implementation;
- Facilitating community compliance on commitments made.
- Stimulate and participate in community assessment of other poverty reduction concerns of the community.

Box 5.15

Steps in Creating a Mechanism for Follow Up

1. Constituting a Community Action Group
2. Constituting a Direct Action Group

The CAG will be introduced to the interface meeting at the end of the discussion and their role explained in detail to avoid creating the wrong impressions about it

Step 2: Constituting a District Action Group

At the District level, the team will facilitate the formation of a representative group to:

- Take charge of reviewing the M&E process for sustainability purposes
- Follow-up on decisions and recommendations made at the interface meeting to ensure compliance and action; and,
- Facilitate the scale-up arrangements.

The committee will comprise:

- A Regional representative;
- A District representative
- Civil society representative;
- Representative of the beneficiary community (possibly a member of the CAG)

The team could be constituted either prior to the interface meeting or during the meeting/dialogue. The facilitating team should introduce the members all other participants. It will be advisable for the two teams (CAG and DAG) to meet and outline a plan of action.

5.9 Summary

As you can see the community assessment, though a worthwhile exercise, entails a lot of intricate work and balance between stakeholders. There are key factors to be considered at all stages of the assessment and the CSO needs to be well trained and aware of these critical success factors.

1. **PREPARATION FOR COMMUNITY ENGAGEMENT**
 - Are facilitators well trained? Are they familiar with the community, language and culture?
 - What will the assessment focus on?
 - How many communities will be sampled?
 - Has accurate supply-side information on inputs been collected?
2. **ORGANISATION OF COMMUNITY ENGAGEMENT**
 - Have all groups from the community been made aware of the assessment?
Has special consideration been given to ensure that vulnerable groups are aware?
 - Is the location and time of the gathering appropriate for the community's schedule?
 - Are community members aware of the goals of the assessment?
3. **DEVELOPING AND COMPLETING AN INPUT TRACKING MATRIX**
 - What inputs are going to be tracked? Are they appropriate indications of efforts in the sector?
 - Does the community understand what their entitlements were?
 - Has the data provided by the community been verified in the plenary?
4. **COMMUNITY SCORING OF PERFORMANCE**
 - Is the community able to brainstorm appropriate indicators?
 - Are National/District benchmarks being utilized in all communities?
 - Is the scoring methodology appropriate for this particular community?
 - Did the community provide a rationale for the scores?
 - Are facilitators exploring variances and obtaining suggestions for improvement?
5. **PROVIDER OF SELF-EVALUATION SCORECARD**
 - Is the appropriate provider selected?
 - Have all staff been invited?
 - Are facilitators exploring variances and obtaining suggestions for improvement?
6. **INTERFACE MEETING BETWEEN COMMUNITY AND SERVICE PROVIDERS**
 - Are both the communities and the provider aware of the feelings of the other before the meeting?
 - Is there adequate participation from all stakeholders?
 - Is facilitation positive and is there room for dialogue?
7. **CREATING A MECHANISM FOR FOLLOW-UP ON RECOMMENDATIONS AND ACTIONS**
 - Are appropriate measures being taken to ensure follow-up?

Positive communication and collaboration are needed throughout to ensure that the needs of all involved are met. The relationship between the DA and the CSO, as well as the CSO and the community are integral to the success of the assessment. Trust, openness and commitment from all sides are necessary components. However, the payoff of a well executed community assessment far exceed these complexities and make it all worth it.

6 CONCLUSION

We have now reached the end of the Decentralized M&E process. We hope that this process is one that will yield benefits for the Districts, Regions and country as a whole as progress towards poverty reduction goals is measured and the information gathered feeds into the planning process to improve future efforts.

At the end of this process do not forget to congratulate yourselves. It is a multi-faceted and complex one, though we have tried to simplify it as much as possible. The hope is that through the process new relationships have been developed and existing relationships strengthened, for in essence, M&E and development in general, depend on those relationships.

This Manual, and the process itself, as are most things, is a work in progress. If throughout your experience you think there are things that could be added, or things that should be subtracted, please let us know. Your feedback is critical to the process, as we have emphasized throughout.

Now that you have completed the reading of the Manual it is time to implement. **To take action.**

GOOD LUCK!

REFERENCES

- CIDA. A Results Approach to Developing the Implementation Plan. Canadian International Development Agency. Hull: 2001.
- CIDA. "How to Perform Evaluations: Gender Equality." No. 4. Canadian International Development Agency. Hull: 2001.
- CIDA. RBM Handbook on Developing Results Chains. Canadian International Development Agency. Hull: 2000.
- Fort, L., B. Martinez and M. Mukhopadhyay. "Integrating a Gender Dimension into Monitoring and Evaluation of Rural Development Projects." World Bank. Washington, D.C.: 2001.
- Government of Ghana. "Ghana Poverty Reduction Strategy." Government of Ghana. Accra: 2001.
- NDPC. "Guidelines for a District – Based M&E System." NDPC, Ministry of Local Government and Rural Development. Accra: 2003.
- NDPC. "National Decentralisation Action Plan." NDPC, Ministry of Local Government and Rural Development. Accra: 2003.
- Singh, J. and P. Shah. "Community Score Cards: A Short Note on the General Methodology for Implementation." World Bank. Washington, D.C.: date unknown.

ANNEX A – COMMUNITY-BASED ASSESSMENT/RESEARCH METHODS

Focus Group Discussions/Interviews

Focus group discussions or interviews are a special type of participatory assessment methodology. In a focus group, there could be a mixed representation of stakeholders or people with similar backgrounds brought together for a specified or unspecified number of hours in a day to discuss or answer a moderator's questions on a specific topic. This methodology is useful for the community poverty assessment component. However, should the collection of qualitative data on the district poverty reduction indicators become necessary, FGD can be used by DPMG to gather such data.

Focus group members hear each other's answers to the interview questions and can make additional comments after hearing what their colleagues in the group say. Focus group participants are not required to agree with each other or reach a consensus. The discussion should be enjoyable, carried out in a non-threatening environment. The moderator should be accompanied by a second resource person, who can take detailed notes of the group's discussions and responses.

Advantages of FGDs:

- They are cost-effective;
- They generate good quality responses; and
- They promote sharing of common and diverse views.

Disadvantages/challenges of FGDs:

- A limited number of questions can be asked;
- Resource persons need to be skilled facilitators;
- Minority perspectives may remain hidden; and
- highly controversial or personal topics are not appropriate for this method.

"The power of focus groups resides in their being focused. The topics are narrowly focused, usually seeking reactions to something (a product, program, or shared experience) rather than exploring complex life issues with depth and detail). The groups are focused by being formed homogenously. The facilitation is focused, keeping responses on target. Interactions among participants are focused, staying on the topic. Use of time must be focused, because the time passes quickly."

Michael Quinn Patton, Evaluation Expert

Community or Group Ranking

Another group or community-based research method is *group ranking*. In this method, a list of problems, issues or actions are expressed clearly in a series of statements. Participants are asked to assign a score to each of the statements, from most important (which would be assigned a score of i.e. 5 or 10 out of ten (depending on number of issues) to the least important (which would be assigned a score of one).

Scores from all participants are then combined and tallied on a master sheet, and an overall ranking of the statements is produced. The facilitator then guides the group through a discussion of what next steps should be taken on these problems, issues or actions.

Note: This methodology should be used in collaboration with Focused Group Discussion for community assessment of poverty reduction interventions.

SWOT Analysis

This methodology guides a group through an analysis of participants' assessments of the strengths, weaknesses, opportunities and threats associated with a given program or project. The key questions in a SWOT analysis, from an Expert's perspective, are as follows:

Strengths:

- What are those things in an intervention that are working well?
- What are the aspects people are proud to talk about?

Weaknesses:

- What are the things that have not worked so well?

Opportunities:

- What are your ideas on how the intervention can overcome its weaknesses?; and,
- How can it build on its strengths?
- What external circumstances exist that will improve the intervention?

Threats:

- What are the things that threaten the range of opportunities for change?

Note: This approach can also be used in larger groups or community meetings, which can be broken out into smaller discussion groups, which are then asked to report back to the plenary. Action arising from SWOT analysis is referred to the appropriate agencies and stakeholders for follow-up. This method can be used as part of the process of assessing district capacity for managing poverty.

Group Interviews

Interviewing a group of community members is one important community assessment method. Such a group could include the Chief or Headman and Elders of the village, a women's income generating cooperative or association, mothers attending a child-health clinic, or a classroom of school children. A Group can range in size from two to three to ten to fifteen community members.

Advantages:

- Participants can pool their information and perspectives to produce good-quality responses;
- Many participants prefer a group interview before being interviewed individually; and,
- Interviewers/researchers can use group interviews to reach more community members more rapidly than through individual interviews.

Disadvantages:

- Since the group interview is a "semi-public" event, some participants may feel constrained in the issues or views they can present.
- As in any group interaction, the more assertive (and louder) personalities can dominate quieter participants for "air time" during discussions; and,
- Persons with more power, prestige and wealth may attempt to speak on behalf of the whole group, without understanding the real needs and perspectives of less privileged participants.

In any case, group interviews must be carried out as systematically as any other type of interview. For instance:

- 1) Researchers should use the same semi-structured or open-ended questions for all groups being interviewed;
- 2) A representative sample of similar groups should be selected from within and across the communities being studied, depending on the time and budget available;
- 3) The full responses of the group should be recorded through note-taking, by question (some groups may permit audio or video recording, but this can be a distraction to the participants);
- 4) Group interviews on sensitive issues should be carried out separately for men and women to permit them to be able to speak freely and fully;
- 5) Interviewers of women's groups should be women themselves (if possible);
- 6) Interviewers will need to be able to work in the local language or dialect of the group, or to have access to an effective interpreter;
- 7) Researchers may wish to make a modest financial contribution to the group as a way of recognizing the value of the group's knowledge;
- 8) As a matter of regular practice, researchers should provide feedback on the overall results of the research to the groups interviewed, perhaps via FM radio or a short (1-2 page) "Citizens' Executive Summary;"
- 9) Group interviews can last from one to two hours; longer than this is an inconvenience and represents a high opportunity cost for participants
- 10) A group interview is, fundamentally, an *interview*. It is not an open discussion, or a decision-making process, or a problem-solving session.

Note: The interviewer must do his/her best to have the group answer all major questions in the interview protocol. Decisions and solutions that may arise through the group's responses to these questions should be referred to the appropriate government or non-government bodies for follow-up.

Transect and Action Walk

What is the T&AW?

This is a participatory rapid appraisal approach that can be used to physically inspect or identify community assets. It can be used as both a planning and monitoring tool. It will very well be used as part of the Community assessment exercise particularly at a point when a facility or project needs to be physically inspected.

How do you carry out the Transect walk?:

- The Group of participants are divided into convenient teams i.e. ten in each (of up to three teams, depending on size)
- Teams begin at the fringes of the community, standing in a single profile.
- Teams are separated by a convenient space depending on both the size of the community and the number of teams but it should be such that they will not miss any project in their view nor record the same projects.
- Teams walk straight into, and towards the end of the community identifying and recording the relevant poverty reduction projects, noting down their condition and status.
- Teams plot and summarise the projects identified and share information with other teams.
- All outputs are integrated/harmonized to generate a single and comprehensive plot of poverty reduction projects with descriptions on status and conditions,
- Open up discussion with community representatives on the outcome for confirmation as well as to generate information on the issues surrounding each project, satisfaction levels, etc.
- Recommendations are made from all sides to be used for action during an interface meeting with service or project providers.

Individual Interviews using Qualitative and Quantitative Methods

For the purpose of the decentralized poverty M&E system, individual interviews may be held with opinion leaders in the community (Chief and Elders, Magazia/senior woman, youth leader, Member of Parliament, Area Councillor, etc) or with community members at large. Interviews can be conducted in public buildings or meeting rooms, or in the compounds of the interviewee.

Types of Individual interview Methods:

Qualitative Interviews:

- The informal conversational interview: It is also called “unstructured interviewing,” where interviewers are free to pursue questions that are suggested by the direction and flow of the conversation. There is no pre-determined set of questions. Interviewers, must, however, keep detailed notes of each unique conversation with each individual.
- The general interview guide approach: The interview guide sets out a common set of questions or issues to be covered in all interviews, but allows the interviewer to explore or probe questions in more detail in order to shed light on specific subject areas during individual conversations.
- The standardized, open-ended interview: In this approach, every question (and its preface) is carefully worded and asked precisely in that form for all interviewees. Detailed interview protocols are prepared in advance, and are available for those who use the findings of the research. This approach minimizes variations in the skills and style of interviewers, and responses are more easily compared across respondents.

Quantitative Interview:

The standardized, closed-ended interview: This type of interview is used for large-scale surveys (administered in person, by telephone, or through the post or internet) and computerized statistical analysis of findings. Questions are carefully structured to elicit from respondents standardized ratings, rankings or choices which are assigned a numerical value. Interviewees are not asked to provide responses over and above the closed-ended questions.

Combined Approaches

Many research and evaluation studies employ a combination of interview approaches. Larger studies may utilize both standardized, open-ended interviews along with closed-ended interviews. These two approaches could be combined into one research instrument administered to the same individuals, or, alternatively, two instruments used in separate sub-studies of different stakeholders or issues.

For example, standardized, open-ended interviews could be undertaken with selected village opinion leaders, while closed-ended interviews are conducted with a larger sample of household members. The results of the two studies should be complimentary in uncovering trends and the factors behind those trends.

Principles

For qualitative, quantitative and combined approaches, the following principles are important:

- 1) Interviewers should try to establish a positive climate for the interview, and a positive rapport with the interviewee;
- 2) The interviewers or their assistants should take detailed notes on responses by interviewees;
- 3) Interview questions should be administered in a standardized manner by all interviewers;
- 4) To ensure 3) above, interviewers and assistants should be trained together in the content and process of the interview;
- 5) Interviewees should be assured that they will not be quoted directly in any report, unless the interviewees themselves so authorize;
- 6) Interviewees should be sincerely thanked for their time and effort;
- 7) Interviews should not take more than one to 1.5 hours of respondent's time;
- 8) Writing up, or coding, interview responses should, as much as possible, be completed on site each day;
- 9) Women respondents should be interviewed by women interviewers.
- 10) Good interpretation is essential for interviewers who do not speak the local language or dialect; a better arrangement is for interviewers themselves to have strong local-language skills.

Case Studies

Case studies summarize in-depth analysis of specific cases. They are written in a popular narrative manner that is easy to read and that highlights the findings from the raw data. Cases may be of individuals, groups, communities, projects, programs, districts or regions. The unit of analysis selected for detailed case study depends on the purposes of the research or evaluation exercise.

In general, the steps in preparing a case study are as follows:

- 1) assemble the raw case data: these include documents, interview responses, field observations, etc;
- 2) construct a case record: condense the raw data into a manageable file;
- 3) write a case-study narrative: this should be a concise, readable story told chronologically or by themes/issues, offering a holistic portrayal and providing any necessary background on the case's context.

A compendium of several case studies in turn becomes another valuable source of data and analysis for the research or evaluation exercise. In addition, case studies may be prepared for different units of analysis: such as households, villages and districts. Such a layering of cases also permits an analysis of possible relationships "up and down" those units of analysis.

A Note on Tension and Conflict

It is possible that the decentralized poverty M&E system will be implemented in areas which, from time to time, may be experiencing ethnic tension or even outright conflict. As common sense would dictate, under such circumstances, community-based research methods are very difficult, perhaps even dangerous, to apply *across* ethnic groups or clans that are in pre-, mid-, or recent post-conflict situations.

However, though great care must be taken, it may be possible to carry out certain community-based research activities *within* ethnic or clan groups.

Working through local leaders is essential. Working with local NGOs is likely to be useful, as well.

In the event of violent conflict, it can be anticipated that in some villages or towns, very unfortunately, infrastructure such as housing, water systems, clinics and schools may be damaged or even destroyed altogether. Therefore, post-conflict ratings of some poverty indicators may go in reverse direction: decreased access to social services, less productive household assets, worse public health conditions, lower crop yields—these and many other negative trends all may characterize post-conflict communities. An understanding of the relief, reconstruction and development challenges and priorities in post-conflict settings is fundamental to regional and district action in the future—and to all agencies concerned with poverty reduction in poor communities.

**ANNEX B – SECTOR SPECIFIC DISTRICT
DEVELOPMENT MANAGEMENT CAPACITY INDEXES**

District Management of Water and Sanitation Services Index

Core Management Capacity	DA Schedule Officer	DWST/ Water Dept	Water Board	System Manager	DEHU	WATSAN Committees	Area Mechanic	Average Score
Indicators								
1. Skills and HR Compliment (1-10) 1 = No skilled HR 5 = Optimum # of skilled HR								
2. Management and Skills at Operations (1-10) 1 = Systems not functioning due to human error 5 = System being managed								
3. Financial Management (1-10) 1 = Financial records are not kept 5 = Financial records are kept up to date/accurate								
4. General Management (1-10) 1 = Management is not skilled or motivated 5 = Management is skills and motivated								
5. Leadership (1-10) 1 = Inadequate to address development needs due to low motivation, corruption, or lack of qualification 5 = Leadership is dynamic and motivates the DA staff and members to work together for long term development								
6. Workload (1-10) 1 = Workload is so high that staff have to work overtime to complete basic administrative tasks 5 = Staff are able to complete their jobs within regular working hours								
7. Motivation and Incentives (1-10) 1 = Motivation/Incentives do not exist 5 = Motivation/incentives exist/are easy to access								
8. Equipment and Facilities (1-5) 1 = Office space, furniture, and technology are not adequate 5 = All staff have access to office space, furniture and technology								
9. Availability of Funds (1-5) 1 = Funds available do not meet basic costs 5 = Funds available meet costs								
10. Timely Access to Funds (1-5) 1 = Funds arrive up to 12 months behind schedule 5 = Funds arrive on schedule								
Total (10 – 50)								

District Gender Mainstreaming Index

Gender Mainstreaming Capacity					
Indicators	DA	DCE	DPCU	GDO	Average Score
1. Gender mainstreaming skills and knowledge (1-5) 1 = No staff have received training in gender mainstreaming 5 = All staff have received training in gender mainstreaming and are using skills					
2. Availability of funds for gender programs (1-5) 1 = Zero funds are allocated to gender programs 5 = 50% of programming funds are targeted at women					
3. Timely Access to Funds (1-5) 1 = Funds arrive up to 12 months behind schedule 5 = Funds arrive on schedule and are easily accessible by program officer					
4. Incorporation of gender issues into annual and medium term plans (1-5) 1 = Plans do not consider gender issues 5 = All plans are gender positive					
5. Demonstrated commitment to gender mainstreaming (1-5) 1 = Women are not included in decision making processes 5 = Women are included in all decision making processes					
6. Motivation/incentives to promote gender mainstreaming (1-5) 1 = There are no incentives in place to promote gender mainstreaming 5 = Several incentives exist to promote gender mainstreaming (e.g. awards)					
7. Collection of gender disaggregated data (1-5) 1 = Gender disaggregated data is not available for any indicators 5 = Gender disaggregated data is available for all indicators					
8. Level of participation (or inclusion of) women in activities (1-5) 1 = Women are excluded from decision making positions 5 = Women are participating in all meetings/committees of DA members and staff					
9. Senior Management's Support of Gender Mainstreaming Efforts (1-5) 1 = Senior management attitudes are negative towards gender issues 5 = Senior management consider gender issues in planning and management and daily activities					
10. Gender Desk Officer is integrated into the DPCU (1-5) 1 = GDO is not included in planning meetings of the unit 5 = GDO is included in all meetings and asked for advice on gender issues in planning					
Total (10-50)					