

DRAFT MEAL POLICY

Monitoring | Evaluation | Accountability | Learning



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PREFACE

In the evolving landscape of humanitarian aid and development, Uddipto Mohila Unnayan Sangstha (UMUS) a human right of women, youth in Dalit's, Indigenous community organization remains strongly committed to transparency, accountability, and inclusivity. We recognize that robust monitoring, evaluation, accountability, and learning (MEAL) systems are essential not only for ensuring donor accountability but also for demonstrating the tangible impact our interventions have on the lives of women, youth, and Dalit's communities.

UMUS MEAL Policy provides a comprehensive framework to strengthen monitoring, evaluation, accountability, and learning across all projects and programmes. It outlines policies, guidelines, and tools that support results-based performance management, while promoting the use of evidence to inform planning, implementation, and adaptation. The MEAL Policy emphasizes participatory approaches, ensuring that staff, partners, and communities are actively engaged in monitoring and evaluation processes. MEAL policy also highlights practical tools and methodologies that are accessible to community-based organizations, while aligning with governance, ethics, donor expectations, and maintaining international standards.

Deep rooted in UMUS organizational values, the MEAL Policy reflects our mission to protect human rights, advance young women's empowerment, promote youth and child welfare, ensure quality education, foster equality, strengthen climate resilience, and drive sustainable development. We view MEAL not as a technical requirement alone, but as a shared responsibility and a catalyst for continuous learning and improvement. Through participatory monitoring, evidence-based evaluation, and structured learning, we aim to capture lessons from both successes and challenges, ensuring that our interventions remain relevant, effective, sustainable, and impactful.

We extend our sincere gratitude to Malteser International (MI) and the Together Project for their substantial financial and technical support in developing this, MEAL Policy. We also thank our donors, partners, supporters, and beneficiaries whose collaboration makes this journey possible. Together, we strive to build a future that is equitable, inclusive, and sustainable where accountability and learning serve as the foundation for transformative and lasting development.



Suma Sarkar
Chairperson, Executive Committee
Uddipto Mohila Unnayan Sangstha (UMUS).
March 2026



Suma Sarkar
Chairman
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List of Abbreviations

| Abbreviation | : Full Form |
|---------------------|--|
| BCM | : Beneficiary Contact Monitoring |
| DAC | : Development Assistance Committee (OECD) |
| DQA | : Data Quality Assurance |
| FGD | : Focus Group Discussion |
| GIS | : Geographic Information System |
| ICT | : Information and Communication Technology |
| IPTT | : Indicator Performance Tracking Table |
| KM | : Knowledge Management |
| Log-frame | : Logical Framework |
| MEAL | : Monitoring, Evaluation, Accountability, and Learning |
| MEALK | : Monitoring, Evaluation, Accountability, Learning, and Knowledge Management |
| MEL | : Monitoring, Evaluation, and Learning |
| MERL | : Monitoring, Evaluation, Research, and Learning |
| MERLA | : Monitoring, Evaluation, Research, Learning, and Adapting |
| MIS | : Management Information System |
| NGO | : Non-Governmental Organization |
| OECD | : Organisation for Economic Co-operation and Development |
| PIRS | : Performance Indicator Reference Sheet |
| RBM | : Results-Based Management |
| SOP | : Standard Operating Procedure |
| TOC | : Theory of Change |
| TOR | : Terms of Reference |
| UMUS | : Uddipto Mohila Unnaya Sangstha. |

1. Introduction

Monitoring, Evaluation, Accountability, and Learning (MEAL) is widely recognized as essential for effective development practice. It helps organizations account for donor resources, track whether projects are implemented as planned and demonstrate the difference interventions make in people's lives. Yet many NGOs in Bangladesh face challenges in building strong systems, particularly when measuring complex social change such as women's empowerment, community resilience, or shifts in social norms.

Expectations are evolving. Donors, government agencies, and communities increasingly require organizations to measure impact and provide evidence of learning.

UMUS's MEAL Policy provides clear guidance on what monitoring and evaluation mean and how to apply them effectively. The policy highlights practical tools and approaches that can strengthen systems, especially for small and community-based organizations. While global literature offers many models, this MEAL Policy focuses on the key components that underpin effective practice and supports UMUS in making sense of diverse approaches, tools, and materials available.

Rooted in UMUS's organizational values of transparency, accountability, and inclusivity, this MEAL Policy reflects our identity as a youth-led feminist organization committed to protecting human rights, advancing young women's empowerment, promoting youth and child welfare, ensuring quality education, fostering equality, strengthening climate resilience, and driving sustainable development. By embedding these values into our MEAL framework, UMUS ensures that monitoring and evaluation are not only day-to-day technical processes but also expressions of our mission to empower communities and achieve meaningful change.

2. Policy Statement

As a Women, Dalit's & Indigenous community based organization Uddipto Mohila Unnayan Sangstha (UMUS) is committed to embedding transparency, accountability, inclusivity, human rights, and continuous learning across all stages of program design and implementation. Our MEAL Policy framework ensures responsiveness to communities through inclusive feedback systems, compliance with donor and government standards, and a culture of responsibility among staff and partners. The policy promotes learning at organizational, sectoral, and community levels by documenting lessons, sharing knowledge, and empowering communities to use evidence for advocacy and decision-making. These commitments reflect local realities and reinforce trust, legitimacy, and transformative impact.

3. Purpose

The purpose of UMUS's MEAL Policy approach is to ensure the strategic and systematic use of knowledge, lessons learned, and good practices across all programmes. By embedding MEAL into our work, UMUS strengthens participation, accountability to the communities we serve, and transparency in decision-making, while promoting organisational learning and the continuous improvement of interventions.

This approach reflects UMUS's identity as a youth-led feminist organisation committed to protecting human rights, advancing young women's empowerment, promoting youth and child welfare, ensuring quality education, fostering equality, and driving sustainable development.

BOX 1: MOST COMMON PURPOSE OF MEAL

- Accountability (upwards to the donor)
- Accountability (downwards to the beneficiaries)
- Control and supervision of staff and volunteers
- Learning from our work
- Improving our performance
- Project or programme management
- Providing evidence for advocacy
- Public relations and fundraising
- Resource allocation
- Measuring impact

The MEAL framework applies to all UMUS programmes and projects, including those implemented with partners under contractual obligations. It ensures that monitoring, evaluation, accountability, and learning are not only technical processes but also expressions of UMUS's mission to empower communities and deliver meaningful, measurable change.

4. Objectives

The MEAL Policy of UMUS ensures that all programmes are evidence-based, values-driven, and continuously strengthened to deliver sustainable, measurable impact for the communities we serve

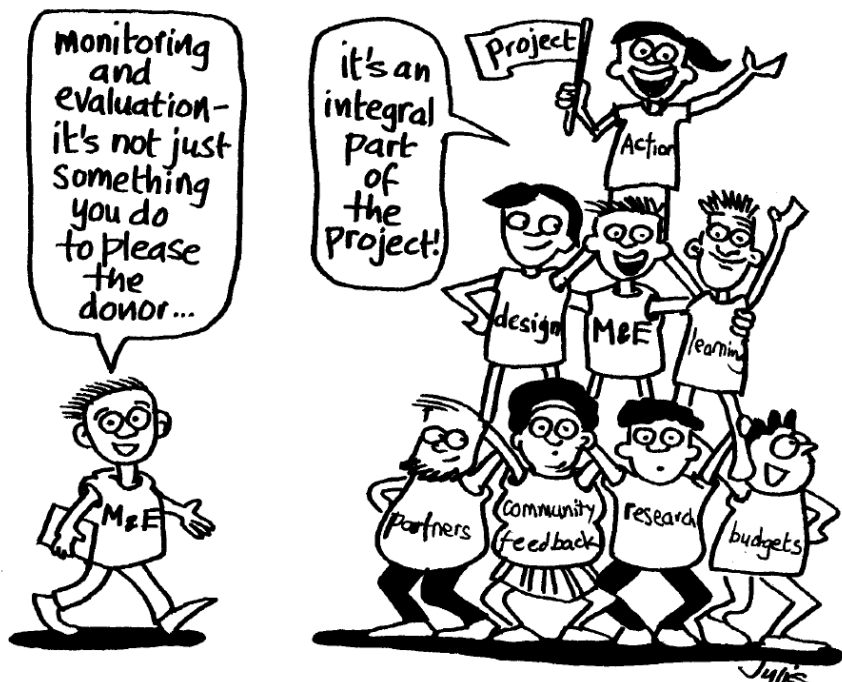
4.1 Specific Objective

- Institutional Commitment UMUS commits to Monitoring, Evaluation, Accountability, and Learning (MEAL) as integral components of its Results-Based Management system, ensuring that all programmes and projects are guided by credible evidence and measurable results.
- Alignment with Organizational Values MEAL activities actively promote and reflect UMUS's core values and policies, including transparency, accountability, inclusivity, human rights, youth and child welfare, gender equality, and sustainable development.
- Focus on Quality and Impact MEAL prioritize the analysis of coherence, relevance, efficiency, effectiveness, and impact of interventions, while assessing the sustainability of results achieved.
- Continuous Improvement and Learning UMUS continuously strengthens its interventions through systematic knowledge development, documentation of good practices and challenges, and incorporation of lessons learned into decision-making and programme design.



5. Intended Audience

Overall, this MEAL Policy is intended as a reference and guide for all UMUS staff and partners engaged in programming at any level, with its contents and structure shaped accordingly. It is particularly relevant for project managers and coordinators who design and oversee programmes to ensure adherence to MEAL standards, as well as field staff responsible for implementing projects and conducting monitoring and evaluation activities so they share a common understanding of best practices. Technical advisors who provide consistent guidance on MEAL approaches, consultants undertaking assessments and evaluations that inform programme planning and learning, and partners and stakeholders who align and coordinate with UMUS's approach to MEAL are also key audiences. By addressing these groups collectively, the policy fosters coherence, accountability, and shared ownership of MEAL practices across all levels of programming.



the policy fosters coherence, accountability, and shared ownership of MEAL practices across all levels of programming.

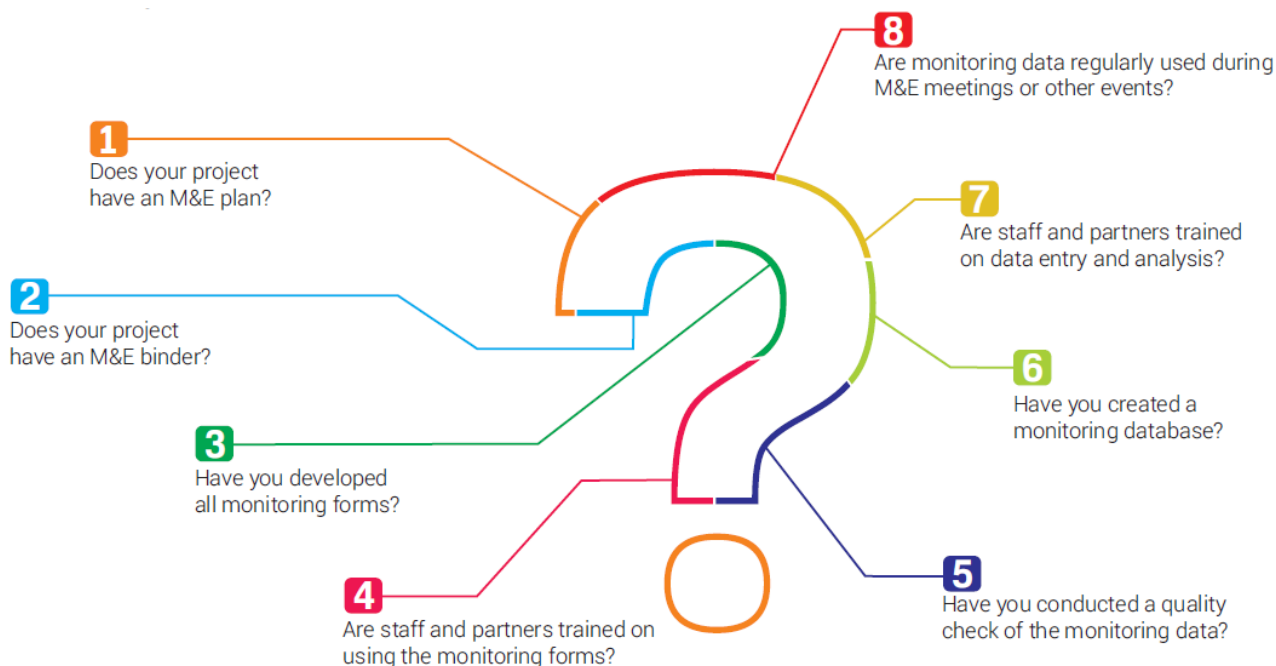
6. Why Monitoring and Evaluation Are Important

Organisations use monitoring and evaluation for two key purposes:

- ✚ To learn about their own activities and results, and to support internal planning and development
- ✚ To be accountable to their stakeholders

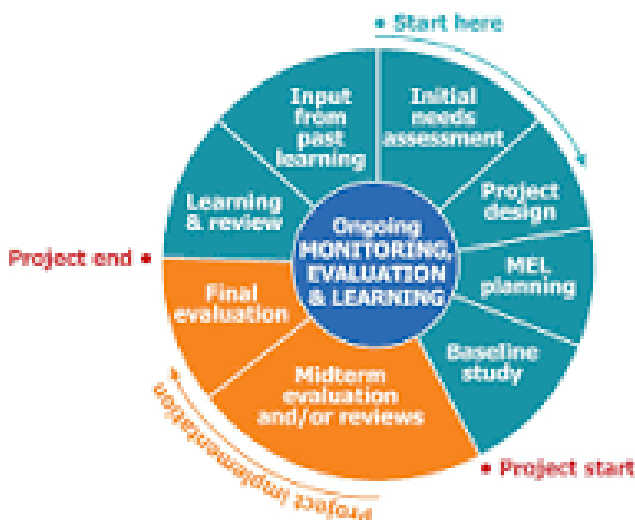
Organizations need evidence of their efficiency and effectiveness for funders, partners, and stakeholders. They also need to communicate achievements to the wider public. Donor organizations are now specifically required to report the achievements of the assistance provided over the year. However, the role of monitoring and evaluation in fostering learning and improving the organization is of equal importance.

The following eight questions shall help in creating a better understanding on the need of monitoring and evaluation:



7. Meal Life Cycle

The MEAL (Monitoring, Evaluation, Accountability, and Learning) life cycle is a structured, continuous process that ensures programmes are designed, implemented, and improved using evidence and learning. It begins with the Start Here phase, which includes conducting an initial needs assessment, designing the project, preparing a MEAL plan, and carrying out a baseline study to establish benchmarks. Once the Project Start phase begins, MEAL activities focus on monitoring progress, conducting mid-term evaluations or reviews, and ensuring accountability mechanisms are in place. As the project moves toward completion, the Project End phase emphasizes final evaluation, learning, and review, drawing on evidence to assess impact and sustainability. Importantly, insights and inputs from past learning are fed back into the cycle, strengthening future project design and planning. This cyclical approach ensures that MEAL is not a one-time activity but an ongoing process of reflection, adaptation, and improvement, driving more effective and accountable programmes.



8. Core Components Of Meal


Monitoring, evaluation, accountability and learning are in synergy and must be implemented concurrently to achieve the objectives of this policy. In practice, all programmes' MEAL systems form part of a participatory and inclusive approach across the programme cycle. The components should be planned and implemented together with partners and the population; we support. These are:

Monitoring, evaluation, accountability, and learning are interlinked and must be implemented concurrently to achieve the objectives of this policy. In practice, MEAL systems across all programmes form part of a

participatory and inclusive approach throughout the programme cycle. These components should be jointly planned and implemented with partners and the communities we support. These are:

8.1 Monitoring

Monitoring is a term used for all types of progress tracking. However, this policy focuses on monitoring programme results in the form of deliveries (outputs) and the effects of the deliveries (outcomes and impact).

 Monitoring is a routine and systematic collection of information against a plan. The information might be about activities, products or services, users, or about outside factors affecting the organisation or project.

UMUS projects and all programmes have responsibility for and must plan and implement

BOX 2: TYPES OF MONITORING

1. Results Monitoring

- It tracks effects and impacts.
- This is where monitoring merges with evaluation to determine if the project/program is on target towards its intended results (outputs, outcomes, impact).
- It measures whether there may be any unintended impact (positive or negative).
- For example, a psychosocial project may monitor that its community activities achieve the outputs that contribute to community resilience and ability to recover from a disaster

2. Process (Activity) Monitoring

- It tracks the use of inputs and resources, the progress of activities and the delivery of outputs.
- It examines how activities are delivered - the efficiency in time and resources.
- It is often conducted in conjunction with compliance monitoring and feeds into the evaluation of impact.
- For example, a water and sanitation project may monitor that targeted households receive septic systems according to schedule.

3. Compliance Monitoring

- It ensures compliance with donor regulations and expected results, grant and contract requirements local governmental regulations and laws, and ethical standards.
- For example, a shelter project may monitor that shelters adhere to agreed national and international safety standards in construction.

4. Context (Situation) Monitoring

- It tracks the setting in which the project/program operates, especially as it affects identified risks and assumptions, but also any unexpected considerations that may arise.
- It includes the field as well as the larger political, institutional, funding, and policy context that affect the project/program.
- For example, a project in a conflict-prone area may monitor potential fighting that could not only affect project's success but endanger the project's staff and volunteers.

5. Beneficiary Monitoring

- It tracks beneficiary perceptions of a project/program.
- It includes beneficiary satisfaction or complaints with the project/program, including their participation, treatment, access to resources and their overall experience of change.
- Sometimes referred to as Beneficiary Contact Monitoring (BCM), it often includes a stakeholder complaints and feedback mechanism.
- It should take account of different population groups, as well as the perceptions of indirect beneficiaries (e.g. community members not directly receiving a good or service).
- For example, a cash-for work program assisting community members after a natural disaster may monitor how they feel about the selection of program participants, the payment of participants and the contribution the program is making to the community (e.g. are these equitable?).

6. Financial Monitoring

- It accounts for costs by input and activity within predefined categories of expenditure.
- It is often conducted in conjunction with compliance and process monitoring.
- For example, a livelihood project implementing a series of micro-enterprises may monitor the money awarded and repaid, and ensure implementation is according to the budget and time frame.

7. Organizational Monitoring

- It tracks the sustainability, institutional development and capacity building in the project/program and with its partners.
- It is often done in conjunction with the monitoring processes of the larger, implementing organization.
- For example, a National Society's headquarters may use organizational monitoring to track communication and collaboration in project implementation among its branches and chapters.
- monitoring activities to track progress on the deliveries and effect of implemented interventions, with emphasis on the latter. The plan shall clearly define UMUS and implementation partners' roles in these activities.

8.2. Monitoring And the Inclusion of RBM

- ✦ Result Based Management (RBM) is an approach to project/program management based on clearly defined results, and the methodologies and tools to measure and achieve them.
- ✦ RBM supports better performance and greater accountability by applying a clear, logical framework to plan, manage and measure an intervention with a focus on the results you want to achieve.
- ✦ By identifying in advance, the intended results of a project/program and how we can measure their progress, we can better manage a project/program and determine whether a difference has genuinely been made for the people concerned.
- ✦ Monitoring and evaluation (M&E) are a critical part of RBM. It forms the basis for clear and accurate reporting on the results achieved by an intervention (project or program).
- ✦ In this way, information reporting is no longer a headache, but becomes an opportunity for critical analysis and organizational learning, informing decision-making and impact assessment

BOX 3: MONITORING BEST PRACTICES

Monitoring data should be well-focused to specific audiences and uses

(only what is necessary and sufficient).

Monitoring should be systematic, based upon predetermined indicators and assumptions.

Monitoring should also look for unanticipated changes with the project/

programme and its context, including any changes in project/programme assumptions/risks; this information should be used to adjust project/programme implementation plans.

Monitoring needs to be timely, so information can be readily used to inform project/programme implementation.

Whenever possible, monitoring should be participatory, involving key stakeholders – this can not only reduce costs but can build understanding and ownership.

Monitoring information is not only for project/programme management

but should be shared, when possible, with beneficiaries, donors and any other relevant stakeholders.

8.3 Evaluation

Evaluation is a key tool for examining the quality of performance and programme deliveries by identifying results achieved and reflecting on lessons learned. All UMUS's projects and programmes shall plan and implement evaluations, either internal or external, at least once during the programme period. The size and scope of each programme will determine the breadth and depth of the evaluation. Where appropriate, a single evaluation may cover multiple programmes if it adequately addresses their objectives and outcomes. Further details on evaluation requirements are outlined in Section 21.

📄 Evaluation is about making judgements about the value of any component part of an organisation or its products, services or benefits, or about the organisation as a whole.

8.4 Links Between Monitoring and Evaluation

Monitoring and evaluation are closely linked but serve distinct purposes within the MEAL framework. Monitoring is a regular, ongoing process that tracks activities and progress, providing timely information to improve efficiency and guide reprogramming. It relies on routine methods such as field observations, progress reports, and administrative records. Evaluation, on the other hand, is episodic and more rigorous, designed to assess effectiveness, impact, and value for money. It uses scientific research designs and draws on both monitoring data and additional sources such as surveys and special studies. Together, monitoring provides continuous oversight while evaluation offers deeper analysis, ensuring that programs remain accountable, adaptive, and strategically aligned.

8.5 Accountability

Uddipto Mohila Unnayan Sangstha (UMUS) is committed to being accountable towards rights-holders, partners, institutional and private donors supporting our work and the wider public. UMUS's most important stakeholders are the population we seek to support, as captured in UMUS's principle of Solidarity in Action and we are committed to ensuring that accountability to these stakeholders underpins all of our programming. MEAL systems shall, at a minimum, include feedback mechanisms to capture the opinions of the supported

populations, partners and relevant stakeholders on our interventions and a system to inform the same about results of the programmes to enable adaptation and continual improvement.

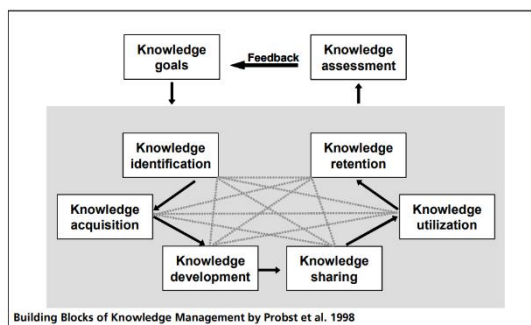
8.6 Learning (And Sharing)

Continuous improvement requires room for reflection and sharing of knowledge. Learning activities shall be planned and implemented in all programmes, including following up learning outcomes. Learning is highlighted as a separate activity together with adaptation (of the programme). Adaptation means to adjust the programme to make it relevant in the given context.

8.7 Knowledge Management Framework

Knowledge Management (KM) is a critical component of the MEAL system, ensuring that evidence generated through monitoring, evaluation, accountability, and learning is systematically captured, stored, shared, and applied. The framework transforms data into actionable knowledge, strengthens institutional memory, and promotes adaptive learning across program cycles.

Drawing on the *Building Blocks of Knowledge Management* (Probst et al., 1998), the framework consists of interconnected processes:



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| Knowledge Goals: Establish clear objectives for knowledge use, aligned with program outcomes, donor requirements, and organizational priorities. |
| Knowledge Identification: Map existing knowledge resources and identify gaps where new evidence is required. |
| Knowledge Acquisition: Collect information from monitoring systems, evaluations, research, and community feedback, ensuring data quality through verification and audit trails. |
| Knowledge Development: Transform raw data into insights through analysis, synthesis, and visualization, producing learning products such as reports, dashboards, and infographics. |
| Knowledge Sharing: Disseminate findings across staff, partners, communities, and donors using accessible formats (workshops, learning events, online repositories). |
| Knowledge Utilization: Integrate lessons into program design, resource allocation, and adaptive management, fostering innovation and responsiveness. |
| Knowledge Retention: Archive key documents, tools, and lessons learned to build institutional memory and ensure continuity despite staff turnover or donor transitions. |
| Knowledge Assessment: Periodically review KM processes to evaluate effectiveness and adjust strategies for relevance, accessibility, and impact. |

9. Core Principles of Meal

All MEAL activities shall adhere to guiding principles that are rooted in the organization’s values and established MEAL standards. These principles ensure that monitoring, evaluation, accountability, and learning are carried out in ways that are ethical, inclusive, and effective. The core principles are:

| | |
|---|---|
| <p>Participation and Inclusiveness</p> <ul style="list-style-type: none"> Engage communities, partners, and stakeholders at every stage. Ensure marginalized voices are heard and represented. <p>Transparency and Accountability</p> <ul style="list-style-type: none"> Share information openly with stakeholders. Establish clear feedback and complaint mechanisms. <p>Evidence-Based Practice</p> <ul style="list-style-type: none"> Collect reliable, high-quality data. Use findings to inform decision-making and programme adaptation. <p>Continuous Learning and Adaptation</p> <ul style="list-style-type: none"> Treat MEAL as a cycle of reflection and improvement. Document lessons learned and integrated them into future programming. | <p>Ethical Standards</p> <ul style="list-style-type: none"> Respect confidentiality, consent, and data protection. Ensure MEAL processes do no harm. <p>Gender and Social Inclusion</p> <ul style="list-style-type: none"> Apply gender-sensitive and socially inclusive approaches. Disaggregate data to highlight inequalities and address them. <p>Sustainability</p> <ul style="list-style-type: none"> Build local capacity for MEAL systems. Ensure practices can be maintained beyond donor funding cycles. |
|---|---|

10. Evolution of Meal Frameworks (M&E → MEALK)

Monitoring, Evaluation, Accountability, and Learning (MEAL) frameworks have evolved over time to respond to increasing demands for evidence, accountability,



and adaptive management. This evolution reflects a shift from basic monitoring functions to comprehensive systems that integrate research, accountability, and knowledge management.

10.1 Stages of Evolution

✚ M&E → Tracking Results

- Early frameworks focused primarily on monitoring activities and evaluating outputs.
- The emphasis was on accountability to donors through reporting of inputs and outputs.

✚ MEL → Learning from Results

- Learning was introduced as a core component, ensuring that evidence generated was systematically used to improve program design and implementation.

✚ MEAL → Accountability to Communities

- Accountability mechanisms were added, recognizing the importance of transparency and responsiveness to beneficiaries and stakeholders.
- This stage emphasized participatory approaches and community feedback systems.

✚ PMEL → Planning with Measurement in Mind

- Planning processes became integrated with monitoring and evaluation, ensuring that measurement frameworks were embedded from the outset of program design.

✚ MERL → Research-Informed Programming

- Research was incorporated to strengthen evidence-based programming.
- This stage emphasized rigorous methodologies and the use of mixed methods to inform interventions.

✚ MERLA → Adapting Based on Evidence

- Adaptive management was formalized, ensuring that programs could pivot based on findings.
- This stage highlighted continuous improvement and responsiveness to changing contexts.

✚ MEALK → Knowledge Management & Learning

- Knowledge management was added as a strategic pillar, ensuring that evidence is captured, stored, shared, and applied systematically.
- MEALK emphasizes institutional memory, organizational learning, and the use of knowledge for advocacy, scaling, and sustainability.

11. Results Base Monitoring (RBM)

Results-Based Monitoring is a continuous process of collecting and analysing information to assess how well a project, program, or policy is being implemented compared to its expected results. Unlike traditional monitoring, which focuses mainly on inputs and activities, RBM emphasizes outputs, outcomes, and impacts to ensure that interventions are achieving meaningful change

11.1 Monitoring Questions and RBM

Impact

- Measuring changes at impact level requires a longer time frame and is therefore dealt with by evaluation and not monitoring.

Outcomes

- Are the outputs leading to the achievement of the outcomes?
- Is there anything happening that should lead management to modify the operations

Output

- How do beneficiaries feel about the work/intervention?
- What is causing delays or unexpected results?

Activities

- Are activities leading to expected outputs?
- Are activities being implemented on schedule and within the budget?

11.2 Evaluation Questions and RBM

Inputs

- Are finances, personnel and materials available on time and in the right quantities and quality?

Impact

- Are the benefits likely to be maintained for an extended period after assistance ends? (sustainability)
- What changes did the project bring about?

Outcomes

- Were the operations objective achieved? (effectiveness)
- Did the outputs lead to intended outcome?

Output

- Were the operations objective achieved? (effectiveness)
- Did the outputs lead to intended outcome?

Activities

- Were activities implemented on schedule and within budget? (efficiency)
- Were outputs delivered economically?

Inputs

- Were stocks of items available on time and in the right quantities and quality?

12. Key Steps for Meal Planning

| | | |
|----|--|---|
| 1. | Identify the purpose and scope of the M&E system | <ul style="list-style-type: none"> ▪ Review the project/program's operational design (RBM/LFA) ▪ Identify key stakeholder informational needs and expectations ▪ Identify any M&E requirements ▪ Scope of major M&E events and functions |
| 2. | Plan for data collection and management | <ul style="list-style-type: none"> ▪ Develop an M&E plan table ▪ Assess the availability of secondary data ▪ Determine the balance of quantitative and qualitative data ▪ Triangulate data collection sources and methods ▪ Determine sampling requirements ▪ Prepare for any surveys ▪ Prepare specific data collection methods/tools ▪ Establish stakeholder complaints and feedback mechanisms ▪ Establish project/program staff/volunteer review mechanisms ▪ Plan for data management ▪ Use an indicator tracking table (ITT) ▪ Use a risk log (table) |
| 3. | Plan for data analysis | <ul style="list-style-type: none"> ▪ Develop a data analysis plan, identifying the: <ul style="list-style-type: none"> ○ Purpose of data analysis ○ Frequency of data analysis ○ Responsibility for data analysis ○ Process for data analysis. ▪ Follow the key data analysis stages <ul style="list-style-type: none"> ○ Data preparation ○ Data analysis (findings and conclusions) ○ Data validation ○ Data presentation ○ Recommendations and action planning. |
| 4. | Plan for information reporting and utilization | <ul style="list-style-type: none"> ▪ Anticipate and plan for reporting: <ul style="list-style-type: none"> ○ Needs/audience ○ Frequency ○ Formats |

| | | |
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| | | <ul style="list-style-type: none"> ○ People responsible. ▪ Plan for information utilization: <ul style="list-style-type: none"> ○ Information dissemination ○ Decision-making and planning |
| 5. | Plan for M&E human resources and capacity building | <ul style="list-style-type: none"> ▪ Assess the projects/program's human resources capacity for M&E ▪ Determine the extent of local participation ▪ Determine the extent of outside expertise ▪ Define roles and responsibilities at each level of the M&E system. ▪ Plan to manage project/program team's M&E activities ▪ Identify M&E capacity-building requirements and opportunities |
| 6. | Prepare the M&E budget | <ul style="list-style-type: none"> ▪ Itemize M&E budget needs <ul style="list-style-type: none"> ○ Human Resource ○ Capital Expenses ▪ Incorporate M&E costs into the project/program budget ▪ Review any donor budget requirements and contributions ▪ Plan for cost contingency |

13. Key Steps for Results Framework

The Results Framework is the backbone of the MEAL system. It provides a structured approach to link program inputs and activities to outputs, outcomes, and impacts, ensuring accountability and adaptive learning.

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| <p>13.1 Theory of Change & Results Framework</p> <ul style="list-style-type: none"> • Develop a clear Theory of Change (ToC) that articulates pathways from activities to intended impacts. • Align the Results Framework with the ToC to ensure logical consistency. • Use participatory approaches to validate assumptions with stakeholders. (detailed TOC guidance in section 18) |
| <p>13.2 Indicators and Targets</p> <ul style="list-style-type: none"> • Define SMART indicators (Specific, Measurable, Achievable, Relevant, Time-bound). • Disaggregate indicators by gender, age, and vulnerability groups. • Set realistic targets based on baseline data and program capacity. • Document indicators in Performance Indicator Reference Sheets (PIRS) for clarity and consistency. |
| <p>13.3 Data Quality Assurance (DQA)</p> <ul style="list-style-type: none"> • Apply the Data Quality Assurance Checklist (Annex 5) to ensure accuracy, reliability, validity, timeliness, completeness, and integrity. • Conduct routine Data Quality Assessments (DQAs) to verify data credibility. • Establish audit trails and version control for all datasets. |
| <p>13.4 Roles and Responsibilities</p> <ul style="list-style-type: none"> • Assign clear responsibilities for indicator tracking, reporting, and verification. • MEAL staff lead technical oversight; program teams provide inputs; management ensures accountability. • Partners and community representatives contribute to participatory monitoring. |
| <p>13.5 Feedback and Complaint Mechanisms</p> <ul style="list-style-type: none"> • Integrate community feedback tools (Annex 6) into the Results Framework. • Ensure complaints and feedback are systematically documented and linked to program adaptations. • Track resolution timelines and communicate outcomes transparently. |
| <p>13.6 Risk Management & Adaptive Learning</p> <ul style="list-style-type: none"> • Identify risks (e.g., bias, data gaps, contextual changes) and document mitigation strategies. • Apply adaptive learning by revising indicators, targets, or strategies based on evidence. • Maintain a Risk & Adaptation Log to track program pivots and rationale. |
| <p>13.7 Capacity Building Plan</p> <ul style="list-style-type: none"> • Train staff and partners on MEAL tools, indicator tracking, and KM practices. • Build capacity for participatory monitoring and community-driven evaluation. • Establish mentorship programs to transfer tacit knowledge. |

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| <p>13.8 Ethical Considerations & Safeguarding</p> <ul style="list-style-type: none"> • Apply do-no-harm principles in data collection and reporting. • Ensure informed consent, confidentiality, and data protection. • Safeguard vulnerable groups by integrating gender and inclusion lenses. |
| <p>13.9 Reporting & Communication Strategy</p> <ul style="list-style-type: none"> • Standardize reporting formats for donors, communities, and internal management. • Use dashboards, infographics, and narrative reports to ensure accessibility. • Align reporting timelines with donor requirements and organizational cycles |
| <p>13.10 Sustainability of MEAL System</p> <ul style="list-style-type: none"> • Institutionalize MEAL practices across projects and teams. • Preserve institutional memory through centralized repositories and KM systems. • Ensure MEAL systems are scalable and adaptable to future programs. |

14. Designing And Implementing A Meal System

Designing and implementing a MEAL system requires a structured approach that takes into account the unique needs and characteristics of the organization and its programs. The following are some steps that organizations can take to develop and implement a MEAL system:

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| <p>Conduct a needs assessment: Before designing a MEAL system, it is important to assess the specific needs and priorities of the organization and its programs. This may include identifying key stakeholders, understanding program goals and objectives, and assessing current monitoring and evaluation practices.</p> |
| <p>Define program indicators: Once program goals and objectives are defined, organizations need to identify key performance indicators (KPIs) that will be used to measure progress towards these goals. KPIs should be specific, measurable, attainable, relevant, and time-bound (SMART), and should be linked to program outcomes and impact.</p> |
| <p>Develop a data collection plan: Organizations need to determine what data needs to be collected, who will collect it, and how it will be collected. This may involve developing data collection tools, such as surveys, questionnaires, or observation forms, and defining sampling strategies.</p> |
| <p>Establish a data management system: Once data is collected, it needs to be managed and analyzed effectively. This may involve establishing a database, data cleaning and analysis procedures, and data visualization tools.</p> |
| <p>Develop a reporting plan: MEAL data should be reported regularly to stakeholders, including program participants, donors, and organizational leadership. Reports should be tailored to the needs and interests of each stakeholder group, and should highlight program successes, challenges, and areas for improvement.</p> |
| <p>Ensure accountability: Organizations should ensure that they are accountable to stakeholders by being transparent about program outcomes and impact, and by involving stakeholders in the MEAL process.</p> |
| <p>Monitor and evaluate the MEAL system: MEAL systems should be continuously monitored and evaluated to ensure that they are effective and efficient. This may involve assessing data quality, evaluating the effectiveness of data collection methods, and identifying opportunities for program improvement.</p> |

Designing and implementing a MEAL system is a complex and ongoing process that requires careful planning, stakeholder engagement, and ongoing monitoring and evaluation. By following a structured approach, organizations can develop a MEAL system that is effective, efficient, and responsive to the needs of the programs and communities they serve.

15. Data Collection and Analysis in The Meal Framework

Data collection and analysis are central to the MEAL system. They ensure that evidence is systematically generated, validated, and interpreted to inform decision-making, accountability, and adaptive learning. – Includes:

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| <p>15.1 Data Collection</p> <p>Tools & Methods:</p> <ul style="list-style-type: none"> • Quantitative: Household surveys, structured questionnaires, monitoring dashboards. • Qualitative: Focus Group Discussions (FGDs), Key Informant Interviews (KIIs), observation checklists. • Digital Tools: KoboCollect, ODK, MIS systems, mobile data collection apps. • Community Feedback: Suggestion boxes, hotlines, complaint registers. <p>Frequency:</p> <ul style="list-style-type: none"> • Routine monitoring (monthly/quarterly). • Baseline, midline, and endline evaluations. • Ad-hoc studies for emerging issues. (<i>principles – operational guidance in section 18.6</i>) |
| <p>15.2 Data Management</p> <ul style="list-style-type: none"> • Establish data flow protocols from field collection to central repositories. • Apply data cleaning, validation, and triangulation to ensure accuracy. • Use disaggregation (gender, age, vulnerability, geography) to capture equity dimensions. • Maintain secure storage with access controls and audit trails. |
| <p>15.3 Data Analysis</p> <p>Analytical Processes:</p> <ul style="list-style-type: none"> • Apply descriptive statistics (frequencies, percentages, averages) for monitoring indicators. • Use comparative analysis (baseline vs. endline, across groups). • Conduct thematic analysis for qualitative data. • Integrate findings into dashboards, infographics, and decision memos. <p>Learning Integration:</p> <ul style="list-style-type: none"> • Hold quarterly reflection sessions to interpret findings. • Document lessons in learning briefs and case studies. • Feed insights into program redesign, adaptive management, and donor reporting. |
| <p>15.4 Roles and Responsibilities</p> <ul style="list-style-type: none"> • MEAL Team: Lead data collection design, analysis, and reporting. • Program Teams: Provide inputs, validate findings, and apply lessons. • Partners/Community Representatives: Contribute to participatory monitoring. • Senior Management: Use evidence for strategic decisions and accountability. |
| <p>15.5 Quality Assurance</p> <ul style="list-style-type: none"> • Apply the Data Quality Assurance Checklist (Annex 5). • Conduct routine Data Quality Assessments (DQAs). • Ensure timeliness, completeness, accuracy, and integrity of all datasets. |
| <p>15.6 Expected Outcomes</p> <ul style="list-style-type: none"> • Reliable, valid, and timely data available for decision-making. • Evidence systematically informs program design and adaptation. • Improved accountability to donors and communities. • Strengthened organizational learning culture. |

16. Minimizing Bias and Errors

Minimizing bias helps to increase both accuracy and precision. Accuracy means that the data measures what it is intended to measure. For example, if you are trying to measure knowledge change following a training session, you would not only record how many people were trained but also include a test to assess actual knowledge change.

Although it is impossible to completely eliminated bias and error in measurement and reporting, precautions can be taken to reduce them. The first step is to be familiar with the major types of bias commonly encountered in MEAL work:

16.1 Selection Bias

Selection bias results from poor sampling design. Also called design bias or sampling error, it occurs when the people, places, or time periods measured are not representative of the larger population or condition being studied. For example, if data collection is conducted only during convenient times of day, in the dry season, or in communities located near paved roads, the findings may not accurately represent the broader population

16.2 Measurement Bias

Measurement bias arises from flaws in data measurement, either due to faulty instruments or data collectors. It can occur when measurements are taken incorrectly or when interviewer attitudes influence how questions are asked and responses recorded. For instance, household occupancy in a disaster response may be miscalculated, or survey questions may be phrased in a way that leads respondents toward a particular answer (e.g., “Why do you like this project?” instead of “What do you think of this project?”).

16.3 Processing Error

Processing error results from poor data management, such as miscoding, incorrect data entry, faulty computer programming, or inadequate quality checks. This type of error is particularly common in quantitative data entry, where specific practices and verification procedures are essential to maintain accuracy.

16.4 Analytical Bias

Analytical bias occurs when data is analysed incorrectly or selectively. Different statistical methods or ways of categorizing data can lead to varying results. To reduce analytical bias, it is important to clearly document the rationale for chosen analysis methods and ensure transparency in interpretation.

16.5 Mitigation Strategies

While bias and error cannot be completely eliminated, they can be minimized through deliberate planning and quality assurance measures. Key strategies include:

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|---|--|
| <p>Careful Sampling Design</p> <ul style="list-style-type: none"> • Use representative sampling methods to avoid selection bias. • Pilot test sampling frames to ensure inclusivity of diverse populations. | <p>Data Quality Assurance (DQA)</p> <ul style="list-style-type: none"> • Apply double data entry or automated validation checks to reduce processing errors. • Use audit trails and verification procedures for both quantitative and qualitative data. |
| <p>Standardized Data Collection Tools</p> <ul style="list-style-type: none"> • Develop clear, neutral, and culturally appropriate survey instruments. • Train enumerators to apply consistent methods and avoid leading questions. | <p>Transparent Analytical Methods</p> <ul style="list-style-type: none"> • Clearly document the rationale for chosen statistical or qualitative techniques. • Encourage peer review of analysis to identify potential biases. |
| <p>Enumerator Training and Supervision</p> <ul style="list-style-type: none"> • Provide comprehensive training on ethics, neutrality, and accuracy. • Conduct spot checks and field supervision to ensure adherence to protocols. | <p>Continuous Learning and Feedback</p> <ul style="list-style-type: none"> • Integrate lessons from past evaluations into new MEAL designs. • Establish feedback loops with communities and stakeholders to validate findings. |

17. Using Results for Program Improvement and Learning

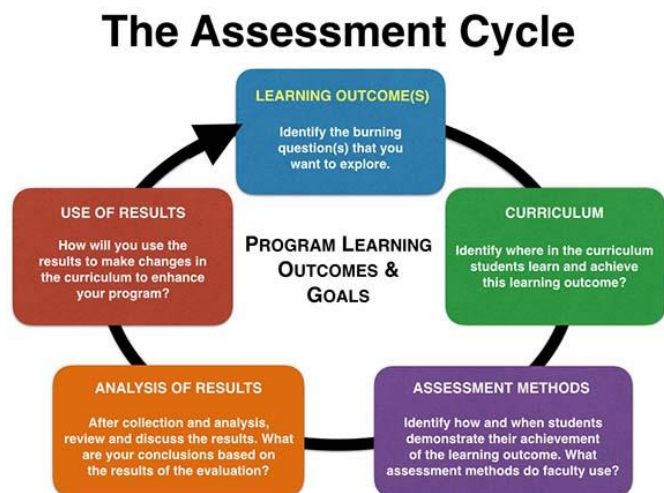
The ultimate purpose of monitoring, evaluation, accountability, and learning (MEAL) is not only to generate data but to ensure that results are actively used to improve program design, implementation, and outcomes. Evidence collected through MEAL processes should feed directly into decision-making, enabling organizations to adapt strategies, strengthen accountability, and maximize impact. Include.

17.1 Linking Evidence to Decision-Making

- MEAL findings must be systematically reviewed by program managers and leadership teams.
- Results should inform adjustments to work plans, resource allocation, and intervention strategies.
- Evidence should be used to identify gaps, replicate successful approaches, and discontinue ineffective practices.

17.2 Strengthening Accountability

- Sharing results with communities, partners, and donors builds transparency and trust.
- Feedback mechanisms should ensure that stakeholders can validate findings and contribute to program adjustments.
- Results should be communicated in accessible formats, such as dashboards, infographics, and community meetings.



17.3 Promoting Organizational Learning

- Lessons learned should be documented and integrated into future program cycles.
- Knowledge management systems should store and disseminate findings for staff and partners.
- Learning events, workshops, and reflection sessions should be organized to encourage adaptive thinking.

17.4 Continuous Improvement

- Results should be used to refine indicators, strengthen data collection tools, and improve MEAL methodologies.
- Programs should adopt a culture of adaptive management, where evidence drives innovation and responsiveness.
- Donor reporting should highlight not only achievements but also how lessons learned have shaped program evolution.

18. Monitoring And Evaluation Plan (M&E Plan)

A Monitoring and Evaluation (M&E) Plan is a road map for activity M&E implementation. Its primary purpose is to document an activity's M&E processes in sufficient detail to enable all staff, especially new staff, to exactly duplicate the processes followed by other staff so that everyone produces equivalent, high-quality data without training or additional information. An M&E Plan also demonstrates to FFP that an awardee has a rigorous system for monitoring and evaluating activity performance that produces accurate, meaningful, and useful data for decision making.

The M&E Plan required by Project that includes:

- ✚ A TOC: A set of diagrams plus a complementary narrative
- ✚ A logical framework (Log-frame)
- ✚ An Indicator Performance Tracking Table (IPTT)
- ✚ A Performance Indicator Reference Sheet (PIRS) for each indicator in the IPTT
- ✚ An annual monitoring strategy describing procedures for:
 - Data collection
 - Data processing and flow from the point of collection to report
 - Data quality assurance
 - Data management and safeguarding
- ✚ An M&E staffing and capacity building strategy
- ✚ An Evaluation Plan:
 - Baseline study
 - MTE
 - Final evaluation

18.1 Theory of Change

18.1.1 Overview

Every donor-funded programme or project must include a Theory of Change (TOC) that clearly demonstrates how proposed interventions and their outputs contribute to a series of outcomes, ultimately leading to the achievement of the overall goal. The TOC must be evidence-based and presented in two parts: a diagram (or set of diagrams) that illustrates the pathways of change from outputs through intermediate outcomes to the goal, and a complementary narrative that explains assumptions, risks, and sustainability.

BOX 4: DEFINITIONS OF TOC TERMS

Pathways: The sequence in which Outcomes are expected to occur in the process of reaching the long-term Goal. In the TOC diagrams, pathways are depicted using directional arrows to connect chains of preconditions and the resulting Outcomes.

Preconditions: Preconditions are the conditions, Outputs, and Outcomes that must exist before a higher-level/later Outcome can be achieved. For example, preconditions might include infrastructural improvements; Outcomes stemming from the application or use of the infrastructure; policy or institutional requirements; or conditions of the political, social, cultural, or natural environment.

Outcomes: Outcomes are changes that are expected to happen when all necessary and sufficient preconditions are met. These might include changes in the ecologic, economic, or governance environment; people's knowledge, attitudes, or practices; or communities' cultural standards or practices. Lower-level Outcomes in the TOC are preconditions for higher-level Outcomes.

Outputs: Outputs are immediate products of interventions implemented by an activity, including training achieved, goods or services provided by the activity, learning or advocacy events held, and communications broadcast. Outputs are also preconditions for higher-level Outcomes.

TOC Diagrams: The TOC contains a set of diagrams that use shapes, text, color, and directional arrows to show the hypothesized pathways of change from intervention Outputs through resulting Outcomes to the long-term Goal, plus the critical rationales and assumptions underlying the TOC.

Rationales: The underlying logic and evidence that support the plausibility of connections in a pathway that may not be obvious to the reader. This includes facts or other information to explain why a precondition or set of preconditions is necessary and sufficient to ensure an Outcome. For example, a rationale might refer to literature that supports a pathway that shows that an infant who is in a mentally stimulating environment grows faster physically than an infant who is not. Evidence can come from multiple quantitative or qualitative sources, including academic, activity-specific, or community-based research. Full explanations of rationales are usually found in the TOC narrative, with references to them in the TOC diagrams.

Assumptions: An assumption describes the contextual or environmental factors or conditions that are out of the control of the activity but that have significant influence over the success of the TOC overall or some portion of it. For example, a common assumption for the achievement of a TOC overall is that political stability allows adequate security for awardees to access and work in the activity area. A Purpose to increase food production may assume that during the activity life the annual flooding in the activity area will not exceed the 10 year flood level. Assumptions are particularly

Because donor projects aim for sustainable change, TOC diagrams should not only show how outcomes will be achieved but also how they will be sustained for example, by strengthening government systems, building private service providers, or embedding practices within communities. High-level outcomes are expected to be measurable at the population level in the final evaluation, so TOCs must also depict strategies that influence both direct participants and wider communities, such as training participants to act as change agents or using media outreach.

In addition to intervention outputs and outcomes, the TOC must identify external conditions and concurrent interventions outside the project's control that are necessary for hypothesized changes to occur. As the foundation for the Logframe and Indicator Performance Tracking Table (IPTT), the TOC is a dynamic tool that should be refined throughout implementation. At minimum, it must be reviewed annually, or whenever new evidence or contextual changes arise, with revisions submitted to donors alongside activity plans or results reports, including justification and any necessary modifications to design, implementation, or the M&E plan.

18.1.2 Developing the Theory of Change

The process of defining a TOC should start from the activity Goal or each Purpose and work backward through various pathways of action to describe the series of preconditions that must exist before the Purpose can be achieved.

Immediate preconditions for the highest-level Outcomes in a TOC are typically not direct Outputs of activity interventions or existing conditions. Therefore, other preconditions are necessary before the immediate preconditions can be achieved. These lower-level preconditions, too, must be portrayed in the TOC. The process of identifying preconditions should continue backward, step by step, until reaching an activity Output or a precondition that is outside the control of the activity.

The improvement of the economic environment is too complex an Outcome to rely on simple activity Outputs. Therefore, the TOC must continue backward from this Outcome to define more levels of preconditions before reaching a direct Output of an activity intervention or a precondition outside the control of the activity. In **Figure 1**, the broad arrows pointing upward toward a precondition/Outcome indicate that more levels of preconditions will be added below these points before the TOC diagram is complete.

In TOC diagrams, donors recommend the use of colours, numbers, fonts, shading, and/or shapes to distinguish the different elements of the TOC and the Log-Frame and to distinguish Outcomes from preconditions outside the activity's control from those influenced by the activity (**Figure 2 as an example**). Every TOC diagram should include a key that explains the significance of the colours, fonts, shading, etc.

Assumptions and rationales should be inserted in TOC diagrams using a unique shape or color. An assumption might be shown floating in the background of a diagram to indicate that it is necessary for all of the pathways depicted in the diagram. Another assumption or rationale underlying or justifying a pathway between two Outcomes should be shown in a shape that points toward the arrow that connects those Outcomes. If the text needed to describe an assumption or rationale makes a diagram too crowded, a simple identifier (for example, A1, R2, 15 etc.) that refers to a description of the assumption or rationale in the TOC narrative or an attached table may be positioned on the diagram to show its relationship to the related Outcome, Output, or pathway (**see Figure 1**).

Figure 1: Figure 1: Preconditions and Outcomes in a TOC

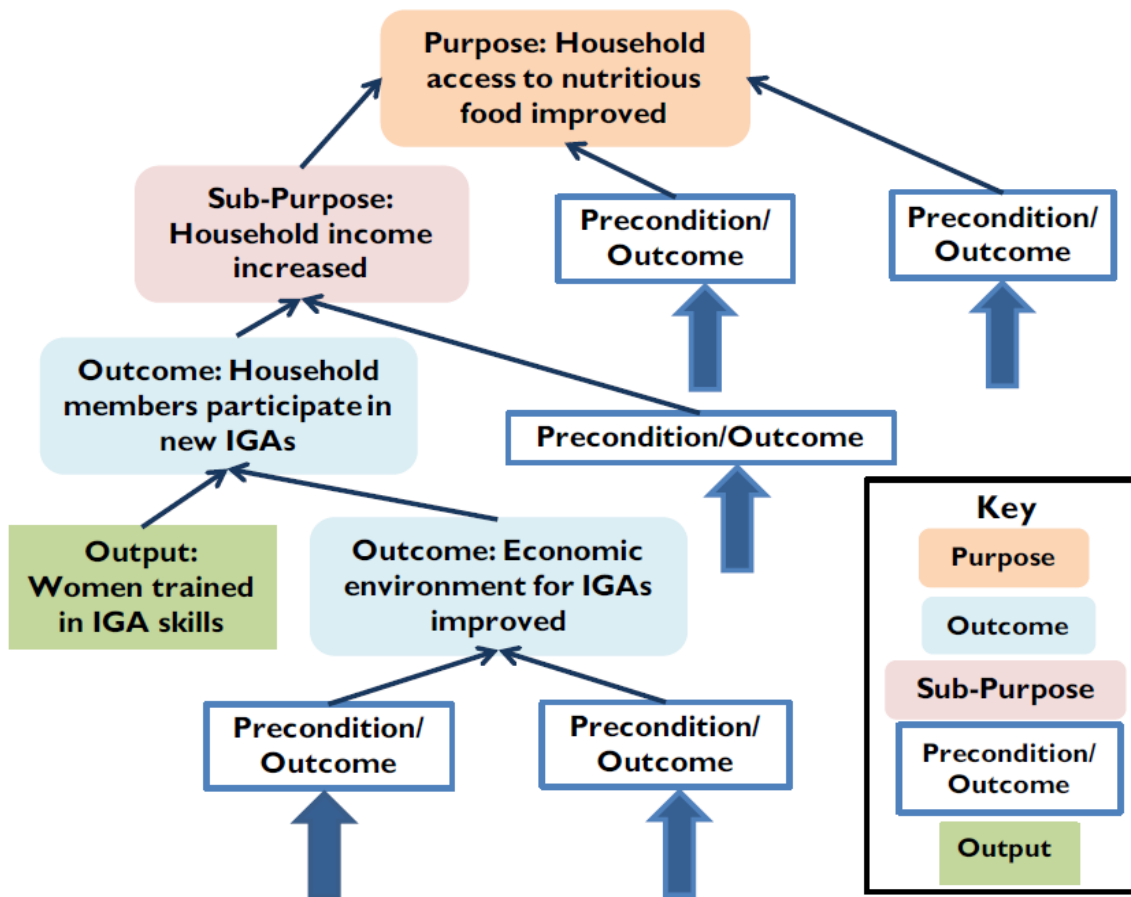
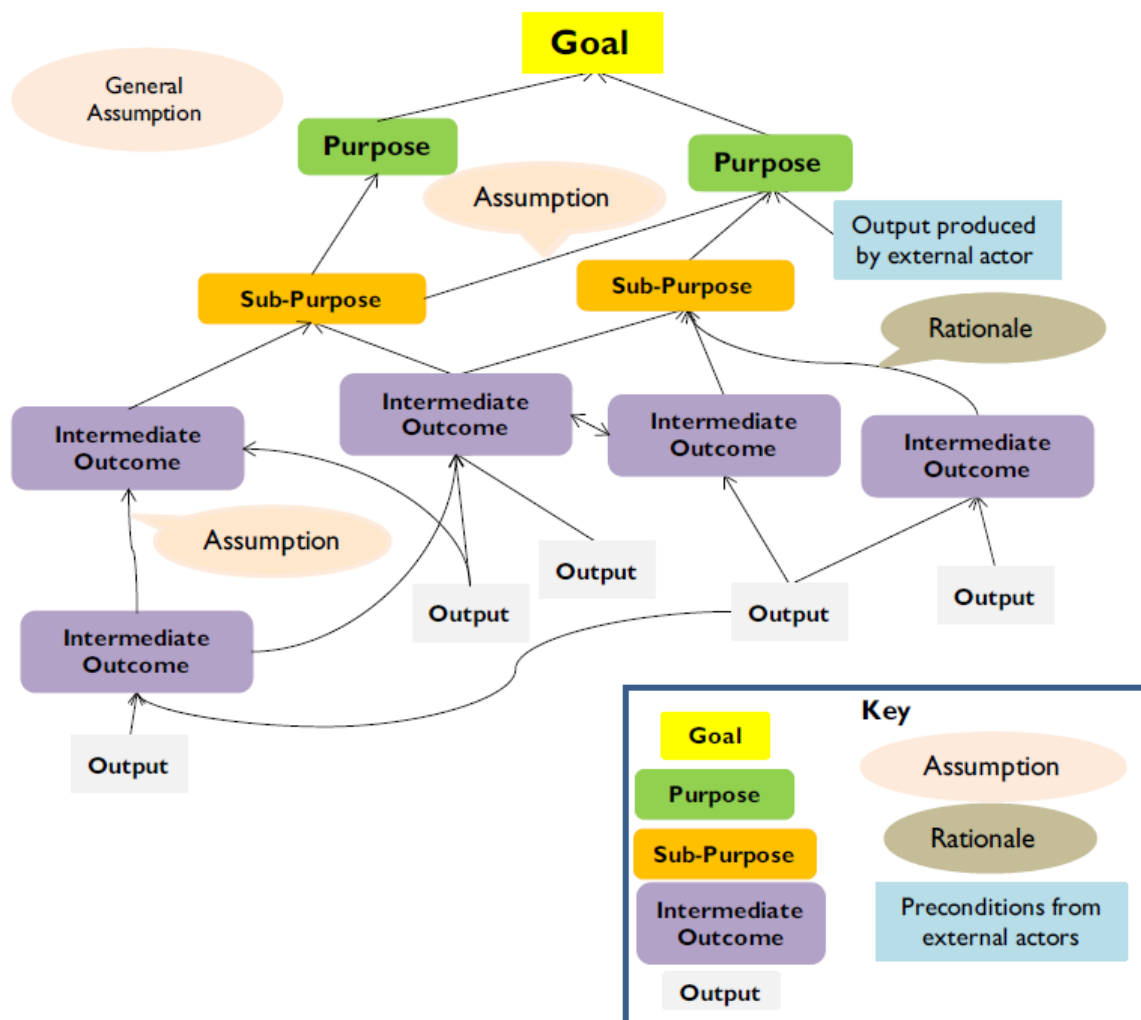


Figure 2: Showing the Use of Colour and Shape to Distinguish TOC and Log-Frame Elements



18.1.3 Breadth, Depth, and Level of Detail of TOCs

The breadth of a Theory of Change (TOC) reflects how well it captures external factors that influence outcomes, while its depth shows how far back pathways are traced from the Goal to the necessary preconditions. The level of detail depends on how clearly the steps between outputs, preconditions, and outcomes are depicted. At the application stage, the TOC should demonstrate understanding of the implementation context by including key external preconditions that may affect success, even if they are outside project control. All outputs must be shown in the diagram, with pathways connecting them to the Goal, while external preconditions can be summarized at a high level and explained in the narrative with risks and consequences. The TOC must be detailed enough for readers unfamiliar with the activity to understand how change is expected to unfold, and awardees are required to submit updated versions post-award as part of their M&E Plan. Over the life of the award, the TOC should expand in breadth, depth, and detail as monitoring and evaluation provide new evidence about pathways of change.

18.1.4 The TOC Narrative

The TOC narrative complements the diagrams by adding details that cannot be easily shown visually. It explains the evidence behind pathways, clarifies assumptions and risks, and highlights external factors that may influence success. The narrative should describe the certainty of outcomes, identify threats to progress, and explain how risks will be monitored or mitigated. It can reference research or literature to justify connections between preconditions and outcomes, outline the role of external actors, and show how limited interventions can lead to population-level change (e.g., through replication, outreach, or participants acting as change agents). In essence, the TOC narrative provides context, rationale, and evidence to strengthen the plausibility and sustainability of the pathways depicted in the diagrams.

18.1.5 Cross-Cutting Technical Areas

Every activity's Theory of Change (TOC) should demonstrate how cross-cutting themes gender, environment, community participation, sustainability, and conflict sensitivity ("do no harm") are integrated into programme design and implementation. The way these are represented may vary depending on the intervention.

Some activities implement specific interventions to promote changes in attitudes, practices, or community structures. For example, gender equity messages may be shared through mass media or community events, fuel-efficient stoves may be introduced to improve indoor air quality and reduce environmental impact, or community leaders may be engaged in dialogue on conflict resolution. In such cases, pathways can be depicted in dedicated TOC diagrams for each cross-cutting Purpose, with clear links to other programme Purposes.

Other activities integrate cross-cutting areas into implementation methods for sector-specific interventions. For instance, savings and loans initiatives may be designed to be gender-responsive, acknowledging different needs and barriers faced by men and women. Similarly, irrigation projects may incorporate governance structures to ensure sustainable water use in the face of climate change, while improved agricultural practices may simultaneously enhance crop yields and protect the environment. In these cases, integration can be reflected directly in the wording of outputs and outcomes, using terms such as gender-responsive, climate-sensitive, inclusive, or community-driven.

18.1.6 Reviewing TOCs

As implementation progresses, new evidence may emerge that reveals additional factors influencing the quality or efficiency of outcomes factors not initially captured in the TOC. For example, routine monitoring may uncover unexpected reasons why some beneficiaries adopt promoted practices more quickly than others; gender analysis may reveal cultural barriers to equitable behaviours change; or findings from an Initial Environmental Examination (IEE) may indicate potential harm from an intervention unless preventive measures are taken.

External research may also support new causal pathways or challenge existing ones. For instance, peer-reviewed studies might show that a locally prevalent factor contributes to stunting, requiring adjustments to the TOC. Additionally, significant shifts in political or environmental conditions may affect assumptions or pathways.

Donor's allows TOC revisions at any time, provided they are justified. When submitting a revised TOC for donor approval, the justification must clearly explain what changes were made and why. The awardee must also assess and describe the implications of these changes for activity design, implementation, and the M&E Plan. Any required modifications to interventions or monitoring systems should be submitted alongside the revised TOC for donor review and approval.

18.2 The Logical Framework

18.2.1 Log-Frame Description and Definitions

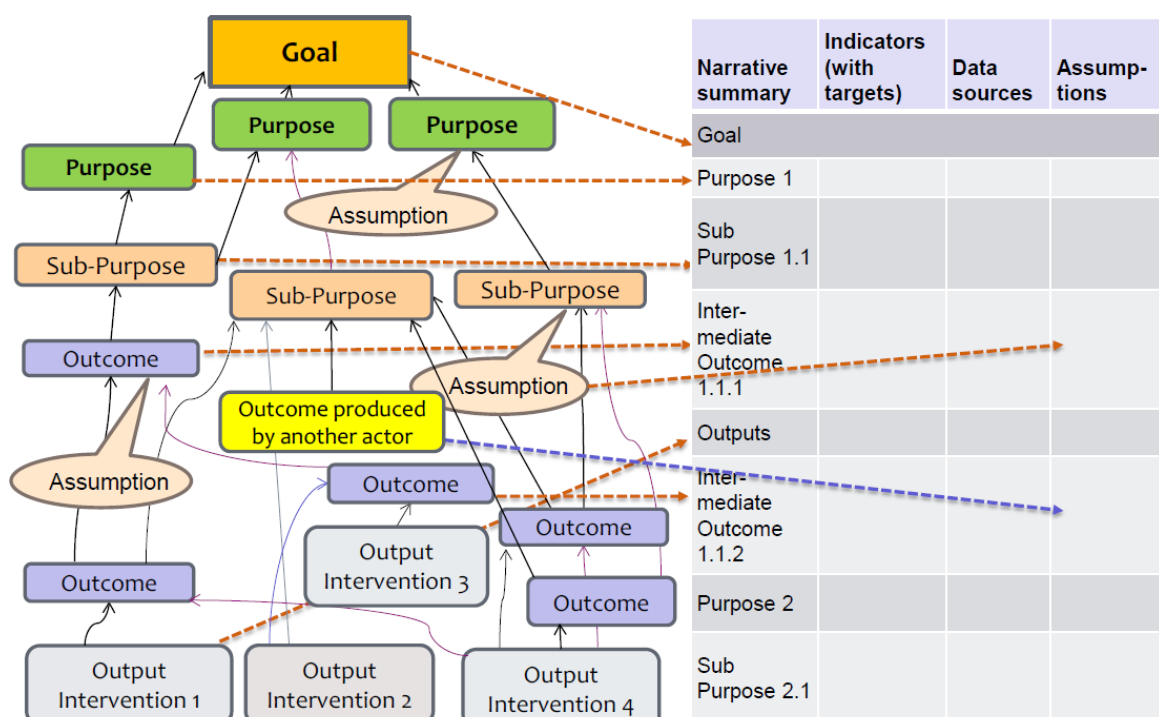
Every application and M&E Plan must include a Log-frame that is consistent with the TOC. A Log-frame uses a standard matrix format to summarize key elements of the TOC in four columns titled "Narrative Summary," "Indicators," "Data Sources," and "Assumptions." Table 1 provides an example of a portion of a Log-frame. Figure 3 shows the relationship between TOC and Log-frame components

Table 1: Example of a Log-Frame Matrix

| Narrative Summary | Indicators (with targets) | Data sources | Assumptions |
|---|--|---------------------------|---|
| Goal: Male and female population in Tangail District are food secure | | | |
| Purpose 1: Chronic malnutrition in boys and girls under the age of 5 years is reduced | Prevalence of stunted children under 5 years of age (Baseline – 10%) | Baseline/Final evaluation | <ul style="list-style-type: none"> External health and WASH objectives in the area achieved No outbreak of disease for which national health system is not prepared |
| | Average height-for-age z-score of child beneficiaries that reach 12 months and 23 months of age during the year | | |
| Sub-Purpose 1.1: Maternal and child health and nutrition (MCHN) care practices improved | % of births receiving at least 4 ANC visits during pregnancy (90%) | | Ministry of Health maintains adequate MCHN health service personnel and supplies in local health centres throughout LOA |
| | <ul style="list-style-type: none"> Number of live births receiving at least 4 ANC visits during pregnancy | Routine monitoring | |

| Narrative Summary | Indicators (with targets) | Data sources | Assumptions |
|--|--|---------------------------|--|
| | <ul style="list-style-type: none"> Number of women receiving postpartum family planning counselling % of child beneficiaries who receive all vaccinations on time | | |
| Intermediate Outcome 1.1.1: Both men and women cooperate to support good MCHN care practices | % of men and women with children under 2 who make maternal health and nutrition decisions jointly | Baseline/Final evaluation | |
| Sub-Purpose 1.2: Household and community hygiene improved | <ul style="list-style-type: none"> % of HHs using an improved sanitation facility (Baseline + 10%) % of HHs with soap and water at a handwashing station commonly used by family members (Baseline + 15%) % of villages with active sanitation committees supported by their village council (100%) | Baseline/Final evaluation | Local supplies and prices of soap and sanitation maintenance materials remain constant relative to incomes |
| | Number of people gaining access to an improved sanitation facility | Routine monitoring | |
| | % of physically improved sanitation facilities with feces visibly present on the floor, wall, or area immediately surrounding the facility | Annual survey | |
| Purpose 2: Household access to a diversity of foods improved | Average Household Dietary Diversity Score (Baseline * 130%) | | Prices of food and non-food necessities change similarly |

Figure 3: Relationships between TOC and Log-frame Components



Indicators

Each Outcome and Output in the Log-frame must have at least one measurable indicator to track progress. Indicators fall into three categories:

- Baseline/Final Evaluation (BL/FE) indicators: Measure population-level conditions at the start and end of the LOA.
- Annual monitoring indicators: Measured regularly among beneficiaries to report yearly progress.
- Contextual indicators: Track external conditions outside the activity's control but important to outcomes.

All required indicators must be included in every Log-frame. At the application stage, applicants must propose targets for Purpose and Sub-Purpose indicators, which can be expressed as:

- A fixed value (e.g., 5% prevalence of wasted children under 5).
- A percentage point change from baseline (e.g., baseline - 10%).
- A percentage change from baseline (e.g., baseline × 130%).

After the baseline survey, awardees must calculate numeric targets for all BL/FE indicators and enter them into the IPTT. At this point, targets should be removed from the Log-frame, and the revised Log-frame and IPTT must be submitted together for donor approval.

Data Sources for Indicators:

Each indicator must specify how and when raw data will be collected, using one of four standard sources:

- Baseline/Final Evaluation (BL/FE): Collected by external contractors at the start and end of the award period through population-based surveys.
- Routine Monitoring (RM): Captured regularly in activity records at intervention sites, usually for all beneficiaries. Reported at least annually in the IPTT.
- Annual/Routine Beneficiary Survey (AS): Collected each year from all or a sample of participants, timed to key events (e.g., harvest, planting) to improve reliability.
- Secondary Data (S): Drawn from external sources such as government agencies or NGOs, often used for contextual indicators (e.g., rainfall, water access).

Assumptions: Assumptions refer to external factors or conditions beyond the activity's control that must hold true for an Output or Outcome to be achieved. These include preconditions identified in the TOC that the activity does not directly influence. Importantly, factors the activity seeks to change such as beneficiary attitudes or behaviours should not be labelled as assumptions. For example, if an activity aims to shift behaviours, then "beneficiaries are open to change" is not an assumption but an intended Outcome.

BOX5: INDICATORS TYPE & DEFINITIONS

Required (R) Indicators: that are mandatory for all core program areas, regardless of the activity's design. They are defined in donor indicator handbooks and must be reported consistently. These often include standard measures such as nutrition, food security, or gender-related outcomes.

Required if Applicable (RiA) Indicators: that are mandatory only when relevant to the activity's interventions. Applicability is determined by donor criteria (e.g., intervention type, sector focus) and outlined in indicator lists or PIRSs. They ensure comparability across activities while allowing flexibility.

Mission/Program Indicators: that are defined post-award by the donor's country office or program lead. They reflect strategic priorities of the donor in a specific context. Awardees must adopt these indicators once provided, using donor-specified definitions and reporting formats.

Contextual Indicators: that track external factors outside the activity's direct influence, but which may affect outcomes. They provide context for interpreting results (e.g., conflict, migration, climate shocks). No targets are required, but actual values must be reported to show how external conditions shaped achievements.

Custom Indicators: designed by the awardee to measure specific Outputs, Outcomes, or contextual elements not covered by donor lists. They are critical for capturing unique pathways in the TOC, such as community participation, resilience, governance, or environmental mitigation. Custom indicators may be adapted from global frameworks (e.g., UN SDGs, OECD DAC) or developed internally.

18.3 Indicator Performance Tracking Table

The Indicator Performance Tracking Table (IPTT) is a central tool for monitoring activity performance against planned targets and reporting progress to donors. Awardees are first required to submit an IPTT post-award as part of the M&E Plan; it is not required at the application stage. The initial IPTT will only be approved once a Performance Indicator Reference Sheet (PIRS) has been submitted and approved for each indicator. An updated IPTT must accompany every

Annual Results Report (ARR), though awardees may submit requests to revise the IPTT at any time. The IPTT provides a consolidated view of activity performance by comparing targets and actual values across indicators, enabling adaptive management and accountability. Using the donor IPTT template, all Log-frame indicators and required disaggregates are presented in rows, with targets and actual values in columns. The IPTT may also include indicators not listed in the Log-frame if relevant. The template may contain separate Excel workbooks with worksheets for baseline/final evaluation indicators, annual monitoring indicators, base value data sources, deviation narratives and comments, target change comments, and archived annual monitoring indicators, ensuring comprehensive documentation and traceability of performance data.

BOX 6: INDICATOR WORKSHEETS IN THE IPTT

The IPTT includes worksheets for baseline, final evaluation, and annual monitoring indicators. The sequence and titles of indicators must mirror the Log-frame. In addition to indicator names, targets, and actual values, several key details must be recorded for donor compliance and performance tracking.

Indicator Number: Each indicator is numbered sequentially for easy reference. Numbers are never reused if an indicator is deleted. New indicators are assigned the next number in sequence, even if their position in the IPTT is out of order.

Data Source: Specify whether data comes from baseline/final evaluation (BL/FE), routine monitoring (RM), annual survey (AS), or secondary data (S).

Indicator Title: Must match the Log-frame narrative and TOC notation exactly. Donor-required indicators must be entered exactly as listed in donor frameworks or handbooks, without modification.

Indicator Type: Identify whether the indicator is donor-required (with number if applicable), Mission/program-specific (M), custom (C), or environmental/mitigation-related (E). If indicators overlap (e.g., required by both donor and Mission), note both.

Data Collection Method: Provide a brief description of how and when data will be collected, including tools, timing, and groups surveyed. A detailed description must be included in the indicator's reference sheet (PIRS or equivalent).

Desired Direction of Change (+/-): Indicate whether the value should increase (+) or decrease (-). For example, prevalence of disease should decrease, while adoption of improved practices should increase.

Cumulative (C) or Non-Cumulative (NC): Specify whether the indicator accumulates results over time (e.g., continued access to clean water) or only counts achievements within the reporting year (e.g., number of people trained).

Base Value: The IPTT must include a base value for every Output indicator and disaggregate. By the second fiscal year, base values must also be provided for all annual monitoring indicators.

Base Value Data Source: Reference the tab that explains how base values were collected and which groups were included in the sampling frame.

Target: Provide annual and LOA targets for all Output indicators, and final evaluation targets for BL/FE indicators. Targets may be fixed values or expressed relative to baseline.

Target Change Comment: If targets differ from previous submissions, a reason must be provided. Changes are only allowed with annual reporting submissions for the prior year. Comments must be retained across submissions.

Actual Value: With each annual report, actual values must be reported for annual monitoring indicators, and after final evaluation for BL/FE indicators.

% of Target Achieved:

- For indicators with a **positive direction of change**, calculate by dividing the actual value by the target value and multiplying by 100.
- For indicators with a **negative direction of change**, calculate by dividing the target value by the actual value and multiplying by 100.
- Example: If the target for underweight prevalence is 25% and the actual is 35%, the percent of target achieved is $(25 \div 35) \times 100 = 71$.

Deviation Narrative/Comment: If achievement is less than 90% or more than 110% of the target, the implementing partner must explain the reasons for under- or over-performance. Longer explanations can be entered in a separate sheet labelled "Deviation Narrative/Comment," with references noted in the IPTT.

Archive Indicators Worksheet: Indicators that are deleted with donor approval should be recorded in an archive sheet. This includes:

- Indicator number, source, title, and type
- TOC/Log-frame reference (Purpose, Sub-Purpose, Outcome, Output, or assumption)
- Indicator level (Output, Outcome, Impact, or Context)
- Justification summary for deletion
- Date initiated and date archived

Submission and Revision:

- The first IPTT is submitted post-award as part of the M&E Plan, with deadlines specified in the award document or donor workshop.
- Updated IPTTs must be submitted with each annual report, including actual values for the reporting year.
- Targets for the current year cannot be changed once approved, but deviations can be explained in the narrative section.
- Revisions (adding, deleting, redefining indicators, or changing data collection methods) require a justification package that also updates related M&E Plan components (Log-frame, PIRSSs, data flow).

Baseline Values vs. Base Values:

- **Baseline values** and **final evaluation targets** apply to BL/FE indicators, measured at population level by external surveys.
- **Base values** and **annual/LOA targets** apply to annual monitoring indicators, measured among direct beneficiaries.
- Baseline values may initially be entered as “TBD” until survey results are available.
- Base values may be zero (e.g., new Outputs) or non-zero (e.g., continuing groups or existing practices).

Targets:

- Annual and LOA targets must be set for all Output and Outcome indicators.
- LOA targets should be more ambitious than final evaluation targets, since beneficiary-level change is expected to be greater than population-level change.

Disaggregates: Baseline, base, and target values must be reported for all required disaggregates defined in donor indicator reference sheets. This includes sex, age, geographic area, or other categories specified by the donor.

Table 2: Indicator Performance Tracking Table (IPTT)

| [Activity and indicator descriptions] | | | FY 2016 | | | | | | | | FY 2017 | | Cumulative | |
|---------------------------------------|-----------------|----------|---------|--------|--------|--------|--------|--------|--------|--------|---------|--------|------------------|--------|
| [Activity and indicator descriptions] | | | Qtr 1 | | Qtr 2 | | Qtr 3 | | Qtr 4 | | Qtr 1 | | [Project Totals] | |
| Activity | Indicator | Baseline | Target | Actual | Target | Actual | Target | Actual | Target | Actual | Target | Actual | Target | Actual |
| <i>Project Objective 1</i> | | | | | | | | | | | | | | |
| Activity 1.1 | Indicator 1.1.1 | | | | | | | | | | | | | |
| Activity 1.2 | Indicator 1.2.1 | | | | | | | | | | | | | |
| <i>Project Objective 2</i> | | | | | | | | | | | | | | |
| Activity 2.1 | Indicator 2.1.1 | | | | | | | | | | | | | |
| Activity 2.2 | Indicator 2.2.1 | | | | | | | | | | | | | |

18.4 Performance Indicator Reference Sheets

18.4.1 Purpose of a PIRS

The purpose of a Performance Indicator Reference Sheet (PIRS) is to provide a clear and unambiguous definition of each indicator, ensuring that its meaning and measurement are standardized across activities. A PIRS specifies the categories for disaggregation, such as sex, age, or geography, and describes the raw data requirements, the methods and frequency of data collection, and the calculations used to derive final values. By documenting these details, the PIRS ensures consistency and transparency, allowing anyone to replicate the indicator measurement process accurately and reliably.

BOX7: CORE ELEMENTS OF A PIRS

- **Indicator Number & Title:** Unique identifier and name, aligned with the Log-frame/TOC.
- **Definition:** Clear explanation of what the indicator measures, including criteria for inclusion/exclusion.
- **Calculation Method:** Formula used to derive values, with numerator/denominator defined.
- **Unit & Range:** Specify measurement unit (e.g., %, number, score) and possible values.
- **Disaggregation:** List of categories (sex, age, region, livelihood group, etc.).
- **Indicator Type:** Identify as donor-required, mission/program-specific, custom, or environmental/mitigation.
- **Level:** Classify as Output, Outcome, Impact, or Context indicator.
- **Direction of Change (+/-):** Indicate whether values should increase or decrease.
- **Cumulative/Non-Cumulative:** Specify if results accumulate over time or reset annually.
- **Data Collection Method:** Describe how, when, and from whom data will be collected.
- **Sampling Frame:** Define population or beneficiary groups included.
- **Frequency of Collection:** State timing (baseline, annual, quarterly, etc.).
- **Data Collection Instrument:** Identify questionnaires, checklists, or observation tools.
- **Data Collectors/Recorders:** Specify roles (enumerators, supervisors, volunteers, etc.).
- **Measurement Notes:** Include “do no harm” considerations, sampling procedures, and clarifications.
- **Further Guidance:** Reference external standards (e.g., SDGs, OECD DAC, Sphere, donor handbooks).

Submission & Approval

- Draft PIRSs for baseline/final evaluation indicators should be submitted before baseline workshops.
- Final PIRSs must be submitted after incorporating workshop feedback.
- PIRSs for annual indicators are submitted with the initial IPTT or as specified by the donor.
- All indicators in the IPTT must have an approved PIRS before the M&E Plan is finalized.

Custom Indicators

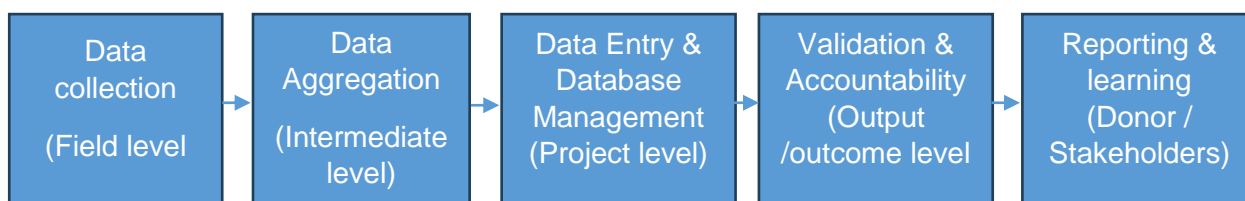
- Awardees must develop PIRSs for all custom indicators.
- Custom PIRSs should detail raw data, sampling frame, collection methods, and calculation formulas.
- Clarifications may be added to donor-provided PIRSs (e.g., specifying technologies, practices, or beneficiary groups), but core definitions cannot be changed.
- If frequency, sampling frame, or calculation is altered, the indicator becomes a custom indicator and must be reported separately.

Example (template) of Performance Indicator Reference sheet (PIRS) detailed out in **Annex 4**

18.5 Annual Monitoring Strategy

Applicants should provide a broad overview of proposed annual monitoring activities in their submissions. Post-award, the Monitoring and Evaluation (M&E) Plan must present a detailed description of annual monitoring activities that covers all indicators in the approved tracking table (IPTT or equivalent) and addresses cross-cutting technical areas such as gender, environment, conflict sensitivity, community participation, and sustainability. The plan must be submitted according to the schedule specified in the award agreement or donor-led M&E workshop. Any changes to the plan for any indicator must be documented and approved by the donor before implementation.

The Annual Monitoring Strategy section should explain the processes and actors involved in collecting and processing data to generate “actual” values for annual monitoring indicators. For partnership or consortium-managed projects, this section should clarify how responsibilities are shared among partners and identify who is accountable for finalizing reported values. While a Performance Indicator Reference Sheet (PIRS) defines the raw data and calculation methods for each indicator, it does not describe the full data flow or the roles of all actors involved. For example, a PIRS may specify that community group secretaries collect membership and activity data, but the Annual Monitoring Strategy should explain how this information is transferred to field officers, summarized, entered databases, and analysed by M&E staff to produce annual reporting values. Where multiple indicators follow the same data pathway, it is more efficient to describe the process once in the Annual Monitoring Strategy rather than repeating it in each PIRS.



Project or programme may use data flow diagrams, matrices, or other summary presentations to illustrate when, where, how, and by whom raw data are collected, aggregated, processed, and disaggregated to produce annual reporting values. Accompanying narrative should provide additional detail, while referencing relevant information already described in PIRSs to avoid duplication. Methods, timing, and responsible parties may differ across indicators, so the Annual Monitoring Strategy should capture these variations clearly.

18.6 Data Collection

Annual indicators should measure change among direct beneficiaries or activity Outputs not the general population unless justified and approved by the donor. Direct beneficiaries include individuals, households, communities, or institutions that receive meaningful support through project interventions. In cascade models, both primary trainees and those trained through structured knowledge transfer may be counted. However, people exposed only to general messaging (e.g., posters, radio, theatre) or informal spillover effects should not be included. For some indicators, individuals benefiting from infrastructure (e.g., water points) may be counted even without direct contact. Sampling frames must be clearly defined and approved, and routine data collection is encouraged to support accurate annual reporting.

BOX 8: ROUTINE DATA COLLECTION

Routine data collection involves gathering information directly from all relevant beneficiaries at intervention sites throughout the year. Common approaches include:

- Service providers (e.g., extension agents, health staff) record attendance, achievements, and demographic details of participants in trainings, care groups, or farmer field schools.
- Community-based workers or volunteers collect data during service delivery or extract it from beneficiary records during home visits or site-based activities (e.g., antenatal visits, commodity distribution).
- Beneficiary groups or community members submit regular reports on their activities (e.g., savings and loan group performance, committee actions), which are verified and aggregated by sectoral supervisors.
- Technical specialists periodically assess community plans (e.g., disaster risk reduction) and assign scores based on

predefined criteria in the indicator reference sheets.

BOX 9: ROUTINE BENEFICIARY SURVEYS

Another approach to annual monitoring is to collect information at regular intervals from a sample of intervention sites or a subset of beneficiaries using probability sampling. Data gathered throughout the year is analysed collectively to derive annual figures. This method is especially useful for measuring knowledge, attitudes, and practices, which require more time and cannot feasibly be collected from all beneficiaries.

- M&E staff conduct scheduled visits (monthly, quarterly, or bi-annual) to selected sites to observe implementation or interview systematically chosen beneficiaries.
- Surveys of targeted groups (e.g., youth, farmers, livestock holders) assess exposure to messages, perceptions of services, or use of community infrastructure.
- Sampling strategies must be clearly defined, consistently applied across years, and rigorously followed to ensure representativeness and comparability.

BOX 10: ANNUAL BENEFICIARY SURVEYS

Annual beneficiary surveys involve collecting information from a large sample of beneficiaries at a consistent time each year, either at intervention sites or in households. Timing may align with the fiscal year or seasonal cycles (e.g., post-planting). Data collectors use standardized questionnaires within a defined time window, focusing only on selected beneficiaries.

Key considerations:

- Each indicator requires a clearly defined sampling frame based on its related interventions.
- Large household surveys covering multiple intervention groups are discouraged due to challenges in ensuring accurate representation.
- Annual surveys should only be used when routine monitoring or routine beneficiary surveys are not feasible or reliable.
- When large-scale surveys are conducted, donor approval of the survey design and scope of work (SOW) is required, especially if external contractors are involved.
- **The SOW must include:**
 - Justification for using an annual survey
 - Indicators to be measured and their intervention groups
 - Sampling design and sample sizes
 - Methodology
 - Roles and responsibilities of staff/contractors
 - Qualifications of personnel
 - Timeline for activities and deliverables

18.7 Data Collection Tools

Data collection tools should be standardized as much as possible to ensure consistency and comparability across sites and partners. If different tools are required for specific contexts, sub-partners, or geographic locations, the reasons must be clearly explained in the Annual Monitoring Strategy section of the MEAL Plan.

All available tools whether questionnaires, checklists, registers, or observation forms should be attached to the MEAL Plan. Draft versions may be submitted initially, but they must be clearly marked as drafts. Final, revised tools should be submitted to replace earlier versions before they are widely used by project staff. Updated tools must also be shared with the donor as they become available to ensure transparency and alignment with reporting requirements.

18.8 Data Flow

To ensure accuracy and reliability, all processes of data collection, recording, transfer, storage, aggregation, disaggregation, and analysis must follow standardized and well-documented procedures. The Annual Monitoring Strategy should include clear data flow diagrams, matrices, or other visual summaries that trace the movement of data from the point of collection to final reporting.

BOX 11: KEY ELEMENTS OF THE DATA FLOW

Collection: Specify location, timing, tools, and actors involved (e.g., registers, logs, digital forms).

Recording: Note whether data are captured on physical media or digital devices at intervention sites or field offices.

Transfer: Describe how raw or aggregated data are moved (hard copy or digital) to regional/national offices, with frequency (monthly, quarterly, or more frequent).

Verification & Aggregation: Identify who validates, aggregates, and disaggregates the data at each stage.

Database Entry: Show which data are entered into monitoring databases and how they are maintained.

Analysis & Reporting: Explain how processed data feed into annual reporting tools (e.g., IPTT or equivalent), including timing and responsible parties.

The narrative of data flow should clearly describe the type of data processing at each stage, the frequency of data movement, and the roles of staff or partners involved. This documentation ensures transparency in how data are handled, supports comparability across reporting periods, and strengthens accountability across all donor frameworks.

Table 3: Data Flow as a Matrix

| | WHO | WHAT | HOW | WHEN | WHERE |
|-------------------|------------------------------|--|---|--|----------------------------------|
| Collection | All trainers | <ul style="list-style-type: none"> ➤ Fills Form (paper) with: <ul style="list-style-type: none"> • Trainees' beneficiary IDs and post-test scores • Training session information: <ul style="list-style-type: none"> ○ Trainer ○ Training dates ○ Type(s) and module(s) ➤ Sends completed form to sub-office via fax, scan, or courier | <ul style="list-style-type: none"> • Paper form provided by Agricultural Training Officer • Email of filled form to sub-offices | Within 3 days of end of training session | Training sites/trainers' offices |
| Entry | Sub-office data entry clerks | <ul style="list-style-type: none"> ➤ Enters into training table in monitoring database: <ul style="list-style-type: none"> • Trainees' beneficiary IDs and post-test scores • Training session information: <ul style="list-style-type: none"> ○ Trainer ○ Training dates ○ Type(s) and module(s) ➤ Paper Form #T3 filed in sub-office training file by training type and trainer | Training table data entry system | Within 1 week of end of each training | Sub-office |
| Storage | Database management staff | Maintains and safeguards monitoring database and data entry system | | Indefinite | Cloud based |
| Processing | M&E Officer | <ul style="list-style-type: none"> • Aggregation of training data across districts • Disaggregation by sex, module • Disaggregation by sex, type of individual, and type of training, annually | <ul style="list-style-type: none"> • Computing module X1 • Computing module X2 | Quarterly and annually | Project office |
| | Training officer | <ul style="list-style-type: none"> • Aggregation of training data by district • Calculation of: <ul style="list-style-type: none"> ○ Male/female ratios by module by district ○ Numbers of beneficiaries who completed all modules of improved techniques by crop, sex, and district ○ Average post-test scores by module and trainer | <ul style="list-style-type: none"> • Computing Module X3 | Quarterly | Project office |
| Report | M&E officer | Number of individuals who have received support short-term agricultural sector productivity or food security training | Manual transfer of numbers to IPTT and entry to ARR in MIS | Annually | Project office |

18.9 Monitoring Databases

Projects should establish and maintain monitoring databases to capture and track beneficiary-level (individual, household, community) and intervention-level data required for calculating annual indicators and for ongoing activity monitoring considering following:

Design Principles

- Database design should be guided by completed or near-final versions of the IPTT, indicator reference sheets (PIRSs), Annual Monitoring Plan, and data flow diagrams.
- Databases must be user-friendly, standardized, and aligned with reporting requirements.

Uses and Benefits

- Databases provide continuous access to data for staff to analyse trends, monitor participation, and compare outcomes across locations.
- They support adaptive management by answering operational questions (e.g., market participation, success of income-generating activities).
- Detailed records (sex, age, household composition, intervention history, training completed, goods received) enable robust sampling frames for annual monitoring.

Structure and Integrity

- Relational databases with unique identifiers at community, household, and individual levels are recommended to ensure accurate linkages, avoid double counting, and demonstrate integration across interventions.
- These connections allow comparison of outcomes between households benefiting from single vs. multiple interventions.

Technology Options

- Databases may be built using widely available software (e.g., MS Access, Excel, SPSS, CSPro) or adapted from existing systems developed by other organizations, provided they meet project needs.
- Before developing new systems, existing tools should be reviewed for possible adaptation.

Documentation

- The Annual Monitoring Strategy should describe database structures, contents, data entry processes, and the applications/versions used for data management and processing.

18.10 Cross-Cutting Technical Areas

The Annual Monitoring Strategy should explain how the MEAL system will monitor and assess the integration of cross-cutting themes across all activities. These themes typically include:

- Gender equality and social inclusion
- Environmental protection and climate resilience
- Conflict sensitivity and peacebuilding
- Community participation and accountability
- Sustainability of interventions

Projects are encouraged to use both quantitative and qualitative methods to measure the frequency, quality, and depth of integration of these areas. The section should highlight all monitoring approaches beyond standard indicators, including:

- Methods used (surveys, focus groups, participatory assessments, routine monitoring)
- Staff roles and responsibilities (M&E officers, technical specialists, community facilitators)
- Frequency of monitoring (monthly, quarterly, annually)
- Locations (intervention sites, communities, households)
- Types of informants (beneficiaries, non-beneficiaries, community leaders, partner staff)

BOX 12: MONITORING CONFLICT SENSITIVITY AND COMMUNITY PARTICIPATION

The MEAL system should ensure inclusive involvement of community members in planning and decision-making at all stages. This strengthens cohesion, improves decision quality, and reduces risks of bias or division.

Monitoring should capture the **extent, frequency, and quality** of participation, documenting both benefits and challenges. Approaches must be context-specific, reflecting cultural norms, activity purposes, and intervention types. Methods may include:

- Tracking numbers and characteristics of participants (leaders, members, men/women, youth, persons with disabilities, socioeconomic groups).
- Recording frequency and nature of information exchanges and follow-up actions.
- Collecting perceptions from communities and staff about communication quality and responsiveness.
- Assessing community views on how well activities respond to their input.

This process may be largely qualitative, with quantitative indicators derived where appropriate, ensuring accountability and adaptive learning across donor frameworks.

BOX 13: COMMUNITY-BASED / PARTICIPATORY M&E

Community members are key informants in monitoring, providing insights on intervention relevance, cultural appropriateness, effectiveness, accountability, and communication. They help identify what works, what doesn't, and any unintended outcomes. Beyond being informants, communities may also participate directly in monitoring processes as data collectors, reporters, or analysts. Leaders, volunteers, or groups supported by the activity can gather and report information on Outputs and Outcomes, which may feed into indicator reporting.

When community members are engaged in data collection or analysis, their roles and responsibilities should be clearly documented in:

- Indicator Reference Sheets (PIRSs)

- Data flow diagrams
- MEAL staffing plans

To ensure reliability, the MEAL system must describe how data quality will be safeguarded through supervision and verification.

19. Data Quality Assurance, Management, and Safeguard

M&E Plans must describe how NGOs/CBOs will ensure data quality and safeguard data throughout collection, transfer, processing, reporting, and storage. Routine procedures should include measures to protect data integrity, cross-checks to test validity and reliability, and supervision and verification to confirm precision. Periodic internal Data Quality Assessments (DQAs) should be conducted for key indicators to test the rigor and effectiveness of these processes. Finally, the plan must outline measures to protect data from inappropriate access, use, or manipulation.

19.1 Data Quality Assurance

The MEAL Plan must describe the routine measures NGOs/CBOs will take to ensure the quality of data collected and generated by their monitoring systems. Data should consistently meet the five key attributes of high quality: validity, reliability, timeliness, precision, and integrity.

To achieve this, the plan should outline:

1. Documentation: Clear, detailed protocols for all processes (collection, cleaning, recording, aggregation, disaggregation, reporting, storage, and safeguarding), written in accessible language and available to staff.
2. Verification and Cross-Checking: Regular checks to ensure staff follow protocols consistently, including:
 - Supervisor visits to verify data collected by staff or volunteers.
 - Use of photos, audio, or video evidence to validate observations.
 - Triangulation of findings through multiple methods or contexts.
 - Systematic review of data to identify outliers or inconsistencies.
 - Built-in software checks (dropdowns, conditional fields, scripts, macros).
3. Capacity and Accountability: Adequate staffing with clear role descriptions, regular training, supervision, and accountability for performance.
4. Resources and Logistics: Sufficient financial and logistical support to ensure timely and accurate data collection and processing.
5. Periodic Data Quality Assessments (DQAs): Internal reviews of key indicators to test the rigor and effectiveness of data quality processes.
6. Data Protection: Measures to safeguard data from unauthorized access, use, or manipulation.

Descriptions of these measures may be presented in a stand-alone section of the MEAL Plan or integrated into indicator reference sheets (PIRSs), data flow diagrams, or MEAL staffing sections.

19.2 Data Quality Assessment

DQAs are periodic reviews designed to assess how well data quality assurance processes ensure that reported indicators meet the five core standards of high-quality data: validity, reliability, timeliness, precision, and integrity. Their purpose is to identify strengths and weaknesses in data systems and recommend improvements.

Scope and Focus

- DQAs typically review selected annual monitoring indicators collected through routine (non-survey) methods.
- Indicators from annual surveys are excluded, as their quality is verified through supervision and survey-specific checks.
- Each DQA should focus on 3–5 strategically selected indicators per year, prioritizing:
 - Indicators that are complex to measure.
 - Indicators with suspected data quality issues.
 - Indicators critical for decision-making or demonstrating progress.
 - Indicators representing different data flow processes.

Process - Reviewers reconstruct the full data flow for each selected indicator from initial collection through storage, aggregation, and reporting to identify potential sources of error. A DQA may examine:

- MEAL structure, functions, and staff capacity.
- Indicator definitions and reporting guidelines.
- Data collection tools and reporting forms.
- Verification, aggregation, processing, management, storage, and safeguarding procedures.
- Data use and dissemination practices.
- Links with national reporting systems, where relevant.

Planning and Reporting

- The MEAL Plan must describe the timing and processes for planned DQAs, including justification if none are scheduled in the first 12 months.
- With each annual planning cycle, the organization should outline DQAs planned for the following year or explain why none are scheduled.
- Each DQA description should include:
 - Indicators to be reviewed and rationale for selection.
 - Time frame and duration.
 - Specific focus areas.
 - Participants, roles, and qualifications.
- Findings and corrective actions from completed DQAs should be documented and shared through annual reporting mechanisms.

External Reviews Donors or national stakeholders may also conduct independent DQAs for selected indicators. These complement but do not replace the organization's responsibility to conduct its own DQAs to test the adequacy of its data quality assurance systems.

19.3 Data Management and Safeguards

The MEAL Plan must describe how data will be safeguarded against unintended change, misuse, loss, or destruction as it moves through collection, transfer, processing, reporting, and storage. This applies to data in paper, digital, and other formats. Protecting privacy and confidentiality is critical, especially in contexts with conflict or social tensions, where inappropriate use of data can have serious consequences.

Key requirements include:

- **Confidentiality:** Measures to protect beneficiary identity and personal information in both hard copy and digital files.
- **Secure Storage:** Clear procedures for storing original data files and activity records, including:
 - Where and how data will be stored.
 - Who has access.
 - How long data will be retained.
 - Procedures and timelines for secure destruction.
- **Backups and Security:** Defined methods, frequency, and responsibility for file and database backups. Safeguards must include:
 - Protection against unauthorized access during entry, editing, processing, or retrieval.
 - Virus protection and cybersecurity measures for digital data.
 - Physical security for hard copies, databases, and backup files.
- **Partnerships:** For consortium or partnership activities, the plan must explain how data management and safeguards will be coordinated across partners.
- **Preservation:** The plan should specify how and for how long data will be preserved for future use (e.g., evaluations, DQAs, or studies).

Box 14: Examples of data management and safeguards include

- Measures that will be taken to ensure and safeguard beneficiary confidentiality and protect personal identity information, both of hard copy and digital files
- Systems to store/maintain original data files/activity records: Where original data will be stored, how they will be protected, who can access them, how long the awardee will retain them, and procedures and timeline for their destruction
- Methods, frequency, and locations of file and database backups and who is responsible for making backups; measures to prevent and detect unauthorized data access for data entry, editing, processing, or retrieval; virus protection of digital data; and security measures to protect the physical location of hard copies, databases, and data backups

19.4 Ethical Considerations & Safeguarding

Ethical standards and safeguarding are integral into MEAL framework. All monitoring, evaluation, accountability, and learning activities must be conducted in ways that respect human dignity, protect vulnerable groups, and uphold the principles of transparency and inclusivity.

Core Ethical Principles

- **Do No Harm:** MEAL processes must avoid causing physical, psychological, or social harm to participants.
- **Informed Consent:** Data collection requires voluntary, informed consent, with participants fully aware of the purpose, risks, and use of information.
- **Confidentiality and Data Protection:** Personal information must be securely stored, anonymized where possible, and shared only with authorized parties.

- **Respect and Inclusivity:** MEAL activities must be culturally sensitive, gender-responsive, and inclusive of marginalized voices.

Safeguarding Commitments

- **Child and Youth Protection:** Special protocols ensure that children and youth are engaged safely, with parental/guardian consent and age-appropriate methods.
- **Gender and Social Inclusion:** MEAL systems must disaggregate data by gender, age, and vulnerability status to identify inequalities and promote equity.
- **Safe Feedback Mechanisms:** Complaints and feedback channels must be accessible, confidential, and free from retaliation risks.
- **Staff Conduct:** All staff and partners involved in MEAL activities must adhere to UMUS's safeguarding policies and codes of conduct.

Implementation Measures

- Training for staff and partners on ethics, safeguarding, and responsible data use.
- Integration of safeguarding checks into Data Quality Assurance (DQA) processes.
- Regular audits of consent forms, feedback mechanisms, and data security protocols.
- Clear referral pathways for safeguarding concerns identified during MEAL activities.

20. M&E Staffing and Capacity Development

20.1 Overview

It is essential that the M&E Plan demonstrate that the activity has adequate personnel with sufficient capacity to achieve all of the processes of data collection, processing, and reporting; to ensure data quality assurance; and to manage and safeguard the data.

20.2 M&E Staffing and Capacity Development Strategy

The MEAL Plan should identify all staff positions and external actors who contribute to data collection, processing, management, and reporting. This includes not only dedicated MEAL staff but also field staff, sectoral specialists, partner organizations, government agencies, consultants, volunteers, and community members engaged in monitoring functions. For each position, the plan should specify roles, responsibilities, and the percentage of time allocated to MEAL tasks.

An organogram must be included to illustrate lines of supervision and reporting for MEAL functions. In consortium or partnership activities, the organogram should clearly indicate the organization responsible for each position.

The staffing and capacity development strategy should also describe how staff will be trained to apply principles of gender equity, environmental protection, community engagement, and “do no harm” in data collection and monitoring. The MEAL budget must identify costs related to capacity building.

Capacity development may use diverse approaches, including formal training, on-the-job learning, mentoring, distance learning, and staff rotations.

With each annual report, the organization should provide documentation of MEAL capacity-building activities conducted during the year, identifying beneficiaries of training and explaining any differences between planned and actual activities. This can be presented in either tabular or narrative form.

21. Evaluation Plan

The evaluation plan must include:

- A baseline study
- An MTE
- A final evaluation

21.1: Baseline Studies

21.1.1 Requirements for All Baseline Studies

A baseline study is required for all development activities to establish benchmark values for key outcome and impact indicators. These values will later be compared with endline data to assess progress and effectiveness. The baseline also provides critical information about the

BOX 15: KEY TYPES OF EVALUATION

Formative Evaluation

Conducted during project design or early implementation to improve planning, identify risks, and strengthen programme strategies.

Process (or Implementation) Evaluation

Focuses on how activities are being delivered, whether they are implemented as planned, and the quality of delivery.

Outcome Evaluation

Assesses the short- and medium-term results of a programme, measuring changes in knowledge, behaviour, or conditions among target groups.

Impact (or Summative) Evaluation

Examines long-term effects and overall contribution to development goals, including sustainability and broader social change.

Mid-Term Evaluation

Conducted halfway through implementation to assess progress, identify challenges, and recommend adjustments.

Development Evaluation

Developmental evaluation involves long-term relationships between evaluators and project or programme staff. Evaluation is ongoing, which means that feedback can be provided on a continuous basis. Development evaluation is particularly appropriate for projects or programmes working in

target population to guide intervention design and targeting.

Core Components

- Household Survey: A population-based household survey must be conducted to collect data for all required indicators, using standardized tools and methodologies.
- Indicators: Data must be collected for donor-mandated baseline/final evaluation indicators, as well as any approved custom indicators.
- Survey Design: Sampling plans, sample size calculations, statistical precision, and respondent selection must follow recognized methodological standards.
- Qualitative Component (Optional): While not mandatory, qualitative methods may be included to interpret quantitative findings, provide contextual insights, or improve specificity.

Timing

- The baseline study must be completed within the first year of implementation.
- To ensure comparability, baseline and endline surveys should be conducted during the same season (e.g., agricultural lean season for food security indicators).

Management and Independence

- Baseline studies must be conducted by an independent third-party firm, selected through a competitive process based on technical merit, cost, and experience.
- All team members must declare any conflicts of interest.
- Awardee staff may not participate directly in sampling, data collection, or supervision, but they are responsible for providing community lists, contextual information, and logistical support.

Awardee Roles

- Provide lists of implementation communities and relevant contextual information (e.g., cropping calendars, local foods, gender norms, overlapping interventions).
- Support permissions and introductions to communities.
- Review draft reports and provide comments; disagreements may be documented in an addendum.
- Participate in planning workshops and briefings to contextualize survey instruments and discuss logistics.

Collaboration Across Activities

- In countries with multiple awards, joint baseline studies may be conducted using a common questionnaire, with contextual adjustments for specific interventions.
- Awardees may request inclusion of a limited number of custom indicators, subject to donor approval.

Reporting and Use

- Baseline values must be incorporated into the project's performance monitoring framework and reporting systems.
- Revised indicator targets should be set based on baseline findings.
- Findings should be shared widely with staff and partners, ideally through workshops to discuss implications for strategy and targeting.

Best Practices

- Keep the number of indicators manageable to avoid respondent fatigue and ensure data quality.
- Ensure transparency and independence in study design and implementation.
- Align reporting with donor evaluation policies and national systems where relevant.

21.1.2 Use of Baseline Study Results to Refine Activity Strategies

Baseline study results must be used to review and refine activity strategies and implementation plans. They provide an evidence-based opportunity to assess the activity design against the theory of change and the broader food and nutrition security framework. Contextual indicators collected during the baseline highlight enabling conditions necessary for achieving intended outcomes.

For example, if baseline findings show that only a small proportion of households have access to improved sanitation, the activity team can reassess whether integrating sanitation-related interventions is essential to achieving the project's purpose. In this way, baseline data serve not only as benchmarks for monitoring progress but also as a critical tool for adapting strategies to ensure relevance, effectiveness, and sustainability.

21.2 Midterm Evaluation

21.2.1 Requirements

For projects lasting four years or more, an externally led Mid-Term Evaluation (MTE) is required to assess the quality and effectiveness of service delivery, efficiency of implementation, targeting strategies, and both expected and

unexpected results. Conducted approximately midway through the project cycle, the MTE provides evidence to refine strategies and strengthen outcomes in the remaining years.

The evaluation must be independent, with team members who have not participated in the design or implementation of the activity. Normally, the MTE is managed by the implementing organization, though in contexts with multiple projects, collaboration among awardees to commission a joint evaluation team is encouraged. Deliverables include a scope of work and budget (submitted within 15 months), approval of the evaluation team (5–6 months before data collection), a final evaluation plan (before data collection begins), and a final report (within 36 months).

The MTE focuses on implementation processes such as training quality, facilitation methods, activity management, monitoring systems, integration of cross-cutting themes, and the relevance and efficiency of interventions. It also examines stakeholder perceptions including beneficiaries, staff, partners, and community members on what is working, what is not, and why. Evaluators should identify strengths, challenges, and unintended results (positive or negative), and compare findings against the project’s theory of change or results framework to validate or refine pathways of change.

Preparation should begin at least one year before the evaluation is needed, with sufficient time allocated for drafting the scope of work, procuring evaluators, reviewing secondary data, conducting fieldwork, analysing results, and finalizing the report. The evaluation team must include a leader and technical specialists with expertise across relevant sectors and cross-cutting areas, all external to the activity. Activity staff may serve only as informants or observers, not as data collectors or analysts, to preserve objectivity.

Within 45 days of donor approval of the final report, the implementing organization and donor must jointly develop an action plan to apply the findings and recommendations, ensuring lessons learned inform the final years of implementation.

21.2.2 Follow-Up Action Plan

Within 45 days of donor approval of the Mid-Term Evaluation (MTE) report, the implementing organization, in collaboration with the donor, must develop a clear plan of action to apply the evaluation’s recommendations. Actions should be prioritized according to their potential to positively influence final outcomes (e.g., essential, high, moderate, low, or impractical) and the resources available (time, budget, and capacity). Once agreed, each action must be assigned a time frame, measurable indicators of progress, and clear responsibility. Progress against these actions should be documented and reported in subsequent annual reports, using a structured template or tracking tool to ensure transparency and accountability.

21.3 Final Evaluation

The Final Evaluation is conducted at the end of the project cycle to provide a comprehensive assessment of performance, effectiveness, and sustainability. It serves as a critical accountability mechanism to donors, partners, and communities, while also generating lessons that inform future programming and organizational learning.

This evaluation examines the extent to which outcomes and impacts have been achieved, the relevance of interventions to community needs, and the sustainability of results. It also identifies innovations, best practices, and challenges, ensuring that evidence is systematically documented and disseminated.

21.3.1 OECD DAC Framework

The Final Evaluation is guided by internationally recognized OECD DAC criteria, ensuring comparability and credibility align with project goal and objectives.

| | |
|----------------|---|
| Relevance | Did the intervention address priority needs and align with donor and national strategies? |
| Coherence | Was the intervention consistent with other initiatives, policies, and partnerships? |
| Effectiveness | To what extent were planned objectives and outcomes achieved? |
| Efficiency | Were resources (time, funds, staff) used optimally relative to results? |
| Impact | What broader, long-term changes (intended or unintended) resulted from the intervention? |
| Sustainability | Are the benefits likely to continue after project completion? |

21.3.2 Evaluation Questions

Aligned with the OECD DAC criteria, the Final Evaluation will address the following guiding sample questions:

| Evaluation criteria | Evaluation Question |
|---------------------|--|
| Relevance | <ul style="list-style-type: none">• How well did the project respond to the needs and priorities of target communities?• Were the objectives aligned with national development strategies and donor priorities? |
| Coherence | <ul style="list-style-type: none">• How consistent was the project with other interventions in the same sector or region?• Did partnerships and coordination mechanisms strengthen or duplicate efforts? |
| Effectiveness | <ul style="list-style-type: none">• To what extent were planned outputs and outcomes achieved?• What factors contributed to or hindered achievement of results? |
| Efficiency | <ul style="list-style-type: none">• Were resources used economically and efficiently to deliver results?• Could similar outcomes have been achieved with fewer resources? |
| Impact | <ul style="list-style-type: none">• What long-term changes in communities, systems, or policies can be attributed to the project?• Were there any unintended positive or negative effects? |
| Sustainability | <ul style="list-style-type: none">• Are project benefits likely to continue beyond donor funding?• What mechanisms (institutional, financial, community ownership) support sustainability? |

21.3.3 Expected Outcomes

- Clear evidence of project achievements, gaps, and lessons learned.
- Strengthened accountability and transparency to donors and communities.
- Recommendations for sustainability and scaling of interventions.
- Evaluation findings aligned with OECD DAC criteria, reinforcing international standards and donor confidence.

21.4 Budget

At the application stage, awardees should allocate sufficient budget to cover costs associated with evaluations. This includes expenses for contracted evaluation team members, international and local travel, in-country lodging, and per diem. Salaries for technical specialists from the awardee's organization may be charged for the days they are directly engaged in the evaluation. Other related costs may include hiring local personnel (drivers, translators, enumerators, and local technical experts), translating reports, and renting meeting rooms for presentations and stakeholder workshops.

Annexes:

[Annex 1: Evolution of MEAL Acronyms Diagram](#)

Narrative Explanation

Monitoring and Evaluation (M&E) frameworks have evolved significantly to meet growing demands for accountability, learning, and adaptive management. Each stage added new dimensions to strengthen evidence-based programming and donor confidence:

- ✚ M&E → Tracking Results Focused on monitoring inputs and outputs, primarily for donor accountability.
- ✚ MEL → Learning from Results Introduced learning as a core component, ensuring evidence was used to improve program design and implementation.
- ✚ MEAL → Accountability to Communities Added accountability mechanisms, emphasizing transparency and responsiveness to beneficiaries and stakeholders.
- ✚ PMEL → Planning with Measurement in Mind Integrated planning processes with monitoring and evaluation, embedding measurement frameworks from the outset.
- ✚ MERL → Research-Informed Programming Incorporated research to strengthen evidence-based programming, using rigorous methodologies and mixed methods.
- ✚ MERLA → Adapting Based on Evidence Formalized adaptive management, ensuring programs could pivot based on findings and remain relevant in complex environments.

[Annex 2: Assessment Cycle Diagram](#)

Narrative Explanation

The assessment cycle is a structured process that ensures evidence is systematically collected, analyzed, and applied throughout the project life cycle. It emphasizes continuous learning and adaptation, aligning with donor requirements for accountability and impact measurement.

Key stages include:

- ✚ Needs Assessment: Identify community priorities, risks, and opportunities before project design.
- ✚ Baseline Assessment: Establish benchmarks and initial conditions to measure change.
- ✚ Ongoing Monitoring: Track progress against indicators, outputs, and outcomes.
- ✚ Mid-Term Review/Evaluation: Assess implementation quality, efficiency, and emerging results; refine strategies.
- ✚ Final Evaluation: Measure achievements against objectives, sustainability, and impact.
- ✚ Learning & Adaptation: Document lessons, share findings, and integrate evidence into future programming.

[Annex 3: Sample Log Frame / Results Chain](#)

| Hierarchy of Results | Description | Indicators | Means of Verification | Assumptions/Risks |
|----------------------|--|--|---|---|
| Impact | Long-term change in community well-being (e.g., reduced poverty, improved health outcomes). | Poverty rate reduction; maternal mortality ratio. | National statistics; household surveys. | Stable political environment; continued donor support. |
| Outcome(s) | Medium-term effects of program interventions (e.g., improved knowledge, behaviours change, service utilization). | % of households adopting improved practices; % of women accessing health services. | Program monitoring reports; evaluation surveys. | Communities remain engaged; services remain accessible. |
| Output(s) | Direct deliverables produced by activities (e.g., trainings conducted, services delivered). | # of trainings held; # of participants trained; # of facilities upgraded. | Training attendance sheets; facility records. | Participants apply knowledge gained; facilities maintained. |
| Activities | Specific actions undertaken to produce outputs (e.g., conduct training, distribute materials, provide services). | Activity completion milestones. | Activity reports; field monitoring checklists. | Resources available; staff capacity adequate. |
| Inputs | Resources invested (e.g., funding, staff, materials, time). | Budget utilization rate; staff deployment. | Financial reports; HR records. | Timely disbursement of funds; procurement efficiency. |

[Annex 4: Performance Indicator Reference Sheets \(PIRS\)](#)

| |
|--|
| Performance Indicator Reference Sheet |
|--|

| | |
|---|--|
| Custom | Number of individuals oriented in acts, ordinances, rules, and Standard Regulatory Orders (SROs) through USG support |
| Development Objective 1 Intermediate Result (IR): IR 1.1: | |
| Development Objective Sub-IR: 2.1.4 Leadership among youth, women, marginalized groups, and minorities, including religious minority groups enhanced | |
| Activity Goal: | |
| Program Intermediate Result (IR I): | |
| Name (and code) of Indicator: Number of individuals oriented in acts, ordinances, rules, and SRO through USG support | |
| Classification: Standard/Custom: Custom | |
| PPR Indicator: No | |
| PMP Indicator: No | |
| Contribute Data to a PMP Indicator: No | |
| DESCRIPTION | |
| <p>Precise Definition(s): This performance indicator reports on the number of individuals trained in acts, ordinances, rules, and SRO through donor support. The indicator is the measure support is the measure of the total number of government and non-government stakeholders who have been sensitized about existing and relevant Acts/Ordinances/Rules/SROs (aligned to the project) that regulate the Right to information in Bangladesh. The indicator captures the extent to which Donor-funded sensitization events have successfully increased the awareness and understanding of selected individuals (from Government, private sector and other stakeholders as relevant) on the regulatory framework governing the Right to information process in Bangladesh.</p> <p>The indicator also includes the completion of pre- and post-training assessments, which will be conducted to measure the effectiveness of the training modules in improving participants' knowledge and understanding of the RTI sector's regulatory framework.</p> <p>Illustrative steps in the process to sensitize individuals on acts, rules and SRO's:</p> <ul style="list-style-type: none"> • Preparation of a contextualized module (presentation slides) both in English and Bangla • One-day event with 25-30 participants per batch at the regional/national level. • The participants will be drawn from Government and non-government stakeholders who are exclusively engaged in seed sectors. • The person who will be nominated for this orientation session will also receive Gender sensitization and Leadership & Management Training on Right to information. <p>All the training reflects a planned, structured curriculum designed to strengthen capacities, and there is a reasonable expectation that the training recipient will acquire new knowledge or skills that s/he could translate into action. The module will be contextualized and adapted based on the Activity's target audience.</p> | |
| Unit of Measure: Number (of people) | |
| Numerator: NA | |
| Denominator: NA | |
| Disaggregated by: | |
| <p>Sex: the unique number of individuals should be entered here (i.e. no double-counting of individuals across disaggregate choices here)</p> <ul style="list-style-type: none"> • Male • Female • Disaggregates Not Available <p>Age Category: the unique number of individuals should be entered here (i.e. no double-counting of individuals across disaggregate choices here)</p> <ul style="list-style-type: none"> • 15-29 • 30+ <p>Disaggregates Not Available</p> | |
| <p>Justification & Management Utility: The individuals oriented in acts, ordinances, rules, and SRO (Standing Regulatory Orders) through donor support is an important indicator that can provide valuable insights into the effectiveness of government initiatives aimed at promoting regulatory compliance and public awareness. Using this indicator lies in its ability to provide a quantitative measure of the impact of donor support programs on the public & private sector. By tracking the number of individuals who have received orientation on regulations, acts, ordinances, rules, and SRO, policymakers can determine the effectiveness of these programs in achieving their intended goals. For instance, if the number of individuals oriented in acts, ordinances, rules, and SRO increases over time, it could be indicative of successful government efforts to promote compliance and public awareness.</p> <p>In terms of management utility, this indicator can be used by government agencies and policymakers to monitor the effectiveness of their regulatory education and outreach efforts. By analysing the data collected through this indicator, policymakers can identify areas where additional support and resources are needed to improve compliance and reduce non-compliance rates. This can help to prioritize regulatory education efforts and allocate resources more efficiently</p> | |

| PLAN FOR DATA ACQUISITION BY USAID | | | | | |
|---|-----------------------|---------|--------|--------|-------|
| Data Collection Method: Data for this indicator are collected from program records (event sign-in sheet, pre/post evaluation) that list the participants in RTI activities (project reports and activity records) | | | | | |
| Data Source: Event monitoring (Project record keeping of participant in each intervention activity records, firm records, training records – routine monitoring) and event participations pre/post evaluation/assessment. | | | | | |
| Frequency and Timing of Data analysis & Reporting: Data is calculated and reported semi-annually and annually as a unique headcount. | | | | | |
| Estimated Cost of Data Acquisition: n/a | | | | | |
| Individual Responsible at USAID: Courtney Buck, ROD/ Project Management Specialist | | | | | |
| Individual Responsible for Providing Data to USAID: COP / Country Lead / MEL Director | | | | | |
| DATA QUALITY ISSUES | | | | | |
| Dates of Data Quality Assessments: Annual DQA activity MEL team, and DQA one every three years or per schedule.: FY24 | | | | | |
| Known Data Limitations and Significance (if any): NA | | | | | |
| Actions Taken or Planned to Address Data Limitations: NA | | | | | |
| PLAN FOR DATA ANALYSIS, REVIEW & REPORTING | | | | | |
| Data Analysis and Presentation: The MEL team will analyse and identified unique participants from different interventions and disaggregated by sex, age and other relevant appropriate categories. Data will be stored in MS Azure and analysed and presented in a Power Bi dashboard. The MEL team will look at semi-annually and annual trends to determine opportunities to increase/decreases the number. | | | | | |
| Data Use: By analysing the data collected through this indicator, policymakers can identify areas where additional support and resources are needed to improve compliance and reduce non-compliance rates. These results can help to prioritize regulatory education efforts and allocate resources more efficiently. | | | | | |
| Reporting of data: The number of individuals oriented in acts, ordinances, rules, and SRO through USG support is a valuable indicator that can provide policymakers with important insights into the effectiveness of government initiatives aimed at promoting regulatory compliance and public awareness. The MEL team will analyse and identified unique participants from different interventions and disaggregated by sex, age and other relevant appropriate categories. | | | | | |
| OTHER NOTES | | | | | |
| Notes on Baselines/Targets: Targets were developed based on assumptions for the number of individuals AWRTI Activity will work with. | | | | | |
| PERFORMANCE INDICATOR VALUES | | | | | |
| Baseline Value | Baseline Date (MM/YY) | Year | Target | Actual | Notes |
| | | Yr 2026 | 234 | 0 | |
| | | Yr 2027 | 2 | 0 | |
| | | Yr 2028 | 360 | | |
| THIS SHEET LAST UPDATED ON: August 2025 | | | | | |

Annex 5: Data Quality Assurance Checklist

Purpose

This checklist ensures that all data used in monitoring, evaluation, accountability, and learning (MEAL) activities is **accurate, consistent, reliable, and timely**. It supports compliance with donor requirements, strengthens evidence-based decision-making, and builds trust with communities and stakeholders.

Checklist Categories

1. Validity

- Are indicators clearly defined and aligned with project objectives?
- Does the data measure what it is intended to measure?
- Are assumptions documented and tested?

2. Reliability

- Are data collection tools standardized and consistently applied?
- Are enumerators trained and supervised?
- Is there documentation of procedures to ensure replicability?

3. Integrity

- Are there safeguards against intentional or unintentional manipulation of data?
- Is raw data securely stored and protected from unauthorized access?
- Are audit trails maintained for data entry and revisions?

4. Precision

- Are indicators disaggregated by gender, age, and other relevant categories?
- Are margins of error or confidence intervals documented where applicable?

- Is sampling methodology clearly described and appropriate?

5. Timeliness

- Is data collected and reported according to agreed schedules?
- Are delays documented and explained?
- Is information available in time to inform decision-making?

6. Completeness

- Are all required data fields filled in?
- Are missing values explained and addressed?
- Are datasets cross-checked against source documents?

Annex 6: Feedback & Complaint Mechanism Tools

Purpose

Feedback and complaint mechanisms (FCMs) are essential for ensuring accountability to communities, partners, and donors. They provide safe, accessible, and transparent channels through which stakeholders can share concerns, complaints, or suggestions. These mechanisms strengthen trust, improve programme quality, and ensure that interventions remain relevant and responsive.

Core Principles of FCMs

- ✚ **Accessibility:** Mechanisms must be easy to use, available in local languages, and culturally appropriate.
- ✚ **Confidentiality:** Complaints must be handled discreetly, protecting the identity of complainants.
- ✚ **Timeliness:** Feedback must be acknowledged promptly, and complaints resolved within agreed timelines.
- ✚ **Transparency:** Communities must be informed about how to use the mechanism and how complaints will be addressed.
- ✚ **Non-Retaliation:** Complainants must be protected from any form of retaliation or discrimination.

Tools and Channels

- ✚ **Suggestion Boxes:** Placed in community centres or project sites for anonymous feedback.
- ✚ **Hotlines / Helpdesk Numbers:** Dedicated phone lines for reporting complaints or seeking information.
- ✚ **Community Meetings / Forums:** Regular participatory meetings where feedback is openly discussed.
- ✚ **Digital Platforms:** SMS, WhatsApp, or online forms for quick and accessible reporting.
- ✚ **Feedback Forms:** Distributed during activities to capture participant perceptions.
- ✚ **Grievance Registers:** Maintained at project offices to record and track complaints.

Process Flow

- ✚ **Receiving Feedback/Complaints:** Through any of the above channels.
- ✚ **Recording:** Documented in a standardized log or database.
- ✚ **Acknowledgement:** Complainant receives confirmation of receipt.
- ✚ **Investigation & Resolution:** MEAL team or designated staff review and act on the issue.
- ✚ **Communication of Outcome:** Complainant is informed of the resolution.
- ✚ **Learning & Adaptation:** Findings are integrated into programme improvements.

Roles and Responsibilities

- ✚ **MEAL Team:** Manage FCM tools, ensure confidentiality, and track resolution.
- ✚ **Programme Staff:** Facilitate community awareness and encourage use of mechanisms.
- ✚ **Senior Management:** Review complaints regularly and ensure corrective actions are implemented.
- ✚ **Donors/Partners:** Receive periodic reports on complaints and resolutions as part of accountability commitments.

Expected Outcomes

- ✚ Strengthened accountability and transparency.
- ✚ Increased community trust and participation.
- ✚ Timely identification of risks, challenges, and misconduct.
- ✚ Evidence-based improvements in programme design and delivery.

Annex 7: Feedback & Complaint Register Template

| Date Received | Source of Feedback/Comp | Type (Feedback/Compl) | Details of Feedback/Comp | Action Taken | Responsible | Status (Open/Clos) | Date of Resolutio |
|---------------|-------------------------|-----------------------|--------------------------|--------------|-------------|--------------------|-------------------|
|---------------|-------------------------|-----------------------|--------------------------|--------------|-------------|--------------------|-------------------|

| | Beneficiary / Staff / Partner / Community | Feedback / Complaint | Summary of issue or suggestion | Steps taken to address | Assigned staff member | Open / Closed | DD/MM/YY |
|----------|---|----------------------|--------------------------------|------------------------|-----------------------|---------------|----------|
| DD/MM/YY | | | | | | | |
| | | | | | | | |
| | | | | | | | |

Annex 8: Knowledge Flow Diagram

Narrative Explanation

Knowledge management is a critical component of MEAL. The Knowledge Flow Diagram shows how information moves through different stages from data collection to utilization ensuring that evidence is not only captured but also applied to strengthen accountability, learning, and adaptive programming.

The flow emphasizes:

- ✚ **Data Collection:** Gathering information from monitoring systems, evaluations, research, and community feedback.
- ✚ **Data Verification & Quality Assurance:** Ensuring accuracy, reliability, and ethical compliance.
- ✚ **Data Analysis & Synthesis:** Transforming raw data into insights, trends, and lessons.
- ✚ **Knowledge Products:** Producing reports, dashboards, infographics, and learning briefs.
- ✚ **Knowledge Sharing:** Disseminating findings across staff, partners, communities, and donors.
- ✚ **Knowledge Utilization:** Integrating lessons into program design, decision-making, and advocacy.
- ✚ **Knowledge Retention:** Archiving key documents and lessons to build institutional memory.
- ✚ **Feedback Loop:** Feeding insights back into planning and implementation for continuous improvement.

Annex 9: Data Flow Diagram

Narrative Explanation

The Data Flow Diagram illustrates the pathway of information within UMUS's MEAL system. It ensures that data collected from the field is systematically processed, verified, stored, analyzed, and used for decision-making. This structured flow strengthens accountability to donors and communities, while safeguarding data integrity and confidentiality.

Key stages include:

- ✚ **Data Collection:** Field teams, partners, and community mechanisms gather information using surveys, monitoring tools, and feedback systems.
- ✚ **Data Entry & Verification:** Data is entered into monitoring databases, checked for accuracy, completeness, and ethical compliance.
- ✚ **Data Management:** Verified data is securely stored in MIS/databases with safeguards for confidentiality and access control.
- ✚ **Data Analysis:** MEAL staff synthesize information into indicators, trends, and lessons learned.
- ✚ **Reporting:** Findings are compiled into donor reports, dashboards, and learning briefs.
- ✚ **Knowledge Sharing:** Results are disseminated to communities, partners, and donors through meetings, workshops, and publications.
- ✚ **Decision-Making & Adaptation:** Evidence informs program adjustments, resource allocation, and advocacy.
- ✚ **Feedback Loop** – Lessons learned feed back into planning and future project design.

Annex 10: Technology in MEAL (MIS, Dashboards, Mobile Tools)

Purpose

Technology enhances the efficiency, accuracy, and transparency of MEAL systems. By integrating digital platforms, UMUS ensures that data is collected, managed, analyzed, and shared in ways that strengthen accountability to donors and communities, while supporting adaptive learning and decision-making.

Key Tools and Applications

Management Information Systems (MIS)

- ✚ Centralized databases for storing monitoring and evaluation data.
- ✚ Role-based access control to ensure data security and confidentiality.
- ✚ Automated reporting functions to reduce manual errors and improve timeliness.

Dashboards

- ✚ Visualize key indicators in real time for staff, partners, and donors.
- ✚ Provide trend analysis and performance tracking against targets.
- ✚ Enable quick decision-making by presenting complex data in accessible formats.

Mobile Data Collection Tools

- ✚ Use of tablets, smartphones, and SMS platforms for field data collection.
- ✚ Reduce delays and errors associated with paper-based systems.
- ✚ Allow offline data entry in remote areas, with synchronization when connectivity is available.

Geographic Information Systems (GIS)

- ✚ Map project activities, beneficiaries, and outcomes spatially.
- ✚ Support targeting strategies and vulnerability analysis.
- ✚ Strengthen evidence for advocacy and resource allocation.

Digital Feedback Mechanisms

- ✚ Hotlines, SMS, WhatsApp, and online forms for community feedback and complaints.
- ✚ Ensure accessibility and confidentiality for diverse stakeholders.
- ✚ Integrate with MEAL databases for tracking and resolution.

Implementation Measures

- ✚ Train staff and partners in the use of MIS, dashboards, and mobile tools.
- ✚ Establish data security protocols, including encryption and audit trails.
- ✚ Regularly update systems to align with donor reporting requirements.
- ✚ Integrate digital tools into Data Quality Assurance (DQA) processes.
- ✚ Ensure inclusivity by designing tools that are accessible to women, youth, and marginalized groups.

Expected Outcomes

- ✚ Improved efficiency and accuracy in data collection and reporting.
- ✚ Enhanced transparency and accountability to donors and communities.
- ✚ Real-time evidence for adaptive management and decision-making.
- ✚ Stronger institutional memory through secure digital archiving.

Annex 11: Gender and Social Inclusion in MEAL

Purpose

Gender and social inclusion are cross-cutting priorities within UMUS's MEAL framework. This annex ensures that monitoring, evaluation, accountability, and learning processes actively identify, address, and reduce inequalities, while amplifying the voices of women, youth, and marginalized groups.

Core Principles

- ✚ **Equity and Representation:** MEAL systems must ensure that women, youth, persons with disabilities, and marginalized communities are meaningfully engaged in data collection, analysis, and decision-making.
- ✚ **Disaggregation of Data:** All indicators must be disaggregated by gender, age, disability, and other relevant social categories to highlight disparities and track progress toward inclusion.
- ✚ **Participation:** Community feedback mechanisms must be designed to be accessible and safe for diverse groups, ensuring that vulnerable voices are heard.
- ✚ **Accountability:** Findings related to gender and inclusion must be reported transparently to donors, partners, and communities, with clear actions for improvement.

Implementation Measures

- ✚ **Inclusive Tools:** Use participatory methods such as focus group discussions, gender analysis frameworks, and social inclusion scorecards.

- ✚ **Capacity Building:** Train staff and partners on gender-sensitive data collection, safeguarding, and inclusive evaluation practices.
- ✚ **Safeguarding Protocols:** Ensure that women, youth, and marginalized groups can provide feedback safely and confidentially.
- ✚ **Integration into MEAL Cycle:** Gender and inclusion considerations must be embedded at every stage — from needs assessment and baseline studies to monitoring, evaluation, and learning.
- ✚ **Adaptive Learning:** Use evidence on gender and inclusion to refine strategies, advocate for equity, and strengthen program design.

Expected Outcomes

- ✚ Stronger evidence on gender equality and social inclusion outcomes.
- ✚ Increased participation of marginalized groups in MEAL processes.
- ✚ Improved accountability to communities and donors on equity commitments.
- ✚ Enhanced program relevance, effectiveness, and sustainability.

Annex 12. Risk log

Purpose

The Risk Log is a structured tool to document potential risks that may affect project implementation, monitoring, evaluation, accountability, and learning. It ensures proactive management, transparency with donors, and timely mitigation measures.

Template Structure

| ID | Description | Category | Likelihood (Low/Medium/High) | Impact (Low/Medium/High) | Mitigation Measures | Responsibility | Status (Open/Closed) |
|----|-------------|----------|---------------------------------|-----------------------------|------------------------|----------------|-------------------------|
| | | | | | | | |
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Annex 13: Safeguarding Checklist

Purpose

This checklist ensures that MEAL activities uphold safeguarding standards, protect vulnerable groups, and comply with donor and organizational policies. It is designed for use during data collection, monitoring, evaluation, and community engagement.

Checklist Categories:

Informed Consent

- ✚ Have participants been fully informed about the purpose, risks, and use of data?
- ✚ Is consent documented (written or verbal, as appropriate)?
- ✚ For children and youth, has parental/guardian consent been obtained?

Confidentiality & Data Protection

- ✚ Are personal identifiers anonymized or coded?
- ✚ Is data stored securely with restricted access?
- ✚ Are audit trails maintained for data entry and revisions?

Do No Harm

- ✚ Have risks to participants been assessed and minimized?
- ✚ Are enumerators trained to handle sensitive topics respectfully?
- ✚ Is participation voluntary, with the option to withdraw at any time?

Child & Youth Safeguarding

- ✚ Are child-friendly and age-appropriate tools being used?
- ✚ Are enumerators trained in child protection protocols?
- ✚ Are referral pathways in place for safeguarding concerns?

Gender & Social Inclusion

- ✚ Are women, youth, persons with disabilities, and marginalized groups meaningfully included?
- ✚ Is data disaggregated by gender, age, and vulnerability status?
- ✚ Are feedback mechanisms accessible to all groups?

Feedback & Complaint Mechanisms

- ✚ Are safe, confidential channels available for complaints?

- ✚ Are communities aware of how to use these mechanisms?
- ✚ Is there a process to ensure timely resolution and communication of outcomes?

Staff Conduct

- ✚ Have staff signed and committed to safeguarding policies and codes of conduct?
- ✚ Are enumerators supervised and supported during fieldwork?
- ✚ Is misconduct reported and addressed promptly?

Implementation Notes

- ✚ This checklist must be completed before and during all MEAL activities.
- ✚ Supervisors should review compliance and document corrective actions.
- ✚ Findings should be integrated into Data Quality Assurance (DQA) and donor reporting.

Expected Outcomes

- ✚ Ethical and safe engagement with communities.
- ✚ Strengthened accountability and trust with donors and beneficiaries.
- ✚ Reduced risks of harm, exploitation, or abuse.
- ✚ Evidence that safeguarding is embedded in MEAL practice.

Annex 14: Learning Agenda Template

Purpose

The Learning Agenda is a structured framework that guides UMUS’s monitoring, evaluation, accountability, and learning (MEAL) processes toward generating actionable evidence. It ensures that lessons learned are systematically captured, analysed, and applied to strengthen programming, donor accountability, and organizational growth.

Template Structure

| Learning Question | Rationale | Data Source | Methodology | Responsible Person/Unit | Timeline | Intended Use | Status |
|-------------------|-----------|-------------|-------------|-------------------------|----------|--------------|--------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

Guidance for Use

- ✚ Define Learning Questions: Focus on priority areas linked to donor requirements, organizational strategy, and community needs.
- ✚ Identify Data Sources: Use monitoring data, evaluations, research, and community feedback.
- ✚ Select Methodology: Apply appropriate qualitative, quantitative, or mixed methods.
- ✚ Assign Responsibility: Ensure accountability by designating staff or units.
- ✚ Set Timelines: Align with project cycles and donor reporting schedules.
- ✚ Document Use/Application: Clearly state how findings will inform programming, advocacy, or policy.
- ✚ Track Status: Update regularly (planned, ongoing, completed).

Expected Outcomes

- ✚ Systematic documentation of learning priorities.
- ✚ Evidence-based adaptation of programs and strategies.
- ✚ Strengthened donor confidence through transparent learning processes.
- ✚ Enhanced organizational memory and knowledge sharing

Annex 15: Stakeholder Engagement Matrix

The Stakeholder Engagement Matrix ensures that all relevant actors—donors, partners, communities, and government agencies are systematically engaged in MEAL processes. It promotes transparency, inclusivity, and shared ownership of results.

Template Structure

| Stakeholder Group | Role in Project/MEAL | Engagement Method | Frequency | Responsible Person/Unit | Expected Outcome |
|-------------------|--|--|--------------------|--------------------------------|--|
| Donors | Provide funding, set compliance requirements, review reports | Formal reports, donor meetings, dashboards | Quarterly / Annual | Project Director, MEAL Manager | Strengthened accountability and donor confidence |
| Government | Policy alignment, | Coordination | Bi-annual / | Senior | Compliance with |

| | | | | | |
|-----------------------------------|---|--|---------------------|--|--|
| Agencies | regulatory oversight, technical support | meetings, compliance reports | As required | Management | national standards and policies |
| Community Members / Beneficiaries | Provide feedback, participate in monitoring, validate results | FGDs, surveys, feedback forms, complaint mechanisms | Continuous | Field Coordinators, Accountability Officer | Inclusive participation and improved program relevance |
| Local Partners / NGOs | Implement activities, share data, co-design MEAL tools | Joint workshops, shared databases, partner reports | Monthly / Quarterly | Partnership Manager | Strengthened collaboration and harmonized MEAL practices |
| Staff & Volunteers | Collect data, ensure safeguarding, apply MEAL tools | Training sessions, supervision meetings, internal feedback loops | Continuous | MEAL Team Leaders | Improved data quality and ethical compliance |
| Youth & Marginalized Groups | Provide perspectives on inclusion, equity, and empowerment | Targeted consultations, safe spaces, participatory monitoring | Continuous | Gender & Inclusion Officer | Evidence of equity and social inclusion outcomes |

Annex 16: Reporting Schedule

Purpose

The Reporting Schedule ensures that all monitoring, evaluation, accountability, and learning (MEAL) outputs are delivered on time to donors, government agencies, partners, and communities. It strengthens transparency, supports adaptive management, and aligns with contractual obligations.

Template Structure

| Report Type | Content / Purpose | Frequency | Responsible Person/Unit | Recipient(s) | Notes |
|---------------------------------------|--|----------------------|--------------------------------|--|--|
| Monthly Progress Report | Updates on activities, outputs, challenges, and corrective actions | Monthly | Project Manager / MEAL Officer | Donors, Senior Management | Include beneficiary feedback and safeguarding updates |
| Quarterly MEAL Report | Consolidated monitoring data, indicator tracking, lessons learned | Quarterly | MEAL Manager | Donors, Government Agencies | Align with Indicator Performance Tracking Table (IPTT) |
| Annual Report | Comprehensive review of outputs, outcomes, and impact | Annual | Project Director, MEAL Team | Donors, Partners, Communities | Include gender and inclusion analysis |
| Baseline Study Report | Establish benchmarks for indicators | Once (Project Start) | MEAL Team / Consultants | Donors, Senior Management | Must be completed before implementation scaling |
| Mid-Term Evaluation Report | Assess progress, relevance, and effectiveness | Mid-project | External Evaluator / MEAL Team | Donors, Partners | Include adaptive learning recommendations |
| Final Evaluation Report | Assess overall impact, sustainability, and lessons | End of project | External Evaluator | Donors, Government Agencies, Communities | Must align with OECD DAC criteria |
| Feedback & Complaint Register Summary | Trends in complaints, resolutions, and accountability actions | Quarterly | Accountability Officer | Donors, Communities | Linked to Annex 8 register |
| Risk Log Update | Documentation of risks, mitigation measures, and status | Quarterly | MEAL Manager | Senior Management, Donors | Linked to Annex 14 risk log |
| Learning Briefs | Key lessons and | As needed | MEAL Team | Staff, Partners, | Linked to Annex 16 |

| Report Type | Content / Purpose | Frequency | Responsible Person/Unit | Recipient(s) | Notes |
|-------------|--------------------------------|-----------|-------------------------|--------------|-----------------|
| | recommendations for adaptation | | | Donors | learning agenda |

Guidance for Use

- ✚ Reports must be submitted on or before deadlines to ensure donor compliance.
- ✚ All reports should integrate gender and social inclusion analysis (Annex 12).
- ✚ Feedback from communities (Annex 6 & 8) must be reflected in quarterly and annual reports.
- ✚ Risk management updates (Annex 14) should be included in quarterly donor reports.
- ✚ Learning briefs (Annex 16) should be shared internally and externally to promote adaptive programming.

Expected Outcomes

- ✚ Timely and consistent reporting to donors, government, and communities.
- ✚ Strengthened accountability and transparency.
- ✚ Evidence-based decision-making and adaptive learning.
- ✚ Improved donor confidence and community trust.

Annex 17: Capacity Building Plan Template

Purpose

The Capacity Building Plan ensures that staff, partners, and communities have the skills, resources, and confidence to implement MEAL systems effectively. It supports sustainability, donor compliance, and continuous improvement.

Template Structure

| Capacity Area | Current Status / Gap | Capacity Building Activity | Method (Training, Coaching, Workshop, Mentorship) | Responsible Person/Unit | Timeline | Resources Required | Expected Outcome |
|--|--|--------------------------------|---|----------------------------|-------------|------------------------------|---|
| MEAL Fundamentals | Limited understanding of MEAL concepts among field staff | Introductory MEAL training | Workshop + Training materials | MEAL Manager | Q2 2026 | Training budget, facilitator | Staff apply MEAL principles in daily work |
| Data Quality Assurance | Inconsistent application of DQA protocols | DQA refresher training | Coaching + On-site supervision | MEAL Officer | Monthly | Checklists, MIS system | Improved accuracy and reliability of data |
| Safeguarding in MEAL | Need for stronger safeguarding integration | Safeguarding orientation | Workshop + Role-play exercises | Accountability Officer | Q2 2026 | Safeguarding toolkit | Safe and ethical data collection |
| Gender & Social Inclusion | Limited disaggregation of data | Gender-sensitive MEAL training | Mentorship + Peer learning | Gender & Inclusion Officer | Continuou s | Gender analysis tools | Evidence of equity outcomes in reports |
| Technology Use (MIS, Dashboards, Mobile Tools) | Staff unfamiliar with MIS and mobile apps | ICT training sessions | Hands-on training + E-learning modules | ICT Specialist | Bi-annual | Tablets, MIS licenses | Efficient digital data collection and reporting |
| Learning & Adaptation | Weak documentation of lessons learned | Learning agenda workshops | Participatory workshops | MEAL Team | Quarterly | Learning agenda template | Systematic documentation and use of lessons |

Guidance for Use

- ✚ Conduct a capacity needs assessment at project start.
- ✚ Align activities with donor requirements and organizational priorities.
- ✚ Ensure inclusivity by targeting women, youth, and marginalized staff/partners.
- ✚ Track progress through pre- and post-training assessments.

- ✚ Integrate outcomes into the Learning Agenda (Annex 16) and Reporting Schedule (Annex 18).

Expected Outcomes

- Strengthened staff and partner competencies in MEAL.
- Improved data quality, safeguarding, and accountability.
- Enhanced use of technology for efficiency and transparency.
- Sustainable MEAL systems beyond donor funding cycles.

Annex 18: Terms of reference

1. Background and Context

- ✚ Provide a brief description of the project/programme, donor requirements, and organizational priorities.
- ✚ Highlight the rationale for the MEAL activity (e.g., baseline study, mid-term evaluation, final evaluation, learning review).

2. Objectives of the Assignment

- ✚ Define the specific purpose of the MEAL activity (e.g., measure progress, assess impact, strengthen accountability, document lessons).
- ✚ Link objectives to donor reporting requirements and organizational learning goals.

3. Scope of Work

- ✚ Describe the tasks to be undertaken, including data collection, analysis, reporting, and dissemination.
- ✚ Specify geographic coverage, target groups, and thematic focus areas (e.g., gender, inclusion, climate resilience).

4. Methodology

- ✚ Outline the approach to be used (quantitative, qualitative, mixed methods).
- ✚ Include ethical considerations, safeguarding protocols, and participatory methods.
- ✚ Ensure alignment with donor standards (OECD DAC criteria, RBM frameworks).

5. Deliverables

- ✚ List expected outputs (e.g., inception report, data collection tools, draft report, final evaluation report, learning briefs).
- ✚ Define format, language, and submission timelines.

6. Roles and Responsibilities

- ✚ **Consultants/Enumerators:** Conduct fieldwork, collect and analyze data.
- ✚ **MEAL Team:** Provide oversight, ensure quality assurance, and manage logistics.
- ✚ **Programme Staff:** Facilitate access to communities and provide contextual inputs.
- ✚ **Senior Management:** Review deliverables and ensure integration into decision-making.

7. Timeline

- ✚ Provide a clear schedule for each stage of the assignment (planning, data collection, analysis, reporting, dissemination).

8. Reporting and Communication

- ✚ Define reporting lines (to MEAL Manager, Project Director, or donor focal point).
- ✚ Specify communication protocols for progress updates and issue escalation.

9. Budget and Resources

- ✚ Outline financial and logistical support available for the assignment.
- ✚ Include provisions for travel, fieldwork, and technology use.

10. Ethical and Safeguarding Standards

- ✚ Ensure compliance with safeguarding policies.
- ✚ Require adherence to confidentiality, informed consent, and do-no-harm principles.

Annex 19: Glossary of Terms

- ✚ **Accountability:** The obligation of organizations to be answerable to donors, partners, and communities for the use of resources and the results achieved.
- ✚ **Adaptive Learning:** The process of using evidence and lessons learned to adjust strategies, improve interventions, and respond to changing contexts.
- ✚ **Baseline Study:** An initial assessment conducted at the start of a project to establish benchmarks against which future progress and impact can be measured.
- ✚ **Beneficiary Monitoring:** Tracking perceptions, satisfaction, and experiences of project participants and communities.
- ✚ **Capacity Building:** Activities that strengthen the skills, systems, and resources of staff, partners, and communities to implement MEAL effectively.

- ✚ **Data Quality Assurance (DQA):** Procedures to ensure that data collected is valid, reliable, precise, timely, and complete.
- ✚ **Evaluation:** A systematic assessment of a project or programme's relevance, effectiveness, efficiency, impact, and sustainability.
- ✚ **Feedback Mechanism:** A structured process that allows stakeholders to provide input, complaints, or suggestions about a project.
- ✚ **Indicator:** A measurable variable used to track progress toward objectives, outcomes, or impacts.
- ✚ **Knowledge Management (KM):** The systematic process of capturing, storing, sharing, and applying evidence and lessons learned to strengthen organizational learning.
- ✚ **Learning:** The process of reflecting on evidence, documenting lessons, and applying insights to improve future programming.
- ✚ **Logical Framework (Log-frame):** A structured planning tool that links objectives, indicators, and assumptions in a results chain.
- ✚ **Monitoring:** The routine collection and analysis of data to track progress against planned activities, outputs, and outcomes.
- ✚ **OECD DAC Criteria:** Internationally recognized evaluation criteria: relevance, effectiveness, efficiency, impact, and sustainability.
- ✚ **Performance Indicator Reference Sheet (PIRS):** A standardized tool that defines indicators, data sources, collection methods, and responsibilities.
- ✚ **Results-Based Management (RBM)** – A management approach focused on achieving clearly defined results and measuring progress toward them.
- ✚ **Safeguarding:** Policies and practices that protect children, youth, and vulnerable groups from harm, exploitation, or abuse in project activities.
- ✚ **Theory of Change (TOC):** A framework that explains how and why a desired change is expected to happen in a specific context, linking activities to outcomes and impacts.
- ✚ **Timeliness:** The extent to which data and reports are available in time to inform decision-making and donor accountability.