I. OVERVIEW OF EVALUATION

The goal of USAID’s Office of Private and Voluntary Cooperation (PVC) is to build the capability of U.S. PVOs to have a sustainable impact in their work in international development. With USAID’s emphasis on managing for results, program evaluations have become less descriptive and more evidence-based. PVC has assisted PVOs to strengthen their program monitoring and to document program achievements so that PVO’s can provide credible evidence of achievements and results.

A. Core Evaluation Practices

PVC’s evaluation policies reflect a commitment to a set of core evaluation practices that over the years have proved to be critical elements in building PVO capacity to monitor and evaluate field programs. These practices have emerged from the lessons learned from the programs implemented by our PVO partners.

1. Evaluations are joint activities. Truly effective learning experiences involve all the partners. PVC, the PVOs, their local partners, and other stakeholders usually participate in program evaluations. The participatory nature of the evaluation process encourages problem analysis and development of solutions by project staff and partners.

2. Good program design is the foundation for documenting achievements. Programs that have successfully documented their achievements have clearly stated objectives, valid indicators and a realistic method for measuring
change over the life of the program. The establishment of accurate baseline data is a critical element in tracking change.

3. **Program commitment to the use of data.** The most successful programs demonstrate strong staff commitment to regular review of project performance data and action planning based on the data.

All good evaluations recognize the achievements of the project and staff and document innovative activities highlighting promising practices or new approaches.

**B. Purpose of Monitoring and Evaluation System**

The BASICS publication, “Child Survival BASICS, Monitoring and Evaluation: Tools for Improving Child Health and Survival,” (Quarterly Technical Newsletter #5, Spring 1998), defines monitoring and evaluation as “collecting and analyzing information that is accurate and reliable and can be put to practical use”.

1. **Monitoring** involves plotting progress in meeting implementation goals or measuring outputs and process, while;

2. **Evaluation** takes a broader perspective, determining if the course is the best one --- or assessing overall outcome or impact.

In the PVO Child Survival Program, monitoring and evaluation provide program managers, local partners and USAID with: a clear understanding of how the PVO program is functioning; evidence of results that have been achieved, and the importance of these achievements to the design and implementation of future programs. The DIP describes the monitoring system the PVO intends to use.
The evaluations take place at the program mid-term and end, and differ from each other in focus, and in the kinds of information they provide:

3. **The mid-term evaluation** focuses on the process of program implementation. The evaluation uses data and information from the program’s monitoring system to (a) assess progress in implementing the DIP; (b) assess progress towards achievement of objectives or yearly benchmarks; (c) assess if interventions are sufficient to reach desired outcomes, (d) identify barriers to achievement of objectives, and (e) to provide recommended actions to guide the program staff through the last half of the program.

4. **The final evaluation** is focused on (a) assessing if the program met the stated goals and objectives; (b) the effectiveness of the technical approach; (c) development of the overarching lessons learned from the project, and (d) a strategy for use or communication of these lessons both within the organization and to partners.

C. **The Evaluation Audience**

The possible “audiences” for the information from the program evaluations include the local partners, the PVO, USAID PVC and Missions and other stakeholders. However, while PVC and its partners share similar evaluation objectives, the information needs of each partner are different.

While the Child Survival Division monitors the performance of the individual programs, the Division also must consolidate information across all programs to report to senior level Agency managers and congressional interest groups about the effectiveness of the PVO child survival programs. Results reporting by DCHA/PVC is intimately linked to resource allocation and thus clearly presented
program results, with supporting evidence, are key to continued funding of the PVO Child Survival Grants Program.

Throughout these Guidelines text boxes like this one identify PVC’s information needs. These questions are linked to PVC’s strategic plan and indicators. It is important that these questions are incorporated in the evaluation SOW and that responses appear in the evaluation report.

D. The Evaluation Process

1. Participation: DCHA/PVC encourages the participation of PVO headquarters and field program staff, representatives from project partners, government health service personnel and community members in planning and conducting the evaluation. Representatives from other PVOs, USAID Mission staff, and other stakeholders (including CAs) may be invited.

2. Developing the SOW: The PVO is responsible for developing the Statement of Work (SOW) for the evaluation team. While these Evaluation Guidelines identify a core set of components to be addressed, the PVO tailors the evaluation to its needs with questions that are specific to the program. The information needs and evaluation questions of the primary partners should also be integrated into the evaluation SOW. DCHA/PVC does not need to approve the evaluation SOW.

3. Team Composition: The evaluation Team Leader, who serves as the lead author and editor of the evaluation report, should be someone who is not employed by, or otherwise professionally associated with the concerned PVO or the specific child survival program. The PVO identifies a candidate for the Team leader and proposes this to DCHA/PVC for approval prior to the evaluation. The CORE Group, CSTS and several PVOs have developed
databases of good, proven evaluators of PVO Child Survival programs. If you have identified another good one, please add this person’s name to their lists! Additional team members may include others that the PVO selects from the PVO, its partners, and other organizations.

II. THE MID-TERM EVALUATION REPORT

The mid-term evaluation provides an opportunity for all project stakeholders to take stock of accomplishments to date and to listen to the beneficiaries at all levels: including mothers, other community members and opinion leaders, health workers, health system administrators, local partners, other organizations and donors. The mid-term evaluation provides an additional opportunity for the project to benefit from the outside viewpoint of a consultant who acts as facilitator of the evaluation process. Other PVOs and resource persons may also be invited to participate in the evaluation process.

The mid-term evaluation report shall address each of the following elements. If any of these items is not covered by the evaluation, please explain why. Except for the summary, redundant sections may be cross-referenced.

A. Summary

Provide a one-to-two page executive summary of the report that includes:

1. Brief description of the program and its objectives.
2. The main accomplishments of the program.
3. The overall progress made in achieving program objectives.
4. The main constraints, problems and areas in need of further attention.
5. A summary of the capacity-building effects of the program.
6. A summary of the prospects for sustainability.
7. A list of the priority recommendations resulting from this evaluation.
B. Assessment of the progress made toward achievement of program objectives

The Detailed Implementation Plan (DIP), presented in the first year of the program is the official workplan of the program. This section of the mid-term evaluation report provides a clear picture of how well the program is implementing the workplan, what challenges it will face in the remaining life of the project and recommendations for addressing those challenges, and how the program will build on its successes. The outline below provides guidance for the evaluation team for examining the program’s technical child survival interventions, and for the approaches that cut across those technical interventions.

1. Technical Approach
   a. A brief overview of the project --- objectives, location, intervention mix, general program strategy. More detailed documentation may be provided in the annexes.
   b. Progress report by intervention area. This section describes:
      (i) Activities related to specific interventions as proposed in DIP.
      (ii) Progress toward benchmarks or intermediate objectives.
      (iii) Effectiveness of the interventions.
      (iv) Changes in the technical approaches outlined in the DIP and rationale.
      (v) Special outcomes, unexpected successes or constraints.
      (vi) Follow-up and next steps.
   c. Discuss any new tools or approaches the program is using; operations research or special studies that were conducted; how the data/information have been used and what actions were taken.
2. Cross-cutting approaches (address each section as applicable)

This section discusses progress on approaches that cross intervention areas and have, or will impact on project objectives. These are activities that may or may not have been articulated specifically in the DIP, but have emerged as critical activities in the program. In discussing cross-cutting activities, discuss the impact of the activities on the program. Examples of cross-cutting approaches include behavior-change strategies, community mobilization, partnership-building activities and training (e.g. negotiations, agreements achieved, linkages formed), outreach strategies, advocacy or community or awareness-building strategies, and strengthening information management systems. The evaluation team may discuss any other cross-cutting activities that may be pertinent to the program. Also include modifications and explanations/rationale for those modifications, and cross-cutting activities added to the workplan.

Discuss progress made in relation to objectives and targets, methods and approaches used, timing, key participants, geographical scope of activity, technical areas covered, etc. Describe how activities have had/will have:

- An effect or impact on the program.
- An impact on the lessons learned to date.
- Links to future activities.

The following are specific questions for several cross-cutting approaches.

a. Community Mobilization

(i) What kinds of community mobilization activities have been undertaken by the project?

(ii) To what extent has the community responded to these?

(iii) How have these activities been used to refine program implementation plans?
(iv) What kinds of barriers exist to prevent members of the community from benefiting from the program, and how have these been addressed?

(v) What impact do factors such as security, politics, roads, mass media, theater group issues, etc. have on program implementation?

b. Communication for Behavior Change

(i) Is the program’s approach to behavior change appropriate and effective?

(ii) Are the messages technically up-to-date? Have any essential messages been omitted?

(iii) How are the effects of the behavior change activities being measured? What tools are used and are the tools appropriate and effective?

(iv) Who uses the data gathered regarding the effects of behavior change activities? How have communities used these data to reinforce or promote other behavior changes?

c. Capacity Building Approach

Discuss the progress made in implementing the capacity strengthening plans outlined in the DIP. This may include plans for the PVO, the public sector partners, NGOs and/or community-based partners. Discuss how this progress affects the project’s vision of and plans for sustainability as described in the DIP. Use the questions below to guide your assessment of the project’s capacity building strategies.
(i) Strengthening the PVO Organization

- Describe progress towards achieving the capacity building objectives, indicators and targets.
- Describe the approaches and tools used to assess capacity and comment on the appropriateness of the tools to measure change in capacity over the life of the program.
- Include a description of activities related to organizational capacity building within the PVO at HQ and in the field.
- What indications do you see at this point that the program has increased organizational capacity?

(ii) Strengthening Local Partner Organizations

- Discuss the organizational capacity building efforts with the local partners, and identify which partners are the main participants in capacity building activities.
- Briefly discuss the actual roles and responsibilities of each of the local partners and any changes that have occurred since these were articulated in the DIP.
- Describe the outcomes of any assessment, formal or informal, conducted at the outset of the project to determine the organizational capacities of your local partners.
- How have the organizational capacities of the local partner changed since the beginning of the project? What factors/interventions have most contributed to those changes?
- What are the primary challenges this project will face in further building the capacities of its partners?

(iii) Health Facilities Strengthening
• Are the health facility strengthening activities of the program appropriate and effective?
• What tools does the program use for health facility assessments? Are the tools appropriate and effective?
• Discuss linkages between these facilities and the communities.

(iv) Strengthening Health Worker Performance
• What is the approach to strengthening health worker performance?
• Has this been effective?
• What tools has the project used to assess performance and are they appropriate and effective for measuring change in the program time frame?
• How have assessment results been used to improve the quality of services?
• How is the program addressing the gaps between performance standards and actual performance?

(v) Training
• Discuss the training strategy, and its effectiveness.
• What is the progress made towards objectives?
• What evidence is there that suggests that the training implemented has resulted in new ways of doing things, or increased knowledge and skills of the participants?

d. Sustainability Strategy
• What is the progress to date in meeting the sustainability objectives articulated in the DIP?
• Has the groundwork for the exit strategy been laid with project staff and local partners in the first two years of the project?
• What approaches has the project implemented to build financial sustainability—
  (e.g., local level financing, cost recovery, resource diversification, corporate
  sponsorships)?
• What does the beneficiary community say about sustaining project services
  through alternative funding sources at the close of the project?

C. Program Management

This section provides an overall discussion of program management issues, at
HQ, within the field program, with partners and with the community. The
objective is to assess the strengths and weaknesses of the management support
systems, i.e., planning, financial management, information management,
personnel management, supervision, training, logistics, etc. The aim is to identify
specific ways in which the management support systems can function better.

1. Planning
   a. What groups have been involved in program planning?
   b. To what extent is the work plan submitted in the DIP on schedule?
   c. Are the program’s objectives understood by: field staff and
      headquarters staff, local level partners, the community?
   d. Do all parties have a copy of the program’s objectives and the
      monitoring and evaluation plan?
   e. To what extent are program monitoring data used for planning and/or
      revising program implementation?

2. Staff Training
   a. How effective is the process for continual improvement in the
      knowledge, skills and competencies of the program’s staff, including
      needs assessment, training methods, content of training and follow-up
      assessment?
b. How is trainee performance in new skill areas monitored?
c. Are adequate resources dedicated to staff training?

3. **Supervision of Program Staff**
   a. How effective is the process of directing and supporting staff so that they may effectively perform their duties? Include an assessment of supervisory leadership, methods, style, training, work planning and problem solving.
   
   b. Are the numbers, roles, and workload of personnel and frequency of supervisory visits appropriate for meeting the technical and managerial needs of the program?
4. **Human Resources and Staff Management**
   a. Comment on the program’s personnel management system.
   b. Are key personnel policies and procedures in place and are there job
descriptions for all positions in the PVO headquarters, field program
and with partners collaborating on the project?
   c. Describe the morale, cohesion and working relationships of program
personnel, and how this impacts program implementation.
   d. Describe the level of staff turnover in the program and its impact on
program implementation. If this is an issue, what are the current
strategies for staff retention?
   e. What plans does the project have for facilitating its staff’s transition to
other paying jobs when the project ends?

5. **Financial Management**
   a. Discuss the management and accountability for program finances,
budgeting and financial planning for sustainability of both the program
and local partners.

6. **Logistics**
   a. What impact has logistics (procurement and distribution of equipment,
supplies, vehicles, etc.) had on the implementation of the DIP?
   b. What logistics challenges will the program face during the remainder of
the program?
7. Information Management

- Is there a system in place to measure progress towards program objectives?
- Is there a systematic way of collecting, reporting and using data at all program levels?

  a. How effective is this system? What types of data are generated? What is the frequency and method(s) of data analysis? Who is involved in collection and analysis of data?
  b. Describe the extent to which the program is using and supporting other existing data collection systems (i.e. government).

- Does the program use data to inform management decision-making?
- Discuss the purpose, methods, findings and use of any assessments (mini surveys, focus groups, etc.) conducted by the program.

8. Technical and Administrative Support

  a. Discuss the types and sources of external technical assistance the program has received to date, and how timely and beneficial this assistance has been.
  b. What are the anticipated technical assistance needs of the program in the remaining life of the program?
  c. Discuss PVO headquarters and regional support of the field program. Approximately how much time has been devoted to supporting this program?

D. Other Issues Identified by the Team

Discuss additional issues identified by the team during the course of the evaluation.
E. Conclusions and Recommendations

This section presents the main conclusions based on this mid-term evaluation. It should outline the recommendations for USAID/DCHA/PVC, the program staff and collaborating partners for the remaining life of the program.

F. Results Highlight - One page “results highlight” [Tear-out sheet]

If appropriate, provide a one-page description of some element of the program, with supporting data, that would make a good stand-alone communication piece for the PVO or USAID to distribute or to post on the Office WebPage.

III. THE ACTION PLAN [To be completed by the PVO Team]

Coming together to develop an action plan for implementing the recommendations that emerge from the mid-term is a major window of opportunity for partnership building and stakeholder capacity building. Sustainability will be best served when everyone institutionalizes the process of periodically reexamining their work and procedures by identifying what is working well and where unexpected problems arise--or where new approaches or systems which might work better are suggested. The importance of encouraging local actors to examine the situation, prioritize needs, and take initiative for creative problem solving to improve their well-being can not be overstated. In addition to the lessons learned and expressed by local stakeholders, the opportunity to have an exchange of ideas with others who have wide involvement with child survival activities in different places potentially makes the MTE a pivotal learning experience. While the MTE highlights the progress made towards results to date, innovative approaches and promising practices, uncovers areas of challenge where more attention or new approaches would be
useful, evaluates concerns and suggestions of stakeholders at all levels and considers the incorporation of new ways of doing things, the **resulting Action Plan should be carefully constructed with high participation and consideration of many viewpoints and adopted by the vast majority of stakeholders.**

IV. ATTACHMENTS

A. Baseline information from the DIP

For this section, copy the requested information from the stated sections of the approved DIP and indicate if substantial changes have been made since approval of the DIP.

1. **Executive Summary:**

   From Section I: A of the DIP (“Executive Summary”), copy the table "Estimated Program Effort and USAID funding by intervention" and the table "Program Site Population: Children and Women."

2. **Program Goals and Objectives:**

   From Section II: H of the DIP (“Monitoring and Evaluation”), cite the program goals and objectives including information on measurement methods and major planned results.

3. **Program Location:**

   From Section I: D (“Program Site Analysis”) of the DIP, copy the information about program location, and the groups to whom program activities are addressed, as well as information about existing health infrastructure.

4. **Program Design:**

   From Section I: F of the DIP (“Program Approach”), briefly describe the program design.

5. **Partnerships:**
From Section I: F of the DIP (“Program Approach”), copy the information about partnerships with the public sector, NGOs and community based organizations.

6. **Health Information System:**
From Sections II: E and II: H of the DIP (“Information Management” and “Monitoring and Evaluation”), describe the program’s proposed health information system and the mechanism for program monitoring.

B. **Team members and their titles**

C. **Assessment methodology**
Provide a brief discussion of the assessment methods used by the mid-term evaluation team to assess essential knowledge, skills, practices, and supplies of health workers and facilities associated with the program.

D. **List of persons interviewed and contacted**

E. **Diskette with electronic copy of the report in MS WORD**

F. **Special reports**
If appropriate, include special reports or analyses produced by the program.