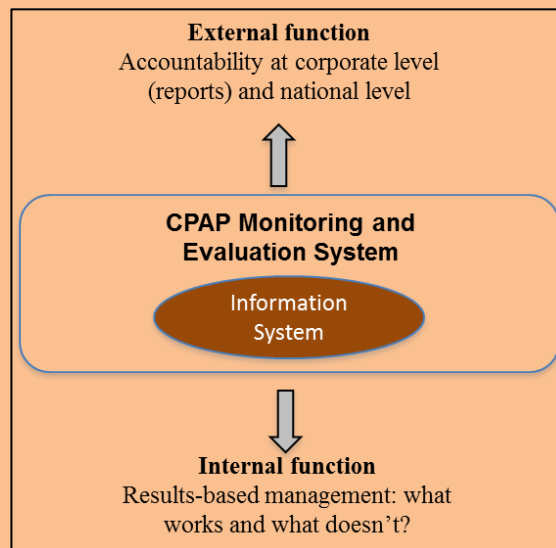




COUNTRY PROGRAMME EVALUATION: BOLIVIA 2008-2011

VOLUME 2:

ASSESSMENT OF THE COUNTRY OFFICE MONITORING AND EVALUATION SYSTEM



Evaluation Report

Evaluation Branch
Division for Oversight Services (DOS)

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COUNTRY PROGRAMME EVALUATION: BOLIVIA

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ACRONYMS AND ABBREVIATIONS

ACOBOL	Asociación de Alcaldesas y Concejalas de Bolivia/ <i>Association of Women Councillors of Bolivia</i>
ATLAS	Enterprise resource planning system, for the recording and consolidation of information at global corporate level for all COs
AWP	Annual Work Plan
AWPMT	Annual Work Plan monitoring tool
BL	Baseline
CISE	<i>Consejo Interinstitucional de Seguimiento y Evaluación de la EBRP/</i> Inter-institutional Council for Monitoring and Evaluation of the Bolivian Strategy for Poverty Reduction
CNAMIB	<i>Confederación de Mujeres Indígenas de Bolivia/</i> Confederation of Indigenous Women of Bolivia
COAR	Country Office Annual Report
CPAP	Country Programme Action Plan
DAC	Development Assistance Committee
DEX	Direct Execution (by UNFPA)
DOS	Division for Oversight Services
ENAJ	<i>Encuesta Nacional de Juventudes/</i> National Youth Survey
ENDSA/DHS	<i>Encuesta Nacional de Demografía y Salud/</i> National Demographic and Health Survey
EVALUN-LAC	United Nations Regional Evaluation Network for Latin America and the Caribbean
INE	<i>Instituto Nacional de Estadística/</i> National Institute for Statistics
LACRO	Latin America and Caribbean Regional Office (Panama)
M&E	Monitoring and evaluation
M&EF	Monitoring and evaluation framework
M&Es	Monitoring and evaluation system
MDG	Millennium Development Goals
MSM	Men who have sex with men
MTR	Mid-term review
MYFF	Multi-year funding framework
N.A.	Not available
NDP	National Development Plan
NEX	National execution
RHR	Reproductive health & rights
SE	Sex education
SPR	Standard progress report
SRH	Sexual and reproductive health
SRHR	Sexual and reproductive health and rights
STI	Sexually transmitted infections
SUMI	<i>Seguro universal materno-infantil/</i> universal mother-child insurance
SUSALUD	<i>Seguro universal de salud/</i> universal health insurance
UDAPE	<i>Unidad de análisis de políticas sociales y económicas/</i> Social and Economic Policy Analysis Unit
UN	United Nations
UNDAF	United Nations Development Assistance Framework

UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
VIPFE	<i>Viceministerio de Inversión Pública y Financiamiento Externo/ Vice-Ministry for Public Investment and External Financing</i>

STRUCTURE OF VOLUME 2

Volume 2, which consists of four sections and is an integral part of the Evaluation Report, includes all the documents associated with the analysis of the country office monitoring and evaluation system presented in Chapter 6 of Volume 1 of the Evaluation Report.

The decision to include this as a separate volume is based on the growing importance UNFPA attaches to monitoring and evaluation systems within the framework of results-based management. In this context, the assessment of country office monitoring and evaluation systems is one of the aspects that is addressed systematically in the new country programme evaluation methodology.

Part 1 presents the tool for the assessment of the monitoring and evaluation system, which is one of the tools used by the evaluation team to analyse the monitoring and evaluation system of the Country Programme Action Plan (CPAP). This part presents the reference variables used as a basis for assessing the System.

Part 2 presents the tool for assessing the quality of CPAP indicators, and the internal analysis instrument used by the evaluation team to assess the quality of the indicators, a key aspect examined when analysing the monitoring and evaluation system.

Part 3 contains a brief practical guide for formulating indicators in the monitoring and evaluation framework. This document supplements the tool that precedes it and is based on an exercise carried out during this evaluation with programme officers and technical staff specialised in each of the focal areas of the programme. The guide has been designed to provide practical support for country office staff when designing and drawing up indicators for the next monitoring and evaluation framework.

The evaluation of the Bolivia country programme is part of an initial pilot of the first draft of the methodology for UNFPA country programme evaluations. This guide constitutes part of the pilot process. As such, it is designed to contribute to the final draft of the methodology.

Part 4 presents the action plan for improving the monitoring and evaluation system, a document that sets out the main recommendations of the evaluation report associated with the country programme monitoring and evaluation system. The improvement plan is designed as a supporting tool for country office managers with the purpose of making the necessary adjustments and improvements in order to develop an effective, high-quality monitoring and evaluation system.

The main inputs used in drawing up the action plan to improve the monitoring and evaluation system are derived from applying the tools presented in parts 1 and 2 of this document.

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Part 1: Monitoring and evaluation system assessment tool (M&Es)

Introduction

This is one of the tools used by the evaluation team when assessing the monitoring and evaluation system (M&Es) of the Country Programme Action Plan (CPAP), and presents the reference variables on the basis of which the system has been assessed. The results table has been used as an input for Chapter 6 of the Report “Country programme monitoring and evaluation system” and for the “Action Plan for the improvement of the monitoring and evaluation system” included in part 4 of this volume.

The tool has two main purposes:

- i) To act as an internal analysis tool for the evaluation team. In this respect, the table provides a summary or snapshot of the key features of the M&Es.
- ii) To support the Bolivia country office by providing a reference framework they can use for improving the M&Es. Although this is an internal tool used by the evaluation team, the table is attached not only so that the country office can see how the analysis was performed but also to assess how far they are from a complete M&Es and to monitor the aspects of the system that require improvement. The table has been designed as a tool that enables the country office to assess the quality of the system on a regular basis.

The tool consists of a table **structured into four columns:**

Features of the monitoring and evaluation system

This column identifies the main components and aspects covered by an M&E system. These comprise the essential elements that a complete, operational monitoring and evaluation system must include.

What to check

This column describes the aspects to be analysed for each of the features of the system listed in the first column. Such aspects are formulated as questions.

Quality or status

This column illustrates the status of the M&E system at the time of the country programme evaluation. The column is completed on the basis of the responses to questions in the preceding column (“*what to check*”) and contemplates three possible scenarios:

+	The response to the question is clearly positive. The aspect or feature is operating well and there is no need for significant improvements.
○	The response is positive but with significant reservations or exceptions. The aspect or feature functions well in general, but there are some shortcomings and, in any event, the aspect or feature should be improved.
-	The response is negative. The aspect or feature is neither operational nor functional or, in the event of being operational, is functioning in an unsatisfactory manner and the consequences of this are clearly negative. In these cases, it is necessary to make substantial improvements.

The assessments of *status or quality* are benchmarked against a comprehensive monitoring system (both compliance and results-based). Consequently, the assessment results are affected by the lack of a results-based system.

Comments: This column includes additional qualitative explanations of the three response options for each of the aspects or features.

Table 1: Monitoring and evaluation system assessment tool

Features of the M&E system	What to check	Quality or status	Comments
Type and nature of the system			
Type	Is the system activity-based, results-based or both?	○	System based on monitoring inputs and activities (compliance monitoring). Results-based monitoring does not exist. Recently (2011) monitoring tools have included the monitoring of sub-outputs at the level of the AWP; but there is no monitoring of products at the aggregate level (in the Monitoring and Evaluation Framework).
Nature	Is the system led by UNFPA, managed jointly with government partners or led by government partners?	-	Government partners do not intervene in monitoring the CPAP; there are no annual reviews or joint monitoring and evaluation framework review exercises. Implementing partners intervene in monitoring, but only at the level of inputs and activities.
Information management system			
Design and structure	Is there an information management system associated with the M&E system?	-	There is no information system for monitoring the outputs and outcomes of the country programme. Monitoring information is generated for activities, but it is not systematized.
	Is the information system formalized in a written document: e.g., operating manual?	-	There is no reference document associated with the information management processes related to monitoring the CPAP with respect to monitoring inputs and activities.
Data collection	Does the system define what type of information to collect, and who should collect it?	○	Defined in Box E-1 (role of different local participants in taking decisions and using monitoring and evaluation tools) of the monitoring and evaluation plan. However, the information management processes that derive from the box are not operational for some actors (Government coordinating bodies; director of Programme Component).
	Is the frequency of data collection appropriate and clearly defined?	○	Frequency of data collection with regard to activities and inputs defined and implemented via the Annual Work Plan Monitoring Tool (AWPMT). However, frequency is irregular (not always quarterly) and there is no data collection on outputs.
	Is the level of detail/analysis of the information appropriate as regards to the information and management requirements of the Government?	-	Level of detail not appropriate given that (i) there is no input from Government with regard to the information needs generated by the CPAP M&Es; (ii) the mechanisms that should enable sharing the information generated are not operational.
Information flows	Does the system define who should report to whom?	○	Only partially with respect to activities and inputs. The sequence of information flows is not explicitly set out in any document.
	Does the information reach the right people in a timely, efficient manner?	○	Partially. No information is received (because it is not generated) at the level of outputs and outcomes of the country programme; and at the level of inputs and activities it is received but not always with the desired frequency because sometimes the AWPMT is submitted at more than three month intervals (every six months or annually in some cases).
	Are there suitable templates to report the information?	○	The forms used to report information with regard to inputs, activities and outputs at the level of the AWP (not at the aggregate/CPAP level) are appropriate and have recently been significantly improved. There are no forms for reporting information about outputs on an individual basis.

	Does the system provide feedback to local partners?	○	There is no evidence-based feedback with regard to government partners within the framework of the M&Es of the CPAP. Feedback is given to implementing partners on the basis of the AWPMT.
Resources			
Financial resources	¿Does the country office have a budget for M&E?	-	There is no separate budget for M&E in the programme. The M&E items are associated with the AWPMTs (for DEX or NEX execution) and only include expenditure associated with compliance monitoring. There is no budget for results-based monitoring.
	Do relevant partners have budget allocations for implementing the system?	-	Government partners, especially the VIPFE as the National Coordinating Body of the CPAP, lack resources – both human and financial – to assume their functions within the system. Not all sectorial partners (ministries) have specific budget allocations for monitoring the part of the system they should be monitoring (outcomes).
Human resources	Is there a person responsible for managing the M&E system in the country office?	○	The CO has an M&E Focal Point; a position filled by a Programme Assistant. This individual can only dedicate 10% of his time to focal point functions. There is no full-time M&E Officer.
	Are M&E responsibilities clearly assigned to country office staff members?	-	There is no clear, formal allocation of M&E responsibilities. The job description of the focal point does not include a description of his tasks in this role. Apart from compliance monitoring tasks, the technical staff members of the CO do not have clear M&E functions or roles allocated.
	Do staff members have sufficient capacity to implement M&E tasks?	-	Existing capacity is insufficient to implement a results-based monitoring and management system in accordance with the prerogatives of the Strategic Plan. The provisions of the Plan (paragraphs 87 and 88) with regard to continuous training and learning and increasing the capacity of UNFPA are not being implemented. There are no major problems with regard to compliance monitoring; however, staff members do not receive training in the use of M&E tools, and this is affecting the quality and optimal use of these tools.
	Does the system make use of and capitalise upon local capacities when it comes to collecting information?	○	There are structural weaknesses with regard to the general collection of information in the country, and this makes it difficult to make use of such capacities. In addition, the fact that the CPAP M&Es does not actively involve government partners makes it difficult to make the best use of existing capacity (however limited this may be). On the other hand, the new format of the AWPMT is a significant step forward, although there is no explicit strategy for utilizing local capacity.
	Does the system contribute to building data collection capacity?	○	It does with regard to inputs (budgetary monitoring) and activities, but not with regard to programme outputs and outcomes; it contributes indirectly by involving implementing partners in drawing up reports. There is no capacity development for government partners.
Indicators			
Feasibility of objectives	Are the outputs and outcomes associated with the indicators achievable?	-	Several of the outputs contained in the results framework and the monitoring and evaluation framework are formulated in terms of outcomes of the country programme and not outputs attributable to UNFPA.
Quality of indicators	Are the majority of indicators relevant?	+	78% of indicators analysed in the revised monitoring and evaluation framework are relevant.
	Are the majority of indicators specific?	+	89% of indicators analysed in the revised monitoring and evaluation framework are relevant.
	Are the majority of indicators operational?	-	Practically none of the monitoring and evaluation framework indicators are operational; i.e.

			none can be used in practise to measure the level of achievement of outputs and outcomes of the country programme.
The role of evaluations in the system			
Integration into the M&E system	Are evaluations selected and planned so as to meet the information and decision-making needs of the country office?	-	There is no organized, planned process for evaluations. The CO has adopted a reactive rather than a proactive attitude to the few evaluations conducted to date. There have been no evaluations of either the outputs or the outcomes of the country programme. The only exception has been the Mid-Term Review (MTR) of the CPAP, which has directly contributed to the country office's strategic review process and institutional diagnosis.
	Are the results of evaluations incorporated into management and decision-making processes?	-	Only in the case of the MTR. The fact that there is no structured planning process with regard to evaluations means that the results of these evaluations are not incorporated into decision-making processes. The two internal evaluations within thematic axes– both mid-term – were carried out with delays, and this hindered use of the results of these evaluations.
	Are the results of evaluations used to update the results framework of the CPAP?	-	Only in the case of the MTR and only to a certain degree. There was a review of the results framework and the monitoring and evaluation framework but it only affected indicators (programme outputs and outcomes were not reformulated). Moreover, this review was not binding (the frameworks were not officially revised) as it was an internal exercise.
Alignment	Do national partners participate in the process of designing evaluations and are the results of evaluations shared with them?	○	National partners take part in the evaluations related to the country programme (MTR and this country programme evaluation): they provide inputs to the terms of reference and the results of the evaluation are shared with them – a reference group was established for this evaluation. This having been said, the role of some key partners (VIPFE, for example) in the design of the evaluations remains minimal.
Monitoring of risks and assumptions ¹			
Assumptions	Has the country office accurately identified the main assumptions affecting the country programme?	+	The CO regularly monitors assumptions through the functions of the Representative and the advocacy activities carried out by the CO management team. Analysis of assumptions occurs, internally, at monthly management meetings.
	Is the country office in a position to obtain accurate, timely information on these assumptions?	+	Yes; thanks to the good relationship with government partners and other development agencies in the country, and the current good positioning of the CO in the country at an institutional level.
Risks	Has the country office correctly identified the main risks that might affect the country programme?	+	Risk monitoring also takes places through the functions of the Representative and advocacy activities carried out by the CO management team. Risk analysis takes place, internally, in monthly management meetings.
		+	Yes; thanks to the good relationship with government partners and other local development agencies, and the current good positioning of the CO in the country at an institutional level.

¹ Assumptions are required aspects if programme outputs and outcomes are to be achieved satisfactorily. Risks are key aspects which could threaten the achievement of programme outputs and outcomes. Both are factors beyond the control of UNFPA.

Formalisation	Is monitoring of risks and assumptions formalised and recorded in a written document?	-	There is no tool or document that formalises the monitoring of external factors that could affect the country programme. This prevents: (i) the structured management and monitoring of these factors; (ii) sharing and transferring information in a systematic fashion; and (iii) objective external evaluations of the level of quality and monitoring of external factors.
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Part 2: Country Programme Action Plan (CPAP) indicators quality assessment tool

Introduction

The CPAP indicators quality assessment tool is one of the instruments used by the evaluation team in the analysis of the monitoring and evaluation system (M&Es) of the Country Programme Action Plan. Similarly to the tool for assessing the M&E System, it serves a dual purpose:

- 1) On the one hand, it is designed to serve as an internal analysis instrument for the evaluation team to assess the quality of the CPAP indicators, one of the key aspects examined in the assessment of the M&Es.
- 2) On the other hand, making the tool and its results available to the country office seeks to achieve a dual purpose: sharing the analytical process with the country office so that the results are better understood; and providing an additional tool to those responsible for the M&E function and to senior management in the country office. This grid can be used as a supporting instrument both when drawing up the monitoring and evaluation framework of the next country programme and to perform regular checks of the evolution of the quality of the indicators used in the country programmes over time.

The indicators quality assessment tool has been applied to the revised monitoring and evaluation framework and not to the original monitoring and evaluation framework,² i.e. to the monitoring and evaluation framework contained in the CPAP monitoring and evaluation plan. The monitoring and evaluation framework was revised just after the mid-term review which took place in 2010. This review consisted of an internal exercise with the aim of preparing country office staff for the design of the monitoring and evaluation framework of the next programming period (2013–2017). The mid-term review did not translate in a revision of the CPAP, and as a result, the approval of the revised monitoring and evaluation framework has never been formalised. In this respect, it is important to stress that the revised monitoring and evaluation framework has a mere internal value: it is not an official document.

The quality assessments, which have resulted from the application of the tool to the revised monitoring and evaluation framework, have been significantly more positive than those that would have resulted from applying the tool to the original monitoring and evaluation framework, which did not include any baselines, targets or means of verification for any of the indicators and expected outcomes and outputs. The review of the monitoring and evaluation framework primarily involved:

- Reformulating some indicators.
- Incorporating new indicators and replacing redundant, irrelevant or non-specific indicators with new indicators.
- Incorporating information about baselines, targets and achievements.

Structure and functioning of the tool

The tool, which consists of an Excel spread sheet, contains **two sections** (which correspond to tables 2 and 3).

The **first section** (table 3) contains a detailed assessment of the quality of the indicators by focal area, and is divided into two parts.

The first part presents the basic information contained in the monitoring and evaluation framework of the monitoring and evaluation plan supplied as an annex to the CPAP. This part is purely descriptive: to

² This decision was agreed between the Evaluation Team and the management of the CO.

complete it, the cells corresponding to “outcomes”, “outputs”, “indicator”, “baseline” and “target” are filled in with the information available in the monitoring and evaluation framework, indicating that the information is not available (N.A.) whenever is the case.

The second part of the first section incorporates the quality assessment of the indicators. In it, the expected outcome and output indicators and the assessment are performed on the basis of four criteria: clarity of formulation, relevance, specificity and operationality. The criterion of operationality includes several criteria: baseline available, end-line available, target available, means of verification, and values of the indicators collected and reported. Part 3 of this volume “Brief practical guide for formulating indicators in the Monitoring and Evaluation Framework” contains detailed explanations of the definition and use of each of these criteria. It also contains a description of the quality control process for the monitoring and evaluation framework indicators at the time when it is designed.

In the second part, the assessment criteria are applied, which involves a judgement. The cells are completed by entering “0” or “1” as applicable. “1” denotes a positive response to the criterion, formulated as a question: Is the indicator relevant? Is the indicator specific? Is it clearly formulated? Is there a baseline available? Is there an end-line available? Are there verification methods? Are the values of the indicator collected and reported? If the answer is positive (yes) “1” is entered in the corresponding cell, and if the answer is negative (no) then “0” is entered.

The **second section** (table 2) consists of a table used to record the cumulative values corresponding to each of the assessment criteria and sub-criteria. The “1s” and “0s” are added automatically³ and inserted in the table, which presents the aggregate values both as absolute values and as percentages.

Assessment of the quality of indicators

The quality assessment for each of the indicators is presented in the Excel spread sheet that is an integral element of this part.

As can be seen in the table, the revised monitoring and evaluation framework indicators are, for the most part, **relevant** (78%), **specific** (89%) and **clearly formulated** (88%). The main problem is that they **are not operational**.

An operational indicator is one that can be used in an immediate and practical way for the purpose of measuring the degree of achievement of an output or outcome. For this to occur, all five operationality sub-criteria must be met at the same time. Of the 42 indicators included in the revised monitoring and evaluation framework only four are operational: i.e. only four satisfy all five criteria at the same time. It is important to note that even for these four indicators the degree of operationality is relative, given that the values (of the indicator) were collected and reported only on an occasional basis as part of the internal monitoring and evaluation framework review exercise and have never been collected and reported systematically throughout the duration of the country programme. As a consequence, it has not been possible to use the monitoring and evaluation framework as a tool for results-based monitoring, which is its main function.

³ The Excel spread sheet attached to part 2 already includes the formulae for automatic calculation.

Table 2: Aggregated values of the indicators' quality criteria

		QUALITY EVALUATION CRITERIA							
		Clear formulation	Relevant	Specific	Operational				
					Base Line available	End-line available	Target available	Means of verification	Values collected and reported
#	# of "yes" (1)	37	29	33	13	7	13	10	9
	# of "no" (0)	5	8	4	29	35	29	32	33
	Total	42	37	37	42	42	42	42	42
%	% of "yes" (1)	88%	78%	89%	31%	17%	31%	24%	21%
	% of "no" (0)	12%	22%	11%	69%	83%	69%	76%	79%
	Total	100%	100%	100%	100%	100%	100%	100%	100%

The two operationality sub-criteria with the lowest scores are “end-line available”⁴ (17%) and “values collected and reported” (21%). This is due primarily to the fact that **there is no information system associated with the M&Es**, one of the key technical factors that prevents implementation of a results-based monitoring system in the country office.

As a part of the internal monitoring and evaluation framework review exercise, information has been collected on achievements. This has been a one-off exercise which required a considerable *ad hoc* data collection effort, and which demonstrated the problems arising from a lack of a structured information system.

Other recurring quality problems identified that prevent the indicators from being operational are:

- There is a baseline but no end-line.
- There is an end-line but no baseline.

The problem of the lack of baselines and end-lines is linked, to an extent, to structural deficiencies in the generation and collection of data in the country, and in this respect, is not a problem specific to UNFPA but rather a weakness encountered by all partners at the national level. However, this argument would only explain the shortcomings associated with outcome indicators but not those relating to output indicators, as these are the responsibility of, and fully attributable to UNFPA.

A provision of the CPAP⁵ identifies the need to perform a baseline study to measure progress and for the subsequent realization of an end-line study. However, this provision was never implemented (see section on additional considerations at the end of the document).

- The indicator is formulated in a clear and comprehensible manner, but the unit of measurement is ambiguous or is not defined.

⁴ The term “end-line” refers both to the value of the indicator at the end of the country programme, and to the value of the indicator at any of the times prior to completion of the programme on which its value has been assessed: i.e. times at which targets and achievements have been compared.

⁵ See paragraph 106 of CPAP 2008–2012, June 2008.

- The indicator is not immediately measurable, either because the data is not available, cannot be collected, or because, although it is available and can be collected, there is no structured reporting system that enables the country office to obtain the data. This problem is one of the explanations for the fact that for the majority of indicators there is no end-line.
- There are no means of verification or these are not well-defined.

In conclusion, though the monitoring and evaluation framework review exercise has improved the quality of the indicators presented in the original monitoring and evaluation framework, this has not been to the extent that the indicators can be used in a practical and effective manner to measure achievements. If the monitoring and evaluation framework was used as a monitoring tool – something that as yet does not happen – the lack of operability of the indicators would prevent them from being applied in practice.

Additional considerations

1) When it comes to assessing how relevant and specific the indicators are, the fact that there are structural problems in the formulation of the outputs of the monitoring and evaluation framework has been ignored. In many cases, the outputs have been formulated as outcomes and not as outputs attributable to the country office and a direct consequence of its work or support. In this respect, the definition of relevant and specific indicator has been relaxed in some situations in recognition of the fact that the underlying problem was the poor formulation of the outputs. What has been assessed is whether the indicator was relevant to the output in general, and sometimes the fact that the indicator was at a considerably lower level than the output has been ignored (this is due to the fact that outputs are formulated as outcomes).

2) The fact that the provision included in the CPAP regarding the establishment of a baseline was not implemented is due to several causes. It is important to note that this provision is based on preceding good practice, and that failure to implement it was not due to a lack of commitment by the country office or lack of recognition of its importance.

The country programme 2003–2007 incorporated both a baseline study and an end-line study that provided values for the majority of the indicators included in the results framework. With the aim of maximizing resources, the intention was to use the end-line of the 2003–2007 programme as the baseline for the new 2008–2012 programme, something that was not possible for several reasons:

- In the 2008-2012 country programme the number of programme components rose from two to three because of the inclusion of the component “gender equality, education and interculturality”. This meant it was not possible to use the end-line of the preceding programme as a baseline for the following one, as not all of the indicators coincided exactly.
- The UNFPA Strategic Plan was published after the design of the Country Programme Document for Bolivia, and after the changes which were forecast to arise with the promulgation of the Bolivian Constitution and the new presidential elections. This led to a decision not to use the same indicators of the 2003-2007 end-line in the baseline of the new 2008–2012 programme.
- The end-line finished in June 2008, and several of the values obtained had to be checked against the results of the National Demographic and Health Survey (DHS/ ENDSA). However, at the time of publication of the results in 2009, one year later, the country context had changed significantly, and several of the end-line indicators were no longer relevant.

Table 3: CPAP indicators' quality assessment grid

CPAP indicators' quality assessment grid		CPAP DESCRIPTION (revised monitoring and evaluation framework)			QUALITY ASSESSMENT CRITERIA								
BOLIVIA CPAP 2008–2012		INDICATOR	Baseline (BL)	Target 2012	Clear formulation	Relevant	Specific	Operational					Values collected and reported
(Source: Monitoring and Evaluation Framework revised in 2011, subsequent to mid-term review)								BL available	End-line available	Target available	Means of verification		
POPULATION AND DEVELOPMENT													
Democratic governance strengthened with the incorporation of new forms of social participation and the exercise of human rights, with gender and generational equality													
Outcome	Strategies, policies, plans, programmes, and public budgets for development and the eradication of poverty, include population dynamics, sexual and reproductive health and rights, gender, generational and intercultural issues	Number of sectorial and development plans, strategies to fight poverty and budgets that address population-related issues, including gender and generational equality, reproductive health, HIV and AIDS	Not available (N.A.)	N.A.	1	1	1	0	0	0	0	0	
		Reduction of youth unemployment rate	N.A.	N.A.	1	0	0	0	0	0	0	0	
Outputs	Output 1: National Planning System and post-constitutional	Population Department or Unit incorporated in the	N.A.	N.A.	1	0	1	0	0	0	0	0	

regulatory framework strengthened in the areas of population and development, sexual and reproductive health and rights, gender, HIV and AIDS, adolescents and young people, and interculturality	structure of the Ministry of Development Planning											
	Progress reports on NDP and country reports on international commitments (population, RHR, MDG, SRH, young people and gender equality) supported and disseminated	N.A.	N.A.	1	0	1	0	0	0	0	0	0
	Legal vacuums in UNFPA issues identified in post-constitutional period	N.A.	N.A.	1	0	1	0	0	0	0	0	0
	Laws and rules that incorporate demographic issues with an intercultural and human rights perspective, supported at the design and implementation stages	N.A.	N.A.	1	0	1	0	0	0	0	0	0
	UNFPA Bolivia has an overall communication strategy that clearly defines objectives, audiences, conceptual positioning of	N.A.	N.A.	1	0	0	0	0	0	0	0	0

		communication and planning of activities										
	Output 2: Multisectorial rights and needs of adolescents and young people incorporated in public policies and budgets	(Youth Plan – check indicators) Departmental and municipal programmes Institutional mechanisms established for the coordination and implementation of public policy, regarding youth, employment and migration - Personal identification cards - Intergenerational dialogues - Citizenship - young people	N.A.	N.A.	0	N/A	N/A	0	0	0	0	0
	Output 3: Strengthening of national and local capacity for collecting demographic information and data, and use it in planning for development and in supervision and evaluation systems at a national, departmental,	Number of public management planners trained in the incorporation of socio-demographic variables in development planning, monitoring and evaluation processes	0	N.A.	1	0	1	1	0	0	0	0

	municipal and community level	Number of population studies that receive support to formulate development policies (includes census and DHS)	0	N.A.	1	1	1	1	1	0	1	1
		National system of statistical information with improved population data for planning and evaluation processes	0	N.A.	0	N/A	N/A	0	0	0	0	0
	Output 4: Issues of youth employment, urban periphery, elderly population – environment, population – territory, adolescent pregnancy and migration are incorporated in national, departmental and municipal plans.	Results of 3 studies and research on emerging issues incorporated in national, departmental and municipal programmes and plans	No study	Results of 3 studies incorporated in programmes and plans	1	1	1	1	0	1	0	0
REPRODUCTIVE HEALTH												
Social inclusion of excluded and marginalised population, with full exercise of rights and improvement of their quality of life												
Outcome	Individuals and communities have increased their capacity to exercise their sexual and reproductive rights, 2) have greater access to high quality sexual and reproductive health programmes and services	Percentage of births attended by qualified staff	N.A.	N.A.	1	1	1	0	0	0	0	0
		Percentage of needs not satisfied of contraception services	N.A.	N.A.	1	1	1	0	0	0	0	0
		Rate of mortality from cervical/uterine	N.A.	N.A.	1	1	1	0	0	0	0	0

	with an intercultural, gender and generational focus, including sex education and HIV/AIDS prevention.	cancer										
		Reduced rate of adolescent pregnancy	N.A.	N.A.	1	1	1	0	0	0	0	0
		Prevalence of use of contraceptive methods	N.A.	N.A.	1	1	1	0	0	0	0	0
Output 1	Increased access to and use of quality maternal health and sexual and reproductive health services, especially among adolescents, within the framework of the Family, Community and Intercultural Health model and the Universal Health Insurance (SUSALUD).	60% of health centres heading networks in UNFPA intervention areas offer integrated high quality SRH care that includes an emphasis on differentiated intercultural care for women, adolescents and young people.	6 networks (31 services in La Paz, el Alto and Santa Cruz) out of 106 networks in total offer differentiated care to adolescents (PROADO L). 65.8% of births attended by health professional (DHS 2008)	N.A.	1	1	1	1	0	1	0	0
		Training of teachers in midwifery for the 3 degrees in obstetric nursery	0	12 teachers	1	1	1	1	1	1	1	1
		Creation of degrees for obstetric nurses at 3 public universities	0	3	1	1	1					
		Contribute to at least 60% (doctors, nurses, auxiliaries) of providers of services of UNFPA intervention areas being sensitized in	40% of health providers trained in differentiated care (in three municipalities) (PROADO	60%	0	N/A	N/A	0	0	1	0	0

		RHR, differentiated care to adolescents and young people, and HIV	L end-line)									
		Cervical cancer information and treatment networks consolidated	N.A.	N.A.	0	N/A	N/A	0	0	0	0	0
		Integrated studies of emergency neonatal and obstetric care conducted and disseminated	Technical support for monitoring of SUMI provision, with emphasis on the area of SRH	N.A.	1	1	1	0	0	0	0	0
Output 2	Individuals, particularly women, adolescents and young people, have increased their access to programmes to reduce unplanned pregnancies and to prevent sexually transmitted infections and HIV	30% increase in adolescents and most vulnerable populations using male condoms in most recent sexual relationship (BL)	15–19 years: 40.9% 20–24 years: 32.2% MSM: 69% Sex Workers: 73%	30%	1	1	1	1	0	1	1	0
		5% increase in female condom use among population covered, especially amongst sex workers (BL).	N.A.	5%	1	1	1	0	0	1	0	0
		80% of health services permanently have SRH supplies	Between 10–15% of health services have some type of contraceptive (male	80%	1	1	0	1	0	1	0	0

			condom, copper T [IUD], pill).									
		30% of services offer integrated counselling in SRH including STI, HIV, cervical cancer, contraceptive, post-natal and post-abortion care	N.A.	30%	1	1	1	0	0	1	0	0
Output 3	People, especially women, adolescents and young people, have received support to exercise their sexual and reproductive rights.	At least 5 mechanisms for the enforcement and justiciability of the exercise of sexual and reproductive rights, within the framework of human rights, strengthened and functioning	N.A.	5 mechanisms	1	1	1	0	0	1	0	1
		Number of social partners committed to enforcement and justiciability of RHR	N.A.	N.A.	1	1	1	0	1	0	0	1
		Increase in women, adolescents and young people who express their satisfaction with SRH provisions	50% of adolescents and young people satisfied	N.A.		1	1	1	1	0	0	1
Output 4	Sex education included in the formal education	Decision-makers sensitised for the	N.A.	N.A.	0	N/A	N/A	0	0	0	1	0

	curriculum, alternative education and teacher training.	inclusion and application of sex education										
		Plans and programmes incorporate sex education at national, departmental and local level	N.A.	N.A.	1	1	1	0	1	0	1	1
		Proportion of teachers trained in sex education	N.A.	N.A.	1	1	1	0	0	0	0	0
		Percentage of boys, girls, adolescents and young people who receive sex education	52% of adolescents and young people state they have received SE	N.A.	1	1	1	1	0	0	0	0
GENDER EQUALITY												
Social inclusion of excluded and marginalised population, with full exercise of rights and improvement of their quality of life												
Outcome	Human rights of adolescents, women and girls, including their sexual and reproductive rights, promoted and mainstreamed in national structures and development plans, eliminating gender violence in all its forms.	“Increase in allocations in national and local programmes and budgets to promote gender equality, including the prevention of gender violence and provision of care”	0.68% of the budget of the General Treasury of the Nation is destined to gender equality in the 9 departments of Bolivia	N.A.	1	1	1	1	0	0	0	0

		Elimination of discriminatory provisions against adolescents, young people, women and girls from the legal system at national, departmental and municipal level.	N.A.	No discriminatory provisions	1	1	1	1	1	1	1	1
		Development of a unified registration system to monitor gender violence, including sexual violence	There is no single register of violence against women	1 single unified register	1	1	1	1	1	1	1	1
Output 1	National and local institutions take responsibility for the rights of women and adolescents and defend them, including sexual and reproductive rights	Increase in the number of indigenous, native and peasant women and women of African descent who receive information about RHR and SRH.	N.A.	N.A.	1	1	1	0	0	0	0	0
		50% of legal operatives trained in legal mechanisms and international case law regarding the justiciability of sexual and reproductive rights.	N.A.	50% of operatives trained	1	1	1	0	0	1	0	0

Output 2	Prevention, care and management of gender violence, including political violence against women, prioritised in the agenda of the National Council, departmental councils and local networks against violence	Increase in the number of mayoresses and women councillors who know their rights and the mechanisms for reporting political violence.	N.A.	N.A.	1	1	1	0	0	0	1	0
		Increase in the number of networks for combating violence against women.	N.A.	N.A.	1	1	1	0	0	0	0	0
		Increase in the number of trained providers of services to respond to violence	N.A.	N.A.	1	0	0	0	0	0	0	1
					QUALITY ASSESSMENT CRITERIA							
					Clear formulation	Relevant	Specific	Operational				
								Baseline available	End-line available	Target available	Means of verification	Values collected and reported
	Key for abbreviations		#	# of "yes" (1)	37	29	33	12	6	12	9	8
	N.A = Not Available			# of "no" (0)	5	8	4	29	35	29	32	33
	N/A = Not Applicable			Total	42	37	37	41	41	41	41	41

			%	% of "yes" (1)	88%	78%	89%	29%	15%	29%	22%	20%
				% of "no" (0)	12%	22%	11%	71%	85%	71%	78%	80%
				Total	100%	100%	100%	100%	100%	100%	100%	100%

Part 3: Brief practical guide for formulating indicators in the Monitoring and Evaluation Framework

1) Introduction

1.1 About this document

This guide is based on the exercise carried out during this evaluation with programme officers and technical staff specialised in each of the focal areas. The exercise consisted of a joint review of the quality of the indicators both of the original monitoring and evaluation framework and of the revised one following the evaluation criteria included in part 2. The purpose of the document is to provide practical support for country office staff when designing and formulating indicators for the next monitoring and evaluation framework.

The guide focuses primarily on the analysis of output indicators (a critical element to assess the work conducted by the country office), as outputs are the direct responsibility of the country office. The outcome indicators are no less important, but depend on the actions of other agencies and development partners in each country, and tend to be formulated on the basis of wider outcome frameworks such as the UNDAF and the outcome frameworks of country institutions. This guide has focused on the output indicators because these are the ones most directly attributable to the country office.

Please note that this document is designed as a practical rather than a methodological guide. It is not designed to replace but rather to supplement any technical advice or guidance provided by the regional office and headquarters. It would therefore be advisable to request technical advice and guidance (methodological references) from either of these.

1.2 The importance of the indicators

Indicators are important because they are instruments for measuring the level of achievements. They are a key tool because of their ability to provide evidence. To fulfil this function, indicators must be well designed and formulated not only on paper but also be operational: i.e. they must be usable in practice to measure achievements.

The evidence-based measurement of achievements is a corporate requirement:

- Firstly, the Strategic Plan, in paragraph 88, stipulates that, “UNFPA-supported programmes must produce demonstrable changes”, and the use of operational indicators is fundamental to this.
- In addition, the “UNFPA results-based management policy (2010)”:
 - Establishes in paragraph 6 (on guiding principles) that credible information must be collected and analysed with regard to performance by means of credible measurements of results, by an analysis of the contribution and influence of the programmes and the country office management activities on results, and validity of results measured should be confirmed through the provision of evidence.
 - Paragraph 17 (monitoring of the implementation) establishes that evidence and information should be collected regarding outputs, outcomes and key objectives, and this information should be analysed with regard to established targets.

To satisfy these requirements, it is necessary to use output and outcome indicators, and to compare values with established targets.

Independent of other external corporate requirements, the use of operational indicators is an imperative within the country office for various reasons, including in particular the following:

- They are a point of reference to enable the country office to analyse what is functioning and what is not, what has been achieved and what has not, and to what degree, and on this basis, to improve strategies and actions based on evidence-based technical considerations. In addition, all staff, whether senior or middle management or technical staff, have a right to objective evidence enabling them to estimate the quantity and quality of the effects generated by the work of the country office.
- The indicators are also a starting point for the process of accountability to donors and government partners, and jointly analysing with them, and on the basis of technical considerations, the programme quality and effectiveness.

It is important to note that the use of indicators is not the only resource that can be used to explain and analyse achievements. Assurance visits, qualitative observations of the quality of outputs and outcomes, and the opinions and observations of experts, partners and, above all, end users, also play an important role. However, these resources are valuable in so far as they complement the values of the indicators at an aggregate level.⁶ Indeed, the indicators *indicate*, but do not *explain*. In this sense, the indicators are a fundamental prerequisite for the analysis of achievements and play a key role in quantifying, rating and explaining achievements at an aggregate level, but their use must always be complemented by other analytical resources that make it possible both to confirm that the values make sense and to explore the reason for these values in greater depth.

In any case, the main importance of the use of indicators lies in the fact that without them results-based management is not possible. Nor would it be possible to have an objective discussion regarding programme achievements.⁷

2) Formulation of outputs and outcomes

According to the Development Assistance Committee (DAC) of the Organisation for Economic Cooperation and Development (OECD) an indicator is a quantitative or qualitative variable or factor that provides a simple, reliable means of measuring achievements, reflecting changes linked to an intervention or helping to evaluate the outcomes of a development organisation.⁸

In the context of the monitoring and evaluation framework, an indicator is a variable that makes it possible to measure the achievement of the objectives established, expressed in terms of outputs and outcomes. If the outputs and outcomes are not appropriate or adequate, either because they are not relevant, not realistic or not directly related to the intervention of UNFPA, then the indicators lose all usefulness.

In other words, the indicators are variables that help us to measure *something*, and if this *something* is poorly defined then the indicators will be defective from the outset. In these cases, the underlying problem is not the indicator but rather the poor formulation of the object that the indicator is intended to measure.

One of the recurring problems identified in the revised monitoring and evaluation framework is the formulation of outputs in terms of outcomes. In these cases, the indicators may be relevant, specific and clearly formulated, but they will rarely be feasible and realistic because the ‘output’ they measure is actually an outcome concealed under the guise of an output, but an outcome nonetheless.

⁶ The aggregate level corresponds to the country programme as a whole and is expressed, in practical terms, in the results framework and the monitoring and evaluation framework.

⁷ Discussion would be possible, but it would be based on observations and impressions drawing solely on personal experience and small simple sizes, falling far short of the principles of results-based management advocated by UNFPA.

⁸ Glossary of key terms in evaluation and results-based management. OECD. 2002.

Example

Output: “Increased access to and use of quality maternal health and sexual and reproductive health services, especially among adolescents, within the framework of the Family, Community and Intercultural Health model and Universal Health Insurance (SUSALUD).” Indicator: “60% of health centres that function as network heads in UNFPA intervention areas offer integrated high quality SRH care, which includes an emphasis on differentiated intercultural care for women, adolescents and young people.”

Although it appears in this form, this output is formulated as an outcome. The indicator is relevant (see following section) as it corresponds to a variable that measures, if only partially, the degree of access. However, this indicator is a long way from measuring achievements attributable to UNFPA as it involves improvements that go beyond the work performed by the country office. In fact, the indicator measures improvements that correspond to a level of outcomes (because the output is formulated at this level). As a consequence, the indicator is neither feasible nor realistic, mainly due to the fact that the output that it measures is not formulated in terms of outputs attributable to UNFPA.

The formulation of appropriate outputs is particularly important because these correspond to *deliverable* outputs that are the responsibility of UNFPA; the production of these ‘deliverables’ is under the influence and control of the country office. Achieving the outcomes is no less important, but it depends on many more external factors and, in particular, on the actions of other agencies and development partners in the country. In addition, the outcome indicators, given the Paris Declaration Framework, tend to coincide with outcome frameworks of country institutions.

In this respect, it is particularly important that, when it comes to formulating outputs (in the results framework and, therefore, in the monitoring and evaluation framework), not only is it guaranteed that outputs are indeed outputs (and not actually concealed outcomes) but also that the outputs reflect, in so far as is possible, the full range of actions implemented by the country office. For this reason, it is important to include:

- Expected achievements of *soft-aid* actions and alliances. These action areas are not currently explicitly stated in the CPAP despite the fact that they are a very important part of the country office activities and its objectives in the country programme. In addition, this type of action determines, to a large degree, both the quality and the rationale of what the country office does.
- Process indicators, given that several of the outputs and outcomes in the revised monitoring and evaluation framework are part of processes that take longer than the five years of the country programme to reach their culmination.
- Aspects such as the positioning of key issues on the Government agenda, a key output that does not appear in the current monitoring and evaluation framework, should also be included.

3) Design and formulation of indicators

3.1 Prior considerations

The process of designing and formulating indicators must be an inclusive process based on teamwork that includes both the input of country office staff and the main programme implementation partners. As regards the country office, the process should include both the programme officers responsible for the component or focal area and the staff who make up the technical team. It is critical that the process of formulating indicators is not only restricted to those who manage the focal areas. Rather the formulation process should include members of the technical team who may be able to offer useful perspectives on the operationality of the indicators. If the design processes do not include the technical staff they may very well result in:





- Lack of ownership of the indicators by technical staff; problematic because technical staff play a fundamental role in monitoring indicators.
- Indicators not being operational or being poorly formulated, given technical staff are the ones familiar with the practical details of actions in the field.

Where feasible, the process should also include the input of government partners and implementing partners. Their input is key, both to ensure a high level of ownership and to verify how operational the indicators are, because partners play a vital role in the process of collecting and reporting data. Three of the possible consequences of failing to include partners are:

- Lack of ownership (due to a lack of consensus on the indicators).
- Formulation of non-operational indicators due to problems with data collection.
- The risk that the indicators selected are considered to be of little use for programme reviews or the risk that achievements are deemed less relevant than expected.

3.2 The quality control sequence

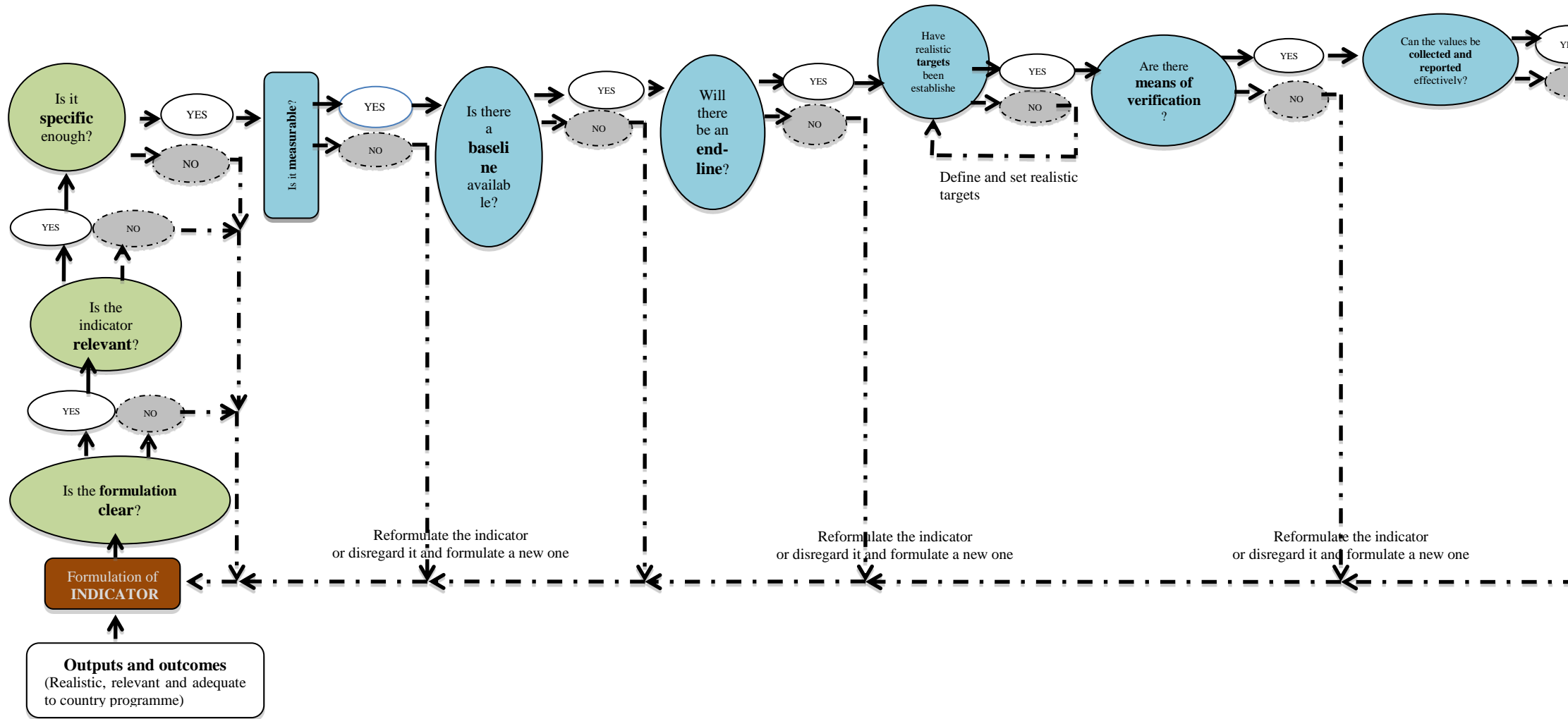
The figure below illustrates the sequence for assessing the quality of indicators prior to their inclusion in the monitoring and evaluation framework. The legend below explains the key elements of the figure:

	The continuous black lines designate the critical path followed by the process to arrive at the formulation of a clear, relevant, specific and operational indicator.
	The broken black lines designate that the indicator must be reformulated because it does not satisfy some of the basic quality criteria ⁹
	The three green circles illustrate the criteria that need to be applied to achieve an adequate formulation of the indicator.
	The five ¹⁰ blue circles show the criteria and considerations to use to guarantee that the indicators are operational .

⁹ In the specific case of the targets, the black line indicates that these must be established before continuing the process, for which there is no need to reformulate or discard the indicator (as it happens in the other cases).

¹⁰ In the figure there is a blue square associated with whether the indicator is measurable. It is blue because it belongs to the considerations related to operationality, and it is not a circle to designate that measurability is not a criterion like the other five, but rather that it represents a precondition.

Figure 1: Sequence for the analysis of the quality of indicators prior to their inclusion in the Monitoring and Evaluation Framework



3.3 Quality analysis of indicators prior to their inclusion within the Monitoring and Evaluation Framework

As can be seen in the figure, the quality control process for designing indicators starts by verifying that the outputs and outcomes have been formulated correctly. This brief guide focuses on the process of formulating indicators and not on the formulation of outcomes and outputs. In this respect, it would be advisable for the country office to request guidance and technical advice from headquarters with regard to possible guides and methodological tools focusing on the formulation of outputs and outcomes in the context of results frameworks.

This guide does not address all of the quality criteria that can be applied to an indicator. The eight that have been selected have been chosen because they were considered essential¹¹ or because they correspond to aspects contained in the monitoring and evaluation framework.¹²

The criteria selected are divided into two groups (identified in green and blue both in the text and in the preceding figure): those associated with the *form* and a **correct formulation** (green): clear, relevant and specific formulation; and those related to the **operationality** (blue) of the indicators: baselines, end-lines, targets, means of verification and the possibility of collecting and reporting values for indicators

Indicator adequately formulated

Clear formulation

Is the indicator formulated in a manner that is clear and comprehensible?

Clarity in the formulation of the indicator comprises three aspects: that it is comprehensible, that it is formulated as an indicator, and that it contains the key information.

1) That it is comprehensible.

This means formulating clear indicators, that are not ambiguous, that are worded in a manner that is comprehensible for any reader, and does not give rise to confusion.

Example¹³

Output: “*Multisectorial rights and needs of adolescents and young people incorporated in policies and budgets.*”

Indicator (included in original monitoring and evaluation framework):

Youth Plan – (check indicators)

Departmental and municipal programmes

Institutional mechanisms established for the coordination and implementation of public policy, regarding youth, employment and migration

- *Personal identification cards*
- *Intergenerational dialogues*
- *Citizenship - young people*

This is an example of confusing formulation. The indicator covers various aspects and it is not clear how these are related within the formulation of the indicator. In addition, for some of these aspects it is not clear

¹¹ Such as, for example, the relevance, specificity or clarity of the formulation.

¹² Such as, for example, the availability of targets, baselines, end-lines and/or means of verification.

¹³ The majority of the examples used in this document are extracted from the original M&EF and the revised M&EF.

what it is that the indicator will measure. For example, “departmental and municipal programmes”.

2) That it is formulated as an indicator.

Indicators must be formulated as such, and not as inputs, activities, outputs, results or achievements. In other words, they must be formulated so that they correspond to quantitative or qualitative variables or factors that provide a simple, reliable means of measuring achievements. An indicator that is formulated as an output or outcome will not permit the measurement of another output or outcome, which is its basic function.

Example

Output: “*Strengthening of national and local capacity for collecting demographic information and data, using it in planning development and in supervision and evaluation systems at a national, departmental, municipal and community level.*” **Indicator:** “*National system of statistical information with improved population data for planning and evaluation processes.*”

An information system with better data is an attribute of improved national capacity, not a variable that permits the measurement of the degree of strengthening of national and local capacity, which is the essence of the output to be measured. The indicator, as it is formulated, does not specify what is meant by “improved data” and cannot therefore be used to measure the degree of strengthening.

Example

Output: “*Increased access to and use of quality maternal health and sexual and reproductive health services, especially among adolescents, within the framework of the Family, Community and Intercultural Health model and Universal Health Insurance (SUSALUD).*” **Indicator:** “*Cervical cancer information and treatment networks strengthened.*”

This indicator is also formulated as a sub-output¹⁴ and not as a variable that enables measurement of the level of access to and use of services. For the indicator to be formulated as such, it would be necessary to specify what is meant by “strengthened” and to include a variable that would make it possible to measure this attribute.

In these cases, it is not possible to determine whether the indicator is relevant, specific or operational as it is not an indicator as such.

3) That it contains the key information.¹⁵

It is often difficult to briefly formulate an indicator that contains all the relevant and necessary information relating to it. However, when formulating and designing indicators, all the relevant information must be specified; even if the indicator is written in abbreviated form. It is particularly important to determine the geographic scope of the indicator (the whole country, only the regions of intervention by UNFPA, etc.).

Examples

In the **indicator** “*Cervical cancer information and treatment networks strengthened*”, it is not clear which

¹⁴ Or rather as a sub-outcome, given that the output is not formulated as such but instead in terms of the outcome.

¹⁵ Several of the output indicators of the M&EF do not include all the basic information about the aspects designated in the actual formulation of the indicator. Despite this, the CO technical staff knew what the basic information was, even though it had not been written down. This is the reason why the criterion “clear formulation” in part 2 received fairly positive evaluations.

specific networks the indicator refers to, and in the indicator “*Proportion of teachers trained in sex education*” it is not clear to which population of teachers the indicator refers, as a result of which it will not be possible to measure their values, because the denominator is indeterminate.

Even if the indicators in the monitoring and evaluation framework are formulated in an abbreviated manner, all the key information must be recorded. One option in this regard is to create files for each indicator.

Relevant

Is the indicator relevant?

An indicator is relevant when what it measures corresponds to the outcome or output to be measured. In other words, when it is directly related to achievement of the outputs or outcomes with which it is associated, and it gives us information about them; and it is not relevant when it does not give us information about the achievement of these outputs or outcomes but rather about others.

It is very difficult to find an indicator that is not at all relevant: this would mean there was no connection whatsoever between the output or outcome and the variable being used to measure it. In other words, it would imply that the *formulators* of the indicator are not clear about what they are measuring. In this respect, relevance is a question of degree: high, medium or low, where a low degree of relevance is the equivalent of saying, in practice, that the indicator is not relevant. Relevance is a key criterion because collecting data about indicators involves a cost. Working with indicators that are of little relevance is very inefficient as the problem is easily solved: by identifying relevant indicators.

Example¹⁶

An example of an irrelevant indicator would be, “*5% increase in female condom use among the population covered*” to measure the output “*Sex education included in the formal and alternative education curriculums and teacher training*” as there is no relationship between the indicator and what is being measured.

The most common cause of indicators with little relevance is generally the **formulation of indicators at levels above or below the object** (output/outcome) to be measured. For example, outcome indicators used to measure outputs or input indicators used to measure the degree of achievement of outputs.

Example

An input indicator like “*the percentage spent on training courses as a proportion of the total spent on a specific component*” has low relevance for the measurement of the “*level of strengthening of the institution*” being supported (output). The problem is not that the indicator bears no relation to what is being measured: there is a relation, but it is very indirect and, in any case, it would be possible to identify other far more relevant indicators, such as the “*percentage of people trained who apply the new method in training courses*”.

An indicator must provide, in so far as is possible, direct evidence of the condition or purpose to be measured. For example, if the desired outcome is a reduction in adolescent pregnancy, achievements could be measured using an outcome indicator such as the rate of adolescent pregnancy. The number of teenage

¹⁶ This example is theoretical. There is no instance of this in the revised M&EF.

girls who have received advice about pregnancy would not be an ideal or relevant indicator to measure this outcome, although it could be relevant as a means of monitoring services which lead, in the best cases, to a reduction in pregnancy rates.

Example

The indicator “UNFPA Bolivia has an overall communication strategy that clearly defines objectives, audiences, conceptual positioning of communication and planning of activities” has very little relevance to the measurement of the output “National Planning System and post-constitutional regulatory framework consolidated in the areas of population and development, Sexual and reproductive health and rights (SRHR), gender, HIV and AIDS, adolescents and young people, and interculturality”, given that the relationship between a communication strategy within the country office and the strengthening of the National Planning System is very indirect – in the best of cases. This indicator could be highly relevant in measuring progress in the internal organization of the country office, but not to measure the strengthening of an external system.

A key aspect of relevance is **when an indicator is assessed**. An indicator may be relevant when it is formulated, but may cease to be so over time due to changes in context or to the programme. This is one of the reasons why it is so important to review and update the results framework and the monitoring and evaluation framework.

Example

This is the case for the majority of indicators of output 1 of the Population and Development area “National Planning System and post-constitutional regulatory framework strengthened in the areas of population and development, SRHR, gender, HIV and AIDS, adolescents and young people, and interculturality”, that have ceased to be relevant because they do not measure the achievements of what UNFPA is currently doing. So, for example the indicator “Population Department or Unit incorporated in the structure of the Development Planning Ministry” ceased to be relevant when the actions relating to the establishment of this Unit were not reflected in any annual work plan due to changes in the priorities of the new Government.

Specific

Is the indicator sufficiently specific?

An indicator must be specific with respect to the output or outcome being measured: i.e. it must provide precise, concrete and specific information regarding achievement of the output or outcome. The opposite of a specific indicator would be an indicator that was too broad, generic or global, thereby providing information not only about the output or outcome to be measured but also about other outputs and outcomes.

Examples

The indicator “80% of health services permanently have SRH supplies” is not sufficiently specific to measure the output: “Individuals, particularly women, adolescents and young people, have increased their access to programmes to reduce unplanned pregnancies and to prevent sexually transmitted infections and HIV.” The reason why this is not sufficiently specific is because health centres have over eighty types of different inputs with regard to sexual and reproductive health, some of which directly relate to pregnancy reduction or the prevention of sexually transmitted infections. In this framework, the indicator is too generic as it fails to specify – among all the inputs – which must be available to achieve the target established.

It should also be noted that specificity is a question of degree. It is relatively unusual to find indicators that are so generic that they are of no use when measuring the output or outcome to be measured;¹⁷ it is more common to find some indicators that are not sufficiently specific. In such cases, reformulating them or looking for more specific indicators is acceptable. The formulation of an operational indicator always has a cost associated with it.¹⁸ Thus, during the design process, an effort should be made to identify the most specific indicators possible in order to maximise the return on the investment of resources to formulate them.

Example

The indicator “*Increase in the number of service providers trained in responding to violence*” is not sufficiently specific to measure the output: “*prevention of, attention to and management of gender violence, including political violence against women, prioritised in the agenda of the National Council, departmental councils and local networks against violence.*” This is because the indicator does not determine which aspect of responding to violence is to be measured, as a result of which the data provided by the indicator (number of service providers trained to respond to violence) will be too generic because it could include both the providers of specialist services in gender-based violence/political violence against women and other types of violence not included in the framework of this output.

This having been said, it is important to stress that a single, isolated indicator will rarely be sufficiently specific to measure the complexity (diversity of aspects) of an output or outcome. For this reason, while attempting to identify the most specific indicators possible, the best recipe for accurately measuring the achievement of an output or outcome is to select a group of indicators (while taking into account cost-benefit considerations).

Operational indicator

Measurable

Is the indicator measurable? Can the indicator be measured at a reasonable cost?

Ensuring that an indicator is measurable is a necessary condition that must be met. An immeasurable indicator is incapable of performing its basic function of “providing a simple, reliable means of *measuring achievements, reflecting changes* linked to an intervention or *helping to evaluate* the outcomes of a development organisation.”

An indicator that is not measurable, or that cannot be measured at reasonable cost, cannot be operational because it will not be possible to provide a baseline, an end-line, and a means of verification; it will not be possible to establish targets, and the values of the indicator cannot be collected.

The majority of outputs and outcomes associated with an monitoring and evaluation framework are measurable because they involve socio-demographic variables, institutional capacity and behavioural changes that, in theory, can be measured. There are many types of indicators (qualitative, quantitative, process, simple, compound) that can be used in combination in order, at a minimum, to provide an approximation of the level of achievement of an output or outcome. The key point is the degree to which the

¹⁷ A more common situation is that indicators that are not specific are also not relevant. As they do not match and correspond to the output or outcome that they measure, they do not provide concrete, precise information about its achievement.

¹⁸ This is the cost of managing it: monitoring it, collecting information or data about its values, reporting them etc.

measurement variables or indicators reflect the degree of achievement of the output. It is rarely justifiable not to include indicators because the output is not measurable.

However, an indicator may only be measurable in theory if, for example, the cost of measurement is very high or because there is no specialised institution (secondary data sources) already measuring it. UNFPA Offices are not sociological or health research centres, and in this sense measurability should be seen as a practical issue. In practice, an indicator is measurable if the country office has an efficient way of obtaining data on its value.

There are three aspects to take into account when assessing the measurability of an indicator:¹⁹ that the unit of measurement is (well) defined, that the indicator is measurable at a reasonable cost (efficient) and that, in addition to being measurable, the data is available.

1) That the unit of measurement (or measurement criterion) is well defined.

An indicator must always incorporate the unit of measurement because, by definition, its purpose is to measure the degree of achievement of an output or outcome.

Example

The indicator “*increase in the percentage of women who take autonomous decisions regarding their SRH*”, associated with the output “*national and local institutions take responsibility for the rights of women and adolescents and facilitate the exercise of these rights, including sexual and reproductive rights,*” does not incorporate the measurement criterion of “taking autonomous decisions”. By failing to specify how to measure autonomous decision-making, the indicator is not measurable. This does not mean that autonomous decision-making cannot be measured (it could be measured by means of questionnaires to evaluate issues related to autonomy when taking decisions about provision of SRH). What it implies is that the indicator cannot be measured because it does not properly incorporate the measurement criterion: i.e. a variable that measures the degree of autonomy in a precise and effective manner.

Two very common errors in this respect are: 1) formulating indicators in terms of achievement (of outcome or output) instead of formulating them as variables that incorporate units of measurement, and 2) including several variables to be measured in a single indicator.

Example²⁰

The indicator “*Contribute to at least 60% (doctors, nurses, auxiliaries) of service providers in UNFPA intervention areas being sensitized in_RHR, and offering differentiated care to adolescents and young people, and HIV*” does not explain how this sensitization is to be measured. The indicator is expressed in terms of an achievement (provider *sensitized*) and not as an indicator as such; in this regard, it could be considered to be a sub-output. To reformulate it as an indicator we would have to add a unit of measurement of “being sensitized”. On the other hand, even if there was a unit of measurement, the indicator seeks to measure three areas of sensitization: in RHR, in differentiated attention for adolescents

¹⁹ We start from the premise that practically every aspect of a country programme can be measured. In this respect, when we say “not measurable” we mean “not possible to measure at a reasonable cost and within a reasonable time period”. An inefficient indicator may be considered not measurable for practical purposes.

²⁰ On the basis of the sequence illustrated in the figure on page 31 ‘Sequence for the analysis of the quality of indicators’, this indicator would not have reached the assessment stage of measurability because it would not have satisfied the first quality criterion (clear formulation) since it is formulated in terms of achievements and not as an indicator as such.

and young people, and in HIV. The indicator therefore lacks a clear measurement criterion that specifies whether a provider who is sensitized is one who is sensitized in all three areas at the same time, in at least two, in at least one, etc.

Another common error with regard to the definition of the unit of measurement arises when, in the case of compound indicators,²¹ one or more of the sub-variables that constitute the indicator is unknown. The most common example occurs when indicators are expressed as percentages, requiring data about both the numerator and the denominator.

Examples

In the indicator “50% of operators in legal system trained in legal mechanisms and international case law on the justiciability of sexual and reproductive rights,” the value of the denominator (i.e. the total number of operators) is unknown, making it impossible to obtain the value of the quotient and, ultimately, meaning that the indicator is not measurable in practice.

The same is true of the indicator “proportion of teachers trained in sex education,” as the total number of teachers (the denominator) is unknown.

2) That the indicator should be measurable at reasonable cost: i.e., that it must be efficient.

It is particularly important to take this aspect into account in the case of primary information sources.

Example

Taking as an example the indicator “number of indigenous, native and peasant women and women of African descent who receive information about RHR and SRH”: if there were no secondary information sources available to provide data for this indicator – i.e. if it proved necessary to have recourse to primary sources – then this indicator might become very expensive because it would probably be necessary to conduct surveys and directly interview the target group.²² If this option were very expensive, it is perfectly possible that the indicator would be deemed to be “immeasurable” in practical terms because of the inefficiency of doing so. On the other hand, if there are secondary information sources available for this indicator – for example the internal records of the (Confederation of Indigenous Women of Bolivia CNAMIB) or implementing partners – then the indicator might be perfectly measurable at a very reasonable cost because the country office would only have to establish mechanisms to ensure that the (already available) data were reported.

3) That the data on the indicator are available to the country office.

Even if the indicator is measurable, the country office will be unable to use it as an instrument of measurement if it is unable to access the values of the indicator.

Example

²¹ A simple indicator (not compound) includes a single variable, such as for example “the number of plans that incorporate elements of sex education”.

²² Of course, there are more feasible intermediate alternatives, such as sampling instead of interviewing all members of the target group.

The indicator “*increase in the number of female leaders and civil society organisations reporting violence against women*” was discarded during the review of the monitoring and evaluation framework precisely because the country office had no immediate and accessible way of identifying the increase in reports of political violence. In this respect, the problem was not that the indicator was not measurable (it is) but rather that the country office could not obtain the data and it was therefore not *measurable for the country office*. This indicator was reformulated as “*Increase in the number of mayoresses and female councillors who know their rights and the mechanisms for reporting political violence.*” The country office has access to data for this indicator because it works with ACOBOL and the Association of Female Members of the Bolivian Parliament through specific annual work plans. This means that the country office can rely on partners to provide data about the indicator and, therefore, this is measurable for the country office in practical terms.

The lack of availability of data due to lack of access to them means that there are no baselines or end-lines. Furthermore, it prevents the achievement of the last quality criterion in terms of operationality: that the data are collected and reported.

Baseline

Is there a baseline for the indicator?

The baseline is the starting point and corresponds to the initial value of the indicator: i.e. to the value of the indicator at the start of the country programme. If there is no baseline it is impossible to use an indicator to measure the degree of achievement of an output or outcome because there is no starting (or reference) point from which to measure progress.

The baseline is a condition for establishing a target, because if the initial value of the indicator is unknown it may lead to the establishment of erroneous targets; for example, establishing a target for reducing the adolescent pregnancy rate to 18% when the baseline is already 16%.

The availability of the baseline directly affects the formulation of the indicators: if it is missing, the indicators are rendered unusable. Above all, it affects indicators that have been formulated in terms of percentage increases.

Examples

The indicator “*5% increase in female condom use among population covered, especially in sex workers (baseline)*” is not operational if there is no baseline, because without this it is impossible to calculate the percentage increase established by the indicator. The same is true of the indicator “*30% of services offer integrated counselling in SRH including STI, HIV, CC, contraceptive, post-natal and post-abortion care.*”

There are three questions that must be considered when evaluating whether there is a baseline for an indicator:

- 1) Is there a baseline available from secondary information sources? (studies, censuses, the country office internal records, partner reports); and
- 2) If there is no baseline, how much would it cost to perform a baseline study to collect information regarding the initial value of the indicator?

There is one exception that enables identification of an indicator without the need to perform a baseline study: when the initial value of the indicator is known to be zero.

Examples

The indicator: “*Plans and programmes incorporate sex education at national, departmental and local level,*” does not have an associated baseline in the monitoring and evaluation framework. However, this situation can be resolved if there is evidence that at the time of starting the Country Programme no plan or programme incorporated the SE, with the result that the baseline would be zero.

The same is true of the indicator: “*Laws and rules that incorporate demographic issues with an intercultural and human rights perspective, supported at design and application stages.*” In principle, there is no baseline associated with this indicator: i.e. the initial value of the number of laws and standards that incorporate demographic issues with an intercultural perspective is not known. This difficulty could be resolved if there were evidence that at the date of the start of the programme (and prior to it) there were no law or standard incorporating demographic issues with an intercultural perspective.

- 3) Where there are baselines available on the basis of secondary information, we need to ask whether these secondary information sources will also provide data for the end-line. If not, the indicator needs to be reformulated or discarded and replaced by a new one.

The link between baseline and end-line is very close, because the data sources that provide the values of the baseline will be the same as those that provide the values for the end-line. In fact, one of the shortcomings of some of the monitoring and evaluation framework indicators is just this: the existence of a baseline but the lack of an end-line, often due to the fact that the information sources that provide the baseline values will be unable to provide data for the end-line.

Example

The percentage of births attended by health professionals, which is one of the baseline values of the indicator “*60% of family health centre networks in UNFPA intervention areas offer integrated high quality SRH care which includes an emphasis on differentiated intercultural care for women, adolescents and young people,*” is provided by the National Demographic and Health Survey (DHS). However, the regularity of the national DHS does not coincide with the data requirements of the end-line, with the result that this source is not operational.

End-line

Will there be an end-line for the indicator?

The end-line of an indicator is the value of the indicator at the end of a given period. Taking into account the structure of the format of the monitoring and evaluation framework, the end-line corresponds to the value of the indicator at any of the moments at which achievements are to be measured: each year or also at the end of the Country Programme. As a result, the end-line, within the context of the monitoring and evaluation framework, is the value of the indicator at the moment when achievements are measured.

The use of indicators to measure the degree of progress with regard to achievements at a given point of time through comparison of the value of the indicator at that time (end-line) with the target value, taking into account the value of the baseline (the starting point).

The non-availability of end-lines is one of the most serious problems of the country programme monitoring and evaluation framework. 83% of the indicators of the revised monitoring and evaluation framework do not have an end-line; this is the item with the highest non-compliance rate of all the quality criteria. Taking into

account that failure to comply with one of the five operationality criteria renders an indicator non-operational, it is important to note that 83% of the indicators of the revised monitoring and evaluation framework are unable to fulfil their function as variables to measure the achievement of outputs and outcomes of the country programme.

There are two questions that must be considered when evaluating whether there is an end-line for an indicator:

- 1) When secondary data sources are used – because the same information source is used as a baseline based on secondary data – it is necessary to analyse carefully whether this data source will be able to provide data with the regularity necessary to measure the achievements at any of the times at which it is planned to measure them.

Example

The source of information (means of verification) selected for the indicator “*Percentage of boys, girls, adolescents and young people who receive sex education*” is the National Youth Survey (ENAJ). This source of information was used to determine the baseline. However, the frequency of the survey does not coincide with the data requirements of the end-line, with the result that this source is unable to provide data for the end-line. As a result, the indicator has a baseline and a means of verification (in theory) but no end-line, as a result of which it is not operational.

- 2) If it proves necessary to conduct studies to generate the information (primary data sources) then one must carefully examine the cost of conducting an end-line study to collect information about the values of the indicator at the points when it is to be used to measure achievements.

In the case of outputs in particular, where there are no end-lines for monitoring and evaluation framework indicators, the underlying problem is the absence of an information system. In this respect, the establishment of an information system – however simple it may be at the beginning – is a basic condition for the existence of end-lines and to ensure, ultimately, that the indicators are operational.

Targets

Have targets been established for the indicator? Are the targets realistic?

Targets are the expected values of the indicator at a given point in time, normally at the end of the country programme.²³ Where no targets have been established, the use of the indicator does not allow evaluation of the achievements – one of its key functions – as the current value cannot be compared with the expected one.

Example

In the revised monitoring and evaluation framework the indicator “*Percentage of boys, girls, adolescents and young people who receive sex education (SE)*” has a baseline (52% of adolescents and young people) and an end-line²⁴ for various years. In 2009, for example, 2,113 adolescents and young people in Cochabamba, Sucre and Potosí attended SE workshops. However, no target was established for this indicator, with the result that it is not possible to assess whether or not 2,113 adolescents and young people (or its equivalent as a percentage) is a satisfactory value.

²³ The format of the M&EF requires annual targets to be specified.

²⁴ As can be seen, this indicator is problematic: the values of the end-line are not expressed in the same terms as those of the baseline. For the purposes of this example this shortcoming has been ignored.

There are two key considerations to take into account with regard to targets:

- 1) The targets for each indicator must be established at the same time as the design of the results framework and monitoring and evaluation framework. The establishment of targets *a posteriori* is not a valid option, as it would imply problems of transparency and reporting.
- 2) Any targets established must be feasible and realistic.

It is very important to establish accessible targets and to avoid unrealistic targets that demotivate country office staff. The most risky indicators in this respect are those that include unachievable targets but that are related to key elements of the country office mandate. Taking into account the fact that the processes supported by the country office are often long-term processes, it is important within the results frameworks (that run over a period of five years) to use process indicators.

Example

An indicator such as “*the theme of sex education is mainstreamed across primary, secondary, and tertiary education curricula*” would be overambitious and unrealistic in a context where the Ministry of Education has very long-term plans for transforming the education system and incorporating certain themes. An indicator such as this would be beyond what is feasible within the framework of a country programme. A feasible alternative to this formulation could be “*sex education is incorporated into plans to transform the curriculum*”, a plausible target for a five-year period. The first indicator corresponds to an impact indicator while the second is a process indicator.

Means of verification

Are there means of verification associated with the indicator? Are they easily accessible?

The means of verification are the data source that supplies the value of the indicator at any given time. They indicate “where we need to look” if we want to know the value of the indicator, assuming that the values of the indicator are available.

There are two key questions to consider when identifying means of verification:

- 1) Are there accessible means of verification associated with the indicator? What are they? Are they clearly specified?

Example

The indicator “*Increase provisions in national and local programmes and budgets for the promotion of gender equality, including the prevention of gender violence and provision of care*” has as its means of verification “*Ministry of the Economy and Finance, Ministry of Justice and Local Government*”. These institutions are the bodies that maintain the data source, but the ultimate source of the data is not the institutions themselves but the budgets drawn up to promote gender equality. This means of verification is accessible to the country office so long as the information is in the public domain. If not, this means of verification would not be valid.

- 2) Are they appropriate and sufficient as means of verification for the indicator in question?

Example

The indicator: “60% of health centres that function as network heads in UNFPA intervention areas offer integrated high quality SRH care that includes an emphasis on differentiated intercultural care for women, adolescents and young people” cites the standard progress reports and country office annual reports as its means of verification. However, both reports are internal information sources and are neither valid nor appropriate as a means of verification. These are secondary data sources that, and for reporting based on evidence, the values of the indicators should be used (and their verification depends on the associated means of verification! A means of verification may be internal (at the level of the country office) if the indicator is also internal, but it may not be internal if the indicator is external, as is the case in this example.

Sometimes, in the revised monitoring and evaluation framework, the baseline appears as a means of verification. The baseline is clearly the means of verification for the starting values, but not for the values of the indicator at any other time (end-line). In this respect, reference to means of verification is made in this second sense: the means of verifying the values of the indicator when measuring progress with respect to achievements (end-line). As a result, treating the baseline as the sole means of verification would not be correct.

Data collected and reported

Can the indicator values be collected and reported effectively?

This criterion refers to the availability of the data to the country office: i.e. to the fact that the value of the indicator is physically available for the country office when this needs it. The values of the indicators of the monitoring and evaluation framework have to be *received by the country office* in order to be inserted in the monitoring and evaluation framework, and to this end must be collected and reported.

If the data is available, in some place or institution in the country, but nobody is responsible for collecting and reporting it (submitting it to UNFPA), the indicator can never be operational. This criterion is essential but is often omitted, despite the fact that it is the basis for making the value of the indicator available when performing the progress review for the Country Programme. The collecting and reporting process may be expensive and laborious if it is performed on an *a posteriori* basis. The monitoring and evaluation framework review exercise is a clear example of this.

Examples

The indicator “Increase in the number of indigenous, native and peasant women and women of African descent who receive information about RHR and SRH,” is an indicator that was used during the monitoring and evaluation framework review to replace another one that ceased to be relevant due to changes in context. However, the improvement in the initial design of the indicator did not take into account the criterion of collection and reporting.

The data for the value of this indicator should have been provided by the Confederation of Indigenous Women of Bolivia (CNAMIB) and by the implementing partners (for example, Family Care International). However, the mechanisms for gathering and reporting information were never established, as a result of which the indicator was not operational in practice.

A very important aspect to take into account is that the values of the indicators should be gathered and reported at the time when they are needed. Even if there is a baseline, end-line, means of verification and target, the indicator is only usable in practice if its values (the data) are available when they are needed; during the annual review of the country programme, when preparing the SPRs or the COARs, at the mid-term review, or during final evaluation of the programme.

79% of the indicators of the revised monitoring and evaluation framework are not collected and reported, the second-highest percentage of non-compliance of all the quality criteria. This percentage rises to 100% if one takes into account that the values (of these indicators) have been collected and reported only on an occasional basis, as part of the internal monitoring and evaluation framework review exercise, and have never been collected and reported systematically throughout the Country Programme. The latter would have prevented the monitoring and evaluation framework from being used as a results-based monitoring tool even had this been the intention.

The establishment of an information system, as a minimum for output indicators, would solve this problem because one of the key functions of an information system is to collect and report data. In this respect, it would be very useful to document and specify who is responsible for collecting and reporting information about the value of each indicator and how and when this is to occur. Who, within the country office, is responsible for monitoring and supervising this process would also need to be documented.

Examples

The indicator: “*Contribute to at least 60% (doctors, nurses, care assistants) of service providers in UNFPA intervention areas being sensitized of RHR, and offering differentiated care to adolescents and young people, and HIV,*” establishes as one of its means of verification the “lists of participants” in technical training courses funded by the country office. Even where verification measures as clear as this do exist, this indicator cannot be operational if nobody is responsible for collecting and reporting the number of participants so that the data is available in the monitoring and evaluation framework when annual progress reviews are conducted. By the same token, the indicator: “*Plans and programmes incorporate sex education at national, departmental and local level,*” that has as its means of verification the “*curriculum plans for regular and alternative education and teacher training*”, will never be operational if nobody is responsible for it and there is no mechanism for accessing these plans, examining them, confirming that they incorporate sex education and reporting the value of the indicator (how many plans incorporate it) in time to be used to assess the achievement of the output (in the example “*Sex education included in the formal education curriculum, alternative education and teacher training*”).

4) Summary of the most common errors in the design and use of indicators

The most commonly recurring errors during the evaluation of the country programme with regard to the design of indicators and their use in the monitoring and evaluation framework were:

- 1) Indicators that were not measurable because the unit of measurement was not (well) defined.
- 2) Indicators that were not measurable because the data was not available.
- 3) Non-existence of baseline.
- 4) There is a baseline but no end-line.
- 5) No baseline or end-line.
- 6) Targets have not been established (the indicator does not incorporate targets).
- 7) Data is available, but has not been collected or reported.
- 8) No means of verification or lack of clearly defined or appropriate means of verification.
- 9) Achievements not reported in terms of the initial indicator (target), as a result of which the achievement has not been compared to the target.

This final point recurs with some frequency during the monitoring and evaluation framework review exercise, which was conducted as a result of the mid-term review. When using the monitoring and

evaluation framework to report on achievements,²⁵ these were not reported in terms of the initial indicator: i.e. there was no coherence between achievements and target.

Examples

In the case of the indicator “60% of health centres that function as network heads in UNFPA intervention areas offer integrated high quality SRH care that includes an emphasis on differentiated intercultural care for women, adolescents and young people,” the achievements are reported in terms of “40 health networks offer differentiated care to adolescents”, and not in terms of the % of health centres offering integrated care.

In the case of the indicator “results of three studies and research projects on emerging issues incorporated in national, departmental and municipal plans,” the achievements are reported in terms of studies completed and not in terms of studies completed “and incorporated into programmes”, which is the essence of the indicator.

In the case of the indicator “percentage of boys, girls, adolescents and young people who receive sex education (SE),” the achievements are reported in terms of the number of adolescents who have attended workshops, and sometimes in terms of educational units that incorporate sex education across the curriculum, but never in terms of the “percentage of children [...] who receive SE”.

The underlying causes refer to design problems such as difficulties in accessing information about the unit of measurement, inappropriate means of verification, and baseline data sources that cannot be used as information sources for the end-line.

Checklist

Below is a simple checklist which summarises the main criteria and issues which must be taken into account when formulating indicators in the monitoring and evaluation framework.

Table 4: Checklist for the formulation of indicators within the monitoring and evaluation framework

	What to check	Check
Outputs and outcomes	Are the outputs relevant and realistic? Are they formulated as outputs?	○
	Are the outcomes relevant and realistic? Are they formulated as outcomes?	√
Appropriate formulation	Is the indicator formulated in a manner that is clear and comprehensible?	...
	Is the indicator relevant?	
	Is the indicator sufficiently specific?	
Operational indicator	Is the indicator measurable? Can the indicator be measured at a reasonable cost?	
	Is there a baseline for the indicator?	
	Will there be an end-line for the indicator?	
	Have targets been established for the indicator? Are the targets realistic?	
	Are there means of verification associated with the indicator? Are they easily accessible?	
	Can the indicator values be collected and reported effectively?	
Use of indicator in the M&EF	The achievements are reported in terms of the targets and in terms of the indicator	

²⁵ The use of the M&EF for reporting does not correspond to a real reporting exercise as such, as the M&EF review was part of an internal exercise to familiarise technical staff with the M&EF and prepare them for the process of designing the results framework and M&EF for the next country programme.

○	The aspect or aspects have not yet been checked for all outputs or outcomes and indicators.
√	The aspect or aspects have been checked for all outputs or outcomes and indicators.

Part 4: Action Plan for Improving the Monitoring and Evaluation System

A) INTRODUCTION

What is the Action Plan?

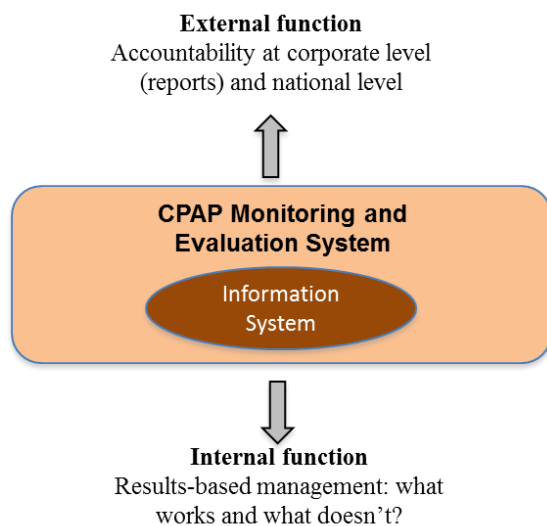
The Action Plan comprises a detailed list of the main recommendations of the evaluation report related to the country programme monitoring and evaluation system. The improvement plan is designed as a supporting tool for managers in the country office when making the necessary adjustments and improvements in order to develop an effective, high-quality monitoring and evaluation system.

The Action Plan is also the reference framework and starting point that the next country programme evaluation team will use as the basis for its analysis of the M&E system. The advances and improvements made during the period evaluated will be implemented on the basis of the actions established in this Action Plan.

The main inputs used to draw up the plan are the same as the tools used to analyse the M&E system during evaluation of the country programme: the monitoring and evaluation system monitoring tool (part 1 of this document) and the country programme action plan indicators quality evaluation tool (part 2 of this document).

The **principal objective** of the Plan is to create the basis for and initiate the process of implementing a results-based monitoring system.

Figure 2: The dual role of the monitoring and evaluation system of the CPAP



In this respect, it is important to note that the aim is not to create a system whose sole purpose is to ensure that the country office is aligned with corporate dispositions regarding results-based management systems;²⁶ rather, it is to design a system that genuinely serves the interests of the country office by helping to measure what has been achieved and supporting improved evidence-based learning and planning. In this respect, the country office results-based monitoring system must fulfil both an external and an internal function. The external function is associated with the need to report both at the corporate and the country level. The internal function of the results-based monitoring system is associated with the need to know what is being achieved and which strategies and activities are more or less effective when it comes to achieving the expected outputs and outcomes.

Furthermore, this internal function responds to the legitimate wishes of country office staff to know what they have achieved and what are the consequences of the interventions on which they work on a daily basis.

The timeframe of the Action Plan

The general timeframe for the Action Plan is five years, and this covers the time period up to the next country programme evaluation. However, the timeframe for the implementation of each of the actions varies in accordance with its level of priority. As mentioned in section C of this Plan, the management of the

²⁶ Included in the Strategic Plan 2008–2011 and in the results-based management policy for 2010.

country office should decide the implementation deadline for each action; although it would be advisable if priority 1 actions were implemented before December 2011 and priority 2 actions were implemented before the end of the current country programme.

Types of actions

The improvement Plan does not incorporate absolutely all the elements necessary for the creation of a comprehensive results-based monitoring system, but instead focuses on actions that affect essential and important aspects. It would be neither feasible nor reasonable to expect the creation of an integrated system within a period of five years, taking into account the current starting position. The Plan includes three types of action:

Table 5: Types of actions in the Monitoring and Evaluation System Improvement Plan

Type of action	Description
Priority 1	Critical and urgent aspects (for immediate implementation) This type of action corresponds to crucial aspects which must be addressed immediately as they constitute basic elements for the creation of the results-based monitoring area. Furthermore, they are conditions if other actions (above all, priority 2) are to be implemented in a satisfactory manner. If priority 1 actions are not implemented, progress in the results-based monitoring system will be limited.
Priority 2	Key aspects for short-term implementation This type of action includes aspects which, while essential, are slightly less important than the ones identified above. They can be implemented in the short-term because they are inserted in processes that will take place in the near future, ²⁷ or because they involve processes or tasks which can be implemented relatively quickly. ²⁸
Priority 3	Important non-urgent aspects This type of action includes elements which, while still important, are not deemed to be essential or urgent because the creation of a results-based monitoring system (the central objective of the Improvement Plan) does not directly depend upon them.

It is important to stress that within each type of action and priority level, actions have been ordered in accordance with their relative importance and urgency. So, for example, action 2.1 is relatively more important and urgent than 2.5.

²⁷ Such as, for example, the process of designing the next country programme.

²⁸ Such as, for example, creating a matrix of risks and assumptions or preparing evaluation and monitoring questionnaires to measure the increase in capacities.

B) ACTIONS

Actions with level 1 priority

(Critical and urgent aspects for immediate implementation)

Action 1.1	Proceed on an immediate and urgent basis to request the appointment of a full-time, fixed contract, Monitoring and Evaluation Officer (M&E) who will form part of the permanent structure of the country office.
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This action cannot be postponed and is extremely urgent.

At present, it is a corporate priority of UNFPA to put in place monitoring systems that enable evidence-based reporting – to UNFPA itself, to donors and to Government partners – using credible, verifiable measurements. This implies a need for Monitoring and Evaluation Frameworks and also practical, high-quality Monitoring and Evaluation Plans, and this in turn requires a person with the capacity, mandate and time necessary to manage and monitor them. Without a full-time person, there is a risk that responsibilities and leadership with regard to results-based monitoring become diluted.

This action is an essential condition for the viability of many other actions. Actions such as the implementation and operation of an information system associated with the monitoring and evaluation framework, the creation of an Evaluation Plan, or the establishment of a joint review space with the Government are scarcely feasible in practice if there is nobody with the time, authority and responsibility needed to drive and follow up their effective implementation.

It is highly advisable that this position be incorporated into the permanent, fixed structure of the country office, as this would be in line with the strategic importance attached to results-based monitoring by UNFPA itself: the Strategic Plan 2008-2011 considers that the central strategy of UNFPA is results-based management. And results-based monitoring is considered to be one of its key elements.²⁹

However, the appointment of a full-time M&E Officer depends on an approval cycle which is beyond the control of the office, as the appointment request must be approved first by the regional office and then by headquarters³⁰. As a result, if the appointment of a full-time officer were to be rejected, the country office would need to take alternative actions. Three of these are recommended below:

- a) Proceed to the direct appointment of a specialist in M&E under a service contract.

Although this person would not form part of the fixed staffing structure of the country office, he or she should be employed on a full-time contract and take on the functions and responsibilities of an M&E Officer.

- b) Study the possibility of requesting the appointment of an M&E Officer shared between two COs (for example, Bolivia and Peru). This option would have to be analysed with other COs who find themselves in the same situation, and discussed with LACRO.

If none of the above options proved feasible:

- c) Redefine the job description of the Focal Point in M&E in order to:

- Free up the time needed to enable the Focal Point to take on and perform results-based monitoring tasks that go beyond support tasks for conformance monitoring.

²⁹ See paragraphs 86 and 118 of the UNFPA Strategic Plan.

³⁰ At headquarters it must be approved by the Human Resources Department, the Finance Department, and reviewed by the Office of the Executive Director of the UNFPA.

Releasing the time needed could involve direct appointment by the country office of an additional programme assistant to perform a large part of the functions in support of the monitoring of inputs and activities currently performed by the Focal Point in order to free up time to allow the Focal Point to effectively focus on results-based monitoring tasks. The Focal Point must have the time required to monitor the monitoring and evaluation framework, lead the process of creating – and later monitoring – the information system, and take responsibility for relations with the UDAPE, the VIPFE, the Ministry of Planning and the implementing partners with regard to results-based monitoring issues (for example, monitoring and evaluation framework reviews).

- Formalise the Focal Point’s mandate as the person with technical responsibility for the area of results-based monitoring.

The terms of reference of the Focal Point’s job description should explicitly incorporate the Focal Point’s mandate and competencies with regard to results-based monitoring.

- The position of the Focal Point in the organisational structure of the country office should be modified so that it answers directly to senior management (Representative or Assistant Representative). In any event, the rank and functional authority of the Focal Point must never be lower than that of a Programme Officer.

Action 1.2	Start the process of creating, designing and providing a budget for results-based monitoring linked to the Office’s management budget.
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The resources required to make results-based monitoring effective, given its strategic importance and the fact that it is an aggregate activity,³¹ means that it should not be dependent upon budgets linked to programme actions: i.e. to the budgets of the AWP. In contrast with compliance monitoring, the resources for results-based monitoring must be linked directly to the country office management budget.

The establishment of a complete annual budget for results-based monitoring implies a medium-term process. In this respect, the purpose of Action 1.2 is to initiate this process as quickly as possible, given that the effective operation of a results-based monitoring system in the near future is largely dependent upon it.

The most important budget item is the cost of the M&E Officer and, as set out in Action 1.1, the most urgent requirement is the immediate provision of this item. This having been said, the budget should also cover, as a minimum: the costs of the information system and data collection mechanisms; the activities associated with institutional relations; field visits to confirm the quality of outputs and outcomes; the costs of training on results-based monitoring; and the costs of participating in results-based monitoring networks.

The table below sums up the main entries that should be included in the budget. The order in which the entries are presented reflects the relative importance of these with respect to ensuring that the results-based monitoring system is operational as soon as possible. In this respect, the appointment of a M&E Officer, starting the process of creating an information system, and establishing data collection mechanisms are extremely important items if the results-based monitoring is to be operational at the earliest possible date.

³¹ Results-based monitoring is an aggregate activity because it is performed at the level of the country programme and is not associated with any specific Work Plan but rather with the outputs and outcomes to which these plans contribute.

Table 6: Main budget items for results-based monitoring

Results-based monitoring budget	
Entries or items	Brief description
Human Resources	Salary of Programme Officer assigned to monitoring and evaluation.
Information System	Costs of design, start-up, operation and maintenance of M&EF information system.
Data collection mechanisms	Costs associated with configuring baselines and end-lines.
Management of M&EF	Costs associated with M&EF review activities (meetings and workshops with UDAPE, VIPFE, Ministry of Planning and partners).
Assurance visits	Costs associated with internal results-based monitoring: i.e. field visits conducted by the M&E Officer or technical staff with the aim of checking the value of indicators, the quality of outputs or outcomes, etc.
Training	Costs of training staff in approaches, techniques and tools of results-based monitoring.
Networks	Costs associated with the country office participation in M&E networks at regional, national and international level

Action 1.3	Formally establish mandate and attribute responsibilities for results-based monitoring
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Regardless of which alternative³² is adopted at Action 1.1, the country office should immediately proceed to the establishment of the results-based monitoring function. In order to do this, two actions should be taken:

a) Include the position of a person with *responsibility for M&E*³³ in the organisational structure of the country office.

The position of *person with responsibility for M&E* should be included in the official organisation chart of the country office so that it answers directly to senior management. The results-based monitoring competencies of the person with responsibility for M&E mean that he or she should report to the Representative or Assistant Representative and, in any event, his or her position in the organisation chart should never be lower than that of Programme Officer.

In the event it is not possible to appoint an M&E Officer,³⁴ the Focal Point should report and answer directly to the Representative or Assistant Representative once the job description has been redefined (see Action 1.1). The Focal Point must be assured of the support of senior management: i.e. it must be clear that he or she has an explicit mandate from management. The Focal Point should in no event hold the position of programme assistant in the organisational structure, as this would make it difficult for the post holder to perform supervision tasks, request information, etc. associated with the position's results-based monitoring function.

b) Adapt the staff job descriptions so that they incorporate functions and responsibilities in the area of results-based monitoring.

³² Appointment of an M&E Officer; direct appointment of a M&E specialist under a service contract; or appointment of an M&E Officer shared between two country offices.

³³ The term "responsibility for M&E" is used to designate, in a generic sense, any of the options that arise from Action 1.1 (appointment of an M&E Officer, direct appointment of a specialist, appointment of a shared M&E Officer, or maintaining a Focal Point with a revised job description).

³⁴ Which would correspond to option c) described above at Action 1.1.

The monitoring and evaluation framework contained in the Monitoring and Evaluation Plan (MEP) establishes that responsibility for monitoring outputs and their indicators lies with the Programme Officers responsible for each of the three focal areas³⁵ In order to perform this monitoring, these programme component managers need substantive support from technical staff. However, these tasks and the responsibilities they entail are not yet covered in the terms of reference of staff job descriptions, and this is a significant obstacle to putting results-based monitoring onto a formal footing and making it operational within the country office.

In fact, Box E-1 of the Monitoring and Evaluation Plan “The role of different country stakeholders in decision-making and using monitoring and evaluation tools” contains two columns specifying the attribution of responsibilities with regard to the country office: the column “Programme component manager” and the column “UNFPA (National Office)”. One of the objectives of Action 1.3 is that these responsibilities should not be limited to merely listing them in the MEP and should be implemented in an effective manner, something that is not yet the case.

There is therefore a need to adapt job descriptions of country office staff to incorporate all the functions and tasks related to results-based monitoring, such as for example: task and responsibilities relating to information collection, assurance visits, annual reviews by components of the value of indicators (targets or achievements) of the monitoring and evaluation framework, and information system management tasks, once this has been designed.

Actions with level 2 priority

(Key aspects for short-term implementation)

Action 2.1	To improve the quality of the next results framework and monitoring and evaluation framework through the incorporation of quality control mechanisms in their design and formulation.
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The operability of the results and monitoring frameworks (results framework, monitoring and evaluation framework) depends on a range of factors, including the quality of the frameworks themselves, the existence of an information system associated with output and outcome indicators, and the existence of incentives to encourage their use. Action 2.1 is related to the first of these factors: the quality of the results framework and the monitoring and evaluation framework.

With the aim of improving the quality of the results framework and the monitoring and evaluation framework of the next country programme, the country office should:

- 1) Ensure that, during the design of the results framework and the monitoring and evaluation framework, quality control tools and mechanisms are used from the outset: i.e. that they should be applied at the moment when outcomes, outputs and indicators are identified. For this purpose, the country office has the following resources:
 - Use parts 2 and 3 of this volume which constitute a first level of support in the design and formulation of indicators. The *brief guide for formulating indicators within the Monitoring and Evaluation Framework* contained in part 3 offers various considerations to ensure indicators are appropriate and operational. Likewise, the *Country Programme Action Plan indicators quality assessment tool* presented in part 2, allows additional assessment of the quality of the indicators in the monitoring and evaluation framework and results framework.

³⁵ The revised monitoring and evaluation framework also includes other partners who are listed as “responsible” for some of the indicators.

- Request technical support from the regional office or headquarters. This support may consist of the provision of methodological tools for results-based management or in the provision of feedback (technical advice) once the results framework and monitoring and evaluation framework have been elaborated.
- Appoint national consultants specialized in the design of monitoring and evaluation systems to advise country office staff during the process of elaborating the results framework and the monitoring and evaluation framework.

2) Ensure that the process of designing and formulating outcomes, outputs and indicators for the monitoring and evaluation framework is inclusive, that is to say:

- It should include the participation of all the technical staff of the country office, who should provide inputs, above all, for the formulation of outputs and their indicators.
- It should incorporate the inputs of government partners,³⁶ above all for the formulation of outcomes and their indicators, and of implementation partners, particularly with regard to the formulation of outputs and their indicators.

3) Check that the sub-output indicators in the annual work plans are linked to output indicators in the monitoring and evaluation framework: i.e. to check that they correspond to sub-indicators (lower levels) of output indicators.

Action 2.2	Start the process of designing an information management system associated with the monitoring and evaluation framework indicators.
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This action is particularly important as, without an information system, the monitoring and evaluation framework will be neither operational nor functional. Given that the main objective of the information system is to obtain data regarding the values of the indicators included in the monitoring and evaluation framework, it must be possible to incorporate the information collected by the system directly to the monitoring and evaluation framework.

The reason why this action is considered priority 2 (to be implemented in the short-term) and not priority 1 (immediate implementation) is because it can only be carried out if other actions have already been taken:

- Prior to the design of the information system the minimum conditions that serve as the basis of the establishment of a results-based monitoring system must have been created: i.e. Actions 1.1, 1.2 and 1.3 must have been taken; and
- The design of the information system is directly linked to the design of the monitoring and evaluation framework, and this should therefore have been previously elaborated.

The initial process of designing the information system should, as a minimum, include the following steps³⁷

- 1) Define the base variables of the information system: type of information to collect – determined by unit of measurement of each of the indicators; who should collect it; how often; the data sources and the collection methods.
- 2) Establish a system for recording and managing indicators.

³⁶ Sector partners (Ministries, the INE etc.) and the VIPFE.

³⁷ Part 1 includes considerations with regard to aspects of the information system (design and structure, data collection, and information flows) which could be used as a reference in the design process.

The results framework and monitoring and evaluation framework summarise what the expected aggregate objectives are and how their achievement is to be measured: they are not information systems. They are one of the tools used in results-based monitoring systems, but not the only one. Both frameworks include information about indicators, but do not cover all the aspects and facets of the indicators.

With respect to the information system, it would be necessary to create a recording system containing folders of indicators by output or outcome, and a file for each indicator. Each file could include:

- A first part specifying all the relevant aspects associated with the indicator: its complete formulation, the unit of measurement, the unit of observation, the frequency of data collection, the person responsible for collecting and reporting data, the means of verification or data sources, the forecast target and the users of the indicator.
- A second part recording the values of the indicator over time (baseline, intermediate values and end-line).

This system for recording indicators would be an integral part of the information system and would naturally be linked to the results framework and monitoring and evaluation framework. In fact, the information system would provide data in the form and with the content defined in the indicator files.

3) Perform a preliminary study of the possible computer or software platforms on which to base the information system.

It is important to note that the information system could be operational within the short term, at least for output indicators, without the need for a computerised platform. Once the basic variables have been defined and the indicator recording system established (points 1 and 2 above) data can be collected and output indicator data tabulated using MS Excel tables or an MS Access database.

Action 2.3	Introduce capacity measurement tools (evaluation and monitoring questionnaires) in the three focal areas.
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The absence of a culture of measuring outcomes and outputs in the country office not only affects the aggregate level (results framework or monitoring and evaluation framework) but is also seen at the operational level.

Capacity development and technical training for target groups and intermediary beneficiaries are a constant in most of the country office annual work plans, as institutional, community and individual strengthening is a recurring element in the expected outputs in the country programmes results framework. However, and despite the major specific impact of training, there is no attempt to check or measure whether those who have received training perform better after attending training courses or capacity development programmes.

Reversing this situation does not require excessive resources and could be resolved in the short-term through the systematic use of assessment questionnaires and *ex-post* monitoring. The complete sequence of questionnaires to measure the impact of training would include:

- Questionnaires prior to the delivery of training courses to collect information about participants' initial situation;
- Assessment questionnaires for training events, completed immediately after course attendance; and
- Follow-up questionnaires, completed several months after the training courses or capacity development programmes with the aim of collecting information about the application of knowledge acquired, improvements in performance, etc.

Given the significant number of training events financed with the country office resources during a country programme, measuring the impact of training could be performed using samples of the target population instead of using sequences of questionnaires for all the training programmes of each focal area.

The data provided by the monitoring questionnaires could eventually constitute inputs for the values of the monitoring and evaluation framework indicators, although this would not necessarily be the most immediate purpose. Its most immediate usefulness is in providing guidance to the technical staff and country office management regarding the effectiveness of the transfer of capacities and, in addition, to offer preliminary evidence about what works and what doesn't with an aim to better understanding the chain of effects that generates the desired outputs.

Action 2.4	Elaborate a matrix to monitor risk and assumptions.
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This matrix would give formal expression to the work being performed with regard to context management and monitoring of key external variables that affect achievement of the outputs and outcomes of the CPAP. The matrix should then be used as a basis for recording and documenting the monitoring process already performed by the country office. Both risks and assumptions affect the degree of achievement of outputs and outcomes, and documenting the process makes it easier to analyse achievements and thus improve the quality of results-based monitoring.

The country office management should design the most appropriate matrix for the management of risks and assumptions. However, it is advisable:

- For the matrix to contain two parts, one for the assumptions and the other for the risks, given the different nature of these variables.

Assumptions are external factors that lie outside the framework of actions of the country programme and are beyond the control of the country office, and are necessary if the outputs or outcomes are to be achieved; they are formulated as positive statements and are often related to elements or actions to be performed by other actors such as the Government, donors or other UN System agencies. Risks are also external factors that lie outside the framework of actions of the country programme and are beyond the control of the country office; they are formulated as negative statements and correspond to potential problems which, should they arise, would constitute important obstacles towards the achievement of expected outputs and outcomes.

- That the matrix should include, as a minimum, the following variables or columns:
 - A brief description of the risk or assumption.
 - A brief explanation of how these could affect achievement of the outputs and outcomes of the monitoring and evaluation framework.
 - The level of risk associated (high, medium, low) in accordance with its potential consequences.
 - The estimated probability of the assumption occurring or of the risk materialising (as an estimated percentage).
 - The actions that the country office should perform in order to mitigate the impact of the assumption not occurring or of the risks materialising.
 - Record of the status of the risks or assumptions at given intervals (quarterly, twice-yearly, etc. as deemed appropriate).

Action 2.5	Develop an Evaluation Plan.
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The development of an Evaluation Plan is the first step towards integrating the role of evaluations in the country office monitoring and evaluation system (practically non-existent at present). The Evaluation Plan should be used so that:

- Evaluations are selected and planned so as to meet the information and decision-making needs of the country office. In this respect, the Evaluation Plan makes it possible to incorporate the outcomes of evaluations into management and decision-making processes³⁸ in a managed and structured fashion.
- The outcomes of evaluations are used in a coordinated fashion to validate, understand and explain the values of the monitoring and evaluation framework indicators, the quality of outputs and outcomes, and to better understand the processes that lead to the achievement or non-achievement of outcomes and outputs.

It is important that the country office provides inputs to the terms of reference of all evaluations that relate to the work of the country office and are led by the regional office or by donors.

Ideally, the Plan should cover a five-year period, coinciding with the timeframe of the country programme, and it should specify which evaluations are to be performed annually. The country office should design the most appropriate format for the Evaluation Plan. However, the minimum elements and variables that should be included in the Plan are:

- Specify the title of the evaluation and its purpose: evaluation of project or donor, of output, of outcome, of component or focal area, of country programme, etc.
- Specify the type of evaluation: prospective or retrospective (intermediate, final, follow-up); external, internal or mixed (internal but with external support); summative or formative, etc.
- Determine the use to which the outcomes of the evaluation are to be put: design of new initiatives, review of the intervention strategy, final evaluation of achievements at the level of outputs or outcomes, input for the CPAP review, reporting to donors, etc.
- Establish time periods: start date and completion date of evaluation.

Actions with level 3 priority
(Important non-urgent aspects)

Action 3.1	Promote the effective establishment of a space for joint review of the CPAP with the Government.
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The joint review of the CPAP by the Government and the UNFPA country office should be led by the National Coordinating Body which, in accordance with the provisions of paragraph 92 of the CPAP, is the Ministry of Planning through the Department for Public Investment and External Financing (VIPFE), the body responsible for coordinating UNFPA assistance in the country. However, to date the VIPFE has not requested a joint review. This has primarily been a consequence of the lack of human resources, installed technical capacity and resources for monitoring within the institution.

As a result, many of the essential characteristics of the CPAP are missing – that it should be led by the Government – as the National Coordinating Body does not participate in monitoring the Plan.

In this context, it would be advisable for UNFPA to take the initiative, on a proactive basis, of setting up an annual portfolio review meeting with the VIPFE. This review, apart from financial issues (amounts committed and paid out), should also undertake joint analysis of the achievements, taking as its point of reference the monitoring and evaluation framework indicators. For this to take place effectively it is necessary for there to be somebody responsible for results-based monitoring in the CO with the necessary time and resources allocated for this purpose (actions 1.1 and 1.2), that the monitoring and evaluation framework should be of a high quality and have incorporated the inputs of the VIPFE (action 2.1) and that

³⁸ The making of both programmatic decisions (relating to specific interventions) and strategic decisions by the CO.

the information system should have achieved a minimal level of operation (action 2.2): i.e. that it should at least provide data on the values of output indicators.

Action 3.2	Promote the establishment and formalisation of an inter-agency technical monitoring and evaluation group in the Country.
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There are currently several United Nations agencies in the country who are working to establish and develop integrated or results-based monitoring systems. Given the fact that the UNFPA country office is currently at the initial stages of developing a results-based system, regular interaction with agencies such as UNICEF or UNDP would be extremely beneficial.

The country office is under no obligation to create a technical group, but there are two reasons why it is in a good position to promote one. Firstly, a results-based monitoring approach is recognised and supported by the country office management, and the proposal to establish a technical group would therefore be promoted by management. And secondly, the country office enjoys a good institutional position among UN System agencies, and this makes it likely that a proposal of this sort would be positively received.

It would be advisable if the Monitoring and Evaluation Technical Steering Committee of the UN agencies in Bolivia were to consist of Monitoring and Evaluation Officers from each of the agencies. It would also be advisable to hold working meetings at least twice yearly, to: a) exchange ideas about good practice and lessons learned with regard to implementation of the results-based monitoring and evaluation plans; b) share the design and results of evaluations; and c) share the results of impact studies undertaken by government organisations.

It is important to note that the establishment of this technical group is not related to the monitoring and evaluation sub-group of the inter-agency technical committee of the UNDAF established during the second UNDAF in the country, and which is not currently functioning. Action 3.2 does not affect reactivation of this group, which had a management rather than a technical profile, as it comprised assistant representatives rather than those responsible for monitoring and evaluation in COs.

At the same time, the technical group being proposed here would complement – rather than replace – the existing participation of the country office in the Regional Evaluation Network of the United Nations for Latin America and the Caribbean (EVALUN-LAC). At the same time as this country programme evaluation was conducted, there was an (incipient) reactivation³⁹ of the Network, whose purpose is to coordinate actions between the United Nations organizations in the region, to identify joint initiatives, share information and monitor the development of a work plan which, to date, has still to be defined. The focus of the Network, in principle, is on evaluation at the inter-agency level more than on results-based monitoring. In addition, the intensity of interaction which would require a technical group at the level of United Nations organizations in Bolivia means it would continue to represent significant added value even if all of them belonged to EVALUN-LAC.

C) THE FOLLOW-UP SHEET

The follow-up sheet presented below records the progress status of the Action Plan for Improving the Monitoring and Evaluation System. It is designed for use by the management of the country office and the agenda of monthly management meetings should include review of this sheet at least once a year.

The follow-up sheet includes all the actions for each of three types of priority and contains four columns:

³⁹ This group was established in 2008 after an inter-agency training event on evaluation but ceased to be operational until its recent reactivation in June 2011.

- Individual responsible: this column should include the name of the person responsible for leading and monitoring implementation of the action.
- Final completion date: this column should specify the forecast completion date for the action.
- Current status: each time a review of the status of the Plan is performed this column should specify the date of this review and a brief description of the level of progress towards implementation of the action.
- Notes on deviations: this should be completed when the degree of progress is not satisfactory or when the actions have not been completed after the final date.

The country office must identify those responsible for actions and their respective deadlines, taking into account that the maximum duration should not exceed five years. Priority 1 actions should be implemented before December 2011, and priority 2 actions before the finalization of the current country programme (December 2012) so that improvements can be incorporated into the next country programme.

Table 7: Follow-up sheet of the Action Plan for Improving the Monitoring and Evaluation System

Action	Description of action	Individual responsible	Final completion date	Current status	Remarks on deviations
Action 1.1	Proceed immediately and urgently to request the appointment of a full-time, fixed contract, Monitoring and Evaluation Officer (M&E).	<i>Name of person responsible for leading the action.</i>	<i>Final date by which the action should have been implemented.</i>	<i>Date of entry, and description of status on this date.</i>	<i>Fill in when the degree of progress is not satisfactory or when the actions overshoot the final date.</i>
Action 1.2	Start the process of creating and providing a budget for results-based monitoring linked to the management budget.				
Action 1.3	Formally establish mandate and attribute responsibilities for results-based monitoring.				
Action 2.1	To improve the quality of the next results framework and M&EF by incorporating quality control mechanisms in their design and formulation.				
Action 2.2	Start the process of designing an information management system associated with the M&EF indicators.				
Action 2.3	Introduce capacity measurement tools (evaluation and monitoring questionnaires) in the three focal areas.				
Action 2.4	Elaborate a matrix to monitor risk and assumptions.				
Action 2.5	Develop an evaluation plan.				
Action 3.1	Promote the effective establishment of a space for joint review of the CPAP with the Government.				
Action 3.2	Promote the establishment and formalisation of an inter-agency technical monitoring and evaluation steering committee in the country.				

