

## M&E STRATEGY PAPER

### BACKGROUND

A clear need exists for well-documented evaluations (process and impact) of ASRH programs, but the need is particularly significant in developing countries. Little conclusive evidence is available that identifies causal links between program intervention, changes in youth behavior and health outcomes. Evidence of program impact is mixed in literature reviews of HIV/AIDS programs, with evaluations suffering from “inadequacies in study design, analytic techniques, outcome indicators and reporting of statistics” (UNAIDS, 1997).

Commonly, programs lack a focused conceptual framework showing intersecting processes through which program strategies aim to achieve impact. Without this program theory, the choice of intermediate and impact indicators (the basis of evaluation) is haphazard (Shepard, 2001).

For the ASRH field, with little evidence of best practices, the current focus should be the testing of innovations, yet few projects include evaluation and those that do are too new to allow assessment of quantitative outcomes (Senderowitz, 1994). Scaling-up youth programs, widely acknowledged as important to reach youth in need, are still rare. Other research identifies two basic reasons evaluations have only demonstrated limited results: many have been short term and therefore unable to show results, and most programs that have been evaluated apply a limited set of strategies that are insufficient to change behavior (Adamchak, et al, 2000).

In this regard, evaluation of AYA, its design, approach, strategies and impact is critical to

- ◆ build evidence to support the relationship between program intervention, changes in youth behavior and health outcomes
- ◆ evaluate and document the innovation of partnerships and the “alliance” model
- ◆ identify components of successful scaled up interventions
- ◆ better understand, through process evaluations, why programs do/do not achieve desired outcomes

### THE AYA MONITORING AND EVALUATION MANDATE

The **goal** of the African Youth Alliance (AYA) program is to contribute to the improved sexual and reproductive health<sup>1</sup> of young people aged 10-24 years old —with particular emphasis on those 10-19 years old. **Program objectives**, individually and collectively, contribute to achievement of the program goal. **Intermediate results** identify essential steps to achieving program objectives. **Indicators** will be used in the assessment of progress (monitoring) and successes (evaluation) at the goal and program objective level.

AYA’s underlying logic is based on —

- A. The well established relationship between condom use, age of first sex and number of sexual partners (i.e. behavioral outcomes) on health outcomes — HIV/AIDS, sexually transmitted infections, pregnancy (AGI, 2002, UNAIDS, 2000, 2002) and by deduction, abortions. AYA therefore seeks to improve adolescent sexual and reproductive health, through an **increase in condom use, abstinence, use of modern contraceptives, reductions in number of sexual partners, and first sex that is forced or coerced.**

---

<sup>1</sup> i.e., reduction in HIV, reduction in STIs, reduction in unwanted pregnancy, reduction in unsafe abortion, reduction in forced/coerced sex, increased condom use, increased age of first sex, increased contraceptive prevalence rate

B. The integration of six program areas, to achieve the objectives —

<b>PROGRAM AREA</b>	<b>PROGRAM OBJECTIVE</b>
Policy and Advocacy	An improved enabling and supportive environment
Behavior Change Communication	Increased knowledge, skills, norms and positive attitudes towards adoption of safer sexual practices
Youth Friendly Services	Increased use of quality youth-friendly adolescent sexual and reproductive health services
Livelihoods	Integration of adolescent sexual reproductive health into livelihood programs
Institutional Capacity Building	Strengthened implementing partner institutional capacity to sustain adolescent sexual and reproductive health outcomes
Coordination and Dissemination	Established and/or strengthened coordination and dissemination mechanisms for improved adolescent sexual and reproductive health partnerships

C. The use of participatory and sustainable program design and implementation approaches, in all program areas to achieve the following crosscutting objectives —

<b>CROSSCUTTING THEME</b>	<b>CROSSCUTTING OBJECTIVE</b>
Partnership	Internal and external partnerships established for effective and integrated program design and implementation
Youth Participation	Active participation of youth in program design and implementation maintained
Gender and Sexuality	AYA programs designed to reflect and address issues of gender equity and sexuality (including adolescent sexual and reproductive health rights)
Sustainability	Increased sustainability of adolescent sexual and reproductive health programs
Scaling Up	Increased number of youth, reached in a broader geographic area, by institutionalizing effective programs

AYA will aggressively seek these results (goals and program objectives) and practice results-oriented management of its initiatives and activities. Monitoring and evaluation will be an on-going process to regularly assess and report on progress towards achievement of these results.

Successes, best practices and lessons learned, as identified by this process, will be disseminated through various knowledge sharing mechanisms. AYA considers it key that processes of monitoring, evaluation, documentation and dissemination occur sequentially. Dissemination serves both a knowledge sharing and partnership strengthening function with various stakeholders: other donors, implementing partners, NGOs, host communities, host governments and the youth.<sup>2</sup>

<sup>2</sup> Refer to AYA's Dissemination Strategy Paper

## PROGRAM DESIGN

AYA notes that its ability to monitor and document the program in a high-quality and meaningful way is inextricably linked to the design and implementation of the program itself. In recognition of this, AYA has identified and defined *what* it aims to do (**goal and program objectives**)<sup>3</sup>, *how* it will do it (**strategies and activities**)<sup>4</sup> and will *show* the progress of these strategies and activities toward the goal and program objectives (**indicators**)<sup>5</sup>. Program design is evidence-based, drawing on documented successes and lessons learned and applying state-of-the-art approaches, to the extent possible, from adolescent sexual and reproductive health evaluations.

## MONITORING AND EVALUATION CHALLENGES

Partnerships, such as AYA, play an important role in the achievement of positive sexual and reproductive health outcomes, but also face unique challenges that have an effect on, and may even shape, the results-oriented programming approach:

- ◆ The involvement and management of multiple partners at different operating levels.
- ◆ Partnerships as an approach, are an innovation for which there is little documented evidence (evaluations, lessons learned, success stories, best practices) to show that they “work”: can achieve stated outcomes, outcomes can be sustained, can reduce cost of initiatives and are the choice for scaling up.
- ◆ Differences in implementing partners’ capacity to implement, monitor and evaluate ASRH activities — with the result that the intensity and quality of program implementation, monitoring and evaluation, will vary.
- ◆ Significant reliance on implementing partners to conduct monitoring and evaluation activities.
- ◆ Differences in partners’ geographic coverage — some implementing partners will be national organizations while others are community-based organizations — with the result that the scope of program implementation will vary significantly.
- ◆ Comparability issues when implementing and evaluating a program that is regional and spans countries with different characteristics.
- ◆ Attribution issues due to the high level of involvement of other donors in AYA countries who are implementing similar programs.
- ◆ Varying degrees of political commitment of host countries, whose participation is critical to implementation as well as monitoring and evaluation.

---

<sup>3</sup> Refer to AYA Results Framework

<sup>4</sup> Refer to AYA Activities by Program Area

<sup>5</sup> Refer to AYA Indicator List

## MONITORING AND EVALUATION APPROACH

Characteristics of the AYA monitoring and evaluation process include:

### DESIGN

- ❖ Baseline and endline surveys, a mid-term assessment, annual school surveys, as well as qualitative and formative research to inform program design and to support and enrich population-based quantitative data.
- ❖ A dose response evaluation of AYA implementation and control sites (as part of the endline evaluation), based on variances in time, intensity, quality, and levels of integration and partnership attained, and their subsequent effect on the program goal and objectives.

### RESPONSIBILITY

Specific partner responsibility for monitoring and evaluation of respective program areas according to program objectives<sup>6</sup>.

### MONITORING

On-going monitoring to ensure that all activities in all sites are implemented as designed and according to joint workplans.

### DOCUMENTATION

Process evaluation and documentation of the partnership/alliance management process (i.e. the AYA partnership) to show how a multi-site, multi- approach program is coordinated to go to scale.

### RESEARCH

Operations research studies that will be determined based on maximizing opportunities in which AYA is best suited to contribute to the body of ASRH knowledge. Primarily, AYA is not an operations research project and therefore, to the extent possible, will leverage external resources to achieve monitoring and evaluation objectives (through external partnerships and technical assistance).

### STRUCTURE

- ❖ Technical advisory committees (TACs) at the global and country level to advise AYA on development and implementation of a monitoring and evaluation plan.
- ❖ An internal advisory and technical group made up of partner agency monitoring and evaluation staff. As a group, joint provision of technical assistance is conducted during country visits.

### PROCESS

- ❖ Participatory, consultative and inclusive approaches that ensure the involvement of stakeholders at the different operating levels.
- ❖ On-going capacity building for AYA implementing partners and staff. As appropriate, maximize opportunities to use and/or strengthen existing monitoring and evaluation systems (e.g. research and data collection systems).

### DISSEMINATION

Dissemination of evaluation findings, identification of best practices and lessons learned and knowledge/information sharing using existing systems, with ASRH stakeholders. Promotion of the dissemination effort through various fora at global, national and district levels.



---

<sup>6</sup> Refer to M&E Roles and Responsibilities

## DISSEMINATION STRATEGY PAPER

### RATIONALE

A review of current adolescent sexual and reproductive health (ASRH) program literature reveals:

- ◆ The elements of successful youth programs have not been well documented or disseminated.
- ◆ A clear need exists for well-documented evaluations of ASRH programs.
- ◆ The means to share information that focuses on the health status of adolescents and successful programming experiences need to be intensified.
- ◆ It is necessary to support the monitoring, evaluation and operations research of programs (including the use of appropriate indicators) by putting this information to use, to inform the community and improve the quality and coverage of programs.
- ◆ Capacity and commitment can be built by
  - ❖ production of programming guidelines
  - ❖ increase in the dissemination and availability of successful program resource materials and provision of support for their adaptation
  - ❖ synthesis of information to give examples of best practices
  - ❖ identification of cost-effective and sustainable approaches for taking programming to scale
  - ❖ development of practical tools to assist program development and implementation
- ◆ Knowledge should be shared and information managed through the use of new technologies.

In acknowledgement of and in response to these comments, AYA will establish results-oriented management systems (monitoring, evaluation, documentation, reporting and dissemination). Clearly, these management systems are inherently linked, for it is the information and evidence generated by the monitoring and evaluation process that will ultimately be disseminated (i.e. these processes occur sequentially).

### DEFINITION

Dissemination is the widespread distribution of knowledge and information. Dissemination increases global understanding of what works, advances the adolescent sexual and reproductive health field and builds a body of knowledge, which strengthens the quality of ASRH programs. The goal of AYA's dissemination effort is to increase access to and utilization of, AYA program information and evidence. To achieve this will require strengthening the capacity of various processes and mechanisms by which AYA information and evidence are disseminated. In AYA, though dissemination is closely related to communication as both processes involve interaction with various target audiences (and often with the same objective), dissemination is distinct, as the source of knowledge being shared is strictly derived from the monitoring and evaluation process.

### LINKAGE TO OTHER PROGRAM AREAS

Dissemination of evidence is critical to move from "paper to policy and practice." It can support the advocacy effort by helping to shape strategic decisions of funding agencies and policymakers in favor of resource allocation and an enabling institutional framework, adequate to achieve health outcomes. On the demand side, dissemination can empower youth, youth-serving organizations and communities to advocate more effectively.

Furthermore, the use of dissemination cuts across all program areas as a feedback mechanism with partners and other ASRH stakeholders. This will build and strengthen the partnership with implementing partners, host governments, communities, and the youth, thereby increasing commitment to the program and its chances for sustainability.

## GUIDING PRINCIPLES

The dissemination process and products shall be guided by the following principles:

- ◆ Keep it up-to-date
- ◆ Keep it relevant
- ◆ Keep it appropriate
- ◆ Keep it manageable
- ◆ Ensure widespread distribution
- ◆ Build on what exists
- ◆ Encourage comments and feedback
- ◆ Minimize costs

## KEY PROGRAM ELEMENTS

Dissemination in AYA will occur at different operational levels: 1) Internal and External; and 2) District, National and Global.

Several elements of the process can be identified —

**PRODUCTS** to be disseminated will focus on those that

- ❖ give examples of best practices, lessons learned, etc. (e.g. operational research reports and findings)
- ❖ can be used as resource materials and practical tools to assist program management (e.g. frameworks: conceptual, results, component and country; strategy papers; reporting formats, presentations and inventory tables)
- ❖ identify cost-effective and sustainable approaches (e.g. strategy papers per program area, annual reports, operational research reports and findings, best practices reports, etc.)
- ❖ provide evidence in support of program initiatives and activities (e.g. baseline and annual survey reports, situational analyses, needs assessments, facility assessments, inventory tables, evaluation reports - PLA, mid-term assessment, etc.)

**AUDIENCES** to be targeted will include:

- ❖ Internal (e.g. Country Teams, In-Country Partners Councils, partner agency headquarters and donors)
- ❖ External audiences can be further sub-divided to include those that are involved with the program (e.g. country management team, implementing partners, technical advisory committees) and those that are stakeholders (e.g., other donors, the media, host governments, the youth, communities, etc)

**CHANNELS** to be used would be selected based on appropriateness for the intended audience and include the extranet, AYA website, ASRH listservs, AYA newsletter, AYA reports (annual report, meeting reports, quarterly reports), AYA resource centers, other electronic and print media, other ASRH publications (such as journals and reviews), national and international events (such as World AIDS Day, International AIDS Conference, APHA Conference, GHC Conference, UN Special Session on Children, AYA Annual Review Meeting).

**PRESENTATION AND FORMAT** of the product being disseminated is a determining factor of how well it is actually received by the audience. Possible modes include electronic, interactive, visual and print and will be applied based on what is most suitable for the type of product and audience. Formats enable the presentation of the evidence in a compelling way, such as pictures, tables, graphs and summaries.

**SYSTEMS** for dissemination fall into two broad categories:

- ❖ Those that already exist, providing opportunities for AYA to build upon and/or employ: reproductive health coordination group meetings, health and other relevant sessions in parliament, annual activities of professional associations, resource centers, universities and libraries, etc.
- ❖ Those that AYA will establish: documentation and dissemination resource centers; annual review meetings with government, implementing partners, communities and youth.

## IMPLEMENTATION GUIDELINES

To ensure the quality of products that AYA will disseminate and a consultative process, the following steps guide the dissemination process:

- 1) A product (or products) is selected for dissemination by the country team, AYA Headquarters or a partner agency. To ensure adequate preparation, all products are expected to be part of a dissemination plan, which also documents activities, channels, financial implications and other issues of note associated with the product. As and if necessary, country/government approval is to be obtained before a product (e.g. baseline survey results) can be selected for dissemination. Ideally, this should have been done during the design phase of the monitoring and evaluation activity that generated the product.
- 2) For national conferences and meetings, the first draft of the product is sent to the partners' M&E specialists in the field for technical review and the final product is shared with ICPC members.
- 3) For international conferences and meetings, the abstract and final product are to be sent to the M&E manager who will distribute it to all members of the M&E Staff Group for their technical review. In each case, the Group commits to completing the review within four days of receipt. The M&E manager will synthesize all comments and forward accordingly within the four-day time frame. AYA HQ, for record purposes, will maintain a copy of all products disseminated at this level.
- 4) To the extent possible, dissemination activities should reach those stakeholders involved in the activity which generated the dissemination product.

## EVALUATION

AYA will assess the success of its dissemination effort based on

- ◆ feedback received from the targeted audience
- ◆ dissemination systems and processes that are established and functional
- ◆ increased access to AYA information and evidence
- ◆ reported and documented utilization of AYA information and evidence by AYA implementing partners.

AYA will also consider a qualitative assessment to determine:

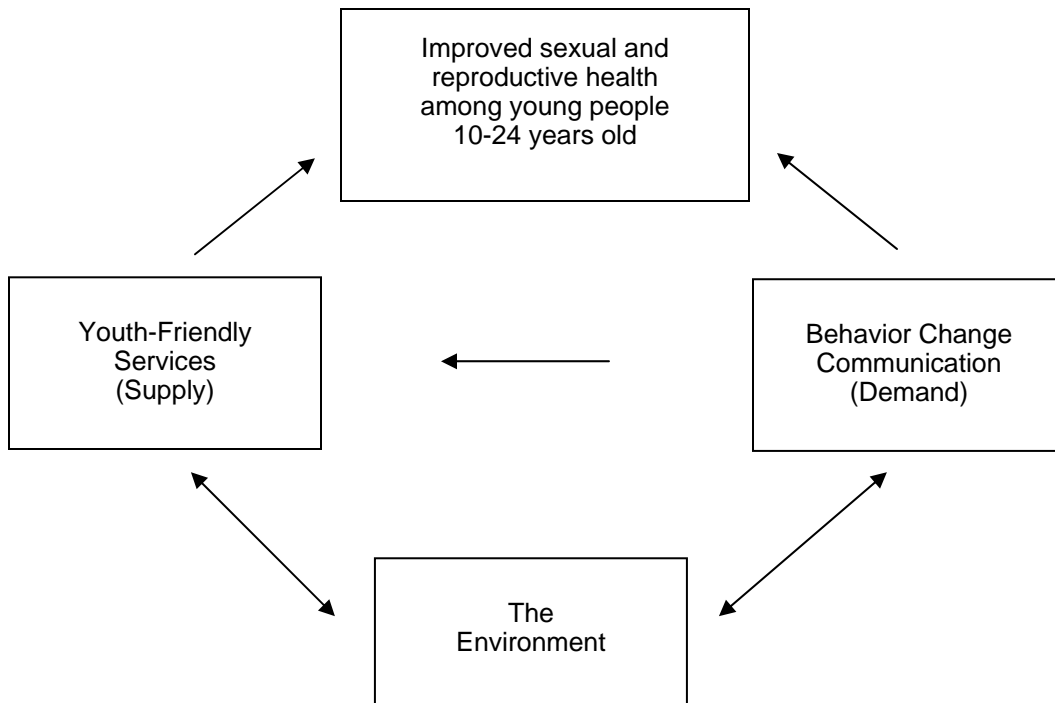
- ❖ AYA's contribution to building the body of knowledge
- ❖ AYA's ability to disseminate widely
- ❖ how dissemination has fostered commitment, partnership and the sustainability of the AYA program.



## CONCEPTUAL FRAMEWORK

Adolescence is a gateway to the promotion of health, providing an opportunity to prevent risky behavior and develop those skills, attitudes and relationships that are crucial to health. (WHO, UNICEF, UNFPA, 1997). Research indicates that programs which aim to promote the well being of young people should initiate activities based on health promotion, social change and behavior change theories.

AYA, as a program<sup>7</sup> that seeks to contribute to the improvement of sexual and reproductive health among young people aged 10 -24 years old, integrates these three basic concepts as follows:



The **ENVIRONMENT** (existence and implementation of positive laws and policies; supportive social and cultural systems; opinions of gatekeepers: parents, traditional leaders, religious leaders, media, etc.; the capacity of youth-serving non-governmental organizations; livelihood opportunities available to youth) significantly affects the ability of youth to change their behavior or reinforce positive behavior.

The environment should foster personal development and provide livelihood opportunities, encouraging young people to adopt healthy behavior, supporting the improvement of programs and policies that address adolescent sexual and reproductive health, and effectively reaching youth.<sup>2</sup>

**SEXUAL AND REPRODUCTIVE HEALTH SERVICES** need to be made youth friendly and readily accessible (either through static facilities or non-static outreach services) in order to effectively serve the needs of young people who have adopted safer sexual practices. It is critical that these services be provided at a scale able to satisfy the demand of all those in need of services.

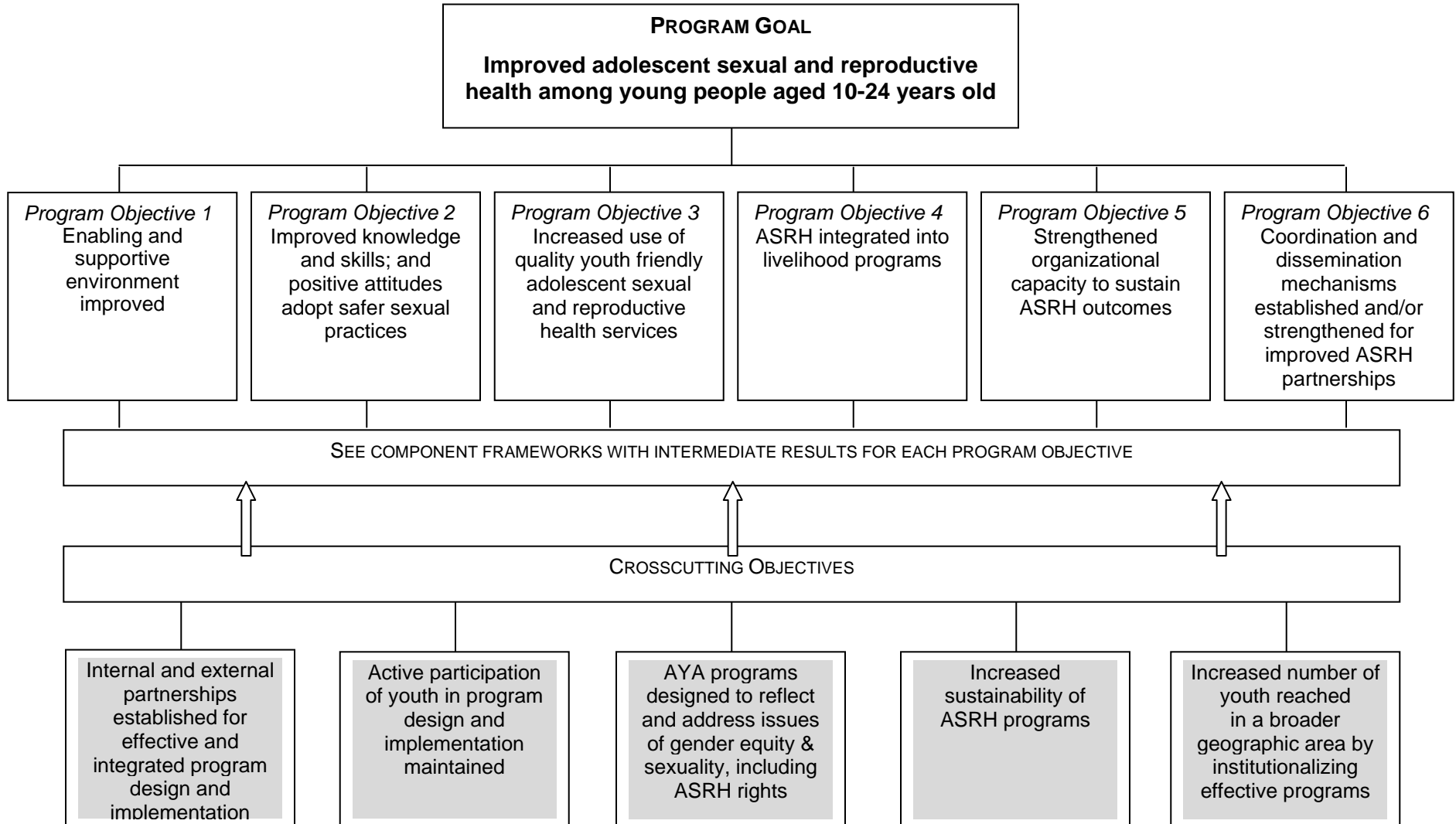
Opinions and attitudes of service providers, public and private funds allocated for the provision of services, and a supportive legal and institutional framework — all aspects of the environment — are critical to the provision of youth-friendly services.<sup>3</sup>

<sup>7</sup> Refer to AYA Program Profile (available at [www.ayaonline.org](http://www.ayaonline.org))

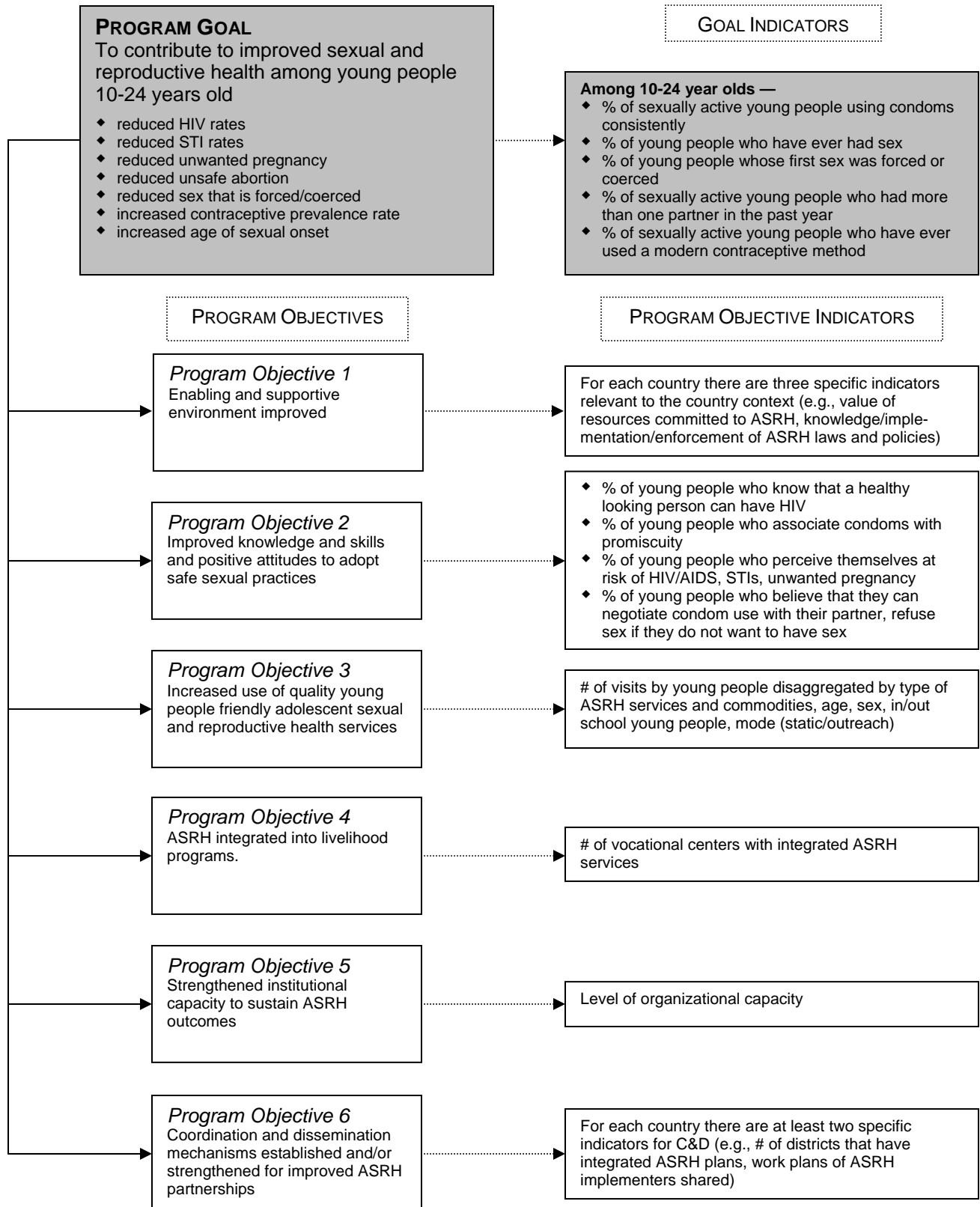
<sup>2</sup> Refer to AYA Strategy Paper on Advocacy and Policy (available at [www.ayaonline.org](http://www.ayaonline.org))



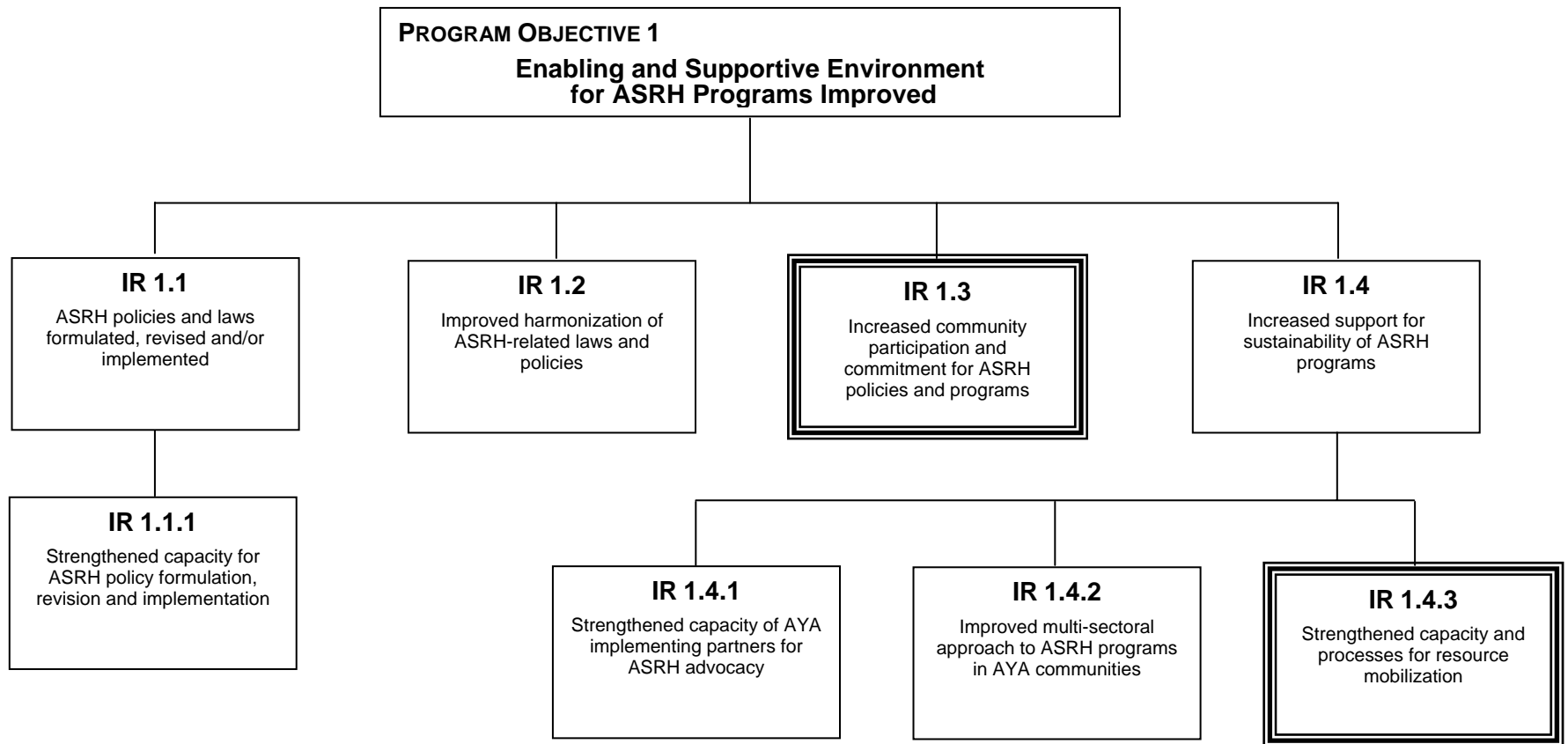
## RESULTS FRAMEWORK



## RESULTS FRAMEWORK INDICATORS

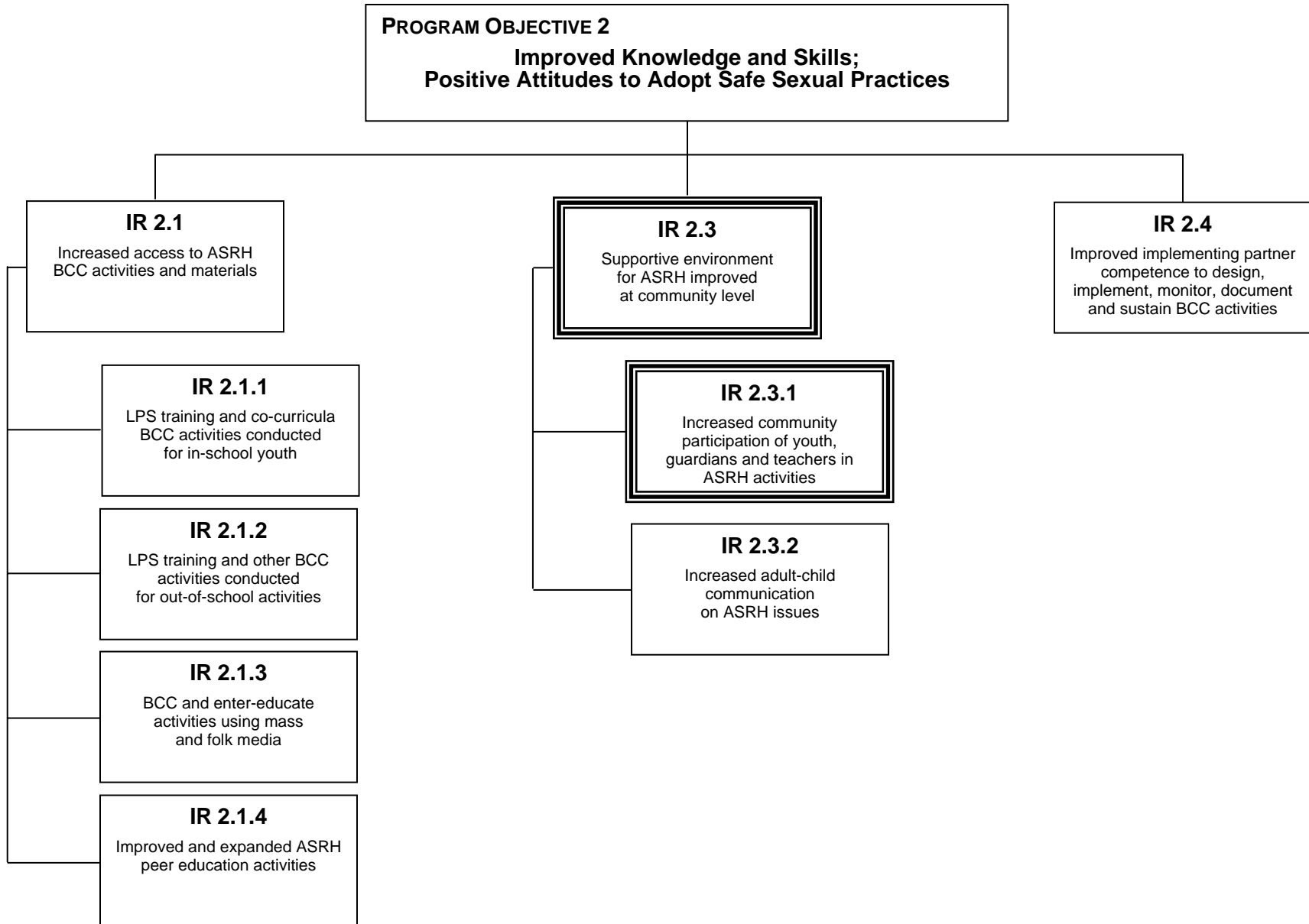


POLICY AND ADVOCACY  
COMPONENT FRAMEWORK

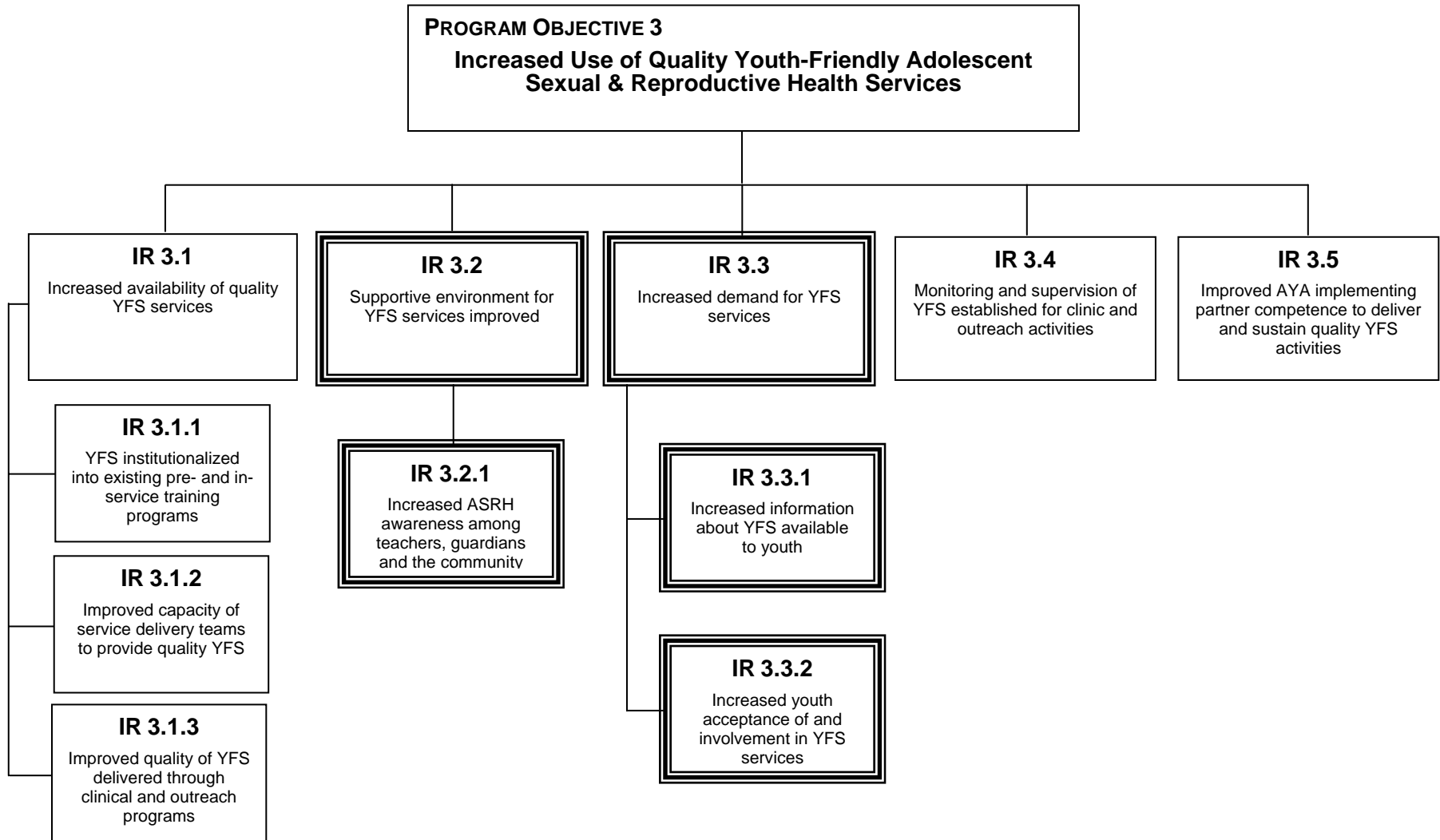


Enhanced boxes indicate results that are directly linked with results in another program area ( e.g., IR 1.3 is directly linked to IR 2.3).

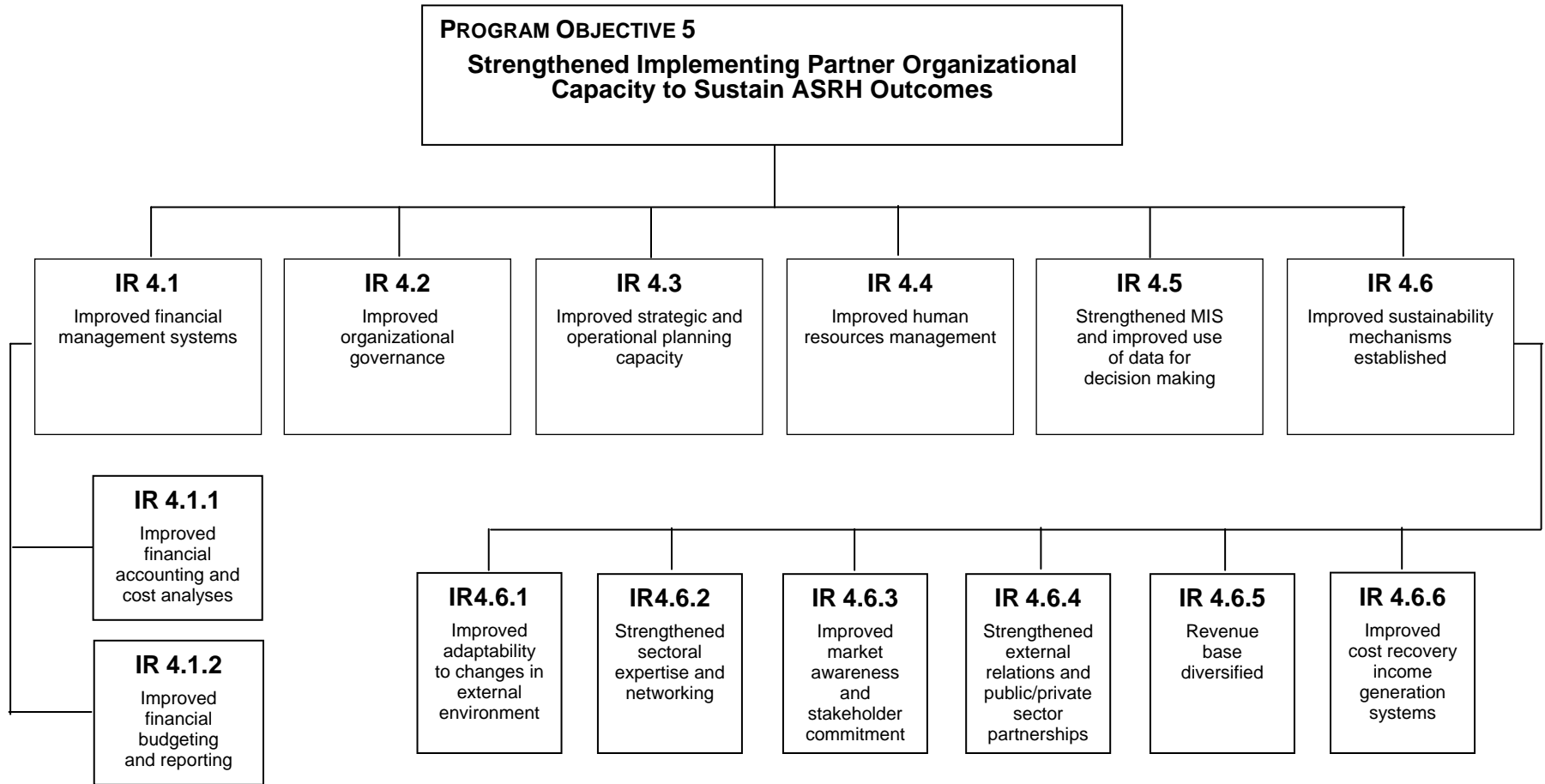
BEHAVIOR CHANGE COMMUNICATION  
COMPONENT FRAMEWORK



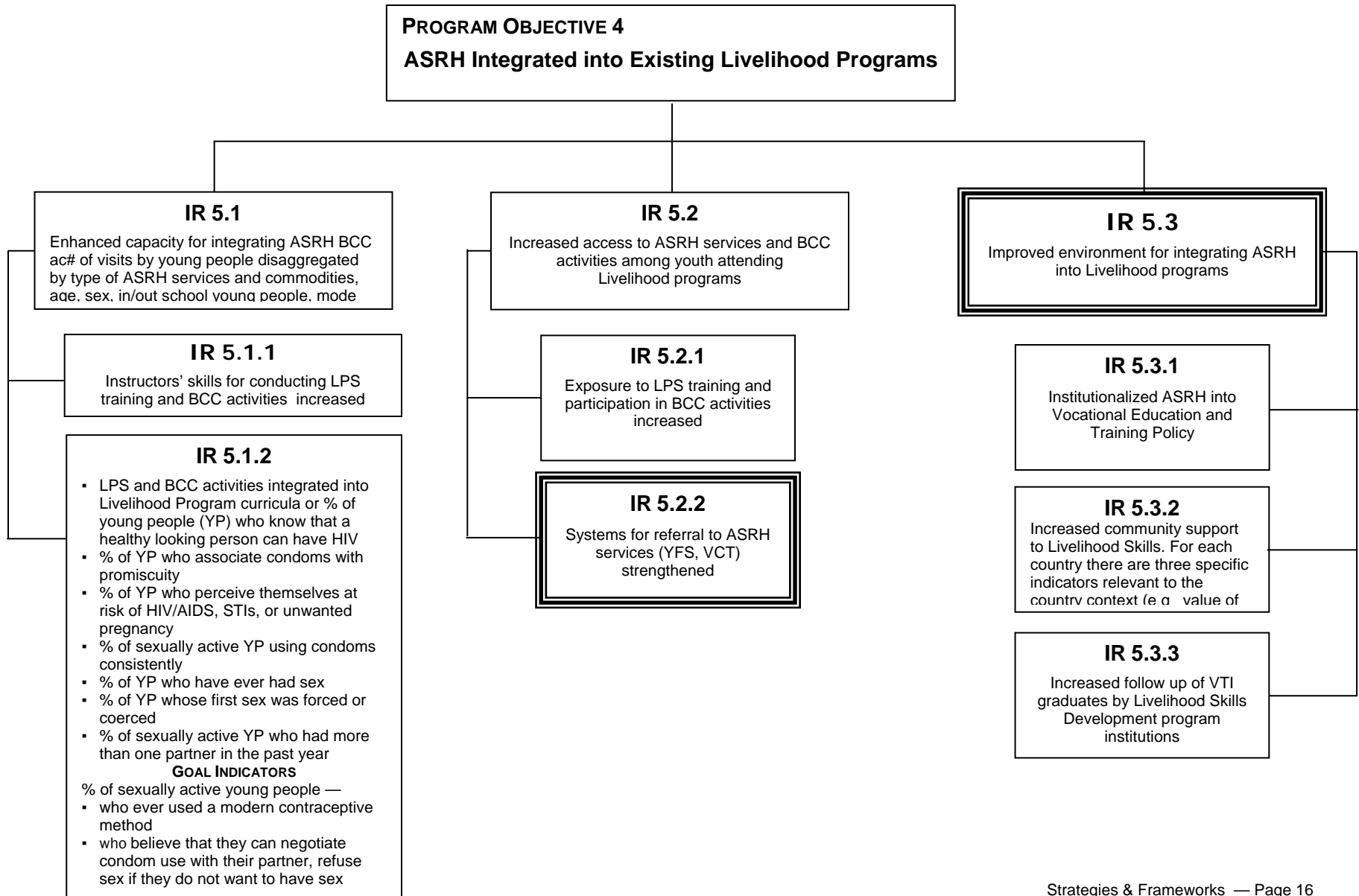
## YOUTH-FRIENDLY SERVICES COMPONENT FRAMEWORK



### INSTITUTIONAL CAPACITY BUILDING COMPONENT FRAMEWORK



LIVELIHOOD SKILLS  
COMPONENT FRAMEWORK



## COORDINATION & DISSEMINATION COMPONENT FRAMEWORK

