C7. Monitoring, Evaluation, Accountability, and Learning

Monitoring, Evaluation, Accountability, and Learning (MEAL) aims to comprehend and demonstrate the impact of humanitarian intervention, supports timely and evidence–based decision making, and allows humanitarian programmes to adjust to changing contexts. Humanitarian programmes need independent MEAL staff and processes in place to measure progress on programme indicators, present results to programme staff as well as to communities, and have flexibility to adapt policies and practices in response to feedback.

A MEAL approach in an acute emergency will look different than in a protracted crisis, but in all situations, monitoring, evaluation, and learning ultimately boil down to accountability. Accountability means that all service providers take account of, and are held accountable by, different stakeholders, primarily those affected by the exercise of such power. Characteristics of accountability should be highly visible in all aspects of WASH programming—as a mainstreamed component of the programme, OXSI embedded accountability in the project vision of increasing engagement and two–way communication. Monitoring is also highlighted throughout each infrastructure chapter. This chapter dives into a few more components of MEAL in the OXSI WASH programme: the development of a logical framework for the programme; a formal, trusted Community Feedback Mechanism; measuring perceptions; and learning and adapting in response to feedback.

7.1 Logical Framework Matrix

The logical framework matrix (logframe) is a management tool used to design, monitor, and evaluate interventions.

As much as possible, agencies should write the logframe with everyone involved in the project—greater inclusivity leads to better planning, understanding, and ownership of the project. One way to do this, as the OXSI MEAL team chose to do, is to conduct Logframe Development Workshops to involve key staff in the process of creating the logframe. This first required deep mutual understanding of the aims of the programme, unpacked from the Theory of Change (TOC), which was previously socialised and validated by key staff. The team then discussed how to measure progress against the TOC, and which aspects of the project would be standalone goals or activities and which need to be mainstreamed throughout the project (some components fell into both categories, such as gender, accountability, and community engagement). It was also important for the logframe to include some "open" indicators, such as those defined by ACE groups (see Section 4.1), designed to be updated at specific points in the programme to allow adaptations. After the workshops, the MEAL team circulated the draft logframe to all staff, as well as technical experts supporting the project for feedback. The OXSI logframe is unique in its participative design, its flexibility to adapt in response to feedback, and in measuring processes as well as outcomes.

The OXSI WASH programme has seven outcomes:

- Conflict–affected populations have access to and ownership and management over the provision of safe water in their communities
- Conflict–affected populations have access to and ownership and management over the provision of safe sanitation in their communities
- Conflict–affected community are aware of and promoting positive hygiene practices
- Increased and strengthened influencing across various platforms at the local and national levels to amplify key concerns from conflict–affected communities
- A strengthened culture of accountability and transparency exists in the delivery of WASH services to affected populations
- Clear and comprehensive Gender and Protection mainstreaming throughout the project implementation
- Emergency Planning implemented and Emergency Response ready to adapt and launch

(7A OXSI Logframe)

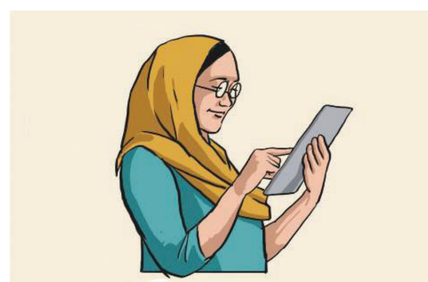
7.2 Community Feedback Mechanism

A Community Feedback Mechanism (CFM) is perhaps the most visible aspect of accountability in humanitarian responses.

Indicators of a good CFM include an accessible, trusted, and easy to use system to log feedback; an adequate response time; feedback on the outcome of the complaint ("closing the loop"); and programmatic changes in response to feedback, if necessary. During a humanitarian response, the responsibility of ensuring a CFM exists lies with Camp Coordination and Camp Management (CCCM) agencies, but every service provider needs to have systems in place to ensure two–way communication and accountability.

Step 1: Feedback Given

Not all systems for collecting and responding to feedback will apply to all contexts, so an assessment of communication channels should be conducted prior to setting up a CFM. Before the OXSI WASH programme started, Oxfam assessed the CFMs in place in the previous consortium, mostly complaint boxes and hotlines, and consulted with communities about the efficacy of the systems. With high illiteracy rates and low cell phone ownership in Sittwe camps, most people could not access complaint boxes and hotlines. Communities overwhelmingly preferred to give feedback face–to–face (F2F) with staff, evidenced by the success of desk–based F2F mechanisms implemented by Camp Management Agencies (CMAs). OXSI built the new accountability system around this feedback, implementing a mobile F2F system designed to complement existing CMA systems (see Section 7.3), wherein dedicated staff roam around the camps to collect feedback. The OXSI system also emphasises collecting feedback as part of routine activities, which allows groups to report feedback together during hygiene promotion sessions or individuals to report privately during household visits.



Step 2: Input Feedback in Device

Multiple options now exist to streamline data collection using Information Communication Technology (ICT), and support from specialised accountability and technology experts can make the difference in setting up a successful CFM, especially if introducing new technology.

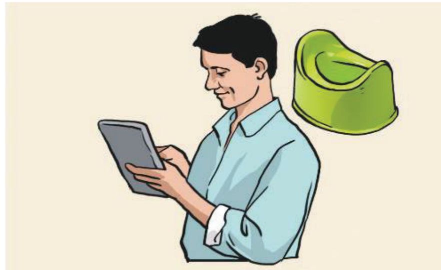
Tip

Although an accountability culture means that the entire team feels accountable, dedicated accountability positions, both staff and volunteer, have been recognised as having a positive impact on the culture and practice of accountability, especially when launching a new CFM.

One comprehensive system that easily ties together and documents all the steps of the feedback loop, from collecting feedback to closing the loop, can simplify the flow of feedback processing. OXSI set up the digital CFM in a platform called SurveyCTO, which staff access on tablets to collect feedback or on the computer to download data. The OXSI system not only collects complaints; it allows for case management.

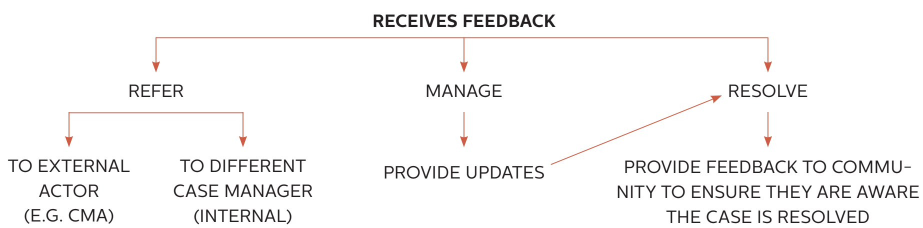
Step 4: Close the feedback loop

All of the OXSI staff received training for case management, and all case managers receive weekly reminders to handle pending cases. Generally, a case manager has a few options when receiving a case:



Step 3: Technical teams refer, manage, or resolve feedback

The person who initially collects the feedback records the case details and the system automatically sends the feedback to the proper department – construction, sanitation, community mobilisation, water quality, gender and protection, or MEAL. Case managers from each of these teams receive the feedback and include it in their action plan to resolve. Case managers ensure the feedback loop is closed before closing the case (see Section 7.5).



Step 5: Reporting and analytics

The OXSI accountability mechanism does not directly link to any external stakeholders, so referrals to external agencies must be handled by case managers for each individual case. The CMA and OXSI CFMs do not always "talk" to each other well, and timely referrals and follow up depend largely on the persistence of staff, which emphasises the need for well–trained staff.

The ICT experts worked together with the OXSI team to define categories of feedback. There are five categories, as listed below. Complaints get elevated into different categories based on the length of time the complaint has been unresolved.

Category	Explanation
WASH Service Request	A request for service that falls within the ordinary work of the consortium.
Cat–1 : Positive feedback	Feedback which is positive about the programme activities or services received.
Cat–2 : Request for other assistance	A request for services that are not provided by the consortium but may be provided by other organisations.
Cat–3 : Minor dissatisfaction with activities	A complaint about the activities, services or infrastructure that the consortium is providing that has been unresolved for over two weeks.
Cat–4 : Major issue with activities	A complaint about the activities, services or infrastructure that the consortium is providing that needs urgent attention or that has been unresolved for a month or more.

A success factor for the OXSI CFM is its link to operation and maintenance, making it a "living tool" that is frequently utilised by the whole team. For example, service requests for construction repairs are integrated into the construction team's monthly work plan along with the results of monthly infrastructure functionality checks. Service requests will eventually phase out the need for frequent monitoring of infrastructure to create construction workplans. In this way, a functioning and well–used CFM indicates a community's increased ownership over WASH infrastructure, and it helps WASH agencies to respond to community needs more efficiently.

Documentation as part of the accountability process is vital to measure performance of the accountability systems themselves. In OXSI's system, the CFM data links with PowerBi, a data visualisation service, which produces reports showing the number of cases received; basic information on the complainant; the type of feedback; the number of cases managed, referred, and closed; and the length of time to close a case. This set up ensures that almost the full cycle of the CFM (except for closing the loop) is automatically documented. The system also shows who manages and closes each case, allowing for greater accountability.

Step 6: Programme change

Tip

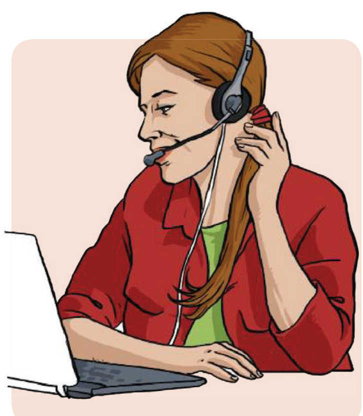
The Community Feedback Mechanism is a key way to provide feedback to service providers but should not be the only way. WASH agencies can collect further feedback through routine Post–Distribution Monitoring assessments, satisfaction surveys, Focus Group Discussions on specific projects and activities, etc.

7.3 Safeguarding, Whistleblowing, and Sensitive Feedback

Sometimes, a separate system is needed to collect sensitive information.

OXSI designed the new F2F CFM to work in collaboration with CFMs already established by Camp Management Agencies (CMAs), which functioned well. OXSI was able to implement an almost entirely F2F CFM because camp residents have the option to report sensitive issues, such as complaints of staff behaviour, to CMAs without having to face OXSI staff to do so. OXSI trained enumerators to help people who approach them with protection or gender–based violence feedback to report them to the appropriate agency. When collaborating with other agencies, it is vital to make sure that data sharing agreements are in place and that both agencies have solid data privacy policies to ensure privacy and protection for the complainant.

In addition, OXSI collects safeguarding issues and whistleblowing complaints through two hotlines – one for Oxfam and one for SI–managed by safeguarding focal points, not through the CFM. Specially trained staff positioned in Sittwe and in Yangon answer the hotline and refer cases to be investigated according to internal procedures, while providing specialised support to the survivor. Oxfam also offers a global online reporting mechanism, but it is only accessible in a few languages and for those with access to the internet.



Focus on equity – gender, protection, and inclusion

Although staff responsible for collecting feedback should be close to the community to ensure a high level of trust, they may face increased risks and protection concerns if collecting sensitive feedback. Measures must be taken to set up safe reporting mechanisms to decrease risks to staff. In Sittwe camps, this meant bypassing camp–based safeguarding focal points and linking cases to staff outside of the camps.

7.4 Accountability Awareness

The success of a new CFM depends largely on the training of staff and the awareness and trust of the system by the community, not only on the design of the system.

To create a culture of accountability, all staff and communities need to understand the CFM and other reporting mechanisms. Communities must understand that there are specific ways to “talk” to service providers in ways that are documented and acted upon. Staff focusing on protection and gender mainstreaming in particular need to be involved in the design and implementation of reporting mechanisms. The OXSI Gender and Protection Coordinator organises regular awareness sessions on safeguarding and whistleblowing for camp–based staff and volunteers, while the MEAL team conducts trainings for data collectors, case managers, and all staff to better understand the CFM and discuss ethics and consent. The MEAL team also manages accountability focal points, who roam around camps to collect feedback on tablets.

OXSI launched the CFM as a pilot in one camp prior to scaling up in all locations. The pilot allowed close supervision and quick troubleshooting of problems, as well as an introduction to the system in practice for the staff.

Focus on equity – gender, protection, and inclusion

Household visits to collect feedback through the CFM ensures that those who are not able to come to offices, such as the elderly or people with disabilities, are reached and heard.

OXSI engaged Internews as a partner for one year of the programme to strengthen accountability and communication. Among other tasks, Internews worked on the Accountability Awareness campaign in camps, focusing on two main components:

- Capacity building and guidance to camp–based staff on accountability so that they can deliver key messages accurately and effectively to communities.
- Facilitating sessions with the community and conducting awareness sessions door–to–door to explain accountability and the CFM and the ways of utilising it. Door–to–door visits ensured that those not regularly participating in OXSI sessions were also aware of the system.

To facilitate awareness raising in camps, Internews produced an animated video and IEC about accountability, the CFM, and OXSI’s services in Rohingya, Rakhine, and English. The extracted audio file can be sent to non–smart mobile phones, while the video is uploaded on tablets and smartphones and played at the end of most standard hygiene activities and events.

The concerted effort to spread awareness about the CFM and about the services provided by OXSI led to a spike in cases in the CFM. Throughout the programme, this pattern was seen with every increase of awareness raising sessions on accountability, suggesting that continued awareness sessions encourage communities to make use of the CFM.

Community members providing feedback to an OXSI MEAL staff, as demonstrated in a video created by Internews

7.5 Closing the Loop

Closing the feedback loop is often the most difficult part of a CFM for staff to remember and track. However, the mechanism cannot be effective without this component.

Transparency about how agencies resolve cases is integral to community trust, and accountability mechanisms only operate if there is trust. Feeding information back to communities about what they can expect when providing feedback, how its handled, and clear protocols on responsiveness allow community members to make informed choices on whether or not to report feedback again.

It is helpful to have a clear schedule in place for when and how to get back to communities about their feedback results. For example, OXSI case managers check their accounts for new cases on specific days twice a week, and try to resolve, give an update, or refer all active cases by a specific day each week.

The next day, the MEAL team downloads the updated database and shares the results of non–sensitive cases with accountability field staff, who go out the following day to follow up with those who gave feedback that has been resolved or updated. Some cases are resolved simply by providing feedback to communities without any practical action, such as when there is a blockage that prevents OXSI from repairing broken infrastructure. In this case, staff may feel discouraged closing the loop when the problem has not been solved, but it is vital for communities to understand why the problem persists so as not to lose trust in the agency and in the CFM.

Staff also encourage communities to continue filing complaints even if they know the issue cannot yet be solved, because agencies can use the complaints for advocacy with others to work on the complaint.

The Programme Management Unit (PMU), sometimes alongside a case manager, handles sensitive cases by directly contacting the person who filed the complaint. For all cases, there is a deadline to respond to communities within two weeks, even if the case has not been resolved.

OXSI works to improve accountability to communities through monthly meetings with camp leaders to provide project updates, answer questions, and hear concerns. This has shown to be particularly important in camps where blockages stalled work. Another way that OXSI practices accountability to communities internally is through “Hearing Sessions”, organised with all camp–based staff and the PMU once a month to give and collect feedback on programme challenges, successes, and updates.

Focus on equity – gender, protection, and inclusion

The collection and processing of beneficiaries’ personal data by humanitarian agencies can pose protection risks, especially if beneficiary data ends up in the wrong hands. Humanitarian agencies must have and follow data protection policies to ensure that only minimal and essential data is collected, stored safely, and accessed only by those who need it for planning or reporting purposes. When searching for a safe system for data collection, Oxfam conducted a feasibility assessment on digital protection, and found SurveyCTO to be one of the safest for collecting information. In addition, all data collectors and accountability staff received extensive training on data protection and digital protection rights.

7.6 Perception–based Assessments

A key aspect of accountability and learning in emergencies is listening to and acting upon the perceptions of affected communities. Without taking perceptions into account, there may be a large disconnect between how a humanitarian agency views its assistance and how affected people experience humanitarian aid.

In the past, Knowledge, Attitude, and Practices (KAP) surveys in the Sittwe restricted area consistently showed high levels of knowledge without evidence of corresponding behavioural changes. For the OXSI WASH programme, translating objectives on increasing community engagement, ownership, and satisfaction into indicators and specific follow–up actions required the development of several perception–based assessments to replace the KAP surveys. This shift to measuring satisfaction, participation, and overall impact of the programme on health (in addition to quantitative assessments such as infrastructure checks) also reflected the goal of the OXSI programme to place communities at the centre of decision–making. The perception–based assessments also sought to highlight how higher engagement and satisfaction in activities results in positive behavioural changes that affect health.

The MEAL team developed each assessment using the same platform as the CFM, validated it with technical teams, piloted it, created a sampling strategy, and then launched each assessment. Following the data collection phase, the MEAL team analysed each set of data and compiled it to be presented and discussed with the entire OXSI team during Learning Reviews. The MEAL team also had to conduct extra training for enumerators to teach them how to conduct perception–based surveys, with a focus on ethics, consent, and data quality. These surveys are briefly described below.

Satisfaction Survey

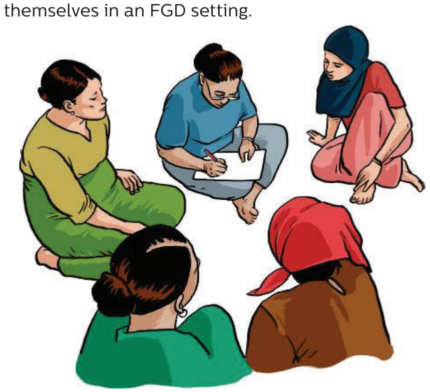
The satisfaction survey is a comprehensive survey that focuses on perceptions of key WASH activities as well as learning from these activities. Although it incorporates elements of previous KAP surveys, it goes beyond the traditional KAP survey to also include information on consultation, participation, and satisfaction. The survey asks people about their perceptions on frequency and quality of consultations; participation in handovers, repairs, and other WASH activities and how useful they are; important practices to prevent diarrhoea; solid waste management behaviours; handwashing practices; whether or not there are enough WASH facilities and if they are safe and accessible; access to information; satisfaction with infrastructure design; sanitary pad disposal practices; and more. It also serves as a means of measuring the effectiveness of the accountability mechanism, by measuring transparency, information sharing, and awareness of the CFM.

The survey is conducted every six months on tablets using SurveyCTO and analysed by downloading the data into Excel. (7B Satisfaction Survey)

The Satisfaction Survey collects peoples' perspectives on WASH activities and services.

Participation Survey

Many humanitarian agencies aim to have high participation in their programmes. Although most agencies report numbers of participants in activities and events, it is difficult to measure meaningful participation. The OXSI programme aims to increase community engagement and needed a way to measure beyond participation to peoples' perceptions on their involvement and decision–making in activities. The OXSI MEAL team developed the participation survey through consultations with communities, particularly women, to understand what meaningful participation means to them. The rungs of the participation ladder–consult, inform, demonstrate acceptance, negotiate, and take decisions–were decided together with communities. The format of the participation survey, consensus–based FGDs, was also preferred by women because they felt more comfortable expressing themselves in an FGD setting.



The Participation Survey is conducted through FGDs and requires consensus from all participants.

Every six months, the participation survey is conducted on paper both with OXSI staff and with communities through FGDs and compared to the baseline. For each activity, the group gives a rating from 1–4 on how much they were consulted, informed, demonstrated acceptance, negotiated, or took decisions in that activity. The group must reach consensus on each activity. Consensus ensures that one or two people do not dominate the FGD and speak on behalf of everyone else, something that happens frequently in FGDs unless carefully avoided. (7C Participation Survey)

Pharmacy Assessment

The overall goal of WASH programming is to positively impact health outcomes. Although OXSI receives health data from the health cluster operating clinics in the Sittwe restricted area, feedback from communities showed that most people seek help at clinics only for severe illness. In addition, there are not enough clinics to serve the entire population, and many people cannot afford to travel to a clinic. Therefore, people frequently buy medicine from small pharmacies in camps. OXSI implemented a simple assessment to ask pharmacy owners every six months which medicines they sell the most, focusing especially on medicines to treat diarrhoea. Because most pharmacy owners do not keep meticulous records over months, this is classified as a perception survey. Although many other factors could influence whether or not people buy medicines and which medicines they buy (eg. availability, lack of income, closure of pharmacies, etc.), this assessment provides a snapshot of common health ailments in camps, and if, over time, people buy more or less medicine for specific ailments that are of interest to WASH agencies.

(7D Pharmacy Assessment)

The Pharmacy Assessment is conducted to keep track of the types of medicine most commonly sold in camps.

7.7 Learning and Adapting

One of the key reasons for collecting regular feedback is to learn and adapt programming to better meet needs of the community.

The changes may include the addition of a new activity or item to distribute, a different way to conduct an ongoing activity or distribution, a new or different way to share information, and so on. Even minor adaptations are vital in demonstrating to communities that agencies listen and respond to requests and to changing needs. In a multi–year programme, needs and approaches will change, and teams will learn and adapt continuously—therefore, it is important for programmes to have tools in place to reflect on activities with staff and communities and to support these changes.

The design of the OXSI MEAL approach itself developed from a change in the context and from feedback in the previous consortium. As the emergency in Sittwe became prolonged and was widely recognised as a human rights crisis, OXSI shifted from top–down aid delivery to more community–led processes to transfer as much agency and decision–making as possible to communities to avoid further disempowerment and dependence on external organisations. The MEAL tools, described in this chapter, thus evolved to reflect this change by focusing less on delivery targets and more on regular consultations with communities to check if activities meet needs, to involve more people in the design and maintenance of infrastructure, and to work together to identify and solve problems.

One opportunity to consult both teams and communities is a routine Learning Review conducted to dialogue about all collected data and how to use it among those involved in the response. The data evaluated can include internal processes, approaches, and harmonisation between actors, as well as programmatic results such as infrastructure functionality, PDMs, satisfaction surveys, pharmacy assessments, and participation surveys. In the OXSI WASH programme, each Learning Review identifies a series of recommendations that the team tracks in a Learning Review Matrix. These recommendations have included ways to improve coordination between teams, the creation of guidelines for specific activities, new approaches for solving blockages and building relationships with stakeholders, ideas for increasing community engagement, and many other recommendations focused on increasing the efficacy of the programme and meeting emerging community needs.

Some examples of changes made in response to feedback in the OXSI programme are below:

OXSI Feedback	OXSI Adaptation
Through PDMs and the CFM, women requested more sanitary pads and underwear.	The programme adapted by including a dignity kit distribution every six months for the remainder of the programme. To enable women more choice and dignity in having a choice of colours and sizes of underwear, the programme adapted its distribution protocol to have staff do the distribution in small groups at household level (see Section 4.3).
The latrine functionality data and other monitoring found consistent evidence of open defecation (OD) in the camps. Through consultations, it also became evident that OD is practiced by children as well as the elderly and people with special needs who may not be able to get to latrines.	OXSI adapted to include formative research on OD to create strategic behaviour change programming to solve the issue (See Section 4.8). With Child Friendly Latrine construction already planned, the project also added an inclusive sanitation consultancy designed to assess needs and recommend tailored sanitation solutions for people with special needs (see Section 3.8).
Through a gender assessment and the CFM, the team learned that some women felt uncomfortable to share latrines with men.	Although communities had previously given preference to have family–shared latrines rather than sex–segregated public latrines during the latrine handover process, OXSI re–started the discussion at shelter level to propose other alternatives for family–shared and sex–segregated latrines. Focus group discussions held at household level allowed the decision to be made by each group of households rather than by WASH agencies (see Section 3.2).
Updated SPHERE standards dictated that agencies distribute more body soap, which required OXSI to change to unscented soap due to cost. Feedback from PDMs found that women in particular appreciated more soap but preferred the scented soap, which they also use as shampoo.	OXSI could not provide scented and unscented soap in each hygiene kit, so adapted by creating two separate hygiene kits. One of the kits includes scented soap and is distributed every three months (see Section 4.3).