

Her Harvest, Our Future: Southern Africa Monitoring, Evaluation, Accountability & Learning (MEAL) Meeting

Moshi, Tanzania – 15-17 May, 2018

Learning from each other

We have the solutions lying within us (Lason Kapata, incoming Chair of the Southern Africa MEAL group)

Speak the truth, because the truth will set you free (Gideon Cohen, Evidence and Knowledge Management Specialist, Southern Africa Sub-Region – referencing John 8:32)

When walking in the forest, only the person in front sees the tree roots (Madagascan proverb)



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Our six commitments and agreements:

- We will increase the accuracy, completeness and timeliness of our PIIRS data → and →
- We will learn from each other, setting up the regional MEAL hub and expanding Country Office MEAL teams →
- We ask regional and country leadership to create safe spaces for honest conversations, in order to learn from failure, and make this a priority theme for the upcoming SALT meeting in Joburg →
- 4. We will further develop our data visualization skills, to better communicate our results, for improving program quality, advocacy and resource mobilization →
- We will advance our country-specific MEL capacity strengthening priorities, and collectively advance two shared priorities in FY19 →. We will start applying the guidance on managing better quality evaluations →
- 6. We will ensure much greater participation of women staff in future MEAL learning events (at least 40%) →

Introduction

The 2018 MEAL workshop for the Southern Africa regional Impact Growth Strategy (IGS) brought together 32 participants from the region, with 5 resource people from global and regional CARE teams (see <u>agenda</u>, and participant list in Annex 1).

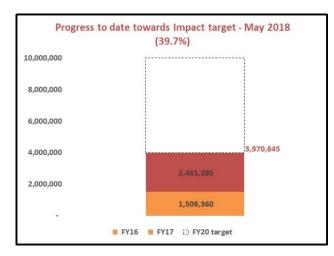
Building on the regional MEAL training in 2017, the meeting reviewed our existing impact data from CARE's Project Information and Impact Reporting System (PIIRS). We discussed how to make sure this is more complete and accurate, including addressing issues of double-counting, and the links with systems for capturing data on Village Savings & Loans Associations (VSLAs). The group practiced using data, to communicate findings in more visually appealing ways to different audiences, and analysing data to develop action plans to improve performance. Groups reviewed and provided feedback on guidance to better manage evaluations, and discussed what to do to make sure we can learn from failure in the region. The meeting concluded with suggestions to strengthen our MEL capacities in the region, and agree on priorities for the next year.

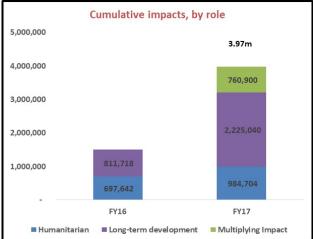
This summary report presents the highlights under each theme, with links to presentations and resource materials, as well as the agreements reached for follow-up action.

1. Regional Impact/Outcome data

To date, CARE in the Southern Africa region has contributed to nearly 4m people improving their Food & Nutrition Security and Climate Change Resilience (FNS & CCR), roughly 40% of CARE's overall target of 10m for the Impact Growth Strategy.

These cumulative impact figures include not only data from project evaluations and reports, submitted to PIIRS, but also two cases so far of Multiplying Impact, in Madagascar and Zimbabwe, documented using CARE's new Advocacy & Influencing Impact Reporting (AIIR) Tool.



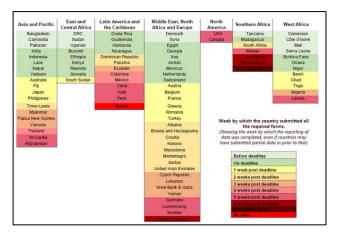


Being able to capture and quantify such examples of our advocacy and influencing work involves a set of 5 steps, from documenting a success, to being able to reasonably claim that CARE and partners have contributed to actual, rather than potential, impact:

- Has the influencing win actually happened (e.g. has a policy been approved, or is it still draft)?
- Was CARE's contribution significant?
- Is there reasonable evidence to show that CARE contributed to the win?
- Is the change actually being implemented?
- Is there evidence of impact to show the change that is occurring?

The different Multiplying Impact cases documented so far in the region, following the SALT 2017 agreement to do this, are at various stages of that journey.

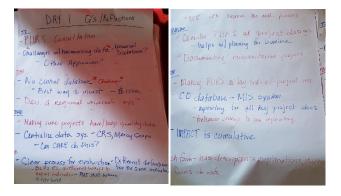
The region has performed much less positively, however, in terms of timeliness of PIIRS submissions last year (see the *Slide of Shame*, below).



Country Office teams in the meeting committed to making sure we submit on time in the FY18 PIIRS campaign, to "go green". A good start for this was made by participants completing a number of their PIIRS Impact forms from FY18, in preparation for and during the MEAL meeting.

A number of opportunities to get more complete data were also discussed, such as: including figures on access to Water, Sanitation & Hygiene (WASH) and education under indicator 3 (access to services); including WASH impacts/outcomes within our regional FNS & CCR impact numbers, given the critical importance of WASH for nutrition; including access to HIV or other services (ECD, OVC, etc.) under indicator 3 (access to services); reporting numbers for a whole consortium, and not just the geographical area we are implementing, for those technical areas where we are providing support and leadership to all consortium partners (e.g. on VSLA in COVIDA in Mozambique); reporting the main quantitative indicators for which projects have evidence (even if these are not the official CARE indicators) in the "Other indicators" sections of the PIIRS impact form, at the end of each Outcome Area; systematically considering PIIRS indicators at design stage of projects; submitting PIIRS Impact forms throughout the year, as evaluations are completed, in order to get immediate review and feedback (as Madagascar and Mozambique have done during FY17).

Other suggestions and conclusions, highlighted by teams at the end of Day 1 of the workshop, are noted on the flipcharts below:



Actions:

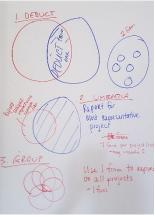
- CO MEAL Teams to review their <u>impact data to</u> <u>date</u>, to identify gaps to fill for FY18 (e.g. WASH, in Zambia);
- CO teams to continue to submit PIIRS impact forms throughout year, as evaluations are finished;
- CO teams to ensure completion of PIIRS forms is part of project close-out processes;
- Jay & Gideon to provide regular PIIRS support service ("Dr. PIIRS"), to address questions;
- Jay to send COs their lists of closed projects for which we do not yet have impact data;
- CO teams to continue to document cases of Multiplying Impact, using the AIIR tool;
- Jay to pass feedback from group, on need for some clearer instructions in Impact form, to Ximena, for inclusion in FY18 PIIRS forms.

2. Dealing with double-counting

Most countries have cases where more than one project works with the same communities and participants, sometimes towards the same outcome area (e.g. FNS & CCR), and sometimes for different outcomes. In these cases, we need to address the risk of double-counting of participants, to avoid overstating CARE's overall reach or impact.

Three options were outlined for dealing with this:

1. Deducting: where two or more projects have a partial overlap, the overlapping participants are deducted from totals reported in one of the projects – but both projects send PIIRS forms;



- 2. Umbrella: where a larger project has partial overlap with one or more smaller projects, the numbers are reported under just the larger, umbrella project. Forms are completed for the smaller projects, with 0 reported under overlapping sectors (unless there are unique sectors for those projects) i.e. one PIIRS form with the overlapping numbers, and other PIIRS forms without;
- 3. Grouping: where multiple projects work supporting the same overall impact population (e.g. a humanitarian response), these can be grouped and reported under one PIIRS form. The risk here is that the details of individual projects (donors and budgets, marker scoring, etc.) are rather lost within the overall group.

All three options were considered relevant for the six COs, given different contexts of overlapping geographical and sectoral interventions. Specific tools for identifying overlaps, and how these are addressed in PIIRS, were shared, including an excellent example from Zimbabwe, below. It was recommended that projects should first compile their own specific data completely, before adjusting or deducting later at CO level.

District	Project	Direct Participants	Wards	Overlap Wards	Average Project Participants/ward	Double Counted Participants	Comment
Bikita	OFDA	9,637	18, 21, 22, 24, 25				No overlap
	ENSURE	30,200	1-8, 14, 26				
Chiri	OFDA	9,637	19, 22, 23, 28, 32				ENSURE AND ANCP WASH overlap
	ENSURE	30,300	12-15, 17, 18, 20, 21, 24-26	12, 24-26	2,755	11,018	
	ANCP WASH	53,111	12, 24-26, 31		10,622		
Zaka	OFDA	11,564	8, 11, 23, 26-28	8, 23, 26, 27	1,927	9,637	OFDA and CTP overlap ENSURE and Rural WASH overlap
	ENSURE	30,100	2, 13-15, 18-21, 24, 25	21, 24, 25	3,010		
	SUDEWE	1,066	1-3, 7, 13, 16, 20, 21, 24, 27-30, 34			1,066	All participants are either ENSURE or YEP participants
	Rural WASH	23,250	1, 6, 9, 10, 20, 21, 22, 24, 25, 31, 32	21, 24, 25	2,114	6,341	ENSURE and Rural WASH overlap
				9, 10, 22, 32	2,114	8,454.55	Rural WASH and CTP overlap
	СТР	33,434	4, 8-10, 12, 17, 22, 23, 26, 27, 29, 30, 32-34		2,229		
Mberengwa	Rural WASH		2, 12-16, 22, 26, 28, 80, 34, 35 4-11, 13-15, 17-19, 21, 23-26, 28-32,	13-15, 26, 28, 30, 34	2,108		CTP and Rural WASH overlap

Actions:

 CO teams to review details of overlapping projects, to identify best strategies for addressing double-counting, in preparation for FY18 PIIRS campaign.

3. Capturing data on VSLAs

The Access Africa team presented on CARE's progress in expanding VSLAs to date (6.7m members across Africa), and their strategy to scale up towards 50m by 2030. For FY18, the previous parallel data collection processes by Access Africa and PIIRS will be brought together: new VSLA members in the FY will be captured in the PIIRS Reach form, while linkages and access to formal financial services will be captured in the PIIRS Impact form (under indicator 16b).

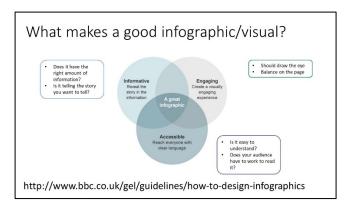
Options for the future of the sector-wide VSLA information platform, SAVIX, were also shared. All COs are using SAVIX in the region, though not necessarily for all projects using VSLAs. But some COs have invested significantly in getting partners & government to use SAVIX, so continued demand for SAVIX in the region seems likely, despite the workload involved in completing data. Access Africa will take this feedback forward as they review the future of CARE's engagement with SAVIX, and how this should be paid for.

Actions:

- COs to report VSLA membership in Reach forms for FY18 – and access to formal financial services in the IMPACT form;
- Access Africa to keep region informed about future of SAVIX and CARE's engagement;
- Ask the regional Savings Led Financial Inclusion
 Hub to set up an email list for those working on
 use of ICTs for programming in the region.

4. Communicating our data

Communicating our regional, country or project data compellingly requires us to create clear <u>visualizations</u> (graphics or infographics, etc.). These need to be informative, engaging, and accessible.



After seeing examples of different type of visualizations, from CARE and others, and links to free or low-cost tools that can be used to create them, participants worked on their own visualizations, on project or country-level data.

This involved identifying:

- 1. The key message;
- 2. The audience & how to deliver the message;
- 3. Sketching out the best chart type/infographic;
- 4. Reviewing to sharpen, emphasize and clarify.

The visualizations were then reviewed by participants, to check if the key messages were clear. The 3 visualizations teams voted to see in greater detail are presented in Annex 2.

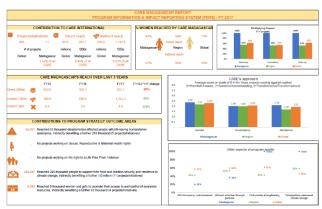


Actions

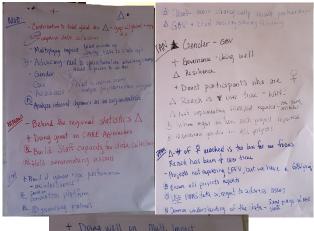
- CO teams to continue to develop their visualizations, sending to Korinne for feedback if desired;
- Korinne to provide further Webex/Zoom sessions on use of specific visualization tools (Canva, Power Bi, etc.).

5. Analysing and using PIIRS data

Teams by country reviewed their FY17 PIIRS reach and program quality data, to identify what they were happy with, what they were worried about, and what actions they would propose to take to address these concerns.



All teams highlighted the need to further integrate gender into programming, through more consistent use of the Gender Marker (and the Governance & Resilience markers). Some teams also highlighted advocacy, scaling up, innovation, and mainstreaming GBV, as areas of concern that needed addressing (see flipcharts, below).





Other uses of PIIRS or evaluation data shared by country teams, included: involving government in designing and contracting evaluations, to ensure ownership of conclusions and to lay the ground for scale-up; analysing PIIRS data on reach, quality and impacts with ACDs, at the recent regional

conference, to identify common concerns, and actions to take in response at ECSA regional level; sharing findings on targeting methodologies with government and donors at country, regional and global levels, to influence their practice.

Actions:

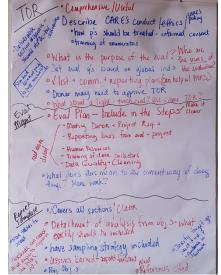
 CO MEAL leads to share their analysis, conclusions and suggestions with CO Senior Leadership Teams.

6. Managing better evaluations

CARE's evaluations are not of sufficient quality. A review of over 250 evaluations over the last 3 years shows an <u>average quality score</u> of 5.4 out of 10. Only 30% of evaluations disaggregate data by sex (and only 10% in Southern Africa), and "impact" only appears on average on page 13 of evaluation reports (which average 92 pages long!).

Tools to help country and project teams better manage their evaluations were <u>shared</u>, including an overall 8 step process for managing and hiring an external evaluator, a template ToR for an evaluation consultant, and an Evaluation Report template. CARE Madagascar also shared their sample evaluation ToR, report template and evaluation consultant scoring sheet, in French. Teams then

reviewed these tools in the light of upcoming evaluations, and provided detailed feedback (right). One suggestion was to include some Top Tips of what NOT to do, to avoid making



common mistakes.

Actions:

- Korinne to incorporate feedback into revised version of Evaluation Tools and templates, including drawing from the Madagascar tools;
- CO MEAL teams to start using the tools on upcoming evaluations, providing additional feedback to Korinne, based on experience;
- CO MEAL leads to ensure all evaluations are submitted to http://careevalautions.org.

7. Learning from failure

Participants began by sharing a story of failure in their work at CARE, and what they learned from it, with a colleague from another team. This was a "safe space", free from the fear or power dynamics within hierarchies that so often limit our ability to be honest about failure, and truly learn from it. Without leadership modelling the behaviour of acknowledging their own failures and what to learn from those, and creating an environment where people feel safe to have honest discussions without fear of losing their jobs or damaging their reputations, it is very difficult to get honest conversations on failure to occur.

Yet being able to <u>learn from failure</u> is critical, in order to:

- Improve our own work;
- Help others avoid the same mistakes;
- Avoid mistakes (problems won't solve themselves!);
- Be credible (you have to be honest);
- Increase our impact (by doing more things that work, and less of what does not);
- Innovate (trying new things will mean that some do not work – innovation requires a culture of accepting that, and learning from failure to adjust and try new things).

When we don't admit failures and learn from them, the problems get much bigger, often with real and negative impacts on the lives of those we serve. The problems Mozambique is facing with the erecording app for VSLA groups (unable to calculate share-outs correctly) could quite well have been avoided had learning from similar problems earlier in Kenya been shared widely. But while not being able to have accurate VSLA records or share-out

calculations is a problem for CARE's project, it is catastrophic for VSLA members, whose trust in the system of collective, self-organized savings and loans (and in NGOs) will surely be affected. Learning from failure is, thus, essential.



Strategies or practical approaches that can help us learn from failure include: presenting aggregate and anonymized data (such as the evaluations graphic, in the earlier section); talking to program participants about what is not going well or how to improve (see Niger example, above, where talking to the community helped identify a better Cash for Work solution that reduced costs by 80%); After Action Reviews to reflect on what was good, bad, and what to change; reviewing evaluations or other documents, to identify what didn't work, and adjust strategies for new projects phases or periods; participant feedback mechanisms; and getting management to share their own failures and learnings, and give the space to others to do so as well (particularly when they own the mistakes themselves, rather than blame others).

The group also shared examples from the region that were enabling learning from failure, including a WhatsApp group in Mozambique for a coaching initiative (where the ACD had started things with a story of her own experience of failure), or the post-project evaluations in Malawi and Mozambique, or the open conversations (unrecorded and not noted) on the Gender Transformation Hub. Some projects had also included sessions on learning from failure in quarterly project review meetings.

Suggestions from the groups included: incorporating learning from failure into the GO/NO GO process (to avoid projects that we know would be mistakes from start); exploring creating or using similar hotlines/reporting mechanisms for failure as are used for fraud; ensuring all COs create safe

spaces, at HQ and field levels; having representatives of field staff in management or executive team meetings, to bring anonymized stories of failure and learning.

Ultimately, Emily emphasized that maintaining an attitude of curiosity is critical to drown out the fear that sometimes limits us (humans can't feel both curiosity and fear at the same time). This can be helped by asking ourselves how can we make our work better and have a greater impact, rather than focusing only on identifying what has gone wrong.

Actions:

- CO teams to document existing examples of learning from failure, and share with MEAL group;
- CO leadership teams to analyse what it would take to enable a culture of open, safe and honest conversations about failure in their organizational context, and develop an action plan to put this into practice;
- SALT to include a session on Learning from Failure in the September 2018 meeting agenda, including a prior communication from Country leadership on what actions they have taken to promote Failing with Honesty.

8. Strengthening MEL capacities

Drawing from a recent mapping of our MEL capacities in CARE, regional data was presented on the 34 staff from the region who responded to the survey. Amongst the main results that stood out, there are very few staff skilled in MEL for advocacy (2 skilled, 17 proficient), and capacities overall in qualitative aspects and tools seemed higher than for quantitative approaches.



Participants suggested data be checked again by teams, and that we list not only skilled staff, but also proficient (which means better than skilled, in Portuguese).

Each CO identified their main priorities for strengthening MEL capacities, including: data analysis (quantitative and qualitative); survey and study design; data storage and management for whole CO (beyond project-specific MIS¹); using new technologies for data collection (e.g. Kobo); and developing a learning system and agenda that includes failure.

Actions:

- CO teams to review their MEL capacity data, and communicate with Korinne if they would like to change anything;
- Korinne to discuss feedback with Ximena, and how to keep the MEL capacity mapping up-todate, without over-burdening staff;
- Participants who have not completed the MEL capacity assessment should do so;
- Lason to expand the WhatsApp group for regional MEAL group, to include workshop participants;
- CO teams to review their priorities, and take forward what they can. Regional MEAL group to prioritize areas for collective action.

The meeting concluded with some final recommendations and agreements. Following the meeting, the regional MEAL group met to prioritize follow-on actions.

Discussions earlier in the week had also highlighted the need to address the gender imbalance in the group (5 women out of 37 participants). The capacity mapping data shows around 30% of MEL staff that have completed the mapping in the region are women, and teams agreed to discuss actions that they could take to address the current imbalance (such as increasing use of technology for data collection, to avoid the need for so much time by MEL staff away from home). Future meetings will have to have a better gender balance, to be true to CARE's values and the spirit of putting gender equality at the heart of the IGS.

Actions:

- CO MEAL leads to expand and strengthen CO MEAL teams;
- CO MEAL Leads to discuss with CO GED/Gender Teams, on actions to take to increase women's participation in MEAL roles;
- Regional team to ensure greater gender balance for future MEAL training events;
- Set up regional MEAL community as the "MEAL Hub" for the region, as a safe space for sharing and learning from each other. Lason to organize the first call, in the first half of June;
- Each CO MEAL lead to share the main results from this meeting with their Senior Management Teams by <u>Friday 25th May</u>, highlighting positive and negative aspects from the meeting (and copying in Gideon and Lason);
- MEAL group to focus for next few months on preparing for and executing a successful PIIRS FY18 campaign in the region – all COs to submit early, and "go green";
- After this, further shared priorities from the list of suggestions will be reviewed and put into action during FY19.

^{9.} Final agreements

¹ CARE Zimbabwe will be developing their MIS in first quarter of FY19, so other COs wanting to develop something similar should connect, to learn from this experience.

Annex 1: Participant list

REGISTRATION FORM FOR CARE TANZANIA ACTIVITIES ACTIVITY: MEYZ TRAINING DATE: 15/05/2018 PLACE OF IMPLEMENTATION: LOVERU WERU LONGE REGION: KILLIMOTARO DISTRICT: MOSHI HAI DIVISION: SN NAMES SEX GROUP/WARD/VILLAGE TITLE PHONE NUMBER SIGNATURE FM NAME 1 DUIA'VIO DE SOUSA X CARE MOZAMBIQUE MEL LOORDINATOR +258821485580 2 Fano RANDRIANARISOA X CARE MADAGASCAR. 1 (cnaw) MEL Coordinator +261344730258 3 FIRETURNE PASEMANANTSIA X CARE MHDAGASCAR MEL Apristant +2613405 h23 63 4 MORAVELO Nicole X CARE MADAGASCAR MEL Assistant +261340742313 5 Stevin BEHITA. Y CARE MADAGASCAR MEL ONISPOST +261344730169 6 LASON KAPATA X CARE ZAMBIA. PROCRAM MANAGER + 260 9.77 966028 MGE COORDINATOR + 260 97734986 PAUL CHIPOPA 7 CARE ZAMBIA 8 MOSES CHIPTY RENTON KASHIMBAYA CARE ZAMBIA MEE COOKSWATION +2609:78177035 9 MGE COORDINATION + 260969237784 6 10 PHILIMON CHEEBA CARE ZAMBIA CARE ZAMBIA V MAE, GOKDINATUL 0977934733 HENRY LODAGO DIRECTOR - KML 1 1260 979 578 201 , NUTE 1716 N HUB + 260 977 6 9690 }
DES PR + 44 7914 419652 11 12 REGINALD NTOMBA MATT BANNERMAN CLAYTON MAFURATIONE 13 V ECSARMY DED PR +447914419652 MEL SPECIALIST +263773918375 14 CARE ZIMBA BWE Clement Bisgi 15 CO-MELA +265995213127 V CARE Magwi Brian Majamanda Emily Janach Kornae CHIU 16 CARE WSA Malawi M8E Con Sinatur +265 888057297 Brown 17 DDirector KML 44049442312 Emily & June 18 CARLE USA MEAL COERD. +265 999105996 19 MATHELL SUPER CARLE MALAWI 20 LEMEKEZA MOKIWA CARE MALAWI PD FNS LCCR +265991122593 -SN NAMES GROUP/WARD/VILLAGE SFX TITLE PHONE NUMBER SIGNATURE FM NAME Bidear Color M CARE SA KML 4255699884422 ERNESTINA 12. HUS F CARE- MOCAMBIQUE +258840665485 3 11 NEAL DIFFCOR +258844368530 4 Parin Gulamo Abolula CARE - MOZANBIQUE MENT OFFICER +258 R4319105 5 M 1CER +258 842191705 6 AMARILDO MANTO CARÉ - MOZAMBIQUE MEAL OFFICER 1258844720609 M 7 JAY GOVEDON KML Coordinator +44-7975 56465 CARE INTERNATIONAL 8 Mitton Navies CARE MOZAMBIOLE MaA-GIS Officer + 25 8 849366430 Rungano Map Tunquitsi Levisan Zimon 9 m CARE ZIMBABWE MEAL OFFICER +263772599770 10 M CARE ZIMBABWE PQ MANAGER +263772407961 11 CARE ZIMBARWE Augustine Masomera MEAL SPECIALS + 26277230193 MEAL Mayer + 265783124460 MEAL OFFICER + 255753635568 12 M NICHOLAN MBILINSI TANZITUI A 13 M CARE TANSANIA 14 JUDITH MWOMBEKI F MEAL OFFICE +255712797252 BENTA S. KAYUNI F EMMANUEL KOYAND 15 +255713991829 16 CARE TANZANIA MEAL COURDINATUR +255754361233 17 TUMANUCY RIOGRA COTRE TADDADIA METE OFFICER +25568364460

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Annex 2: Example visualizations

1) The Mozambique team presents their sketched-out visualization, on "Life improved by Loans"



2) The Impact of the SCALE project in Zambia, in 3 slides:

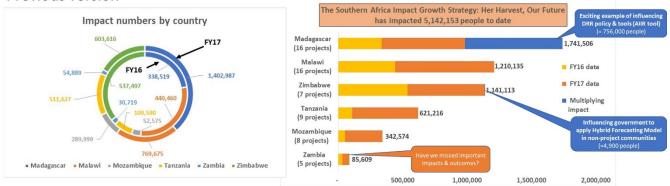


Food Security and HH Welfare

3) CARE's impact, by country – sharpening an existing graphic:

Previous version

Revised Version



4) Other visualizations



