



Programme Manager's Planning Monitoring & Evaluation Toolkit

Division for Oversight Services

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Tool Number 4: Stakeholder Participation in Monitoring and Evaluation

I. Introduction

The toolkit is a supplement to the UNFPA programming guidelines. It provides guidance and options for UNFPA Country Office staff to improve planning, monitoring and evaluation (PM&E) activities in the context of results based programme management. It is also useful for programme managers at headquarters and for national programme managers and counterparts.

This tool clarifies the significance and different modalities of stakeholder participation in programme monitoring and evaluation. Its content is based on a review of evaluation literature from academia and international development agencies and NGOs such as the Institute of Development Studies, Sussex, UNFPA, UNDP, UNICEF and Catholic Relief Services².

II. What is participatory monitoring and evaluation?

There is no single definition or approach to participatory M&E leaving the field open for interpretation and experimentation. Most of the documented experiences in participatory M&E are from the area of agricultural, environmental and rural development. Experiences in the health and education fields are less readily available.

However, as highlighted in **Box 1**, the principles guiding the participatory approach to M&E clearly distinguishes it from conventional M&E approaches. Participatory M&E also requires a different mindset, acceptance of a different way of conducting M&E.

¹ This tool was first published in March 2001.

² An excellent review of literature on participatory M&E is provided in Estrella 1997.

Box 1. Principles which Distinguish Conventional M&E from Participatory M&E

Conventional M&E:

- aims at **making a judgment** on the programme for accountability purposes rather than empowering programme stakeholders
- strives for “**scientific**” **objectivity** of M&E findings thereby distancing the external evaluator(s) from stakeholders
- tends to emphasise the **needs for information of programme funders and policy makers** rather than programme implementers and people affected by the programme
- focuses on **measurement** of success according to predetermined indicators.

Participatory M&E:

- is a process of individual and collective **learning** and **capacity development** through which people become more aware and conscious of their strengths and weaknesses, their wider social realities, and their visions and perspectives of development outcomes. This learning process creates conditions conducive to change and action
- emphasises varying degrees of **participation** (from low to high) of different types of stakeholders in initiating, defining the parameters for, and conducting M&E
- is a social process of **negotiation** between people’s different needs, expectations and worldviews. It is a highly political process which addresses issues of equity, power and social transformation
- is a **flexible** process, continuously evolving and adapting to the programme specific circumstances and needs.

Source: Estrella, 1997.

III. Who are the stakeholders?

M&E stakeholders are those people who have a stake in the programme. They are persons who take decisions using the M&E data and findings.

Box 2 shows five types of stakeholders. They can include members of the community – men, women and youth; health clinic staff, teachers of population education, staff of the Census Bureau who implement the programme activities; national counterparts in government and NGOs at the central and local levels who oversee programme implementation; international and national programme funders and

Box 2. Types of Stakeholders

- **The community** whose situation the programme seeks to change
- **Project Field Staff** who implement activities
- **Programme Managers** who oversee programme implementation
- **Funders and other Decision-Makers** who decide the course of action related to the programme
- **Supporters, critics and other stakeholders** who influence the programme environment.

Source: Adapted from C.T. Davies, 1998.

other decision-makers; community leaders, central and local government administrators who have a major influence on the “enabling” programme environment.

IV. The rationale for stakeholder participation in M&E

The growing interest within the international aid community in participatory approaches to development programming emanates from lessons learned in the past. It was found that participation of the programme stakeholders, central level decision makers, local level implementers, and communities affected by the programme, in programme design, implementation, monitoring and evaluation, improves programme quality and helps address local development needs. It increases the sense of national and local ownership of programme activities and ultimately promotes the likelihood that the programme activities and their impact would be sustainable (see **Box 3**).

The introduction in UNFPA of the results-based approach to programme management calls for strengthening partnerships, participation and teamwork at all levels and stages of the programme process. Therefore, efforts should be made to move away from the conventional to more participatory approaches to M&E.

Box 3. Advantages of Stakeholder Participation in M&E Planning and Implementation.

- Ensures that the M&E findings are relevant to local conditions;
- Gives stakeholders a sense of ownership over M&E results thus promoting their use to improve decision-making;
- Increases local level capacity in M&E which in turn contributes to self-reliance in overall programme implementation;
- Increases the understanding of stakeholders of their own programme strategy and processes; what works, does not work and why;
- Contributes to improved communication and collaboration between programme actors who are working at different levels of programme implementation;
- Strengthens accountability to donors;
- Promotes a more efficient allocation of resources.

Sources: Aubel, 1999. UNDP, 1997.

However, exactly what programme stakeholders are involved in M&E varies according to the purpose of M&E and the general institutional receptiveness to the use of participatory approaches. In each instance, programme managers must decide which group of stakeholders should be involved, to what extent and how.

V. When is it appropriate to use participatory M&E approaches?

In general, all relevant counterparts such as project field staff, programme managers as well as the UNFPA Country Office should regularly monitor programme activities.

The extent of stakeholder participation in evaluation, however, depends on the evaluation questions and circumstances. Participatory evaluations are particularly useful when there are questions about implementation difficulties or programme effects on different stakeholders or when information is wanted on stakeholders' knowledge of programme goals or their view of progress. A conventional approach to evaluation may be more suitable when there is a need for independent outside judgment and when specialized information is needed that only technical experts can provide. Such an approach is also more appropriate when key stakeholders don't have time to participate, or when such serious lack of agreement exists among stakeholders that a collaborative approach is likely to fail.

Participatory M&E is useful for:

- ***institutional learning and capacity development:*** through self-assessment, stakeholders identify and solve programme related problems themselves thereby strengthening their capacity to be active participants in programme implementation, rather than remaining passive recipients of development assistance. Self-assessment can help strengthen partnerships between different stakeholders and increases their understanding of programme processes and outcomes. It also clarifies the roles of different stakeholder in implementing the programme. **Box 4** provides a few lessons from Madagascar on the participation of a key stakeholder group, health service providers, in monitoring the quality of service delivery by using the COPE³ approach.
- ***negotiating stakeholder perspectives:*** participatory M&E may be used as a process that allows different stakeholders to articulate and present their needs, interests and expectations. The process of dialogue and negotiation among stakeholders used in participatory M&E facilitates reconciliation of different stakeholder viewpoints. Difficulties may, however, arise in resolving competing and conflicting stakeholder perceptions, especially when certain stakeholder groups are powerless in relation to others.
- ***ensuring public accountability:*** participatory M&E can be a way for programme participants and local citizens themselves to monitor and evaluate the performance of donor and government institutions. For instance, legal reforms that decentralize decision-making often encourage elected representatives at district or municipal levels to be more proactive in monitoring implementation of local development plans. In Paraguay, UNFPA is funding a project the aim of which is to establish a network of local male and female leaders who will monitor the quality of RH service delivery and periodically report on the status of the services to higher levels in the health administration.

³ Client-oriented, Provider-efficient. A COPE Handbook can be obtained from AVSC International. For more information on COPE, visit <http://www.engenderhealth.org>

Box 4. Lessons from applying the COPE methodology in Madagascar

The COPE approach involves a series of activities (self-assessment, client interviews, client-flow analysis, and action planning) conducted by staff at health service delivery points to help them identify and solve their own problems and continually improve service quality, using resources already available at their facility.

In 1994 the NGO SALFA introduced COPE in Madagascar. By 1998 the method was used by 20 provincial level FP centres managed by SALFA and one government health centre. The experience showed that the method can be applied to many service delivery management processes at clinics and hospitals: for example in the areas of administration and service delivery such as management of staff and supplies and provision of preventive and curative services. The opportunity for service providers to contribute to the assessment and improvement of service delivery increased their sense of responsibility and the enthusiasm for their work. The self-assessment process increased their awareness of the importance of better client provider relations. As a result, service utilization improved significantly.

The introduction of COPE is, however, not problem free:

- Health care providers tended to think that COPE would resolve all their problems, including the lack of financial incentives for good service delivery. The introduction of COPE should therefore emphasise its main purpose of achieving client satisfaction;
- In their enthusiasm, health care providers tended to seek the perfect solutions even if sometimes too ambitious. Therefore, slow achievement of results discouraged them and they lost faith in the utility of the COPE approach. It is important to ensure that solutions proposed can be implemented by health care providers themselves, within the health care facility and with reasonable resources;
- Clients interviewed by service providers did not express all their opinions about the services, leaving out negative aspects. This COPE tool should therefore be applied by data collectors independent from the service delivery point while ensuring client confidentiality;
- The short-term results achieved with the introduction of COPE were not maintained at service delivery points that did not continuously monitor the use of the COPE approach. Continuous monitoring of COPE implementation is key to achieving the expected results;
- Health care providers at the government facility were demoralized by the fact that their supervisors rarely visited their health centre, despite official recognition of their excellent work. Continuous supervision of COPE implementation by higher level supervisors is important to sustain and improve results;
- These health care providers also realized that decisions to solve several of the problems identified needed to be taken at higher levels of the health administration. The introduction of COPE at the individual service delivery point should therefore be combined with the necessary related interventions at higher decision-making levels.

Source: "Le Processus 'COPE' – L'Expérience de Madagascar", UNFPA, Madagascar, 2000.

VI. Which stakeholders should participate in evaluation and what role should they play?

Participation may be broad to include a wide array of programme staff, communities affected by the programme, partners and others. It may, alternatively, target one or two of these groups. For example, if the aim is to uncover what hinders programme implementation, field implementers may need to be involved. If the issue is the impact of a programme on local communities, they may be the most appropriate participants. If the aim is to know if all stakeholders understand a programme's goals and view progress similarly, broad participation may be best.

Roles may range from serving as a resource or informant to participating fully in some or all phases of the evaluation.

How can communities be involved in evaluation? Community participation can be constrained by lack of literacy skills, insufficient time, the intensity of analytical work to be undertaken during the evaluation, and the fact that many of the issues covered during the evaluation are not directly relevant to community members. There are different ways to make sure that the community perspective is considered. For instance, prior to a programme evaluation, complementary evaluation activities could be undertaken with communities involved in and affected by the programme. Such activities could include interviews with and collection of data by community members. They could also consist of community members using PRA and PLA tools⁴ to analyse programme activities and assess whether they meet their needs. Alternatively, community members could define their own criteria for evaluating community-based activities and use these criteria to carry out their own evaluation.

Table 1 illustrates responsibilities of participants in an “expert-driven”, conventional evaluation process as compared to a participatory evaluation process involving programme managers, field staff and other decision-makers. The example recognizes the difficulty in simultaneous participation of community and other stakeholders in the evaluation.

⁴ Participatory Reflection and Action (PRA) and Participatory Learning and Action (PLA) methods aim at: allowing community members to express their perceptions, priorities, problems and plans for the future; allowing community development workers to listen to and dialogue with community members in order to better understand their lives, perceptions, problems, priorities and plans for the future. PRA/PLA tools include: community mapping; health problem ranking; body mapping; role plays and stories and other tools.

Table 1. Responsibilities of participants in “Expert-driven” and Participatory Evaluations.

Activity	Who is responsible?	
	<i>“Expert-driven” Evaluation</i>	<i>Participatory Evaluation</i>
Define evaluation purpose	Evaluation Planners (UNFPA Country Office) Funder(s)	Small group of stakeholders (2-5 persons) responsible for evaluation coordination throughout (coordinating group). Must include Programme/project managers
Define evaluation objectives, questions and data collection methods	Evaluation Planners (UNFPA Country Office) External evaluator(s)	All selected evaluation stakeholders (Programme/project managers, field staff, other decision-makers as required)
Collect and analyse data	External evaluator(s)	Small group of stakeholders (10-12 persons) divided into teams with a team leader External evaluator(s)
Manage logistics (budgets; field work; equipment and supplies)	Evaluation planners (UNFPA Country Office)	Programme/project staff member (logistics coordinator)
Summarize field work findings	External evaluator(s)	Field work team leaders and a few of the stakeholders involved in data collection and analysis
Formulate lessons learned	External evaluator(s)	All selected stakeholders External evaluator(s)
Summarize evaluation results (findings and lessons)	External evaluator(s)	External evaluator(s) One member of the coordinating group
Develop action plan for implementing evaluation results (findings, conclusions, lessons, recommendations)	Evaluation planners (UNFPA Country Office) in consultation with national counterparts	Small group composed of: programme/project managers, field staff, external evaluator(s)
Write report	External evaluator(s)	Small group of stakeholders, external evaluator(s)
Distribute and discuss report; follow-up on implementation of the Action Plan	Evaluation planners (UNFPA Country Office)	Coordinating group
Develop spirit of collaboration and sharing; coordinate and facilitate all steps of the evaluation	External evaluator(s) Evaluation planners (UNFPA Country Office)	External evaluator(s) Coordination group Evaluation planners (UNFPA Country Office)

Source: Adapted from Aubel, 1999.

VII. What are the steps in a participatory evaluation process?

Box 5 illustrates suggested steps and lessons learned based on a participatory evaluation of 15 social sector, health and agriculture projects implemented by NGOs in Haiti⁵. The individual project evaluations were undertaken over a period of three weeks by teams of three to five NGO staff trained in participatory evaluation approaches.

Box 5. NGO staff can successfully evaluate their own projects

Step 1: a planning meeting gathered 36 NGO staff and several community representatives to answer the following key questions: Was there commitment to undertake a participatory evaluation?; Why undertake an evaluation and what should be the purpose?; When should the evaluation take place?; What indicators should be used?; What resources and support could be expected from the local NGOs?; Who in terms of profile and skills should be involved in the evaluation?; Where should the training of evaluators take place?

Step 2: a four-day participatory evaluation workshop during which 29 NGO staff learned to become participatory evaluation facilitators using PRA and PLA techniques. The workshop aimed at creating an understanding of the difference between participatory and traditional evaluations; awareness of social dynamics and class differences and how evaluation facilitators' attitudes and behaviors can adversely affect others; collective exploration of the attitudes and personal qualities of facilitators; imparting skills on how to get community members to "map" their community to give an inside perspective; how to verify findings using different data collection methods and sources (data triangulation).

Step 3: visits to 15 projects over a two-week period. Each facilitator team visited a total of two projects which were not their own. They spent three days at the project site. They sought answers to detailed evaluation questions that they had identified at the planning meeting. Questions related to major areas of project impact, relationships with other partners, sustainability, efficiency, project management, the role of women and gender equity.

Step 4: collective reflection and dissemination of findings. Each team was responsible for consolidating their community work into a brief project report. At the end of their visit, some teams debriefed community project stakeholders in order to check the reliability of their findings. Each team was responsible for making a presentation of their findings to the larger group. All programme partners were invited to attend a final presentation organized by the facilitators.

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⁵ This is a summary of Francoise Coupal, Marie Simoneau. 1997: "Participatory Evaluation: A Case Study of CCIC Humanitarian Fund Projects in Haiti". Mosaic.net. 1997.

Box 5. (cont'd)

Some Lessons Learned

About the Process:

- Participatory evaluations are a viable alternative to more traditional approaches even for projects that are not participatory by design. The evaluation was cost-effective. It did not take longer than a traditional evaluation due to the large number of facilitators used. However, additional time would have been beneficial for additional field visits, more preparatory coordination with stakeholders, and for group reflection on findings and lessons learned;
- While the quality of individual reports did vary, inexperienced facilitators can achieve enough participatory evaluation skills to answer evaluation questions. When selecting participatory evaluation facilitators, it is very important to choose persons who are open and willing to learn new methods;
- The impact of the participatory evaluation was significantly greater than that of a traditional evaluation. NGO facilitators' perception of poor, illiterate people changed dramatically from viewing them as helpless beneficiaries to self-sufficient and creative individuals. Many of them now use participatory evaluation tools in their day-to-day work. There has been a wider recognition of the importance of stakeholder participation throughout the project cycle.

What the facilitators learned:

- It is essential to use the PRA/PLA tools; they need to be adapted to individual circumstances, however;
- The trust of individual community members should be earned before presenting the tools. That can take time. The initial strategy for approaching community members is very important;
- The availability of interviewees of both sexes is important;
- PRA methods can be time consuming for busy community members.

Source: Coupal et al. 1997.

VIII. Elements of successful stakeholder participation in evaluation

It is important to bear in mind that the local environment, the socio-political power structures and socio-cultural norms and values, influence the evaluation process.

In this context the following are a few important elements of a successful process of stakeholder participation in evaluation:

- the **support of** programme management (implementing partners) and other direct **decision-makers** for the participatory evaluation approach;
- the **evaluator is committed to the principle of participation; has sufficient group facilitation and mediation skills** to enable effective dialogue and discussion and to ensure that the experience is both participatory and focused;
- a **realistic assessment of stakeholders capacity and willingness to participate** on a full-time basis (partly depending on availability of time, supervisor's support, as well as professional gain);
- **representation of the most important stakeholder interests** related to the programme being evaluated;
- investigation into the **“real” interests** and issues of key stakeholders. The “real interests” often differ from those, which are openly expressed. **Box 6** highlights an approach to discover “real interests” of stakeholders;
- established procedures for mediating power imbalances among stakeholders.

Box 6. Discovering the real interests of stakeholders through dialogue

Goal of Dialogue: Stakeholders come to more complete understanding of each other's positions.

Dialogue Process: A conversation that helps develop alternative perspectives, critical examination.

Evaluator's Identity: Proposes alternative perspectives, facilitates conversations and critiques, mediates and coaches.

Source: Ryan et al., 2000.

Sources

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More resources on participatory monitoring and evaluation are available at the ELDIS website: <http://www.eldis.org/>

This tool is subject to constant improvement. We welcome any comments and suggestions you may have on its content. We also encourage you to send us information on experiences from UNFPA funded and other population programmes which can illustrate the issues addressed by this tool. Please send your inputs to:

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