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RESEARCH REPORT

COVID-19 AND CHANGING M&E PRACTICES

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Trust Consultancy and Development, founded on 15th June 2016, is an independent Third-Party Monitoring (TPM) and Capacity Development consultancy based in Turkey, providing a range of services to the whole of the MENA and South Asia regions and beyond.

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The spread of the COVID-19 pandemic poses an unprecedented challenge for the humanitarian sector and has immobilised many aspects of relief interventions. In accordance with the Do No Harm principle, one of the primary activities of humanitarian assistance, Monitoring and Evaluation (M&E), has been scaled back as evaluators risk both spreading and contracting the virus.[1] In this fraught context, humanitarian practices for M&E must be adapted in order to continue this critical component of humanitarian relief efforts, while mitigating the risk of further spread inherent to infield M&E exercises.

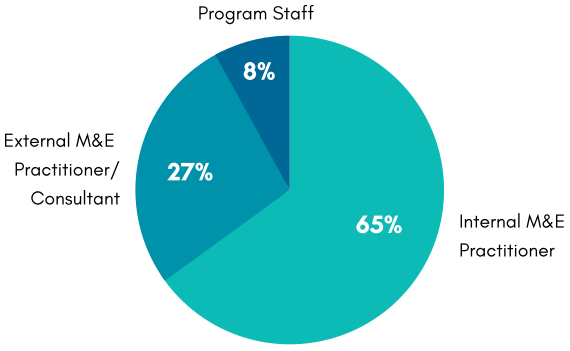
A number of leading humanitarian agencies have proposed safety measures to reduce the risks associated with data collection during the pandemic. However, dissemination of information regarding the actual implementation of such measures, limitations of newly adapted data collection tools, and implications for future M&E planning have not been widely explored so far. In order to address this gap, Trust conducted an online survey in May and June 2020 intending to answer the following questions:

- How have M&E activities been affected by COVID-19?
- What are the most useful practices for M&E practitioners during this pandemic?
- Which groups of people and sorts of interventions are going to be most adversely affected by this crisis in terms of monitoring and data collection, and are therefore at risk of being excluded from M&E findings?
- What are the lessons learned and lasting changes for M&E going forward?

Respondents' Profile

Fifty respondents from 27 different countries participated in the survey: from Malaysia to the USA, South Africa to India. Respondents were comprised of three types of humanitarian professionals: internal M&E practitioners (those working in M&E departments of humanitarian and development agencies), external M&E practitioners/consultants (those hired

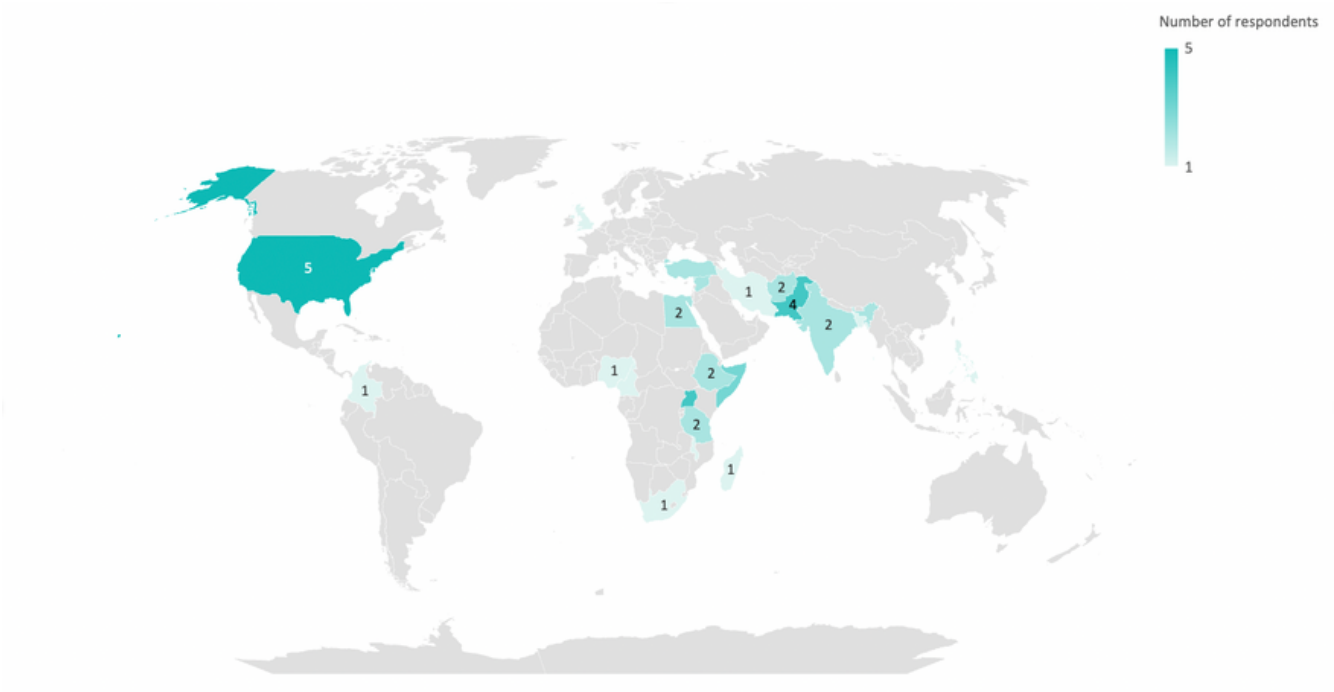
Figure 1: Professional Background



[1] Chelsky & Kelly (2020), "Bowling in the dark: Monitoring and evaluation during COVID-19 (Coronavirus)". Available at https://ieg.worldbankgroup.org/blog/mande-covid19

externally to carry out M&E for other humanitarian and development agencies), and program staff. Internal practitioners (65%; n=32) represented the largest group of respondents, followed by external practitioners (27%; n=13) and program staff (8%; n=4).

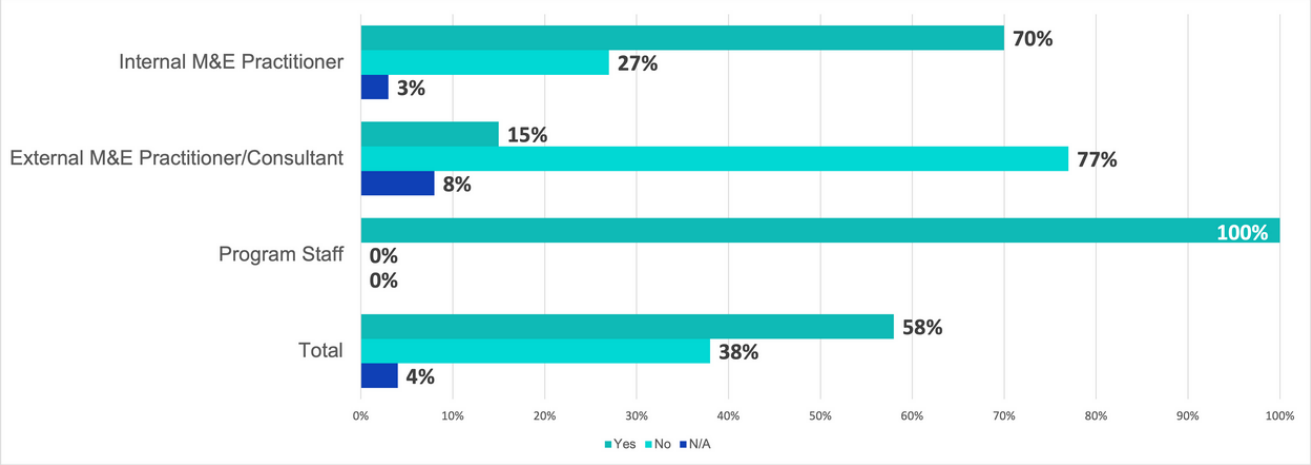
Figure 2: Respondents' Locations



Impact of COVID-19 on Data Collection for M&E Purposes

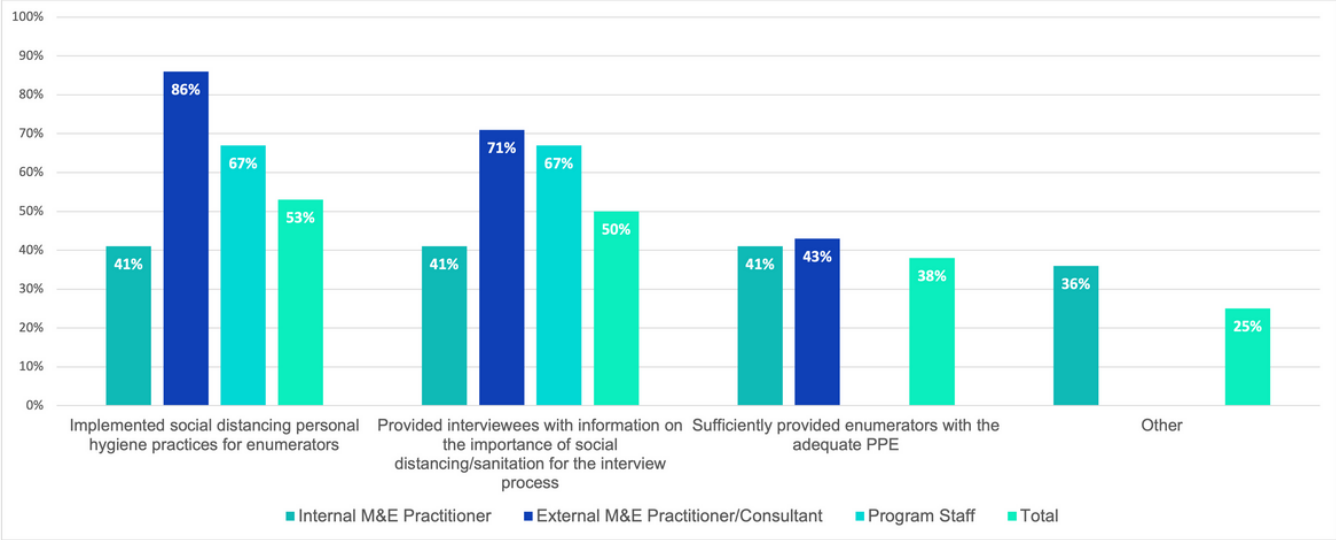
Survey results confirm that M&E data collection has been severely impacted through the suspension of many monitoring activities since the outbreak of the COVID-19 pandemic. External M&E consultants were the most severely impacted in terms of ability or readiness to conduct data collection during the pandemic, with 77% (n=10) reporting that they were no longer carrying out data collection. For M&E staff in humanitarian and development agencies, data collection appears to be more feasible, with 70% (n=23) of internal M&E practitioners and all program staff indicating that they were still collecting data.

Figure 3: Are you still conducting data collection?



This may suggest that M&E consultants and Third-party Monitoring (TPM) organizations are experiencing decreased demand, or that they do not possess the resources required to carry out data collection as a result of the pandemic because internal practitioners more easily have the access and resources required to continue data collection within their projects.

Figure 4: If Yes, which of the following recommended practices have you implemented?

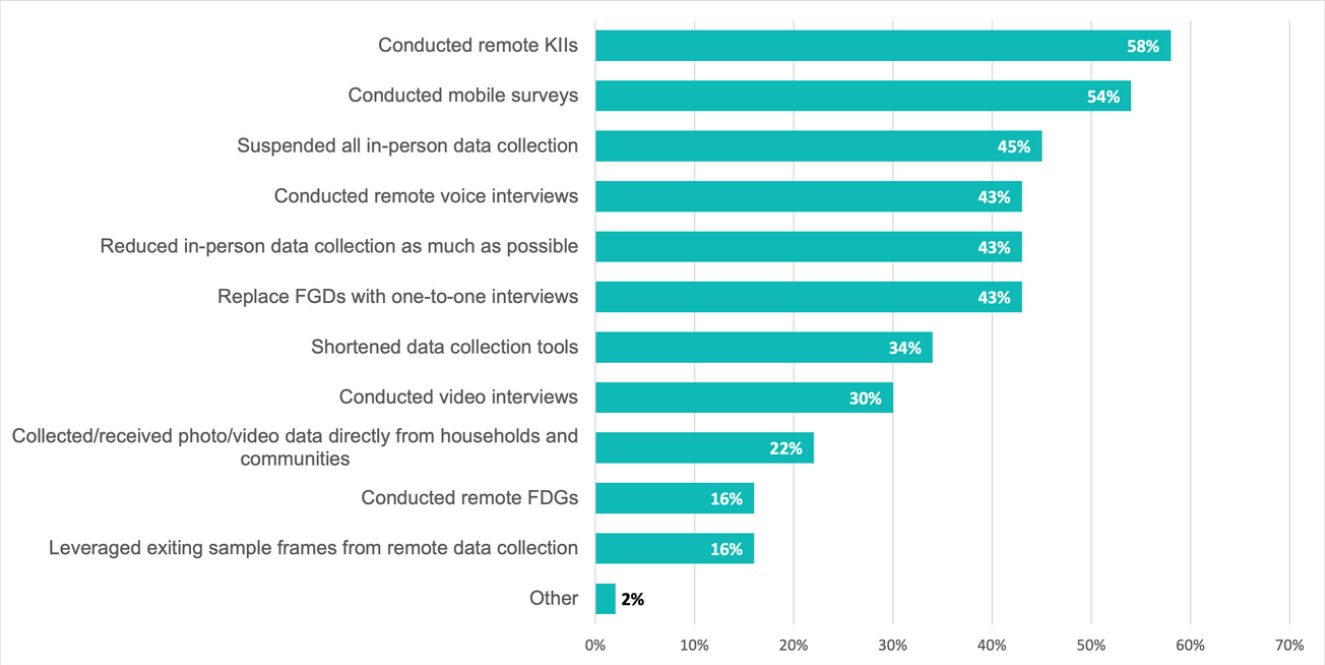


Of those respondents who have continued data collection activities, *implementing social distancing and personal hygiene practices amongst enumerators*, and *providing interviewees with information on social distancing practices*, were the most commonly implemented recommended practices across practitioner types. However, these were more common among external M&E consultants than internal M&E and program staff. Across respondent type, provision of PPE for enumerators was the least reported practice implemented.

Adapting M&E Data Collection Tools and Methods

The pandemic has given rise to conversations on how best the M&E community can ensure data collection continues safely [2]. Participants were asked to select from a number of these recommended methods in order to indicate which have been most regularly utilised at the time of the survey. The most popular methods included remote Key informant interviews (KIIs) (58%, n=29), mobile surveys (54%), and substituting Focus Group Discussions (FGDs) with one-on-one interviews (42%, n=27). In addition to adapting data collection methods, 44% (n=22) of survey respondents said they had suspended all in-person data collection and 42% (n=21) said they had reduced in-person data collection as much as possible.

Figure 5: Which of the following recommended practices for remote M&E data collection have you implemented?



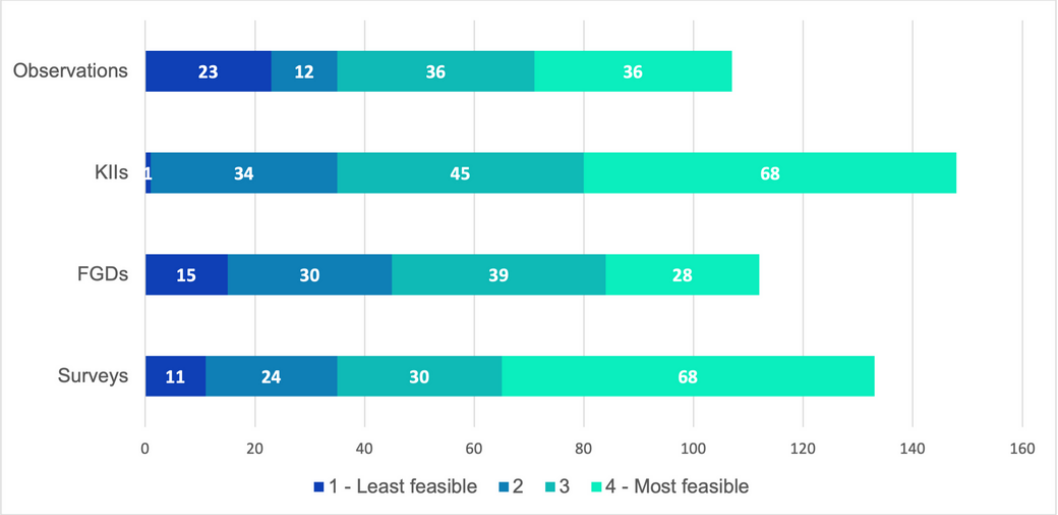
The most commonly used data collection methods are KIIs, FGDs, observation visits, and surveys. Practitioners were asked to rank, in order of feasibility during the pandemic, those four common

[2] see: Chelsky & Kelly (2020), "Bowling in the dark: Monitoring and evaluation during COVID-19 (Coronavirus)". Available at https://ieg.worldbankgroup.org/blog/mande-covid19; Rous (2020) "8 Ways to Adapt Your M&E During the COVID-19 Pandemic". Available at https://www.humanitariandatasolutions.com/pandemic/; Cartong (2020), "Covid-19 Crisis : How To Adapt Your Data Collection For Monitoring And Accountability?". Available at https://blog.cartong.org/wordpress/wp-content/uploads/2020/04/IM-covid-19-impact-on-monitoring-and-accountability_CartONG.pdf

data collection methods (1 being most feasible and 4 being least). Predictably, KIIs and surveys were ranked as most feasible, while FGDs and observation visits, least. This indicates the difficulty in physically accessing project sites and facilitating group discussions remotely

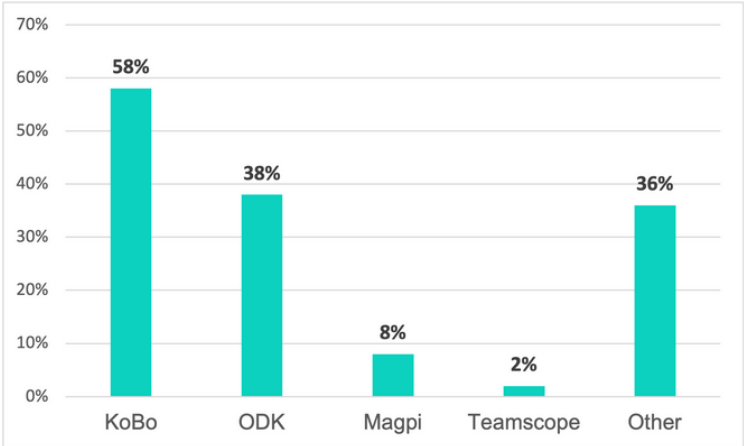
When asked what implications these limitations will have on the quality of data collected, respondents often noted reduced data accuracy and evidence, limitations in exploring in-depth interview styles, increased potential for miscommunications, and insufficient methodologies for triangulating findings. For other respondents, some of these limitations also offered unique opportunities to build local capacity in data collection, increase learning with local implementing partners and communities, and increase transparency for all stakeholders.

Figure 6: Feasibility of data collection methods



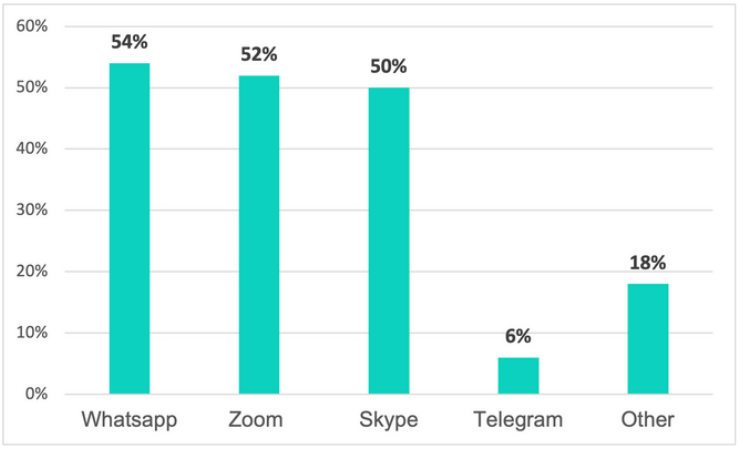
Technologies Most Useful for Remote Data Collection

Figure 7: What are the most useful humanitarian softwares/ apps/ technologies you have used for remote quantitative data collection?



For remote quantitative data collection, KoBo was the most common among participants (58%), followed by ODK (38%), although many respondents had other suggestions. These included: Zoom, SurveyMonkey, Google Forms, Survey CTO, and COMMcare [3].

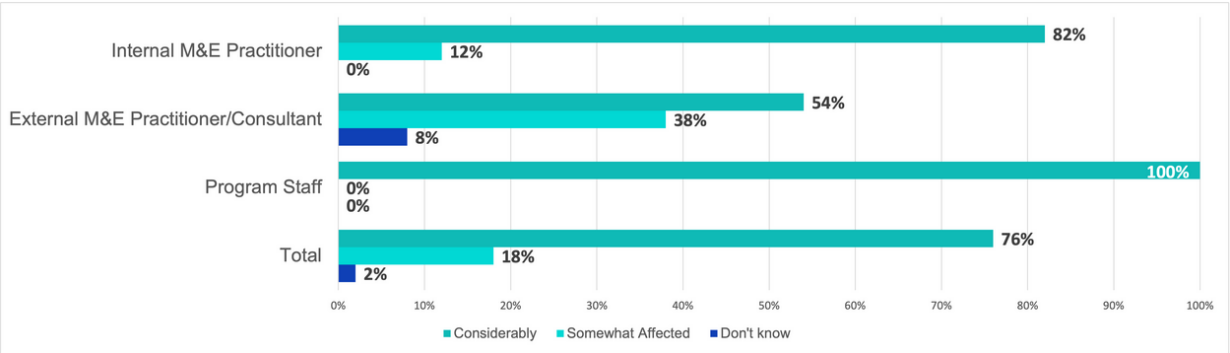
Figure 8: What are the most useful humanitarian softwares/apps/technologies you use for remote qualitative data collection?



As for remote qualitative data collection, WhatsApp, Zoom and Skype were the three most popular apps. Other apps included Google Duo, RapidPro, Viber, Telegram, SurveyMonkey and Microsoft Teams. Seeing as a diverse range of technologies and applications are being used for both qualitative and quantitative analysis, it would be worth exploring which contexts the above technologies may be best suited for taking into account their cost, ease of use, and safety/privacy issues.

How Practitioners See COVID-19 Affecting the Most Vulnerable

Figure 9: Given the limitations imposed by COVID-19 on data collection, how do you think your ability to reach particularly vulnerable groups will be affected?

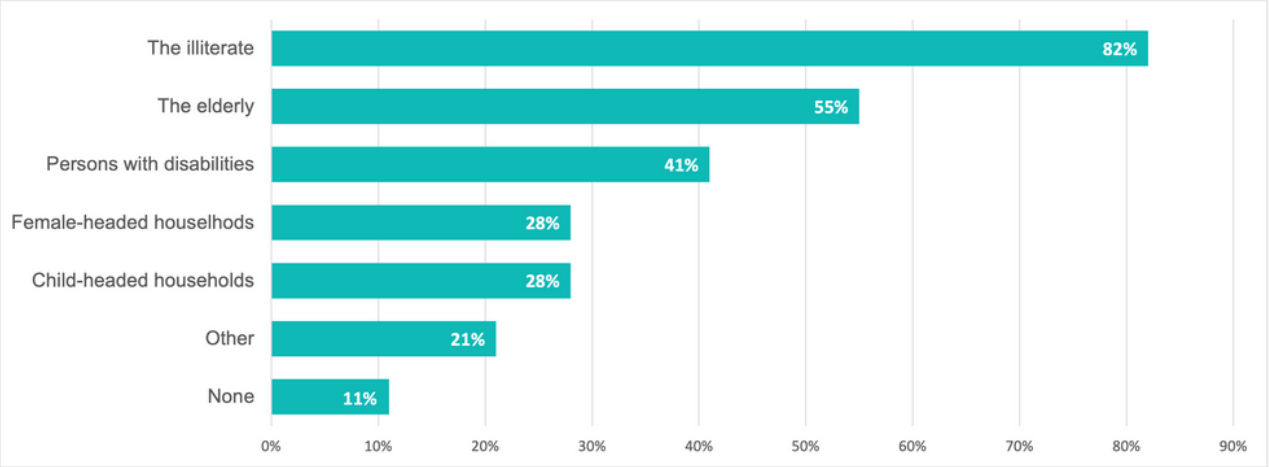


As is usually the case with disasters and emergency contexts, negative effects are most often compounded on the most vulnerable. Therefore, it is important to understand which groups of beneficiaries will be most likely be excluded by the changes in data collection methods as a

[3] Other technologies included Iformbuilder, Survey123, AkvoFlow and WhatsApp.

result of the pandemic. The majority of participants (76%, n=38) reported that their ability to reach the most vulnerable would be affected due to the limitations imposed by COVID-19 on data collection. However, a higher proportion of external M&E consultants indicated that these limitations would have less impact on their ability to reach vulnerable groups, although no further explanation was provided.

Figure 10: Which vulnerable groups of people will likely be most excluded as a result of the changes in data collection methods?



When asked which groups are most vulnerable to exclusion in this context, 84% of respondents said those with low-literacy skills, followed by 56% (n=28) saying the elderly. Just over 40% (n=21) reported that persons living with disabilities will be affected. In this context of the ongoing pandemic, the shift to remote forms of data collection discussed in previous sections of this report will likely require some level of literacy, hearing and/or vision abilities, access to smart phones, and technological know-how among beneficiaries, reflecting a possible basis for these observations.

HOW CAN THESE GROUPS BE INCLUDED IN DATA COLLECTION?

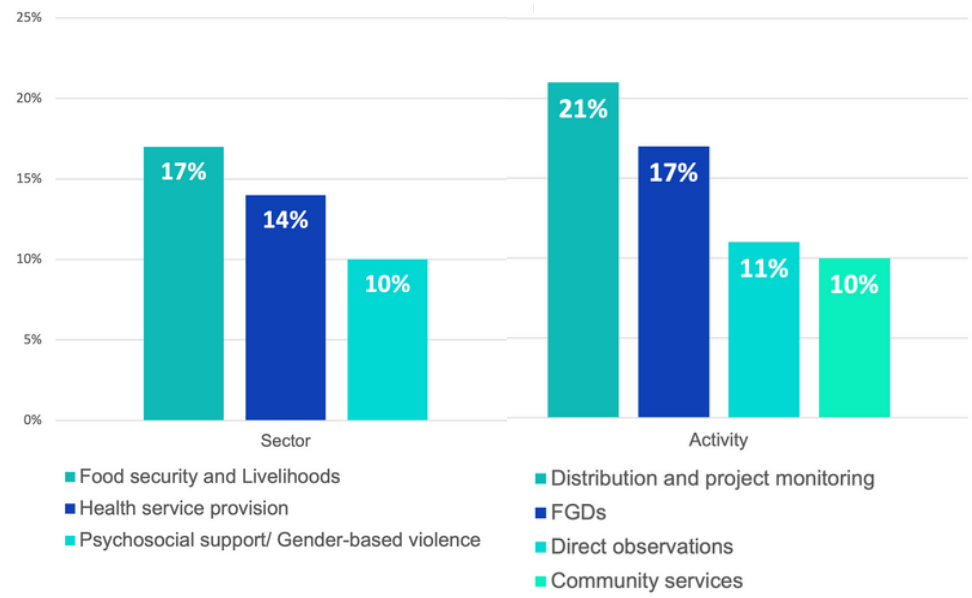
- "Have community leaders and local leaders speak on their behalf and represent their interests in a transparent way - not based on assumptions".
- "Reach out to them through field workers from the same area, or approach their relatives or trusted persons around them."
- "Combine offline and online data collection modalities to reach people with no access to the internet."
- "Peer-to-peer information exchange in their community while following the World Health Organization's safety measures".
- "Establish a communication system between humanitarian workers and the target group(s)."

These suggestions underscore the need for M&E professionals to employ local enumerators, and build relationships and open communication channels with communities to engage them in data collection in order to increase the likelihood of reaching vulnerable people during pandemics who may otherwise be excluded by the changes in data collection methods.

Areas with Highest Risk for Carrying Out Monitoring Exercises

Participants were asked which areas of humanitarian interventions they thought posed the highest risk for carrying out monitoring exercises, with regards to COVID-19. The aim of this question was to understand how different areas or sectors of humanitarian intervention (i.e. protection, food safety, health, ...) may be affected by COVID-19. However, the question was in some cases understood as M&E activities, which nevertheless elicited some interesting insights. In terms of humanitarian areas of intervention, Food Security and Livelihoods (FSL), health service provision, and Psychosocial Support and Gender-Based Violence (PSS and GBV) interventions were most commonly listed as high-risk areas for monitoring activities. In terms of M&E activities more broadly, distribution and project monitoring were seen as the highest risk activity for monitoring and to a lesser extent, direct observations and community surveys.

Figure 11: Which areas of humanitarian intervention do you consider highest risk due to COVID-19 for carrying out monitoring exercises (Activity and Sector)?

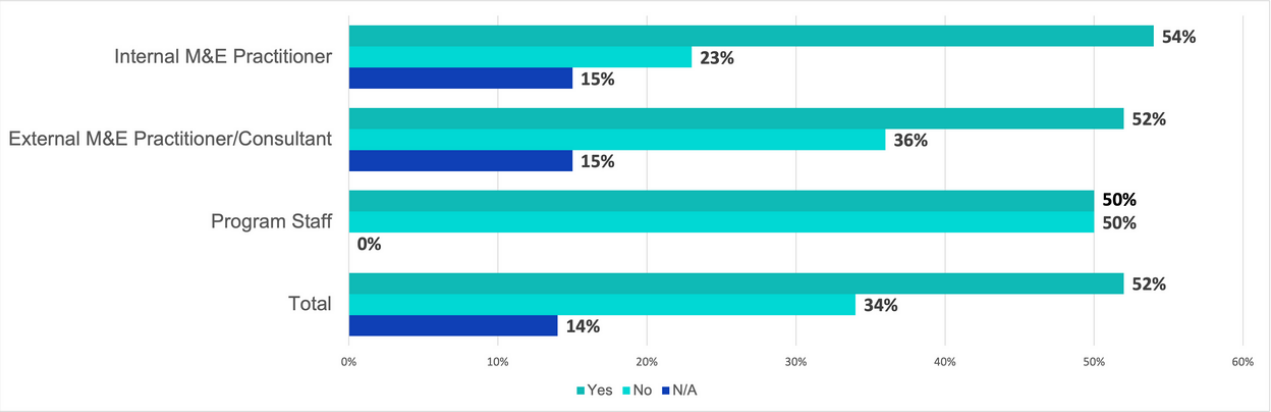


Is Third-Party Monitoring a Justifiable Investment for Aid Agencies During the COVID-19 Pandemic?

TPM has often been drawn on to help organisations access hard-to-reach places and environments of instability for M&E data collection, and offer a mechanism for transparency and

ccountability. However, the scaling back of projects, reduced budgets, and concerns for the safety of beneficiaries and project staff brings into question whether or not remote TPM is a justifiable investment for aid and development agencies during the COVID-19 pandemic [4].

Figure 12: Do you think remote Third-Party Monitoring is a justifiable investment for aid agencies during the COVID-19 pandemic?



Just over half of the participants (52%, n=26) felt that remote TPM is still a justifiable investment during the pandemic with a little over half of external (54%, n=7) and internal (52%, n=17) M&E practitioners agreeing that remote TPM was still justifiable. Similarly, half of the program staff agreed that TPM was a justifiable investment. Reasons for continuing to invest in (remote) TPM included the need to ensure the quality of data collection and project implementation, ensuring the safety and security of project beneficiaries, and ensuring transparency of aid agencies at this time. While it may not be surprising that more internal M&E and project staff than external M&E consultants did not believe that remote TPM at this time was not a justifiable investment, the reasoning underpinning this belief highlight potential additional areas for improvement and adaptation for both NGOs and TPM agencies. Reasons included TPMs lacking contextual understanding of projects, and the need for organisations to adapt and learn themselves, rather than outsource knowledge and resources.

> "It [TPM] is important as humanitarian NGOs need to be transparent and effective during this pandemic".
>
> "They [TPMs] mack the contextual understanding of projects and there are government guidelines now which limit interactions of any nature."

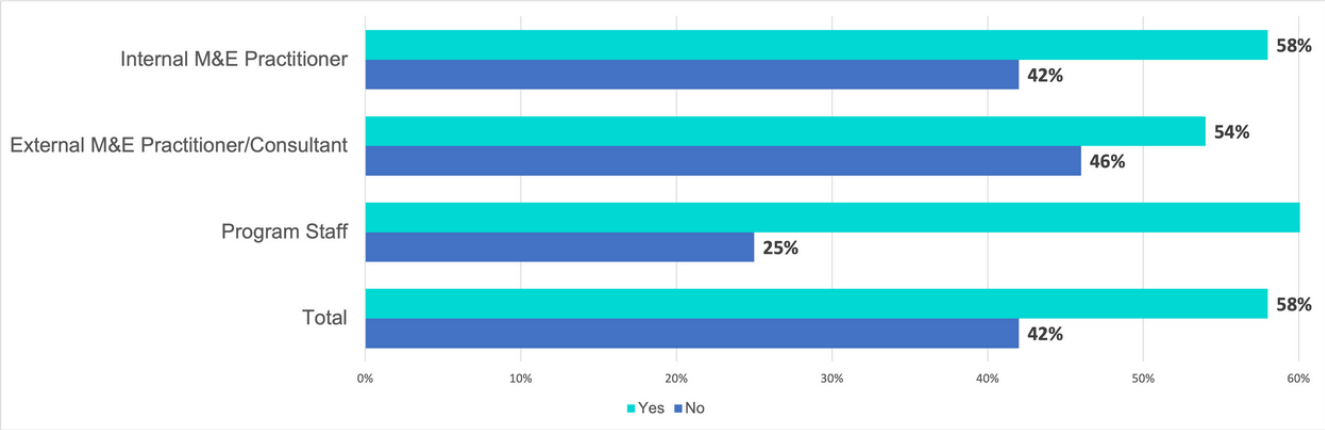
COVID-19 and Lessons Learnt for M&E

Such unprecedented circumstances as the global spread of COVID-19 has ushered in, may offer humanitarian organizations with an equally unique opportunity to reflect on the adaptations

[4] Rous (2020) "8 Ways to Adapt Your M&E During the COVID-19 Pandemic". Available at https://www.humanitariandatasolutions.com/pandemic/

made and lessons learned in order to inform more effective, efficient and safe programming I the future to enhance and overhaul their contingency planning. When asked whether they would do differently anything about their future M&E planning were the pandemic to end, the majority of respondents (58%, n=29) answered in the affirmative.

Figure 13: Let's imagine that the COVID-19 pandemic is over. Is there anything that you would do differently about your future M&E planning?



Practitioners frequently indicated that if the pandemic were over, they would incorporate efforts to improve and increase their capacity for remote data collection into their future M&E planning. Practitioners frequently indicated that they would focus on empowering and building the capacity of local NGO workers, local communities, and beneficiaries for a more participatory approach to data collection.

> "To do more remote video and audio story collection involving NGO workers and local communities in the data collection".
>
> "Make sure that it's more participatory driven by the beneficiaries so that if the team cannot collect data, beneficiaries are empowered to continue to provide that information".
>
> "Plan for more, improved remote methods going forward".
>
> "I will ensure we use more technology and train staff more intensively in the use of electronic data collection tools".
>
> "If remote working is successful then aid agencies should revisit in-person data collection which will reduce costs significantly".

These main lessons learned from the COVID-19 pandemic so far, as they relate to M&E practices, emphasize the need for increased adaptability and flexibility in M&E frameworks and methodologies (although it was highlighted that this is often dependent on or influenced by

donor flexibility), greater community involvement in data collection, and improved organizational infrastructure and resources in order to collect data remotely. These suggestions point to practitioners being focused on the sustainability and replicability of adaptations made to M&E practices, and aiming for benefit beyond the duration of the current crisis.

> "It is possible to systematically collect stories of change for learning purposes through [remote] monitoring and evaluation".
>
> "You need to be adaptable and flexible when it comes to M&E frameworks. Some donors are more willing to adaptand others are more rigid".
>
> "Community involvement is important because most of the monitoring information we are receiving comes from the communities to have high community involvement. Information collection continues remotely".
>
> "Consulting companies now need to come with different methodologies for working remotely. Those companies that realise this faster and are able to identify relevant methodologies will have an edge in the short term".

CONCLUSION

Overall, M&E activities have been severely impacted as a result of the COVID-19 pandemic. Practitioner responses have illustrated how routine M&E activities have been limited and some of the ways in which they have had to adapt their planning to ensure they are limiting the spread of the virus. This has been most evident for in-person data collection methods, particularly for conducting FGDs, community surveys, monitoring and observation visits.

Respondents suggested a plurality of technological platforms, applications and software to aid in remote data collection. However, the dependence on this re-orientation towards remote data collection methods relies on access to technologies, primarily mobile phones and internet connections. Practitioners predicted that the most vulnerable groups affected by this would be those with low-literacy skills, those who do not have access to such technologies or those who are particularly vulnerable to the COVID-19 virus, including the elderly, the economically disadvantaged, and persons living with disabilities. These limitations must be accounted for moving forward to ensure that there are ways to adapt in order to foster their inclusion, and also to be cognizant of these potential gaps in data attained during the pandemic.

The capacity to adjust data collection methods is somewhat differentiated by internal and external practitioners, and program staff. Internal M&E practitioners tended to report having more resources and infrastructure ready in place to continue remote data collection than did either external practitioners and program staff. This situation brings into question the practicality and utility of external M&E practitioners, particularly TPM agencies, at this time. As many projects are frozen and the potential for broad data collection has been restricted, M&E activities are more likely to come under the remit of the implementing organisations themselves.

Common lessons learned for M&E data collection with regards to the COVID-19 pandemic pointed to improving adaptability and flexibility for data collection activities. This would require more investment in infrastructure, resources and capacity building in order to facilitate such adaptability in future similar contexts. Importantly, a common lesson highlighted by practitioners was the necessity to improve community capacity, working towards more participatory M&E approaches, underpinning such adaptability.

Though COVID-19 has thrown into question the extent to which TPM is possible in this context, TPM arguably has a comparative advantage in overcoming some of the limitations imposed by the pandemic. A key lesson learned from the West African Ebola pandemic was that

"responders' unfamiliarity with a local culture can undermine pandemic response" and that therefore, "both tech-enabled and human data collection and evaluation efforts need to be culturally and linguistically sensitive" [5]. Here, TPMs can use their list of local resources to provide local M&E practitioners to monitor and evaluate projects in local communities. In this way, TPMs can continue to provide services in a way that does not undermine pandemic response. However, this would require a more participatory approach to M&E - something many respondents have suggested moving forward - that would ultimately help to build local and community capacity, enhance data quality and flexible data collection methods, while still maintaining a mechanism for NGO transparency and accountability.

[5] Chelsky & Kelly (2020), "Bowling in the dark: Monitoring and evaluation during COVID-19 (Coronavirus)". Avaliable at https://ieg.worldbankgroup.org/blog/mande-covid19

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