

**Needs Assessment,
Monitoring And
Evaluation**



Determining whether specific programmes lead to lasting and real change in the attitudes and behaviours of men and boys—let alone in the social construction of gender—can be challenging. Existing evaluation research offers uneven levels of data, varying rigour in the application of evaluation methods, a variety of measures or indicators (attitudes, knowledge, behaviour and effects on policy) and the common challenge of social desirability (distinguishing between actual behaviour and attitudes and the fact that men may tell researchers what they think they want to hear).

Nevertheless, the number of health-related programmes targeting men and boys and based on a gender perspective has been growing during the past 15 years. Most of these have been at the programme level and generally focus on several health areas, most notably: Sexual and reproductive health (SRH); HIV prevention, treatment, care and support; maternal, newborn and child health (MNCH); fatherhood and GBV. Accompanying these programmes has been an increase in rigorous evaluations and the evidence of the positive impact on male attitudes and behaviours (see Box 3 in the Introduction). More evidence is needed, to be sure, and such programmes have been mostly small scale and short term.

Evaluation is a fundamental part of programme efforts to engage men and boys in health promotion. It can demonstrate the impact of activities and help to

identify gaps and directions for future work. Moreover, evaluation can bolster advocacy efforts by providing policymakers with evidence of the benefits. Too often, however, programmes do not undertake adequate evaluation of their activities owing to a variety of reasons. These include lack of:

- Financial or material resources;
- Qualified and experienced personnel;
- Organizational experience with evaluation;
- The fact that it is not always easy to collect information about some issues related to health and relationships (e.g. sexual behaviours and use of violence) owing to the delicate nature of these topics.

Moreover, caution must be exercised with how much to attribute to certain outcomes and indicators. On the surface, for example, increased condom use among men and use of health services do not inherently reduce gender inequality—unless they also reduce the burden of contraception on women or represent a measureable change in how men view and interact with women.

To help address these different considerations and challenges, this module provides brief explanations related to key steps in the evaluation process and a set of tools specifically related to programmes that engage men and boys.

NEEDS ASSESSMENT

A needs assessment is the process of defining the various factors that influence the attitudes and behaviours of men and boys related to specific health themes in a specific context; the gaps in access to, and quality of, existing information; programmes and services and; subsequently, the types of interventions that would help to address these gaps.

It can include carrying out research firsthand and/or collecting and analyzing data from secondary sources. **The research and/or data highlighted should feature the voices and reflections of men and boys**

themselves, as well as those who interact with them and influence their attitudes and behaviours—such as intimate partners, parents, teachers, and community leaders, among others. As part of the needs-assessment process, it is worthwhile to also identify other organizations that work, or are interested in, engaging with men and boys. These organizations might be able to furnish data and instruments from their own studies and can also be valuable collaborators in the design and implementation of interventions and advocacy activities.

PLANNING

After the needs assessment, the next step is to develop intervention objectives and strategies (such as educational activities, health services, community campaigns and/or advocacy) and to define the duration, number and variety of individuals to be engaged, etc. It is also during this planning phase that the monitoring and evaluation plan and instruments are developed. An important tool for planning, in addition to monitoring and evaluation, is the log frame (see Tools "Logframe"). It entails defining and describing goals, activities, indicators, means of verification and risks/assumptions related to the successful implementation of the project and, when used accurately and consistently, can help in the design, implementation, monitoring and evaluation of the project. Other helpful tools include a detailed work plan and timeline.

BOX 1

NEEDS ASSESSMENT PACKAGE FOR MALE ENGAGEMENT PROGRAMMING

EngenderHealth/ACQUIRE Project and Instituto Promundo developed a package for carrying out a needs assessment to identify gaps in male engagement programming related to HIV/AIDS prevention, treatment, care, treatment and support. The package includes a set of questionnaires designed to help gather firsthand information on existing programmes and policies in a particular setting and to gauge the commitment and capacity of key institutions and stakeholders to integrate male gender norms in

HIV and AIDS prevention, treatment, care, support and treatment.

The questionnaire for health services professionals is included in the tools section. With slight adaptations, this and the others in the package could be utilized for needs assessment featuring men, boys and other health themes.

AVAILABLE FOR DOWNLOAD AT: WWW.AIDSPORTAL.ORG/

BOX 2

PLANNING QUESTIONS

- What are the goals of the intervention?
- Who will be the target population(s)? How will they be engaged?
- Who are the main stakeholders?
- How will the community and its leaders be engaged in the development and implementation of the project?
- What strategies will be used to reach these goals?
- What is necessary to ensure that the intervention is a success?
- What potential barriers exist to success?
- What indicators will be used to measure success?
- What problems may occur during implementation? How will they be addressed?

MONITORING

Monitoring is the process of ensuring that activities are implemented as planned and identifying necessary adjustments in the work plan and/or use of resources. A monitoring plan should be developed prior to the onset of activities and should include process indicators such as financial resources and time expended (quantitative) and response and feedback from staff and participants (qualitative). For example, the monitoring of educational workshops can include tracking of the number of sessions and participants present at each session (quantitative) in addition to weekly meetings between the evaluation team and the facilitators and activity reports which the facilitators complete after each workshop session (qualitative).

EVALUATION

Evaluation is defined as, "a time-bound exercise that attempts to assess systematically and objectively the relevance, performance and success, or the lack thereof, of ongoing and completed programmes" (UNFPA, 2004). The monitoring and evaluation plan should be developed at the project design stage just as the indicators are being selected for the project.

In organizing an evaluation plan, the following questions can be a useful guide (UNFPA, 2004):

1. WHY: What is the goal of the intervention and evaluation and who should benefit from the results? The beneficiaries can include the target population as well as implementing organizations and the broader field of research.

EXAMPLES:

- Was the intervention successful in preventing the transmission of HIV among men and women living within a specific community?
- Did the intervention result in an increase in condom usage by men in their last sexual relation with fixed partners?
- Are men using condoms more often than before the intervention?
- Do the results contribute to a discussion at the federal or local level regarding public policies that address men and boys?
- Did the project increase the amount of time men dedicated to direct care-giving to infants?
- Did the project reduce reported incidences of violence against women?

2. HOW: What would be the best evaluation design? Will there be a pre-test (before the intervention) and a post-test (after the intervention) or only a post-test? Will all the data be quantitative, qualitative or both? Will there be a control group? (See Tools "Qualitative Focus Group Guide" and also Tools "GEM Scale", a quantitative questionnaire).

3. WHO: Who will coordinate and work on the evaluation? Are they familiar with quantitative and/or qualitative research methods and data analysis? How will stakeholders and young men be involved (not necessarily the same young men who will be direct beneficiaries of the intervention, but peer representatives)?

4. HOW MUCH: How much money will be needed to carry out the evaluation? In general, qualitative evaluations are less costly, but require more time for analysis. Quantitative evaluations, on the other hand, are generally more expensive owing to the cost involved in hiring and training interviewers, producing copies of questionnaires, and entering and cleaning the data. Box 3 presents the scale of resources needed for different research designs—even when resources are very limited, it is important to incorporate some minimal package of evaluation into the design of the programme.

The evaluation process can be a considerable investment in technical and financial terms, but it is highly necessary to ensure that resources are maximized and that programme efforts are effective.

There have been many innovative efforts to engage men and boys in the health promotion, however, too few of these efforts have been adequately evaluated and documented. For programmatic purposes, as well as funding and advocacy ones, it is important to increase the body of evaluation studies with respect to working with men and boys as well as the dissemination and exchange of lessons learned and recommendations.

BOX 2

TYPES OF EVALUATION “PACKAGES” BY AMOUNT OF RESOURCES

- Very limited resources = needs assessment + process evaluation + pre and post qualitative
- Limited resources = needs assessment + process evaluation + pre and post quantitative and qualitative
- Modest resources = needs assessment + process evaluation + pre and post quantitative and qualitative + control group
- Sufficient resources = needs assessment + process evaluation + pre and post quantitative and qualitative + triangulation (e.g. in-depth interviews with partners) + control group

TOOLS

Organizational Self-evaluation
Health Facilities Staff Needs Assessment
Sample Logical Framework
The Gender Equitable Men Scale