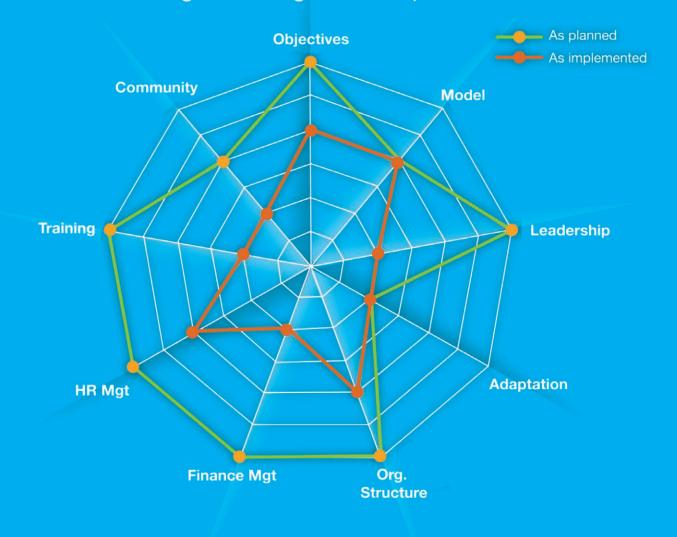
Program Documentation Guide

Strength of Program Components



David Pelletier, PhDDivision of Nutritional Sciences,
Cornell University

Robin Houston, M.D.Global Nutrition Consultant

Silvana Faillace, MPH A2Z Project AED

August 2010









This tool was made possible by the generous support of the American people through the United States Agency for International Development (USAID) under the terms of Cooperative Agreement No. GHS-A-00-05-00012-00. The contents are the responsibility of AED and do not necessarily reflect the views of USAID or the United States Government.

Suggested Citation: Pelletier D, Houston R, Faillace S. Program Documentation Guide. August 2010, A2Z Project, AED, Washington, DC.

Acknowledgements:

The development and testing of this tool and the companion tool (Program Assessment Guide) was made possible through support provided by the Bill & Melinda Gates Foundation, the United States Agency for International Development (USAID)/Health, Infectious Disease and Nutrition (HIDN) Office/Bureau of Global Health, the U.S. Centers for Disease Control and Prevention, the Global Alliance for Improved Nutrition (GAIN), the Micronutrient Initiative (MI), UNICEF and The World Bank. The tool was developed by David Pelletier, (Cornell University) in collaboration with Robin Houston (consultant) and Silvana Faillace (A2Z Project).

The opinions expressed herein are those of the author(s) and do not necessarily reflect the views of AED, the United States Agency for International Development or the Bill & Melinda Gates Foundation.

Copies of the Tool can be obtained from:

A2Z: The USAID Micronutrient and Child Blindness Project AED 1825 Connecticut Ave., NW Washington D.C., 20009-5721

Tel: 202-884-8000 Fax: 202-884-8432

Website: www.a2zproject.org

a2z_info@aed.org

August 2010

Contents

Basic Information

Focal person
Method for the PDG assessment
Description of the focal program

Part I. Program Characteristics

Section 1. Policy environment

Section 2. Management

Section 3. Monitoring and Evaluation

Section 4. Logistics supply

Section 5. BCC/IEC

Section 6. Advocacy

Part II. Program Results

Section 1. Most Recent Data

Section 2. Coverage and impact

Section 3. Equity

Section 4. Efficiency

Section 5. Sustainability

Part III. Supplemental Donor Information

Background and Purpose

n September 2008 leading micronutrient (MN) donors, NGOs, program-oriented researchers and country implementers met at the UNICEF Innocenti Research Center in Florence, Italy, to take stock of the evidence and experience in implementing large-scale micronutrient interventions in low income countries. ¹ In addition to the technical conclusions regarding the effectiveness of specific micronutrient interventions the participants identified some overarching issues needing attention in the future, including the following:

- Country teams lack guidance and are not empowered to assess needs systematically and facilitate evidence-based decisionmaking;
- Weak program monitoring, evaluation, and documentation of performance and impact of MN interventions hinders efforts to strengthen programs, advocacy, accountability and guidance to country-level managers;
- Limited funding for implementation research restricts our understanding of how best to strengthen the design, management, implementation, evaluation, and financing of MN programs at scale.

In light of these conclusions the meeting recommended that guidance and tools be developed to help country teams systematically assess and document the status of their current interventions and identify the actions needed to expand and/or strengthen them. The meeting acknowledged that this will require the development of new methods to systematize contextual knowledge and experience, as distinct from the conventional scientific evidence needed to assess efficacy in small scale trials. The meeting further acknowledged that country teams and international partners each have legitimate but distinct information needs and the tools should attend to both sets of needs. Specifically:

Country teams need specific information about the barriers and enablers to intervention implementation and effectiveness, as well as streamlined processes for reporting to multiple international partners. ■ International partners need systematic and comparable information (across countries and time) on the characteristics of large scale interventions in order to identify and disseminate successful models and practices, and to provide the types of assistance most needed by countries.

In response to these recommendations A2Z, the USAID Micronutrient and Child Blindness Project (the A2Z Project) and the Division of Nutritional Sciences at Cornell University developed and tested two tools, with support from several international partners.²

The Program Documentation Guide (PDG): helps country teams assess the current status of an intervention's implementation, management and results, and streamline the reporting of these characteristics to multiple external partners. In its basic form it is applied in a one-day workshop with 4-10 participants who are most familiar with the intervention in question.

The Program Assessment Guide (PAG): helps country teams critically examine the <u>detailed</u> design of their interventions and delivery systems and develop an action plan, operations research agenda and monitoring and evaluation systems to strengthen these.³ The PAG can be tailored to the needs of particular countries but in its most basic form is applied in a three-day workshop involving 15-30 participants.

The PAG is intended solely to meet the needs of country teams and the PDG is designed also to meet the needs of international partners.

¹ Klemm RDW, Harvey PWJ, Wainwright E, Faillace S, Wasantwisut, E. Micronutrient Programs: What Works and What Needs More Work? A Report of the 2008 Innocenti Process. August 2009, Micronutrient Forum, Washington, DC.

² Financial and/or in-kind support has been provided by the Bill and Melinda Gates Foundation, the Centers for Disease Control and Prevention, the Global Alliance for Improved Nutrition, The Micronutrient Initiative, UNICEF, The World Bank and WHO.

³ See Pelletier D, Corsi A, Hoey L, Houston R, Faillace S. Program Assessment Guide. August 2010, A2Z Project, AED, Washington, DC.

Specific Objectives of the PDG

The PDG provides a consistent framework for use by country teams in order to assess and report on

- 1. The robustness of the program design, management, and delivery systems "as planned." (This refers to a how things were supposed to work, as reflected in project documents and knowledge of participants)
- 2. The current status of program implementation, management and results. (This refers to a description of how things actually happened)
- 3. The factors (barriers and enablers) that are responsible for the gap between what was planned and what has been achieved so far
- 4. The potentially transferable innovations and good practices in relation to management, implementation and results
- 5. The gaps in information (concerning 1-3 above), and thus the adequacy of currently available documentation

Assumptions

The ability of the PDG to reduce the reporting burden on country teams will depend on the extent to which it is supported by the full range of global nutrition partners. A section is provided at the end of the PDG for "supplemental donor information" so that donors are better able to support the core PDG while perhaps requesting certain supplemental information from country teams that is not captured by the core PDG.

Overview of the Tool

The PDG helps country teams organize existing knowledge and experience concerning two key features of nutrition programs: program characteristics and program results.

Program Characteristics includes six components that are recurrent and crucial for effective large scale programs:

- policy environment
- management
- monitoring & evaluation
- logistics supply, and
- BCC/IEC and advocacy

Program Results includes information on five aspects:

- coverage and impact
- data quality and consistency
- equity of coverage and impact
- efficiency in program management, and
- sustainability

For most of the program characteristics the PDG helps country teams organize existing knowledge and experience concerning the adequacy of each component as it was originally designed, the adequacy "as implemented," the barriers and enablers that explain the gap between the two and the degree of variability in each component across various sub-national units (regions, districts or local government units(LGUs). In addition, the templates include a section for each component where respondents can indicate the nature of the evidence used in arriving at these determinations.

In designing the PDG it was necessary to strike a balance between a tool that is detailed and comprehensive versus one that is practical and indicative. The latter was given priority because experience has shown that an indicative template is sufficient to enable country teams to identify the most successful program characteristics and the most critical gaps. This is supported by the positive experiences with the Management and Organizational Sustainability Tool (MOST), a tool developed by Management Sciences for Health (MSH) and implemented in over 20 countries since 2005.4 MOST is based on a three-day workshop to assess the current status of 18 essential components of program management and develop an action plan for strengthening these components. The MOST assessment phase is based entirely on existing contextual knowledge and experience and is completed in one day, followed by action planning in the next two days. The PDG has adapted this one-day assessment process and tailored it to the case of nutrition programs.5

⁴ See Management and Organizational Sustainability Tool (MOST): A guide for users and facilitators. MSH, Boston MA, 2004 (http://erc.msh.org/toolkit/ Tool.cfm?lang=1&TID=162)

⁵ If the country nutrition team should decide, after applying the PDG, that more detailed analysis and action planning is warranted, they could proceed to organize a workshop based on the Program Assessment Guide (PAG) referenced earlier.

Procedure for completing the template

The first step is to identify a focal person who will organize the one-day workshop and take responsibility for reporting and follow-up. The focal point could be a ministry staff member, the chair of a nutrition working group, someone from a donor agency or NGO, an academic, or others. It is important that the focal point, the participants and other stakeholders recognize that the exercise has the constructive purposes of helping country teams assess current status and future needs, streamline reporting to multiple partners and support a global evidence base that will enhance the relevance and effectiveness of support from international partners. As such, the focal point and the participants should be committed to undertaking a candid assessment of the program's current status and barriers and enablers. The participants should be chosen to provide diversity in perspectives on the program as well as being the most knowledgeable concerning various aspects of the program.

We recommend that the focal point follow these steps.

Step 1: Review the templates carefully before you meet with others. If there are any questions that are not clear, contact the A2Z Project for clarification (E-mail: a2z_info@aed.org).

Step 2: Plan to meet with 4-10 individuals who know the intervention/program well. You will need to think carefully about who should be involved, bearing in mind the information needed for various sections of the templates. Include appropriate ministry officials, as well as others such as staff from donor agencies, NGO's academia, etc. The template should take about 4-8 hours to complete in its entirety.

Step 3: Arrange a meeting or series or meetings with the selected group. The focal person will facilitate these meeting(s) to complete the PDG. Each member should first complete the template on their own and then seek consensus on each item. The focal person will facilitate this process (or an external facilitator could be used) and enter the responses into the electronic template. An electronic version of the form can be downloaded to the focal person's computer, completed offline and then submitted electronically. Hard copies of the report can be printed and distributed as needed.

Guidance for Completing the Template Items

For most items the templates solicit three types of responses:

- close-ended responses concerning: a) the status of the item as originally planned and b) the status as actually implemented
- open-ended responses concerning: a) the evidence that was used in arriving at the response for the close-ended items; and b) the barriers and enablers that help explain the gap between what was planned and what has actually happened during implementation
- a space at the end of each component where more explanations can be included if needed

Response choice	Intended meaning
Not at all	the item does not exist or is not functioning
Inadequate	the item exists or is functioning but not nearly to the extent needed to fulfill its intended purpose; program performance is severely compromised
Partially adequate	the item exists and is functioning fairly well but program performance could be better if some investments are made in improving it
Fully adequate	the item is functioning satisfactorily and does not require further investments to improve it

As Planned and As Implemented

To enhance consistency in responses it is useful to have a clear understanding of what is meant by each of the response choices for the close-ended items. These are provided above.

There are variations in the wording of some of the response choices but the intended meaning always is in reference to fulfilling the item's purpose, whether program performance is severely compromised and whether further investments are warranted. Note that these response choices are carefully designed to be decision-oriented: they are intended to help the country teams and the international partners identify which aspects of the program require further investments in order to enhance performance and effectiveness. As such the participants have a strong incentive to report fairly and accurately on each item.

Evidence⁶

Because workshop participants come from many parts, they often differ in their perceptions of how to rate a given item. To help resolve these different views, the template provides a space for the participants to individually record evidence: a brief description of an event or situation that they have seen, heard, or experienced, which supports them in rating the component at the stage they have selected. Later, in heterogeneous small groups, participants will share their evidence and take into account their different perspectives as they seek to reach consensus on each item.

Barriers and Enablers

This item solicits information on the barriers, or factors that are responsible for the gap between what was planned and what was actually implemented and the enablers or success factors that have helped the program minimize the gap. A wide range of factors may be relevant here and the most important ones should be entered in the template.

Geographic Variability

It is often difficult to provide an overall (national) rating for a given item when it is known that the item may be performing very well in some regions, districts or local government units (LGUs) and poorly in others. The column on geographic variability allows respondents to indicate this. NOTE: If a program has been implemented in only a portion of the districts or LGUs in the country, the responses in this column should refer only to those geographic areas where the program is intended to be operating.

Use Additional Space for Open-Ended Items

The space provided in the template for open-ended items is limited but users are urged to use extra sheets of paper as needed to elaborate their answers. Much of the utility from this process lies in the specifics that are identified in these open-ended items.

Basic Information

1. Focal Person: Please provide the full name and contact information of the person completing this questionnaire. Name:____ Telephone: Affiliation (Ministry, unit, etc.): 2. Method for the PDG assessment: Please describe who was involved, when (date) and how (meetings, telephone conversations, etc.) this project documentation was carried out. 3. Focal Program Please describe the intervention or program that is the focus of this assessment. Nutrition problem being addressed: Intervention(s):_____ Target groups:_____ Geographic scope:_____ Year initiated and years expanded:______ Implementing organizations:_____ Partner organizations (incl donors):

Part I. Program Design and Implementation

Section 1: Policy Environment Component

Program characteristic	Status	Barriers or enablers	Geographic variability	Evidence
This intervention fits within the existing national nutrition policy (e.g. the intervention is specifically mentioned or permitted in a national plan of action, policy statement or other formal document)	□ not mentioned or permitted □ not mentioned but permitted □ mentioned and permitted □ no plan or document			
Adequate policy details for this specific intervention are provided in the national plan of action, policy statement or other formal document (e.g. policy specifies national or international norms for dosing, target ages, timing and/or delivery mechanisms)	□ not at all □ present but inadequate □ partial but adequate □ fully adequate □ no plan or document			
Intersectoral cooperation and decision making structural arrangements (e.g. there are structures and/or informal processes for convening key stakeholders and seeking consensus on this intervention policy and delivery strategy that are working well)	□ not at all □ present but inadequate □ partial but adequate □ fully adequate □ no information		□ present in <25% of districts or LGUs □ present in 25-50% of districts or LGUs □ present in 51-75% of districts or LGUs □ present in >76% of districts or LGUs □ no information	

Section 2: Management

Program	As planned	As implemented	Evidence	Barriers or enablers	Geographic
characteristic					variability
The intervention has clear objectives and a plan for implementation	□ not at all □ inadequate □ partially adequate □ fully adequate	☐ not at all ☐ inadequate ☐ partially adequate ☐ fully adequate			☐ adequate in <25% of districts or LGUs ☐ adequate in 25 50% of districts or
(e.g. objectives are specific, measurable, achievable, realistic and timebound; and there is clarity regarding activities and roles and responsibilities for implementation)					LGUs □ adequate in 51 75% of districts or LGUs □ adequate in >76% of districts or LGUs □ not applicable
Program model (e.g. is the intervention supported by a sound program model that suggests that the program inputs will plausibly produce the desired outcomes and impact—based on theory and contextual considerations)	□ not at all □ present but inadequate □ partial but adequate □ fully adequate	□ not at all □ present but inadequate □ partial but adequate □ fully adequate			□ present in <25% of districts or LGUs □ present in 25-50% of districts or LGUs □ present in 51-75% of districts or LGUs □ present in >76% of districts or LGUs □ present in >76% of districts or LGUs □ not applicable
Leadership (e.g. leadership is strong as exhibited by existence of champions, advocates, policy entrepreneurs, and/or visionary managers, with appropriate delegation	□ not at all □ present but inadequate □ partial but adequate □ fully adequate □ no information	□ not at all □ present but inadequate □ partial but adequate □ fully adequate □ no information			□ present in <25% of districts or LGUs □ present in 25-50% of districts or LGUs □ present in 51-75% of districts or LGUs □ present in >76% of districts or LGUs □ present in >76% of districts or LGUs
Adaptive management (e.g. there are routinely used mechanisms at multiple levels of the program, for recognizing implementation problems and adapting implementation to solve these with these adaptations recorded)		□ not present □ present but not recorded □ present and recorded □ no information			□ present in <25% of districts or LGUs □ present in 25-50% of districts or LGUs □ present in 51-75% of districts or LGUs □ present in >76% of districts or LGUs □ present in >76% of districts or LGUs

Section 2: Management (continued)

Program characteristic	As planned	As implemented	Evidence	Barriers or enablers	Geographic variability
Organizational structure /communication (e.g. the program has appropriate structures (technical working groups, partnership groups, and/or task forces, etc) with well understood roles and responsibilities and these structures are communicating and functioning well)	□ structures not defined □ defined but inadequate □ defined and somewhat adequate □ defined and fully adequate □ no information	□ not at all □ inadequate □ partially adequate □ fully adequate			 □ present in <25% of districts or LGUs □ present in 25-50% of districts or LGUs □ present in 51-75% of districts or LGUs □ present in >76% of districts or LGUs □ present in >76% of districts or LGUs □ no information
Financial management (e.g. there is an appropriate system for ensuring adequate financing, oversight, and allocation across program components, administrative levels and geographic areas)	□ not at all □ present but inadequate □ partial but adequate □ fully adequate □ no information	□ not at all □ present but inadequate □ partial but adequate □ fully adequate			□ present in <25% of districts or LGUs □ present in 25-50% of districts or LGUs □ present in 51-75% of districts or LGUs □ present in >76% of districts or LGUs □ present in >76% of districts or LGUs □ no information
Human resource management (e.g. does the program have adequate numbers of staff at all levels, and are the staff adequately motivated through appropriate intrinsic and extrinsic incentives and sanctions)	staff levels and incentives inadequate levels inadequate but incentives adequate levels adequate but incentives inadequate levels and incentives adequate levels and incentives adequate louin incentives and incentives	staff levels and incentives inadequate levels inadequate but incentives adequate levels adequate but incentives inadequate levels adequate levels and incentives adequate louincentives and incentives and incentives and incentives and incentives			 □ present in <25% of districts or LGUs □ present in 25-50% of districts or LGUs □ present in 51-75% of districts or LGUs □ present in >76% of districts or LGUs □ present in >76% of districts or LGUs □ no information
Training for service delivery and supervision (e.g. for service providers and supervisors, was there an appropriate training program with regard to methodology, duration, quality, and post-training evaluation)		□ not present □ present but not recorded □ present and recorded □ no information			□ present in <25% of districts or LGUs □ present in 25-50% of districts or LGUs □ present in 51-75% of districts or LGUs □ present in >76% of districts or LGUs □ present in >76% of districts or LGUs □ no information

Section 2: Management (continued)

Program characteristic	As planned	As implemented	Evidence	Barriers or enablers	Geographic variability
Community involvement (e.g. did the program include activities designed to create and sustain community awareness and support for the intervention.)	□ not at all □ present but inadequate □ partial but adequate □ fully adequate □ no information	□ not at all □ present but inadequate □ partial but adequate □ fully adequate □ no information			□ present in <25% of districts or LGUs □ present in 25-50% of districts or LGUs □ present in 51-75% of districts or LGUs □ present in >76% of districts or LGUs □ present in >76% of districts or LGUs □ no information

Section 3: Monitoring and Evaluation

Program characteristic	As planned	As implemented	Evidence	Barriers or enablers	Geographic variability
Overall M&E for this intervention (e.g. how strong is the M&E system that provides information to support this intervention, including quality of design, timeliness, financing and implementation)	□ not at all □ inadequate □ partially adequate □ fully adequate	□ not at all □ inadequate □ partially adequate □ fully adequate			□ adequate in <25% of districts or LGUs □ adequate in 25- 50% of districts or LGUs □ adequate in 51- 75% of districts or LGUs □ adequate in >76% of districts or LGUs □ adequate in >76% of districts or LGUs □ no information
Human resource capacity (e.g. does the program ensure adequate staff levels and skills for data collection, processing, analysis, interpretation, and reporting for this intervention)	□ not at all □ inadequate □ partially adequate □ fully adequate	☐ not at all ☐ inadequate ☐ partially adequate ☐ fully adequate			□ adequate in <25% of districts or LGUs □ adequate in 25- 50% of districts or LGUs □ adequate in 51- 75% of districts or LGUs □ adequate in >76% of districts or LGUs □ adequate in >76% of districts or LGUs □ no information
Indicator selection (e.g. are the indicators for this intervention appropriate, consistent with the logframe, cover key aspects of implementation, and correctly defined)	□ not at all □ inadequate □ partially adequate □ fully adequate	□ not at all □ inadequate □ partially adequate □ fully adequate			□ adequate in <25% of districts or LGUs □ adequate in 25-50% of districts or LGUs □ adequate in 51 75% of districts or LGUs □ adequate in >76% of districts or LGUs □ ano information
Data use and follow-through (e.g. are the data from the M&E system routinely used at multiple levels of the program, to inform management and implemenation decisions, and is this practice documented)	□ not at all □ inadequate □ partially adequate □ fully adequate □ no information	□ not at all □ inadequate □ partially adequate □ fully adequate □ no information			□ adequate in <25% of districts or LGUs □ adequate in 25- 50% of districts or LGUs □ adequate in 51- 75% of districts or LGUs □ adequate in >76% of districts or LGUs □ an oinformation

Section 3: Monitoring and Evaluation (continued)

Program characteristic	As planned	As implemented	Evidence	Barriers or enablers	Geographic variability
Responsive operations research (e.g. does the program have an effective and timely mechanism for conducting periodic operations research to strengthen overall design and implementation)	□ not at all □ present but inadequate □ partial but adequate □ fully adequate	□ not at all □ present but inadequate □ partial but adequate □ fully adequate			□ present in <25% of districts or LGUs □ present in 25-50% of districts or LGUs □ present in 51-75% of districts or LGUs □ present in >76% of districts or LGUs □ present in >76% of districts or LGUs □ no information

Section 4: Logistics Supply

Program characteristic	As planned	As implemented	Evidence	Barriers or enablers	Geographic variability
For program management (e.g. does the program have access to adequate supplies of equipment and materials needed for program management—such as computers, paper, storage facilities, office space)	☐ not at all ☐ present but inadequate ☐ partial but adequate ☐ fully adequate	□ not at all □ present but inadequate □ partial but adequate □ fully adequate			□ adequate in <25% of districts or LGUs □ adequate in 25- 50% of districts or LGUs □ adequate in 51- 75% of districts or LGUs □ adequate in >76% of districts or LGUs □ and comparison □ no information
For program delivery (e.g. does the program have access to adequate supplies of equipment and materials needed for program implementation—such as supplements, fortificant, IEC materials, transportation, tea and snacks, etc)	□ not at all □ present but inadequate □ partially adequate □ fully adequate	□ not at all □ present but inadequate □ partially adequate □ fully adequate			□ adequate in <25% of districts or LGUs □ adequate in 25- 50% of districts or LGUs □ adequate in 51- 75% of districts or LGUs □ adequate in >76% of districts or LGUs □ and companies or LGUs □ and companies or LGUs □ no information
Logistics information system (e.g. Is there a well functioning LMIS that identifies and records stockouts and other logistics supply information)	□ not at all □ present but inadequate □ partially adequate □ fully adequate	□ not at all □ present but inadequate □ partially adequate □ fully adequate			□ adequate in <25% of districts or LGUs □ adequate in 25- 50% of districts or LGUs □ adequate in 51- 75% of districts or LGUs □ adequate in >76% of districts or LGUs □ no information

Section 5: BCC/IEC

Program characteristic	As planned	As implemented	Evidence	Barriers or enablers	Geographic variability
Target group (e.g. Has the program defined and reached the appropriate target groups as related to the program objectives, including age, gender, ethnic minorities, SES, etc.)	□ not at all □ inadequate □ partially adequate □ fully adequate □ no information	□ not at all □ inadequate □ partially adequate □ fully adequate □ no information			□ adequate in <25% of districts or LGUs □ adequate in 25 50% of districts or LGUs □ adequate in 51- 75% of districts or LGUs □ adequate in >76% of districts or LGUs □ and comparison □ and comparison
BCC/IEC approaches (e.g. does the program have messages, channels of delivery and messengers appropriate to the target groups, and the key behaviors being addressed.)	□ not at all □ present but inadequate □ partial but adequate □ fully adequate	□ not at all □ present but inadequate □ partial but adequate □ fully adequate			□ present in <25% of districts or LGUs □ present in 25-50% of districts or LGUs □ present in 51-75% of districts or LGUs □ present in >76% of districts or LGUs □ present in >76% of districts or LGUs □ no information
BCC/IEC formative research and evaluation (e.g. Did the BCC/IEC component develop its approach using formative research, and has it used evaluation to improve its design)	□ not at all □ present but inadequate □ partial but adequate □ fully adequate	□ not at all □ present but inadequate □ partial but adequate □ fully adequate			□ present in <25% of districts or LGUs □ present in 25-50% of districts or LGUs □ present in 51-75% of districts or LGUs □ present in >76% of districts or LGUs □ present in >76% of districts or LGUs □ no information

Section 6: Advocacy

Program characteristic	As planned	As implemented	Evidence	Barriers or enablers	Geographic variability
Approaches at multiple levels (e.g. Has the program directed advocacy efforts toward all the critical target groups—for example, elected officials, ministry policy makers and managers, donors, community leaders, etc in order to ensure program effectiveness and sustainability)	□ not at all □ inadequate □ partially adequate □ fully adequate □ no information	□ not at all □ inadequate □ partially adequate □ fully adequate □ no information			□ adequate in <25% of districts or LGUs □ adequate in 25- 50% of districts or LGUs □ adequate in 51- 75% of districts or LGUs □ adequate in >76% of districts or LGUs □ no information
Quality and consistency of messaging (e.g. Is the intervention presented consistently by various sectors and partners, with agreement on the most appropriate messaging)	□ not at all □ inadequate □ partially adequate □ fully adequate □ no information	□ not at all □ inadequate □ partially adequate □ fully adequate □ no information			□ adequate in <25% of districts or LGUs □ adequate in 25- 50% of districts or LGUs □ adequate in 51- 75% of districts or LGUs □ adequate in >76% of districts or LGUs □ and countricts or LGUs □ no information
Alliance building (e.g. Has the program undertaken systematic efforts to build and sustain alliances among key partners—such as donors, government sectors, civil society leaders, private sector, etc)	□ not at all □ inadequate □ partially adequate □ fully adequate □ no information	□ not at all □ inadequate □ partially adequate □ fully adequate □ no information			□ adequate in <25% of districts or LGUs □ adequate in 25- 50% of districts or LGUs □ adequate in 51- 75% of districts or LGUs □ adequate in >76% of districts or LGUs □ no information
Operational plan (e.g. Does the advocacy component have a defined multiyear workplan, with adequate finances and staff, to achieve advocacy objectives)	□ not at all □ present but inadequate □ partial but adequate □ fully adequate	□ not at all □ present but inadequate □ partial but adequate □ fully adequate			□ present in <25% of districts or LGUs □ present in 25-50% of districts or LGUs □ present in 51-75% of districts or LGUs □ present in >76% of districts or LGUs □ present in >76% of districts or LGUs □ no information

Part II. Program Results

Section 1: Most Recent Data

Supplementation

	Description of Indicator	Finding	Year	Data Source	Time Trend
Coverage					
Compliance					
Impact					

Fortification

	Description of Indicator	Finding	Year	Data Source	Time Trend
Fortificant Level	In Food Supply				
	At Household Level				
Estimated Intake	Actual amount				
	% RDA				
Coverage	% Household using fortified product				
Impact	Biochemical				
	Functional				

Section 2: Coverage and Impact

Program characteristic	As implemented	Explanation for response
Data quality (e.g. Are the data related to coverage and impact complete (few missing data), and accurate (few data entry errors) with regard to data collection, recording, reporting and aggregation)	☐ not at all ☐ inadequate ☐ partially adequate ☐ fully adequate ☐ no information	
Consistency of results from multiple sources (e.g. Does the program have information from different sources (surveys, HMIS) that presents a consistent picture)	□ not consistent □ somewhat consistent □ largely consistent □ fully consistent □ no information	
Consistency between coverage and impact (e.g. Is there a consistent relationship between coverage and impact across time and space, that is, high coverage areas demonstrate greater impact)	□ not consistent □ somewhat consistent □ largely consistent □ fully consistent □ no information	
Consistency of coverage / impact with process indicators (e.g. Is there consistency between the coverage achieved, and the process indicators suggesting adequate program implementation—across time and space)	□ not consistent □ somewhat consistent □ largely consistent □ fully consistent □ no information	

Section 3: Equity (disparities across geographic and social groups)

Program characteristic	As implemented	Explanation for response
Geographic variability (e.g. Are there differences in indicators of impact and/or coverage across geographic areas, and are these persistent over time)	□ extreme differences □ considerable differences □ some differences □ little or no difference □ no information	
Gender and age equity (e.g. Are there differences in indicators of impact and/or coverage across age and/or gender categories)	□ extreme differences □ considerable differences □ some differences □ little or no difference □ no information	
Socio-economic equity (e.g. Are there differences in indicators of impact and/or coverage across socio-economic groups)	□ extreme differences □ considerable differences □ some differences □ little or no difference □ no information	
Ethnicity, religious or disadvantaged group equity (e.g. Are there differences in indicators of impact and/or coverage across ethnic, religious, or disadvantaged groups)	□ extreme differences □ considerable differences □ some differences □ little or no difference □ no information	

Section 4: Efficiency

Program characteristic	As implemented	Explanation for response
Administrative efficiency (e.g. How efficient are the routine administrative functions such as hiring, firing, training, logistics management, monitoring and reporting, etc.)	□ extremely inefficient □ considerably inefficient □ somewhat inefficient □ very efficient	
Financial efficiency (e.g. How efficient are the routine financial management functions such as acquiring and managing government and donor funds, disbursing funds for program use, financial reporting, accountability, and use for intended purposes etc)	□ extremely inefficient □ considerably inefficient □ somewhat inefficient □ very efficient	
Change management efficiency (e.g. How efficient is the program in institutionalizing changes in policies and/or administrative procedures related to human resources, logistics, monitoring, etc.)	□ extremely inefficient □ considerably inefficient □ somewhat inefficient □ very efficient	
Narrative comments: (Please add any comment	nts or examples that help expl	lain the entries above)

Section 5: Sustainability

Program characteristic	As implemented	Explanation for response
Political commitment (e.g. To what extent are political leaders committed to allocating human, financial and institutional resources, with sufficient scale and intensity to meet program objectives)	□ not at all □ inadequate □ partially adequate □ fully adequate	
Bureaucratic commitment (multiple levels) (e.g. To what extent are senior ministry administrators and managers committed to allocating human, financial and institutional resources, with sufficient scale and intensity to meet program objectives)	□ not at all □ inadequate □ partially adequate □ fully adequate	
Financial sustainability (e.g. To what extent does this intervention have secure financing—from government and/or non-government sources beyond the next 5 years)	☐ not at all ☐ inadequate ☐ partially adequate ☐ fully adequate	
Community commitment (e.g. To what extent are community leaders and organizations committed to ensuring that this intervention continues indefinitely, such as fitting intervention activities into their community structure, ensuring that the structure is functional and viable over the long term)	□ not at all □ inadequate □ partially adequate □ fully adequate	
Partner support (e.g. To what extent are partners supporting the mechanisms through which the program becomes sustainable, such as capacity building, ensuring continued government financing, ensuring political support)	□ not at all □ inadequate □ partially adequate □ fully adequate	
Narrative comments: (Please add any commer	nts or examples that help expl	ain the entries above)

Part III. Supplemental Donor Information

Please provide any additional information needed for a specific donor report.

A2Z: The USAID Micronutrient and Child Blindness Project
AED

1825 Connecticut Ave., NW Washington D.C., 20009-5721 Tel: 202-884-8000 Fax: 202-884-8432

Website: www.a2zproject.org