OVERVIEW OF THE PILOT PROCESS
AND FEEDBACK RECEIVED

30th ALNAP Meeting
Berlin, Germany
2 March 2015
Pilot process acknowledgements

The ALNAP Secretariat would like to thank first and foremost John Cosgrave and Margie Buchanan-Smith for their continued engagement and passionate work on drafting, improving, promoting and using the EHA Guide as well as previous EHA training materials over the course of the last several years.

A huge thank you is due to the hundreds of piloters and users of the EHA Guide who have taken time to engage with this materials and get back to use with insights, feedback, suggestions for improvement, or simply a word of acknowledgement and appreciation. We have been overwhelmed by the willingness of the ALNAP Network Members and beyond to take part in the pilot activities, to review the EHA e-learning course co-developed with UNICEF, and share their views on how to make the Guide more useful and practitioner focused. All feedback from the 18-month pilot process has been captured and reviewed by the ALNAP Secretariat and will be invaluable in revising and finalising the EHA Guide.

The feedback received is the foundation of the validation workshop that marks the conclusion of the pilot. We are grateful to Ralf Otto for leading us through this process.

Many thanks go to John Mitchell and Paul Knox Clarke and to the Communication team in the ALNAP Secretariat for their continuous support and creativity that succeeded in making the EHA Guide an approachable and unintimidating resource. Thanks go out in particular to Patricia Curmi, Franziska Orphal and Maria Gili.

Lastly, a very special thank you also goes to Wendy Fenton, from HPN, who initially launched a survey among HPN Members who recognised the need for new guidance on the topic of evaluating humanitarian action.

Francesca Bonino and Alexandra Warner

London, 16 February 2015
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1. History of the EHA Guide

Though the most visible stage in the development of the Evaluation of Humanitarian Action Guide, the 18-month pilot process was only a small component of the lifeline of this initiative. This section aims to breakdown the stages in the development of the EHA Guide as well as give some insight into the origins of this publication.

1998  

1999  
The first humanitarian RTE is completed: Danida/ETC UK Real Time Evaluation of the Humanitarian Response to the Crisis in Kosovo.

2000  
ALNAP holds a 2-day ‘State of the Art’ Colloquium on Humanitarian Evaluation in New York to prioritise the identified training need and activities, to identify gaps in current evaluation of humanitarian action guidance material and form an ALNAP Training Advisory Group.

2001  
Initial set of training materials commissioned by ALNAP, and developed by Sara Swords with significant input from Sheila Reed of InterWorks. Training materials initially designed separately for evaluation managers and for evaluators. Piloted in Dublin at a 5-day workshop, hosted by Ireland Aid (see: www.mande.co.uk/archives/200205005.htm).

2002  
UNHCR Evaluation and Policy Analysis Unit publishes its Frequently Asked Questions on RTEs. (By Arafat Jamal and Jeff Crisp; See: www.unhcr.org/3ce372204.pdf). RTEs in the humanitarian context began to take off with their use by UNHCR. The first formal UNHCR RTE was of the Eritrea-Sudan emergency in 2000 following the influx of refugees in Kerbala (Jamal, 2001).

2002 - 2003  
Several training courses are conducted by Sara Swords and Sheila Reed. (These training courses were used to enhance the quality of the materials. The training materials were updated in July 2003).

2006  
Release of Evaluating humanitarian action using the OECD-DAC criteria: An ALNAP guide for humanitarian agencies, by Tony Beck. (See: www.alnap.org/material/78.aspx) Training materials updated and adapted by Margie Buchanan-Smith and John Telford, in preparation for a 3-day combined training for evaluation managers, evaluators and evaluation users.

2007  
Three 3-day training course on EHA, using new training materials, were run by Channel Research and ALNAP, facilitated by Margie Buchanan-Smith and John Telford.

2009  
The Humanitarian Practice Network (HPN) administered a stakeholder survey to gather information that would feed into its new 3 year strategy. Among other questions, the survey asked: ‘Which Good Practice Review should we revise…?’ The 1998 Evaluating humanitarian assistance programmes in complex emergencies, by Alistair Hallam, was at the top of the list. Members felt that more guidance was needed on how to plan evaluations and on how to adapt evaluation methods to humanitarian situations.

Survey conducted of the HPN membership on possible Humanitarian Evaluation Guidance (received 252 responses). The survey questions included:

- Questions about the format of any possible guidance;
- Questions about the content of the guidance. (The 5 topics most often rated as critical and useful were, in order: evaluation in complex emergencies, making useful recommendations, evaluation methods, writing a useful evaluation report, evaluation criteria).

Start of ALNAP’s initiative ‘Harnessing the power of evaluation’, a follow-up of Peta Sandison’s 2006 Review of Humanitarian Action on evaluation utilisation.

IPDET runs its first training module on EHA, facilitated by Margie Buchanan-Smith and John Cosgrave.

Call for expressions of interest for the authoring a new ‘ALNAP Guide on Evaluating Humanitarian Action’.

Start of scoping by John Cosgrave and Margie Buchanan-Smith to plan the EHA Guide. This included:

- Review of existing guidance,
- Review of the HPN stakeholder survey results
- Convene a workshop on humanitarian evaluation capacities to better understand gaps and users’ needs
- Interviews with evaluation managers, programme managers and evaluators
- Review of ALNAP’s meta-evaluations to identify areas of persistent weakness in EHA.

Based on the findings from these, John and Margie proposed ways forward for guidance on evaluating humanitarian action. These were approved by ALNAP and the drafting process began.
JUNE 2011 – FEB 2012
Drafting of EHA Guide. 3 drafts submitted to the ALNAP Secretariat for comment. The third draft was then shared with the Advisory Group for comments over a six week period. During the drafting process, there were also several changes in the ALNAP Secretariat team supporting the EHA Guide development.

NOV 2012
John and Margie submit the fourth draft of the EHA guide. This draft, after editing and formatting, becomes the pilot version of the guide.

2013
Conclusion of ‘Harnessing the power of evaluation’ with the release of the final study and capacities framework on how to improve the utilisation of evaluation findings and recommendations, Using Evaluation for a Change: Insights from humanitarian practitioners, by Alistair Hallam and Francesca Bonino. (See: www.alnap.org/resource/8980)

MARCH 2015
- Launch of ALNAP-UNICEF Introduction to Evaluating Humanitarian Action e-learning course. (See: www.mymande.org/elearning/course-details/16)

JUNE 2013
Publication of the EHA Guide and start of active pilot process for the English version of the EHA Guide.

APRIL 2013
Design of active pilot process of the EHA Guide. This included scoping interviews with the implementers of other guidance pilot processes, including:

APRIL 2014
Launch of the French and Spanish version of the EHA Guide.

NOV 2013
Development of ALNAP-UNICEF Introduction to Evaluating Humanitarian Action e-learning course starts.

NOV 2014
Close of the EHA Guide active pilot process.

DEC 2014
Release of Evaluating protection in humanitarian action: issues and challenges, a scoping study by Francesca Bonino. (See: www.alnap.org/evaluating-protection)
2. Description of the Pilot process

Means of gathering feedback

The following means of gathering feedback are organised in descending order in terms of the breadth and depth of feedback that was received.

- **Shadowing evaluation exercises in real time**: Where humanitarian organisations agreed to have an evaluation activities (e.g. during ToR development, inception phase, follow up) or EHA-related activities, for which they would use or refer to the EHA Guide, shadowed by the ALNAP Secretariat. In some instances, this was in exchange for remote advisory support. Insights were captured from both evaluation managers and evaluation team leaders.

- **Development of e-learning course based on the EHA Guide**: ALNAP and UNICEF, in collaboration with EvalPartners and UNEG, have developed an introductory level e-learning course on EHA. As part of this process, 43 individuals from across the ALNAP Membership and beyond reviewed the 10 units of the course. In many instances inputs could be upcycled or related to the pilot EHA Guide.

- **Phone interviews**: The ALNAP Secretariat reached out to ALNAP Member representatives and others to gather insights and good practice examples for the revision of the EHA Guide.

- **Email**: At times, piloters reached out to the ALNAP Secretariat with specific feedback. Though this occurred infrequently, many piloters who contributed in this way provided very detailed feedback, sometimes on a page by page basis.

- **Unsolicited, verbal feedback**: Periodically, in margins of other meetings and events, such feedback would be shared with of the ALNAP Secretariat. This type of feedback was then written up and sent to the ALNAP internal impact log system (email-based system).

- **Surveys**: An online and PDF survey were launched in August 2014, which proved to be one the least popular means of sharing feedback. There was a total of 41 responses.

- **EHA Guide feedback buttons**: Integrated into every page of the EHA Guide was a feedback button that automatically generated an email to the ALNAP Secretariat. This means was seldom used.
What do we know and not know about piloters?

As the pilot progressed, three categories of users emerged: shadowed piloters, active piloters and others.

- **Shadowed piloters**: For some of these activities, the ALNAP Secretariat provided remote advisory support.

- **Active piloters**: organisations or individuals that were actively using and/or referring to the Guide but were not, or not consistently, feeding back to the ALNAP Secretariat. Most often, the ALNAP Secretariat was told of this use through informal conversation. Nonetheless, if asked, active piloters were likely to provide feedback.

- **“Others”**: are organisations or individuals that have expressed interest in the Guide and pilot, or circulated the Guide. This group did not provide feedback as frequently, if at all. This group was more likely to use the survey or email.

These three groups perfectly fit the commonly used analogy of an iceberg. As we move from core piloters to others, the groups increased considerably in size, yet what is known of these becomes much foggier and incomplete.

To download the Guide, individuals had to fill-in a pre-download questionnaire. The questionnaire asked for individuals’ name and email. As of mid-April 2014, there were 1,537 respondents. However, based on our analytic information there were over 5,117 downloads of the Guide in this same period. This pointed to an issue in when the pre-download questionnaire appeared on the ALNAP website.

Moreover, it is difficult to measure how many people may have downloaded the Guide and circulated the file via email or other means. Also, the ALNAP Secretariat has found instances of people or organisations posting the resource on their website instead of linking to the ALNAP EHA page. It is difficult to gauge how many people downloaded the Guide through these other locations.
Shadowed Piloters:

<table>
<thead>
<tr>
<th>Activities</th>
<th>Examples of who has engaged and how so far:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full evaluation</td>
<td>ACF-led consortium evaluation - Scale up, build up: Strengthening local alliances and advocacy and empowering champions on disaster risk reduction (SUBU), Philippines. Participation in pilot formally stipulated in ToR, received remote advisory support from ALNAP Sec. [Aug 2013]</td>
</tr>
<tr>
<td></td>
<td>UNICEF – EHA of response to the Abyan Emergencies, Yemen. Participation in pilot formally stipulated in ToR, received remote advisory support from ALNAP Sec. [Nov 2013] Evaluation cancelled due to security concerns and poor quality of inception report</td>
</tr>
<tr>
<td></td>
<td>Chaine du Bonheur (Swiss Solidarity) – Project evaluation 2004 Asian Earthquake and Tsunamis. Participation in pilot formally stipulated in ToR. [January 2014]</td>
</tr>
<tr>
<td></td>
<td>Canadian Red Cross-led - Final Evaluation of the Health Emergency Response Unit/ERU Operation in the Philippines. Participation in pilot formally stipulated in ToR, received remote advisory support from ALNAP Sec. [February 2014]</td>
</tr>
<tr>
<td></td>
<td>ACF - Evaluation of ACF International’s Response to Typhoon Haiyan/Yolanda, Philippines. Participation in pilot formally stipulated in ToR, received remote advisory support from ALNAP Sec. [March 2014]</td>
</tr>
<tr>
<td>Facilitating EHA training or capacity building</td>
<td>IECAH, Spain - Ultimas tendencias en EHA [July 2013]</td>
</tr>
<tr>
<td></td>
<td>Groupe URD, France – Evaluating the Quality of Humanitarian Action training</td>
</tr>
<tr>
<td></td>
<td>IECAH, Online course – Evaluación y gestión de la calidad de la acción humanitaria (three-module course, module on evaluation was strongly based on the EHA Guide). Alexandra from the ALNAP Secretariat was an observer in the course and introduced the EHE Guide and pilot process.</td>
</tr>
</tbody>
</table>
### Active Piloters:

<table>
<thead>
<tr>
<th>Activities</th>
<th>Examples of who has engaged and how so far:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Used as reference</td>
<td>Sarah Bailey, independent consultant, post-evaluation of Concern cash-based programming in North Kivu, DRC.</td>
</tr>
<tr>
<td></td>
<td>Silva Sedrakian, Oxfam America</td>
</tr>
<tr>
<td></td>
<td>AIDMI, used the EHA Guide as its internal evaluation guide, also condensed it into a quick reference document.</td>
</tr>
<tr>
<td></td>
<td>Used specifically for review of own projects and review of 10 years after the Tsunami.</td>
</tr>
<tr>
<td></td>
<td>UNHCR, Guide “used all the time”, heavily referred to during the development of upcoming Syria evaluation [January 2014], were provided some assistance by ALNAP Secretariat during the evaluability assessment phase.</td>
</tr>
<tr>
<td></td>
<td>Independent Consultants – a number of independent consultants provided feedback on the EHA Guide. This was the user most likely to fill-out the survey in detail.</td>
</tr>
<tr>
<td></td>
<td>Lian Bradley, Evaluation and Learning Advisor, NRC, provided mini-case studies. Also put ALNAP in contact with external evaluators that had done work for NRC for the gathering of mini-case studies.</td>
</tr>
<tr>
<td></td>
<td>Hana Crowe, Save the Children US, provided mini-case studies.</td>
</tr>
<tr>
<td>Facilitating EHA training or capacity building</td>
<td>IECAH, Spain - Ultimas tendencias en EHA [July 2013]</td>
</tr>
<tr>
<td></td>
<td>Groupe URD, France – L’évaluation de la qualité de l’action humanitaire [October 2013]. Used the guide as a core reference and extracted key messages from the guide and included them in course handbook</td>
</tr>
<tr>
<td></td>
<td>IECAH, Online course – Evaluación y gestión de la calidad de la acción humanitaria (three module course, module on evaluation was strongly based on the EHA Guide). Alexandra from the ALNAP Secretariat was an observer in the course and introduced the EHA Guide and pilot process.</td>
</tr>
<tr>
<td></td>
<td>Groupe URD, Haiti - L’évaluation de la qualité de l’action humanitaire [May 2014]. Used the Guide as a reference and suggested it as supplementary reading.</td>
</tr>
<tr>
<td>Developing evaluation policies or other evaluation guidance material</td>
<td>ACF – review of Evaluation Policy and Guidelines</td>
</tr>
<tr>
<td></td>
<td>NRC – revision of Evaluation Policy</td>
</tr>
</tbody>
</table>
It is also worth noting that the draft units of the ALNAP-UNICEF Introduction to EHA course was reviewed by over 40 individuals from 30 different organisations. There was some overlap with the piloters already discussed but many reviewers were reached through UNEG or targeted because of their expertise (e.g. HAP, GPPi, 3iE, ODI RAPID), adding a significant layer of diversity.

More sporadic users/uses of the pilot Guide:

- **Channel Research**, Belgium – M&E training course [May 2013 and June 2014]

- **International Program for Development Evaluation Training (IPDET)**, Canada - Evaluating Humanitarian Assistance [June 2013]

- **DFID and Pakistan Humanitarian Forum** (coalition of NGOs, UN agencies and donors) – used as training material and to advocate for the creation of a in country-level evaluator community of practice training

- **Tearfund** – EHA Guide used as a reference for review of Evaluation Process and in real-time reviews (e.g. Lebanon and Jordan, August 2013)

- **UNHCR** –

- **Center for Refugee and Disaster Response at the Johns Hopkins Bloomberg School of Public Health** - planned to use as basis for new MA course, was interested in developing a Cousera with ALNAP [March 2014]

- **SIDA** – intended to use Guide in reformulation of evaluation guidelines [June 2014]

- **British Red Cross** – used by field teams as a reference [July 2014]. One of the materials used to inform the new evaluation policy, e.g. it will be used to inform sample evaluation TORs and other tools. [November 2014]

- **UNICEF Pakistan** – will be using the EHA Guide for a training course on RTE and has submitted feedback via the feedback button

- **UNICEF India** -

- **Union Aid Abroad–APHEDA** (The Humanitarian Aid Agency of the Australian Council of Trade Unions) – found the EHA Guide when looking for tools to help design an impact evaluation of projects in the occupied Palestinian territories.

- **WFP** - used and referenced the EHA pilot Guide to develop its own guidance on evaluation matrices.

- **Sphere Secretariat** – during the drafting of the Sphere 4 Evaluation guidance (led by B. Mountfield and A. Nadig) made sizeable reference to the Guide.
Guide promoted within agency:

- **Bioforce** – sent to all trainers
- **Oxfam International** – circulated to all M&E staff
- **CRS** – sent to M&E Listserv
- **UNICEF** – sent in UNICEF newsletter and shared in UNICEF internal evaluation CoP

Non-humanitarians that shared feedback or demonstrated interest in pilot process:

- Medical Research organisation in India
- Small South African NGO working to help communities better engage with development
- Universidad de San Pablo Tucuman in Colombia
- Shelterexpert.org
- Banyaneer, Network of independent consultants for South and South-East Asia, encouraged potential clients to read the Guide
- Department of Clinical Epidemiology & Biostatistics, McMaster University
3. What did we hear back?

The following section summarises the feedback received over the 18-month pilot process. Where possible, direct quotes were used to illustrate the comments shared – without disclosing the identity or affiliation of individual piloters or reviewers.

How was feedback compiled?

All feedback on the pilot Guide was captured and considered by the ALNAP Secretariat. Feedback was compiled in a Master Grid on a continual basis. This grid was organised by Section of the Guide and feedback was sorted as content related or design related.

Design-related comments are not presented here as they can only be addressed at the revision phase.

Content-related comments were then summarised. These summaries are presented below. In preparation for the validation workshop issues arising from the feedback summaries were categorised into the four following categories. The principal and secondary issues that emerged are presented in the feedback validation workshop booklet.

- **Edits and other issues**: minor wording, syntax, and language issues that will not be brought for discussion at the validation workshop. This may also include piloters’ feedback on issues that ALNAP has recently covered in its work streams (e.g. evidence, evaluation capacities etc.) and that the Secretariat will fold into the final version of the EHA guide for publication. The ALNAP Secretariat will address these issues after the validation workshop.

- **Secondary issues** with limited implications for the EHA guide finalisation – ALNAP can gain a steer from participants on these without using plenary or table discussion time at the workshop.

- **Principal issues** with possibly major implications for the EHA guide finalisation - ALNAP Secretariat would like to get a clear decision or direction from participants. This is one of the main reasons for the organisation of the validation workshop.
Who was the Guide for?

The Guide was designed to be comprehensive (covering the whole of the evaluation process), practical and cross-sectorial (has examples from different sectors but is not specific to any one sector). Piloters saw the resource as all of these things, but reached for it because of its structure and navigability, and because it offered a broad overview of evaluation. As one piloter stated, “the Guide is a good starting point for beginners and a good refresher or reminder for experts”. It seems to have used most often as an aide-mémoire or reference document. In others words, dipped in and out off, not consumed in full.

The Guide was designed and written to speak to programme managers, evaluation managers and consultants. As page 6, Who is the guide for?, illustrates certain sections applied to specific roles. Though some piloters wanted more tips, tools and good practice examples specific to their type of role, we did receive feedback indicating that divisions in who read what sections were not necessary. Ideally, all parties would be aware of what others will expect. As one piloter explained: “It is commendable that the guide addresses those who commission, support, and carry out evaluations – potentially bringing them onto the same page”.

From the small window of data gathered, we can surmise that the largest group of users were most likely consultants and INGO staff followed by UN agencies. Just as interesting, are those who did not use the guide. It was much more difficult to find users from within the Red Cross and United Nations (with stark exceptions such as the Canadian Red Cross, UNICEF and UNHCR). Two National Red Cross Societies did share that they were not using the Guide because their own organisational guidance already incorporated many of its components and they felt that their staff often suffered from “guides and tools overload”.

Why was the Guide used?

- An independent consultant explained that the EHA Guide gave her the confidence to negotiate the ToR, for example. She said it helped a lot that John Cosgrave and Margie Buchanan-Smith were the authors.

- “Very action-oriented and not really a position-paper, but I see this much more as practical guidance that can be used by all the different stakeholders in the evaluation process. This was especially useful as a consultant, because you knew which section you should look at, same for an evaluation manager at headquarters level.” -- NGO representative

- An INGO representative explained that he used the Guide mainly as a reference, in addition to his organisation’s resources. He used the Guide as a Wikipedia to check the meaning of a term or to look up a concept.
Why was it not used?

- "Our practical engagement with the pilot Guide has been limited. I think there are 3 main reasons for this: we are mostly a donor organisation and very rarely are operational ourselves, we have a good technical (advisory) team that is the main source of guidance to programme teams, and we have our internal processes, such as for example Project Management Methodology, which already incorporate similar elements as in EHA". – RC/RC representative

- "Generally, the challenge may also be one of ‘guides and tools overload’ rather than the lack thereof; somehow it becomes hard to distinguish the guides and tools, the premises they’re based on and what they prescribe. Basically, choosing one guide or tool rather than another becomes an issue in itself which requires an informed understanding of if, and how they differ, and what this means in terms of what evaluation findings (for example the standard OECD methodology compared to the Barefoot methodology)". – RC/RC representative

- "I still struggle to see this publication's concept/added value. As I understand, it’s the comprehensive and authoritative guide to evaluating humanitarian action. Evaluators will need to refer to it as a go-to text on good practices." – Independent consultant

Comments on organisation of the Guide

As mentioned above, the layout, navigation and format of the Guide was highly praised. However, piloters did often point out (directly or indirectly) that some components were difficult to find, that certain sections could be more intuitive and that titles did not always tell the reader "what was in the can". This is understandable when considering that the Guide was most often used as reference material; the table of contents was used as the main navigation tool.

In addition to proposed changes to the ordering and structuring of the Guide, many suggestions were made as to what kind of tools or elements could be incorporated. Piloters put forward the following:

- Boxes specifically for evaluation managers

- ‘Don’t forget!’ markers indicating important considerations at particular steps of the evaluation process (this would include some of the most common mistakes or neglected points at different steps of EHAs)

- Easy wins/low-hanging fruits would point out the little things that can make a big difference in an evaluation or highlight different things (e.g. sources of data) that an evaluator may overlook or fail to consider

- A complete glossary. Currently users only find definitions of terms the first time they appear. There is no links back to this definition in subsequent sections. Resulting in piloters complaining about a missing definition just to later realise that they were looking at the wrong place.

- The bibliography is difficult to access and not easy to search.
It was noted by one piloter that the current proportion of examples and mini-case studies is just right. If this was increased, “the guide would feel like a case study compendium”. Also, piloters very much appreciated the crosslinking across sections of the Guide and the links to evaluation report examples.

**Comments on overarching content considerations**

From the feedback received over the 18-months of the pilot process, broader questions, weaknesses or gaps have come to the surface. These were not always directly underlined by piloters, but became evident when feedback was reviewed as a whole. There is some overlap in the points below.

**Could be considered:**

- The guide feels quite “large organisation” and “large evaluation” specific. (reflected by Piloter 8, 36)
- “The guide is not what you would look at when starting a project. It already assumes that you are doing an evaluation and want to get it going. It would be a good idea to include a bit more on the pre-evaluation phases” (Piloter 50).
- Difficult to pick-out what are the “minimums” for an EHA no matter its size, scope or budget. (reflected by Piloter 13)
- “The essence of complexity — relations of cause and effect between what you do and what you will achieve are unknown at the moment of taking action — is not evident in the Guide”. It is stated in the Guide that the term complexity will be used to refer to both complicated and complex, “combining the two is a conceptual aberration”. (Piloter 22)
- “There are numerous mentions of systems (using various connotations of the term) but a lack of systems thinking” (Piloter 22).
Could use more emphasis:

- The differentiating factors/unique considerations of EHA are no demonstrated throughout the Guide.
- What does it mean, in practice, to take humanitarian principles into account in EHA work?
- “Ethics of evaluation in international contexts” (Piloter 1, 29)
- Do No Harm and protection
- Overcoming limited access in EHA
- Engaging the affected population, noting the difficulties of reaching marginalised populations
- How to ensure data quality
- “[The Guide] completely [misses] the point of developmental evaluation, perhaps the evaluation mode most applicable to humanitarian action when it takes place in complex dynamic systems and therefore is constantly challenged to innovate and adapt” (Piloter 22).
- Along the lines of the previous comment, a number of piloters alluded to the need for the evaluation process for EHA to be iterative (e.g. Piloter 8 and 35).
- Considering communication, dissemination and take-up (utilisation) from the start and throughout the EHA.
Section 1 - Deciding whether to do an EHA:

What piloters found most useful:

• Common challenges identified as a good summary, really appreciated by piloters

Suggestions for more precise wording:

• “The training started by discussion what is HA. The group would have expected the definition of HA to include/make mention of the relief-development continuum/contiguum and issues such as protection” (Piloter 13)

• “The linkages between summative and accountability and between formative and learning would need to be nuanced, especially when one considers that all evaluations can have the dual purpose while they are not at the same time formative and summative” (Piloter 34).

Could you elaborate on:

• “I would stress more the relationship between baselines and monitoring with the evaluation. The best evaluations tend to be produced when a) a good baseline and b) a good monitoring system are already there – thus allowing for a valid longitudinal comparison. All too often, we find ourselves in the situation where a baseline is either non-existent or in such a poor quality that it is pretty useless for a base/endline survey comparison. Paying more attention to baselines and monitoring should be stressed further”. (Piloter 5)

• “It is not clearly stated that it is not necessarily accountability vs. learning in terms of evaluations types, that evaluations are often a balance of the two.” (Piloter 13; similar comment from Piloter 11). “You can’t be accountable if you don't learn” (Piloter 14).

Challenges faced by Piloters that the Guide did not help address:

• Are we evaluating at the right time? (Piloter 3)

• Are we evaluating the right thing? (Piloter 3)

• Unique difficulties of conflict (vs. natural disaster) (Piloter 4) [note: this is an example of whether the ALNAP-UNICEF e-learning has “pushed” the content further by dedicating a whole e-learning unit to “carrying out EHA in situations of constraints access”]
Section 2 – Promoting utilisation and ensuring quality:

Challenges faced by Piloters that the Guide did not help address:

- Creating demand for evaluation findings and recommendations.
- “How to convince the evaluated organisation that all of it is in their best interest?” (Piloter 1).
- “I’ve encountered too many organisation who really fear evaluations and this deserves our attention” (Piloter 1).

What piloters found less useful:

- Reviewers of the e-learning course, had many questions about the wording and appropriateness of the stakeholder mapping (Box 2, p.38).
- Sub-section 2.8 - Factors affecting evaluation utilisation: “[T]his sub-section does not necessarily translate into a quality evaluation. There may be prerequisites, but quality has to be assured through a methodological appraisal, verification mechanisms, making sure you do not invest in the prerequisites to get something substandard…” (Piloter 28). [note: Since the publication of the pilot version of the EHA Guide, ALNAP has completed and published a study on evaluation utilisation. It presents a framework of evaluation capacity areas.]
- Some reviewers of the e-learning course were unsatisfied with the prominence given to certain factors that contribute to evaluation utilisation in the current Section 2, such as leadership/management buy-in.

Clarification needed:

- The language in Section 2 is inconsistent. There are changes in language between sub-sections, from users, to stakeholders, direct and indirect. The use of these different terms is not always clear.

What is missing:

- There are few examples and tips in this section. Though it describes activities to help your thinking and helpful questions, it would benefit from small, clearly marked hints such as “don’t forget” or “watch out for”.

Section 3 – Planning and Design:

Many sub-sections were not commented on.

Key Questions:

• “Is it time to interrogate the OECD-DAC criteria in how they have been interpreted to fit EHA? Mainly in the ALNAP 2006 Tony Beck guide” (Piloter 16)

• What piloters found most useful:
  
  • Sub-section (3.7) on management and governance structures for evaluations and how to deal with team dynamics
  
  • Sub-section (3.8) on choosing an evaluation team
  
  • Sub-section (3.10) budgeting for an evaluation

Inaccuracies:

• Evaluation teams: During the review of the e-learning, a number of organisations did not see the division between evaluation teams as being internal/external. For them it was: internal to programme/external to programme but internal to organisation/external to organisation.

What piloters would have liked to see:

• “It would be good to have a section on conditions for doing internal evaluation, especially the pure ones (only internal evaluators) – we need more discussion on this” (Piloter 7).

• The table on the elements of a ToR raised good points (table 9). “As an external consultant I often find agencies wanting 40+ questions answered in a 3 week evaluation, most often those that do are using DAC criteria as their basis. It might be good to provide an example of research questions which is feasible” (Piloter 20).
Challenges faced by Piloters that the Guide did not help address:

- “Advice for evaluation managers on tendering issues including dealing with variations” (Piloter 24).
- How to headhunt an evaluator and what competencies should an evaluator have? (Piloter 7)
- More assistance in making time and cost estimates for different evaluations. How many days are needed on average for different methodologies and activities (e.g. focus group discussions, report writing) and how many days are needed in between different steps of the EHA.
- How many days should a call for expression of interests (or RfP) be left advertised?
- How detailed should the ToR be
- Narrowing down the number of evaluation questions

More emphasis needed:

- Importance of having open discussions with evaluators on what “level” of evaluation is wanted. “The Cadillac or the moped?”
- Though some piloters appreciated the title of Section 3.11, Negotiating terms of reference, as it set expectations of open discussion and back-and-forth when developing the ToR. Yet, comments such as the following were also received:

  “The reality I face as a consultant leading independent evaluations is that I am given the ToR more or less on a take it or leave it basis. The EHA guide needs to flag this issue. The phenomenon is related to the process of commissioning an evaluation where the evaluator is typically the last to be involved/engaged in a process that has lasted months and by which stage the ToR have been developed, commented on extensively internally and externally and signed off on by the formal evaluation manager i.e. prior to engaging the evaluator” (Piloter 42).

Observation from ALNAP: We noticed that the Guide has relatively little on evaluating efficiency – but that may be a reflection of the fact the among the OECD DAC criteria, efficiency is one of the least used ones.
Section 4 – Doing an evaluation of humanitarian action:

What piloters found most useful:

- Sub-section on inception reports (4.1) convinced many agencies to require inception reports and even convinced some consultants to do inception reports even when not required. This section was one of the most used and appreciated of the Guide.
- Sub-section (4.2) on leadership and teamwork challenges

Could be given more prominence:

- “A more explicit list of reasons/rationale for participatory approaches is needed. Introduce a direct statement i.e. that the goal of improving the quality, accountability, effectiveness of humanitarian action cannot be fully met without hearing the views and suggestions of the affected populations” (Piloter 31). The Guide could also highlight strong evaluations where the affected population was consulted and the impact of quality of information.
- “I would like that we convey the message that targeted communities deserve to be at the highest level of the four stages of engagement (1.ignore 2.inform 3.consult 4.involve), and that if they have been ignored at previous stages, the results are likely to be mixed at best” (Piloter 25).

Points that could be included or further elaborated:

- Involving the affected population while prioritising sensitivity and confidentiality
- Highlight the importance of not interfering with the coping strategies of the affected population.
- Ways of ensuring the quality of data gathered from consulting the affected population (getting over issues such as: gate-keepers, interpretation/translation, desirability bias, seeing the evaluator as a donor)
- Potential sources of information for an evaluation (e.g. feedback and complaint mechanisms; post distribution monitoring info) and types of people in the affected community that may have really important insights for the evaluation.
- It also takes time to properly engage the affected population but evaluation planning often underestimate the time required
- How the inception report feeds into the final report

More tips, please:

- Planning your field visit (e.g. number of days, timing, time needed for field office to receive the evaluation team)
Section 5 – Evaluation Design and Methods

Piloters of the Guide and reviewers of the e-learning course contributed a great number of rich tips, tricks, resources and examples for this Section. These related greatly to interviews and field work, more broadly.

Focus and presentation:

- “Section 5 can be confusing for someone without this background. It is overwhelming. A better/clearer explanation of what is actually feasible in EHA, when are some methods more useful. Would be helpful to have KEY resources to know more about sampling, key informant interview” (Piloter 45).

- “Is the true goal here really to teach people about different designs? Or to get them familiar with the concepts around choosing evaluation designs? Or teach them about the practicalities of implementing these designs? If we answer that question, that will help [inform the flow if this Section]” (Piloter 27).

- “More contextualization needed for this section (and how it relates the previous ones). Your design is the “roadmap” for indicating for all concerned how the evaluation will amass the most credible evidence to answer the evaluation questions at hand” (Piloter 51).

Proposed structural changes:

When discussing evaluation design, “I’d suggest that for any practitioner, this is what is important to know:

- What designs answer what questions?
- What does a good question look like?
- Is there significant differences in cost between these research designs?
- How much do I have to change my program to carry out these research designs?
- How do I identify that my program is not ready to be evaluated for certain questions?” (Piloter 27)

- Could we “summarise the different types [of research designs] and highlight what could be applicable to EHA by potentially addressing different questions, it would make more sense” (Piloter 30).
Debated:

- “In the next iteration of the EHA Guide, you might want to get rid of Section 5.3.8 - Online surveys. I’m not sure I see the connection” (Piloter 51). But, “Add examples of digital data collection tools” (Piloter 19).

More Emphasis needed:

- “I think that more emphasis should be placed on the sacredness of beneficiary time” (Piloter 27, also reflected by Piloter 21).
- Issues relating to confidentiality and consent
- “Ethical issues related to research designs should be clearly stated, and limitations to the applicability of the models highlighted” (Piloter 29).
- Contribution vs. attribution and how is this reflected in EHA
- The effect that poor translation/interpretation can have on your questionnaire
- Being aware of gatekeepers and the control they hold.
- “Noted that there is nothing on preparing teams to go to the field and conduct the evaluation. Would be good to include a bit on the importance of training and orienting staff, testing tools, reviewing completed tools at the end of the day & conducting de-briefs with teams. As this will greatly help to ensure the quality of the data being collected” (Piloter 17).
- “A lot said about samples but not about surveys (design, implementation…)” (Piloter 44)

Additions:

- “Design of scientific/experimental evaluations is very important but this is difficult for smaller evaluations/programmes. Could this aspect be touched on? Suggestion: table on what aspects MUST be upheld by type of evaluation for example” (Piloter 13).
- What are the main types of evaluation questions?
- Help for prioritising evaluation questions
- Guidance on when to do which type of evaluation.
- “When is it better to go for participatory evaluation? When the purpose of the evaluation is for learning more than for accountability” (Piloter 10).
- “I understand the methods section as a broad overview/introduction – as such, it is good. However, if there was room for expansion, this would be the part that should be expanded. For instance, you could add dose-response analysis, cost-benefit analysis (efficiency tends to be the most neglected of the OECD criteria), and trend analysis/MAPP” (Piloter 46).
• “[The Section on Appreciative Inquiry] is very useful. It would be great to see more resources … – how it can be applied in EHA, step by step guide, examples of evaluations which have used this approach etc” (Piloter 43).

• “The issue of unintended outcomes is not adequately covered” (Piloter 44).

• “Mobile data collection should be mentioned” (Piloter 44).

Expansions:

“The evaluator should try to make observation deliberate and be able to clearly indicate it as a method used” (Piloter 36; also mentioned by Piloter 52). “We often develop forms for observation and train staff about what to look for (especially for WASH) and have found it is one of the most important approaches to ensure quality data and strong triangulation of results. It is also good to note that observation can/should then inform questionnaires for other approaches like interview and FGDs” (Piloter 17).

Unclear:

• “case-based really unclear. Not well explained” (Piloter 44).

• Sampling Section keeping in mind “It is communicated to field staff that they are not expected to be statisticians. There are tools for doing the simple calculations but for anything more complex it is best to reach out for help” (Piloter 18).

Appreciated:

“Thanks for including PRA processes as tools in evaluations! I am using this more and more in FGDs and finding it to be very helpful, particularly at fully engaging everyone in the processes as well as eliciting more in-depth input. It was criticized by one agency who stated that this is not “representational”... they totally missed the point of this being participatory. This would be a very interesting piece of work on its own, PRA techniques in evaluation!” (Piloter 20).
Section 6 - Remote, Joint, Real-time and Impact Evaluations

What was expected, but not found:

- The reviewers of the e-learning course based on the EHA Guide made it clear that they expected more on how to evaluate when access is constrained.

Could be given more space:

- “Conduct an evaluability assessment to inform the ‘Go/No Go’ decision making about the value and appropriateness of commissioning an evaluation at this time” (Piloter 31).

- Joint evaluation: “Power dynamics in the management process are important to address more intentionally (beyond prohibitive cost) -- big agencies vs small agencies, international agencies vs. national NGOs or national govt, politics, agendas, etc.” (Piloter 31 and 32)

- Reasons for not doing Remote, Joint, Real-time and Impact Evaluation? What are some of the challenges?

- RTEs: Tests to help determine if the timing is right

Updating needed:

- Real-Time Evaluations vs. Real-Time Reviews and other changes from the Transformative Agenda

- Impact evaluation and how organisations are addressing (or moving away from, according to some reviewers of the e-learning course) attribution

- What impact looks like in different types on crisis and contexts
Section 7 – Outputs, Dissemination and Take-up

Though relatively little feedback was contributed using the EHA surveys (total of 40 submitted), it is worth noting that section 7 was the section of the guide that was indicated to need the most improvements.

What was expected, but not found:

• What are the specificities of the dissemination of EHA
• Suggested means of disseminating evaluation reports (database, websites, etc)
• Dissemination to the affected population and other who took part in the programme or evaluation process
• What is the best way to present recommendations to assure take-up?

Highlight more:

• Importance of speaking to your audience, in content and format (e.g. executive summary)
• Difference between findings, conclusions and recommendations
• Ways of developing recommendations and validating findings (e.g. workshops)
• The evaluation report should not only have a methodology section but also “make it clear how the consultant went about answering the ToR evaluation question” (Piloter 47).
• Little things that make evaluation reports more compelling
• “The evaluation report is just a report of the process, not the full product. It should serve as more of a simple aide-memoire. I often find, as an evaluator, that the report is more limiting than it should be because people put so much emphasis on it, when more emphasis should be on the learning” (Piloter 48).
• “The section on recommendation and how to follow up on them should be expanded. What can be done with recommendations? How to convince the evaluated organisation that all of it is in their best interest?” (Piloter 1).
Could be given more space:

- Examples of different ways of disseminating evaluation findings
- Who is responsible for what in this stage of the evaluation
- How do recommendations for an accountability- and learning-oriented evaluation differ in their formulation and implementation?

Requests:

- Could the Guide offer templates for the dissemination of findings?

Expression of disagreement:

- “I don’t think it is necessarily a good idea to structure evaluation reports around the criteria or questions. To my mind, the most important thing is to present a clear argument in a logical form and to present the most important findings up front, ideally with a sub-title that already transports the main message” (Piloter 37).

- “The EHA should not give the impression that dissemination (publication) is the norm. It most certainly is not” (Piloter 42).
Other ALNAP resources on evaluation:

- Evaluating protection in humanitarian action: Issues and challenges
- Using evaluation for a change: Insights from humanitarian practitioners
- EHA Method Notes on representativeness, accuracy, evidence and causation
- EHA Practice Note: Repeat after me: Communicate, disseminate and support take-up!
- Insufficient evidence? The quality and use of evidence in humanitarian action
- Real-time evaluations of humanitarian action: An ALNAP guide
- Evaluating Humanitarian Action using the OECD-DAC Criteria: An ALNAP Guide for humanitarian agencies