



# Technical Guidance Note on Developing Monitoring and Evaluation Plans for Global Health & Rights Programs

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Canadian Partnership for  
Women and Children's Health



**CanSFE**  
Partenariat canadien pour la  
santé des femmes et des enfants

## About

The Canadian Partnership for Women and Children's Health (CanWaCH) is a proud membership of more than 100 non-governmental organizations, academic institutions, health professional associations and individuals partnering to improve health outcomes for women and children in more than 1,000 communities worldwide. Learn more at [CanWaCH.ca](https://www.canwach.ca).

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## Acknowledgements and Disclaimers

CanWaCH gratefully acknowledges the primary authorship and research of Dr. Elizabeth Dyke, as well as the contributions of the CanWaCH Secretariat, Global Affairs Canada (GAC) and the CanWaCH Metrics Working Group.

Please note that, for the purposes of this document, we will refer to the development of a Monitoring and Evaluation (M&E) plan to maintain alignment with existing guidance documents. However, we acknowledge that many partners use various, more comprehensive terms, including, but not limited to, MEAL (monitoring, evaluation, accountability, and learning), MERL (monitoring, evaluation, research, and learning), CoLMEAL (community-led MEAL), and others.

This note was developed with the Canadian international development, global health, and global cooperation sectors in mind. Within this context, we recognize that GAC is frequently a critical partner and funder. Ultimately, our intention is to provide useful guidance on developing M&E plans for any project. At the same time, the note includes specific references to published GAC guidance to support users collaborating with GAC in navigating these documents.

This note is currently under active review and consultation; recommendations are welcome. Please contact [info@canwach.ca](mailto:info@canwach.ca) to participate more in this process.

# Acronyms

<b>CanWaCH</b>	Canadian Partnership for Women and Children's Health
<b>CoLMEAL</b>	Community-Led Monitoring, Evaluation, Accountability, and Learning
<b>CSO</b>	Civil society organizations
<b>DHS</b>	Demographic and Health Survey
<b>FIAP</b>	Feminist International Assistance Policy
<b>GAC</b>	Global Affairs Canada
<b>GBA+</b>	Gender Based Analysis +
<b>GoC</b>	Government of Canada
<b>HMIS</b>	Health Management Information System
<b>KAP</b>	Knowledge, Attitudes, and Practices
<b>LMIC</b>	Low- and middle-income country
<b>LQAS</b>	Lot Quality Assurance Sampling
<b>M&amp;E</b>	Monitoring and Evaluation
<b>MCIS</b>	Multiple Indicator Cluster Surveys
<b>MEAL</b>	Monitoring, Evaluation, Accountability and Learning
<b>MERL</b>	Monitoring, Evaluation, Research and Learning
<b>NGO</b>	Non-governmental Organization
<b>PIP</b>	Project Implementation Plan
<b>PMF</b>	Performance Measurement Framework
<b>PTL</b>	Project Team Leader
<b>RBM</b>	Results-Based Management
<b>WHO</b>	World Health Organization

# Table of Contents

- About** 2
- Acknowledgements and Disclaimers** 2
- Acronyms** 3
- 1 Purpose of this Technical Guidance Note** 5
- 2 Purpose of an M&E Plan** 5
- 3 Detailed Guidance** 7
  - 3.1 Review key guidance documents and expected M&E plan components 7
  - 3.2 Evaluation Questions 8
  - 3.3 Design, Methods, and Tools 9
    - 3.3.1 Formulate Indicators 9
    - 3.3.2 Determine data sources, collection methods, frequency, and responsibility. 10
    - 3.3.3 Reporting 17
  - 3.4 Budget 18
  - 3.5 Learning Plans, Data Sharing, and Use 19
- 4 Important Principles and Considerations** 20
  - 4.1 Health Security and Crisis-Resilient M&E 21
  - 4.2 Ethical Considerations 22
  - 4.3 Risks and Mitigation Responses 23
  - 4.4 Assessing Capacity to do Monitoring, Evaluation and Learning (MEAL) 23
  - 4.5 Feminist MEAL Principles 24
  - 4.6 Anti-Racism and Decolonization Principles 24
  - 4.7 Intersectionality and Population Considerations 25
  - 4.8 Community-Driven Approaches 25
- 5 Detailed Guidance Checklist** 26
- 6 Additional Tools to Support M&E Plans** 30
- 7 Resources** 31

# 1 Purpose of this Technical Guidance Note

The purpose of this Technical Guidance Note is to provide a clear, consistent framework for developing Monitoring and Evaluation (M&E) Plans across global health and rights programs. It supports partners in aligning program design, measurement, and learning systems with donor requirements and internationally recognized good practices.

In recent years, M&E approaches have evolved to emphasize adaptive management, digital transformation, and the integration of cross-cutting priorities, including gender equality, climate resilience, and localization. This updated guidance broadens its scope to help organizations design agile, data-driven, and inclusive M&E plans that enable real-time learning and rapid adaptation in complex environments. By applying this guidance, implementing partners can ensure their M&E plans are rigorous, context-responsive, and aligned with global standards and Global Affairs Canada (GAC) requirements. Ultimately, the goal is to strengthen evidence-based decision-making, promote equity and support continuous learning across the global health and rights sector.

We recognize that there are various approaches to undertaking monitoring, evaluation, accountability, and learning (MEAL) activities. This guidance note does not explain “how to do M&E”, as numerous resources are available on this topic (see the references included throughout this note for a modest list). Instead, this guidance provides overarching considerations and information to support the development of an M&E plan, along with a synthesized overview of existing guidance documents, including those from GAC.

The intended users of this note are civil society organizations (CSOs), academic institutions, and other organizations that implement global health programming, including those that have received GAC funding. This includes organizations of all sizes, with or without dedicated M&E staff. We recognize that, depending on an organization's experience and resources, some of this guidance may seem either overwhelming or basic. **We encourage readers to take what they can from this resource and use it to engage in constructive conversations with other stakeholders**, including their GAC Project Team Leaders (PTLs), where applicable. We hope these PTLs find this note useful for collaboration and communication with CSO partners.

## 2 Purpose of an M&E Plan

An M&E Plan serves as the central framework for tracking progress, assessing performance, and generating learning across all project components. It defines the results of structure, indicators, baselines, targets, and data-collection processes necessary to ensure accountability and evidence-based management. The role of an M&E Plan extends beyond compliance and reporting; it is recognized as a living, adaptive management tool. Contemporary plans emphasize continuous feedback loops that link implementation data to decision-making, enabling timely course corrections and learning throughout the project lifecycle.

An M&E plan also serves as a practical companion to other documents. Details on the development of a **logic model**, **theory of change**, performance measurement framework (PMF), and implementation plan (key documents for project implementation) are not included here. GAC templates are available for **logic models** and **PMFs**. For an example of a partial PMF/results chain, **please see section 5 of CanWaCH's Technical Guidance Note on Measuring Women's and Girl's Agency in the Global Health Sector**.

For it to be useful, the M&E plan is more detailed than the PMF. As per [GAC's RBM guidance](#):

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*“It is important to note that the performance measurement framework, while being the “skeleton” of the plan for the systematic collection of data, does not contain enough information to guide the implementation of a monitoring system” (p. 63)*

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As mentioned above, the M&E plan should be a **living document** that provides sufficient detail to serve as a useful, hands-on resource for the team as the project is designed, developed, and implemented. It should be referred to regularly and should be **updated at regular intervals** as the project unfolds (in discussion with partners, stakeholders, funders, government partners, etc.). It should be grounded in the project's core evaluation questions and relevant to the needs of all stakeholders involved. Operational details for monitoring, evaluation, and learning include, but are not necessarily limited to:

- What data you will collect from whom, and when
- How you will collect the data (e.g. tools) and who will collect the data
- The time frame for data collection
- How you will choose, define, and calculate indicators
- How you will aggregate and/or disaggregate the data (as applicable)
- How you will store, analyze, interpret, and report the data and findings
- How you will use the results (e.g. for change, for ongoing learning), including what this data will answer (evaluation questions or learning questions)
- What resources you will need to conduct data collection, analyses and reporting, including timelines, workplans, and roles and responsibilities of various team members and other stakeholders across the various tasks (e.g. data collection, storage, analysis, interpretation, use)
- How you will facilitate participation from other stakeholders, including project participants, throughout the process
- How you will incorporate feminist MEAL principles through your plan

**NOTE:** While the above may seem like a lot of detail at this stage of the process, this level of planning is needed to develop a usable, detailed M&E plan and to budget accordingly. Insufficient budget allocations for M&E activities can have lasting, negative consequences. The logistics and budget allotted for M&E activities will be discussed in more detail below.

Timelines for developing the M&E plan will vary depending on your partners. Therefore, ongoing discussions with your stakeholders (e.g., PTLs) will be necessary, and flexibility on all sides will be crucial so that the plan can be revisited and revised as needed. All project stakeholders, including donors such as GAC, should expect that effective M&E plans and their components will evolve over the course of the project. Without regular updates, projects risk creating plans that are not consultative and reflect only the perspective of Canadian partners. While much can and should be anticipated at the outset of the project, it is appropriate for some sections to be fleshed out later, such as once the PMF is finalized. For example, if a participatory instrument is to be co-created in year 2 of a project, detailed planning and instrument information may be completed only after community engagement processes are undertaken; therefore, they would not be available at baseline. What is critical, however, is that **justification and planning** are adequate to

support the intended activities, and possible risks and mitigation strategies have been considered. As noted in **GAC's RBM guidance**:

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*“The monitoring and evaluation plan can be finalized by the implementer as part of the project implementation plan or equivalent” (p. 63).*

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The M&E plan should provide sufficient detail to demonstrate that you have thoroughly considered the process. It should enable new staff or partners to understand and implement the plan, and should clearly outline baseline, project monitoring, and evaluation activities.

For more information, please refer to **Managing an Evaluation or Evaluation System** from Better Evaluation, Measure Evaluation's manual on **developing an evaluation plan**, and **the course on M&E**, as well as the Save the Children **course manual** on MEAL. These **videos and templates from Tools4Dev** can also help if you want more details on how to develop an M&E plan.

## 3 Detailed Guidance

### 3.1 Review key guidance documents and expected M&E plan components

GAC has existing published guidance in place that can help inform your organization in developing your M&E plan:

- GAC's guide on **Results-Based Management (RBM)**
- GAC's **International Assistance Results Reporting Guide for Partners**
- GAC's **Checklists, tip sheets, tools, and other guidance**
- **Feminist International Assistance Policy (FIAP)** including Action Area 2: Human Dignity
- GAC's **Glossary of Terms**

As noted in **GAC's RBM guidance**:

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*“By the time the monitoring and evaluation plan is finalized, the implementer should be able to answer questions related to the cost of data collection, sampling methodologies, sample sizes, statistical analyses to be used, data-capture templates and data-storage systems” (p. 82).*

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Before beginning your plan, it is critical that all stakeholders have a clear understanding of the distinction between monitoring and evaluation, although they are often closely connected and synergistic.

### Definitions (VIA OXFAM GB):

“**MONITORING** is normally the systematic assessment of a programme’s performance over time. It involves the ongoing collection and review of data to provide programme managers and other stakeholders with indications of progress against programme plans and towards programme objectives

**EVALUATION** takes place at a particular point in time but complements ongoing monitoring activities by providing more in–depth, objective assessments of the relevance, efficiency, effectiveness, impact and sustainability of programmes. Formative evaluations are carried out during the life of the programme with a focus on improvement; summative evaluations take place towards the end of the programme and are used to judge its overall merit, worth or effectiveness.”

Regularly monitoring processes provides routine updates throughout the project, supporting feedback, course correction, and informed decision-making on progress. It often feeds into but is distinct from the evaluation process. Evaluation processes often occur at key moments in a project’s lifecycle (baseline, midline, endline) and help answer questions about impact (anticipated and unanticipated) and outcomes. Evaluations are less frequent and are typically designed to answer specific questions (see below) deemed relevant by all stakeholders.

## 3.2 Evaluation Questions

Evaluation questions capture the purpose, focus, and priorities of your evaluation. Evaluation questions guide the gathering and interpretation of evidence. They translate project objectives into measurable lines of inquiry. They are distinct from the activity-specific questions you might ask during data collection; rather, they are the project’s high-level points of inquiry. Clearly articulated evaluation questions provide essential grounding for the evaluation and can serve as a crucial point of reference as the project progresses. These questions may be refined throughout the project.

However, in the early stages of design, you may still be able to identify your questions. Strong evaluation questions are:

- Grounded in a clear and relevant purpose: understanding processes, demonstrating accountability, informing program decision-making, supporting policy development, resource-benefit analysis, etc.
- Highly relevant and focused on the critical, need-to-know area of inquiry that is within the project’s sphere of influence
- Succinctly written, with a high degree of specificity
- Co-created with stakeholders
- Answerable in a feasible, ethical, and timely manner
- Best answered by an evaluation (rather than through other means)

It is usually best to keep evaluation questions focused. While there is no absolute rule, having more than 5-7 evaluation questions in a project should prompt stakeholders to reassess whether their questions truly meet the above criteria.

Sector evaluation typically use core evaluation questions such as:

- Are the project's objectives still relevant in the current context and priorities?
- To what extent were project objectives achieved, and what were the main factors contributing to or hindering success?
- How effectively and efficiently were resources used to achieve results?
- What are the project's intended and unintended impacts?
- How sustainable are the results and benefits after project completion?

Evaluators are encouraged to co-create questions through participatory processes to ensure they reflect community priorities and intersectional perspectives. If you or your project partners have limited experience developing and/or co-creating evaluation questions, you may want to consult useful references (included below) to navigate the process.

### 3.3 Design, Methods, and Tools

The M&E plan outlines the methodology and tools used to monitor and evaluate project results. It ensures data are collected systematically, accurately, in a timely and consistent manner to demonstrate progress toward expected outcomes and to inform decision-making.

A robust M&E plan includes the following core elements:

- Formulate indicators (quantitative and qualitative) linked to the project's results framework
- Determine data sources, frequency of collection, and responsible parties
- Select sampling and target-setting methods
- Establish data collection and analysis tools
- Set reporting and learning mechanisms

The sector is adopting more technologically advanced M&E approaches that reflect the growing use of digital platforms, real-time analytics, and adaptive learning. However, the use of digital technology needs to be assessed and weighed against considerations such as localization of data and data sovereignty before determining whether it is appropriate for a particular project or context.

The following sections outline considerations for developing the design, methods, and tools for your M&E plan.

#### 3.3.1 Formulate Indicators

Indicators should be specific, measurable, attainable, relevant, and time-bound (SMART), and must align directly with the program's intended outcomes and outputs. In a Global Health and Rights context, indicator formulation should also reflect intersectional, equity-focused, and environmental dimensions. This includes indicators that are gender-responsive, rights-based, climate- and resilience-sensitive, and inclusive of diverse populations. Indicators should measure not only access and service utilization, but also agency, empowerment, equity of experience, resilience, and structural or systemic change.

Where appropriate, the use of composite or multidimensional indices is encouraged to better capture the complexity of health and rights outcomes. Indicators should draw from or align with established global frameworks, such as the Sustainable Development Goals (SDGs), WHO measurement guidance, national health information systems, and human rights monitoring mechanisms to ensure comparability and coherence across contexts.

When selecting, developing, or revising indicators, ensure that the following are clearly described:

- Why was the indicator selected and how will it be calculated (including numerator and denominator),
- Which tool(s) or data sources will be used to collect the data?
- How frequently will data be collected and reviewed, and
- Who is responsible for collecting, verifying, and reporting the data?

This builds on the content provided in the PMF ([template available here](#)).

When developing indicators, you may also want to consider:

- What are the mandatory or recommended indicators that the donor requires that apply to your project?
- What indicators will help to provide evidence on the current state and progress towards any intended change (as per the result or output statement)? This could be based on literature or previous experience with other projects.
- Can the indicator be measured in your context within the required timeframe?
- Is this indicator realistic, given the available resources?
- How can the indicator be measured using your data collection tools (tip: avoid having too many tools)?
- Is secondary data available for this indicator?
- How will you involve key stakeholders, including project participants, in developing indicators?
- Is the indicator comparable with global standards? Will you be able to compare it to existing frameworks in order to track trends?

Note that if you are developing an M&E plan for a GAC-funded project, specific definitions of qualitative indicators can be found on page 52 of [GAC's RBM guidance](#).

Many existing standardized indicators are accompanied by comprehensive methodological notes, and organizations are encouraged to leverage these indicators or indices when available.

- [IndiKit](#) offers methods for measuring indicators across various sectors.
- A database of family planning and reproductive health indicators, developed by USAID, is available on the [Data4Impact](#) page.
- For other examples of health indicator reference sheets, see the [WHO Global Reference List of 100 Core Health Indicators](#). Here, you can find definitions/calculations, numerator/denominator, method of measurement, data sources, and more. Developing detailed indicator information will also aid in the analysis of your indicators (see the analysis section below).

**NOTE:** GAC has a [Results-Based Management Tip Sheet 3.1 – Selection of Performance Indicators by Level of Outcome](#), and GAC's RBM How-to Guide has a section on indicators starting on page 51, and a section specifically related to the M&E plan on page 80.

### 3.3.2 Determine data sources, collection methods, frequency, and responsibility.

It is essential that an M&E plan clearly outlines both the methods for **monitoring** the project and the **procedures for evaluating its progress**.

- For **monitoring**, this entails identifying how each intervention will be monitored, including the monitoring system and the processes associated with it.
- For **evaluation**, this means explaining the evaluation methodology.

Each method in your PMF should be fully described in the M&E plan.

Methods may be qualitative or quantitative, and include household surveys, secondary data (see below), health facility assessments, interviews, focus groups, observation, oral histories, and/or social media review, as well as other innovative approaches such as **contribution analysis**, **process tracing**, **outcome harvesting**, and community-led MEAL (see below). These should be detailed in the M&E plan, including how these will be used to **measure progress towards outcomes**. A 'Stories of Change' methodology should also be outlined, in line with the guidance provided in the **International Assistance Results Reporting Guide for Partners**.

A strong M&E plan must be specific in describing the 'how' of what you will be doing, rather than simply naming the overall approach. In other words, if you adopt a feminist approach, what exactly will that look like in practice, and how are these practices in line with a feminist approach from your perspective? It is important that all stakeholders share a practical, detailed definition of the methods and approaches used.

It is essential to have multiple lines of evidence from diverse data sources to support data triangulation. This does not necessarily mean you should have multiple sources for each indicator, as indicator definitions may be best supported by a single data source. Data should be gathered from credible sources using consistent procedures.

Partners are encouraged to co-develop and/or discuss their chosen methods with key stakeholders, including project participants, implementing partners, and donors, to ensure a shared understanding of the methods used.

**Detailed Tool Description:** The M&E plan should outline how each monitoring and evaluation tool will be operationalized. For multi-country projects, if you anticipate country-level variances (e.g., different tools, sampling methods), these should be identified and detailed by country in the plan to ensure clarity and a shared understanding among all stakeholders. If no variances are anticipated between countries, this can be noted.

For each tool, the description should include:

- The purpose of each tool
- Which indicators the tool will measure (including specifics on how these indicators will be calculated)
- How the data will be disaggregated (so that these variables are included in the tool as needed), depending on the indicator(s)
- How the tool will measure progress towards the outcomes
- The sampling, scale, and scope of each tool (e.g. number of questions, length of interview or survey, what topics will be covered, etc.), along with necessary resources (e.g. financial, human, etc.) – see more below.
- The data strategy for each tool, including a plan for data collection, frequency, data storage, management, analysis and use, as well as who is responsible (see more below)
- Timelines for implementation of each tool in the M&E Gantt chart (the completed section for the MEAL schedule)
- Any relevant risks, constraints, and data quality issues
- How the information collected from each tool will be shared with key stakeholders (including how key stakeholders will be involved in indicator and tool design) – see more below.

For monitoring, it is important not to simply list “project reports” or “document review” as methods for specific indicators, but to detail in the M&E plan how data will be systematically collected to ensure they are captured accurately over time.

As per [GAC’s RBM guidance](#), the M&E plan:

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*“...should provide a detailed explanation of the data collection tools identified in the data collection methods column of the performance measurement framework” (p. 64).*

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### 3.3.2.1 Use of Secondary Data, including Health Management Information Systems (HMIS)

It is essential to utilize existing data in your M&E plan when feasible and appropriate. This may mean considering “existing indicators tracked by “host governments or other stakeholders” when defining appropriate indicators that could be used to measure program/project expected outcomes ([RBM guide](#), p. 80).

While you may think this is early to examine this data, now is the time to engage with government stakeholders and involve them early to understand what data is available (and to reduce the burden on people in-country to collect new data where it is not necessary). The M&E plan (and budget) can reflect the effort you have made to understand what data is available and how relationships have been established. You can then revise the plan as it evolves.

Key sources of survey data include a country's [Demographic and Health Survey](#) (DHS) and [UNICEF’s Multiple Indicator Cluster Survey](#) (MICS). Each is typically conducted every 5 years, and may be in different years, so you may find different data points as needed. These are open-access data that are available for use. There are also [Service Provision Assessments](#) that include data on facility assessments.

Administrative data from a country’s Health Management Information System (HMIS) is another key source, especially when DHS is underfunded and at risk of discontinuation. You may also ask government stakeholders and partners in country about other relevant national systems. HMIS data can support longitudinal analysis and be used to examine counts of client interactions. This data can provide an opportunity to monitor progress, if applicable, between the baseline and end-line coverage surveys, helping to guide management decisions. More information on HMIS by country is available on [Measure Evaluation](#).

Some key questions to ask when using secondary data in your M&E plan include:

- Are secondary data available for the indicator(s) of interest and for the geographical area(s) of interest? To whom does this data belong?
- How recent are the data? Are the data available regularly for monitoring? How often will you need this data? Will this data be refreshed frequently enough to be available to you at your expected reporting intervals?
- Can you access this data in a timely and regular fashion? With whom will you work to access this data (e.g. via a government partner)? Who from your team will lead this?
- Can you access disaggregated data by the variables you need? (e.g. by sex, age, geography, etc.)?
- What are the quality issues with the data? What mitigation strategies have been implemented to enhance data quality?

- This may be a particular challenge with HMIS data, and it will be important to discuss quality issues with your government contact and other partners in-country to understand any limitations.

Note that indicator definitions will differ when using administrative data (e.g., HMIS) compared with other data sources (e.g., surveys). It will be helpful to review the definitions to ensure clarity (e.g., the level of analysis may be ‘visit with a client’ for HMIS, not the individual response). It is also important to outline the timelines for this source data.

Resources on using existing data are also available [on CanWaCH’s website](#).

### 3.3.2.2 Prepare Sampling

Sampling methods should ensure that data are representative of the population and include socio-demographic data to allow for equity-based analysis on gender and social inclusion factors.

When **describing the sampling**, provide the **sampling strategy, sample size, rationale** for each tool you will use, and, if applicable, the location (e.g., by country). This may seem early in the process, but it is a critical step to support your development of the M&E plan and budget. If you are considering hiring a consultant to handle sampling, remember that you need to know the sampling plan before determining the approximate budget for a consultant, as sampling is a major factor in the terms of reference for the consultant.

An M&E plan should include a sampling strategy and specify the sampling size, along with a rationale. Assuming all stakeholders recognize that sampling may be revisited and adjusted, it is not sufficient to state in an M&E plan that sampling will be decided later. This preliminary work can be done with a relatively limited budget if you do not have this expertise in-house. Preparing for sampling may also include engaging a statistician to develop a preliminary sampling plan for your coverage survey (to determine confidence levels and sampling error) or consulting a qualitative expert to discuss saturation in interviews or focus groups. You may also draw on information you have about the context or community – the key is to explain how you determined that this was an appropriate number of people to reach.

NOTE: This can sometimes seem overwhelming. It is important to remember that the sampling strategy should reflect the thought that you have put into sampling and be informed by the data that has contributed to program/project design so far. In other words, sampling is a place to answer: how many people will the initiative collect data from at a given time and how did you come up with that number?

When developing your sampling strategy and sample size, consider (**for each tool** you will be using):

- From which groups/demographics do you need to collect data based on the focus of your project?
- Why are you collecting data from each group? How will this data be used?
- How many people do you need to survey to ensure the data are representative of the larger population and sub-groups of interest?
- What types of cross-sectional analysis do you want to do (e.g. by sex, age groups, geography, etc.)? How many people do you have to collect data from to ensure that the information is representative of the various subgroups of interest?
- Where will you find the sampling frame (a list of the population you are engaging, e.g. household lists) for each tool?
- What type of sampling will you do for each tool?
- Will you use random sampling? Non-random (e.g. purposeful) sampling?
- What resources do you have available (e.g. financial, human resources)?

- What are the limitations in your sampling strategy? How will you overcome these limitations (e.g. triangulation)?

As per **GAC's RBM guidance**:

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*“Whether using a quantitative or a qualitative indicator, wherever samples are used, they should be representative. If this cannot be achieved, you must identify the limitations to representativeness”. (p. 62)*

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**‘Representative’** may not always mean the same as ‘statistically significant’. For example, if you are conducting a knowledge, attitudes, and practices (KAP) survey with your care groups and have 1,000 people included in these groups, you may find that interviewing 50-100 people is sufficient. If you are doing a population-based survey as part of the evaluation, you will need a statistically significant sample size. Therefore, you can calculate this as part of your M&E plan. For monitoring, you could use **Lot Quality Assurance Sampling (LQAS)**, as described in your sampling plan. Whatever you choose, **outline why you came to this decision and why the number of people you’ve identified is enough** for data saturation.

Additional support is available in the **sampling** section from Measure Evaluation. Additionally, please see the discussion below on **intersectionality**, which should inform your sampling plan.

### 3.3.2.3 Define Targets

Setting targets is an art rather than an exact science, but it is a critical piece of your M&E plan and requires some time and consideration. As explained in GAC’s **Results-Based Management Tip Sheet No. 3.2 – Outcomes, Indicators, Baseline, Targets and Actual Data: What’s the Difference?**, targets outline a specific value (or range if applicable) that you expect the project to reach by a specific future date. Targets are estimates of what your project can achieve, given its resources, timelines, and other contextual factors. See also GAC’s RBM document for the **section on targets** on page 82.

It is essential to set targets once you have sufficient, reasonable data. When developing a project, some targets you will know early on (particularly those at the operational and output levels) will be tied to your budget. You can therefore outline these targets and the rationale in the initial version of the plan. These are unlikely to change, except in cases of significant circumstances (such as a major risk event or a change in the program’s scale).

While you may not yet have any baseline data, you can still set targets for many indicators, informed by existing data (e.g. DHS data at the district level), research, project participant groups (through a participatory approach), and/or your experience. These may need to be adjusted as new information becomes available, in discussion with your partners and funders. Whenever targets are set, it is essential to explain how the target was developed and justify the chosen target. It is best not to change targets once they have been firmly set (i.e., once project implementation begins), as one purpose of the M&E plan is to measure your progress against these targets.

When developing targets, be sure to consider:

- What data do you already have for the specific context? For example, you may have access to other reports, surveys or data including a country's Health Management Information System, data from the Census Bureau or other Ministry in the country, the latest available country data in the **DHIS**, **trends over time from the United Nations Sustainable Development Goal data**, or **country data from the World Health Organization on various maternal, newborn and child health data**.
- What does the scientific literature or grey literature say in terms of what you might expect to see regarding changes in these indicators?
- Have you involved the relevant stakeholders in the co-design process to define these targets in a participatory manner, including project participants, technical specialists, field staff (familiar with the sector and geography), Ministry of Health staff, and other government entities?
- What comparable data is available in other regions or districts where similar projects have been implemented?
- What has been your organization's experience in working in this area/geography? What is feasible and reasonable? (e.g. have you worked in the country before? What have you or other organizations been able to achieve with similar projects?)
- What effort and resources are contributing to making a change in this particular indicator that may impact the level of change that might be expected?
- What contextual factors may impede or facilitate your activities that may result in these indicators improving more or less quickly (e.g. has a new policy been implemented recently by the government that may facilitate improvements?)

As per GAC's **Results-Based Management checklist 2.1 – How to assess and/or review a performance measurement framework**, consider the following with regard to targets:

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*“Are the targets realistic and achievable given the scope, funds and timeframe of the project?”*

*Do the targets specify an achievement date?*

*Do the units of measure and of analysis match those units in the indicators and baseline data?*

*Does the target include proportionality (i.e. does the unit of measure have a numerator and a denominator)?*

*Do the targets describe the same dimensions (age, sex, targeted regions/areas, etc.) as presented in the indicators and their baseline data?*

*Are the targets for indicators that deal with people disaggregated by sex and other necessary social and/or demographic categories (age, ethnicity, etc.) wherever possible?”*

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For GAC-funded projects, once you have baseline data, you can continue to work with your PTL to finalize targets if needed to ensure they are realistic and achievable by the dates you have specified.

### 3.3.2.4 Data Collection

Data collection tools should align with ethical standards and ensure confidentiality and data security. A mixed-methods approach that combines quantitative, qualitative, and narrative data is encouraged to capture the complexity and interactions within systems.

There are many considerations in terms of data collection that will have an impact on your timelines, budgets, and overall plan, such as:

- Will you conduct data collection yourself or outsource this? If you outsource data collection, how will you ensure data quality and consistency across sites and countries, if applicable? Who will conduct the training of enumerators and/or interviewers?
- How many interviewers do you need? How many enumerators will you need? What languages/dialects do they need to speak? Are there gender or other identity factors to consider when recruiting enumerators or interviewers (for example, is it essential that women interviewers collect data from women interviewees)?
- What practical and logistical considerations will affect data collection? Consider: how many interviews/focus groups/surveys can reasonably be conducted in one day? Where will they take place? Will per diems and overnight accommodation be needed? Are there days and times that data collection cannot take place given school hours, curfews, safety concerns with nightfall, etc.?
- What equipment and resources are needed to carry out data collection (e.g. recorders, printers for consent forms, tablets for surveys, transportation costs, etc.)?
- Will interviews and focus groups be transcribed and translated? Who will do this work, and at what cost?
- How will you engage local stakeholders in the data collection process for co-management? How will you account for this in your timelines and budgets?

Please also refer to the section below on Health Security and Crisis-Resilient M&E, which may affect data collection during a crisis, such as the COVID-19 pandemic. Additionally, the ethics section includes questions on data collection that should be considered.

### 3.3.2.5 Logistics Data Management and Flow

The M&E plan should outline the process **for each tool**, including data collection, analysis, and storage. Considerations include:

- How will you safely, and in a timely fashion, transfer data from your M&E activities for your various tools (e.g. from paper to electronic data, from site to site)?
- Where and how will the data be securely stored (consider paper and electronic data from various sources)? For how long will data be retained? What will happen to the data once this time has passed (e.g. how will it be safely destroyed)?
- Who will have access to what data? How will you restrict access for those who do not need access? How will you determine who needs access, and who will control this?
- How will data be anonymized to protect participants? Who will do this anonymizing? At what point in the process will this be done?
- How will consent be obtained?
- How will safety (of participants and of staff/enumerators) be ensured?

Please also refer to the ethics section below for additional considerations. For more information, see the section on [managing data](#) from BetterEvaluation.

### 3.3.2.6 Analytics and Interpretation

Details need to be outlined for **each indicator and each tool** on how the analysis will be undertaken. Participatory sense-making and co-analysis sessions with community members and stakeholders can help interpret findings through local knowledge systems and feminist and decolonial lenses. Considerations include:

- Who will conduct this analysis?
- What specific statistical tests, if any, are needed? Do staff have the skills to perform these tests or will they be carried out by consultants?
- What software, if any, will be used for analyzing quantitative data?
- How will qualitative data be coded? Do staff have the skills to analyze qualitative data?
- What software or methods will be used for analyzing qualitative data?
- How will data be compared between the baseline and the endline for the surveys? For the focus groups and interviews?
- How will you engage local stakeholders within the analysis and interpretation steps for co-analysis and co-interpretation? How will you account for this in your timelines and budgets?
- For monitoring data: How often will the analysis be conducted? What types of analysis will be conducted? By whom?

Refer to the section above on developing indicators to ensure harmony between your indicators and analysis plans.

### 3.3.3 Reporting

It is essential to have a plan for reporting on, using and learning from (see more below) all monitoring and evaluation data collected. Your reporting plan should include:

- What data will be reported?
- How often will the data be reported?
- In what format will data be reported? If relevant, how will the data be visualized?
- To whom will data be reported? How will feedback loops be built in for you to get input from others?

Reports should summarize progress toward results and provide actionable insights for learning and decision-making. Reporting moves beyond static documents toward dynamic dashboards and visual analytics. Real-time data visualization and storytelling techniques enhance understanding and learning. Findings are increasingly shared through participatory validation workshops and community-level feedback mechanisms, strengthening transparency and ownership. Overall, a well-designed M&E system is critical to evidence-based programming, emphasizing that data serve not only for compliance but also for continuous learning, innovation, and collective accountability.

For organizations working on GAC projects, please see the section on GAC's RBM guide for [Reporting on Outcomes](#) (p. 86). Information from GAC on reporting on gender equality outcomes can be found [here](#).

#### 3.3.3.1 Baseline Data and Report

Baseline data is critical to ensure that a specific value is provided for each of the indicators in the PMF at the start of your project. This baseline data enables you to set realistic and measurable targets, allows you to track progress over time towards the outcomes, and informs the project's implementation. Baseline data may include various types of

evaluative and monitoring information at the project's outset, including formative research. Baseline data can include a mix of methods, including both qualitative and quantitative approaches.

The baseline report should include a narrative explanation of the baseline's design, as well as describe (by method and country) how data were collected, analyzed, and validated. Limitations by method and country should also be clearly outlined. A narrative write-up will show the credibility, reliability, and validity of the baseline data.

Baseline reports are typically standalone, approximately 25-30 pages long (plus annexes). The baseline report should include the following (many of which have been noted above):

- Executive Summary
- Introduction
  - Brief description of the project and context
  - Objective of the Baseline Study
- Methodology
  - Data collection methodology/methodologies
  - Ethical considerations and consent, including Independent Ethics Review Board approvals and/or local approval and review requirements
  - Limitations (by method and country), any impact on the data, and how these limitations were mitigated
  - Sampling methodology (by method and country) for each target demographic
  - Population sampled by country and sex (by method)
  - Process, timelines and locations for data collection, data entry, and analysis (by method and country)
- Findings by outcome
  - Data analysis by project outcome (ultimate, intermediate, immediate)
  - Findings presented by country and by method
  - Quantitative data presented, including both % and “n” (% or # out of total)
- Recommendations based on the data
- Final and complete PMF, including baseline data and targets for all indicators.
- A data validation and use plan that is inclusive, collaborative, and participatory, ensuring data is used for ongoing, results-based project management and improvement.
- Annexes include tools used for the baseline (e.g. survey instruments, focus group discussion guides, list of key informants and interview dates, consent forms and other detailed methodological information)

### 3.4 Budget

Budgets should be outlined in detail, including costs for human resources, supplies, and services for each component of the M&E plan (including baseline, mid-line, end-line, and all monitoring) based on the details outlined in the methods, tools, and timelines. Given the diverse nature of projects and plans, each budget will be unique. However, some common questions to consider include:

- How much will the evaluation(s) cost to carry out? Consider baseline, midline, and endline costs (or annual and semi-annual, depending).
  - What work will be done in-house, and what will be done with consultants?
  - What will be the cost of collecting evaluation data? Examples of cost categories to consider include: tool development, pilot testing, travel costs, training costs for data collectors, data collectors in field, tablets or other data collection platforms, refreshments and facilities for focus groups and interviews,

recording equipment, office supplies, internet costs, translation, transcriptions, data entry, software for analysis, dissemination and learning costs, and data storage.

- What will be the cost of the monitoring system collection and analysis? Consider staff costs and training, data collection tool development, pilot testing, training for data entry and analysis, equipment and software, including for analysis and reporting, data storage, dissemination and learning costs.

GAC's **RBM guide** notes that the budget for monitoring:

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*“...should also commit specific financial and human resources to these results-based monitoring activities, which should be reflected in the project budget. This may involve the hiring of a project monitor, the allocation of dedicated project staff and financial resources to monitoring, and the establishment of a monitoring system to collect data on the output and outcome indicators in the performance measurement framework”. (p. 64)*

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### 3.5 Learning Plans, Data Sharing, and Use

Learning is a core component of monitoring and evaluation. A strong learning plan ensures that data and findings are systematically analyzed, reflected upon, shared, and applied to improve program quality and organizational effectiveness. Learning is not a separate step; it is a continuous, adaptive process integrated throughout the project cycle.

The learning plan should describe how data will be interpreted, discussed, and used by relevant stakeholders. It explains how learning will inform real-time decision-making during implementation, as well as how evidence generated will shape future programming. It also helps to ensure stakeholder ownership of data and fosters a culture of reflection. A clear learning process contributes to shared ownership of data and findings, encourages collaboration, and fosters a culture of continuous improvement within the organization and among partners.

Learning should be drawn from **project results and data**, which include reviewing progress, discussing intended and unintended effects, examining trends, and making program adjustments as needed and **the implementation process itself**, where teams reflect on what worked well, what challenges emerged, and what could be improved in the monitoring and data collection processes.

Key components to consider for the learning plan are:

- Identify the specific questions or evidence gaps the project aims to address.
- Specify when learning discussions will take place, who will participate, and what formats will be used (for example, learning workshops, team debriefs, partner exchanges).
- Describe how learning will influence decisions during implementation, and how insights will be used to inform future programs once the project ends
- Clarify how, when, and with whom findings will be communicated, and in what formats (for example, staff meetings, participant dialogues, reports, presentations).
- Explain how feedback will be collected from those who receive the information and how this feedback will be integrated back into program decisions.

Data sharing should be transparent and ethical, respecting privacy and confidentiality. These guidelines emphasize responsible data governance frameworks guided by the FAIR and CARE principles, especially in contexts involving Indigenous, community-generated, or locally held knowledge. Partnerships should establish agreements on data ownership and stewardship, clear authorship and citation protocols and equitable recognition of contributions. This is particularly important when collaborating with local organizations, community leaders, and Indigenous knowledge holders.

Digital platforms are increasingly used to document, visualize, and disseminate lessons learned. These may include shared repositories, online dashboards, collaborative workspaces, podcasts, short briefs, and interactive data stories adapted to different audiences. Emerging tools such as AI-assisted text analysis, evidence synthesis algorithms, and real-time analytics dashboards can support rapid interpretation of large datasets, early identification of trends and adaptive decision-making during implementation.

When learning is consistently documented, communicated, and applied, it contributes to improved program design and effectiveness, as insights are translated into real-time adjustments and future planning. Systematic learning can influence institutional practice and policy by providing credible, context-specific evidence that shapes organizational priorities and approaches. Over time, these processes collectively contribute to broader sectoral knowledge and innovation, advancing shared understanding and improving outcomes across the field.

More ideas on how to **support the use** of monitoring and evaluation results can be found at BetterEvaluation.

## 4 Important Principles and Considerations

Monitoring and Evaluation in Global Health and Rights programming should be guided by principles that ensure credibility, inclusion, and the meaningful use of evidence to advance health equity and human rights. M&E is not only a technical function; it is also a social and political process shaped by diverse interests, perspectives, and power dynamics across global, national, and community levels. Effective M&E, therefore, requires intentional focus on participation, transparency, ethical integrity, and the use of evidence for learning and accountability.

Contemporary M&E practice increasingly integrates equity, feminist, and decolonial evaluation approaches. These approaches recognize that evidence is shaped by who frames the questions, designs the tools, collects and interprets the data, and communicates the findings. Co-creation and shared power with women, adolescents, community health actors, social movements, and Indigenous and local organizations are essential to ensuring that evidence is accurate, contextual, ethical, and just.

Key considerations for effective M&E in global health and rights programs include:

- **Participation and Inclusion:** M&E processes should meaningfully engage stakeholders across the system and throughout the project cycle. This includes ensuring equitable participation of women, adolescents, persons with disabilities, Indigenous peoples, and crisis-affected or marginalized communities. Intersectional and gender-transformative approaches should be applied to capture how power, identity, and structural inequities shape access, experiences, and outcomes.

- **Ethics and Confidentiality:** All M&E activities must uphold robust ethical standards. This includes obtaining informed consent, implementing privacy protections, safeguarding data, and adhering to data sovereignty principles, particularly when working with communities whose histories include extractive or colonial research practices. Respectful, culturally grounded engagement is essential.
- **Use and Learning:** Findings should be shared in clear, accessible, and culturally relevant formats to inform decision-making at local, national, and global levels. Ongoing learning opportunities, such as pause-and-reflect sessions, data review meetings, and adaptation workshops, enable real-time adjustments and strengthen learning.
- **Quality and Rigour:** M&E systems should ensure validity, reliability, and analytical rigour. Mixed-methods approaches, triangulation, strengthening routine data systems, and the use of digital tools for verification and data quality assurance contribute to the production of credible and actionable evidence.
- **Sustainability and Local Capacity:** Building strong local systems and institutional capacity is central to sustainable results. Capacity strengthening now encompasses data literacy, digital monitoring capabilities, adaptive management skills, and community-led monitoring mechanisms at all levels, including facilities, communities, and governments.
- **Integrating Climate, Planetary Health, and Gender Equality:** Climate and ecological change increasingly shape health and rights outcomes, including through food systems, disease patterns, displacement, and infrastructure resilience. M&E frameworks should therefore capture climate resilience, environmental co-benefits, and adaptive capacity, while applying a gender-responsive and intersectional lens to understand differential impacts and benefits. Aligning indicators with national climate policies and the SDGs ensures monitoring reflects both social and ecological determinants of health, rights, and well-being.

These principles and considerations are crucial when developing an M&E plan. While it is beyond the scope of this guidance note to provide in-depth comments on each of these areas, some additional resources are provided for your consideration under the reference section.

## 4.1 Health Security and Crisis-Resilient M&E

The M&E plan should anticipate and respond to disruptions from health emergencies, climate-related shocks, or other crises. COVID-19 demonstrated how rapidly evolving health threats can affect access to communities, data-collection timelines, budgets, and the safety of participants and field teams. A crisis-resilient M&E approach ensures that monitoring and learning activities can continue safely and ethically under changing conditions, while maintaining data quality and equity. To support health security and resilience, the M&E plan should outline strategies for:

- **Safeguarding participants and data collectors:** This may include adapting data collection to open or ventilated spaces, providing appropriate protective and hygiene supplies, and prioritizing the recruitment of data collectors from local communities to reduce travel-related risks and strengthen contextual understanding.
- **Flexible and adaptive data collection modalities:** M&E systems should be prepared to shift among in-person, hybrid, and remote methods (e.g., phone surveys, SMS/WhatsApp interviews, or digital survey tools) as needed. When using remote approaches, consider how reduced connectivity, digital access, or literacy barriers may limit participation, especially among the most marginalized.

- **Use of secondary and routine data sources:** Where direct data collection is disrupted, routine service data, community monitoring platforms, or government information systems may be used as interim sources, with clear documentation of their limitations.
- **Contingency planning for timelines and resources:** The plan should acknowledge that crises may require adjustments in workflow, staffing, and budgeting. Flexibility should be built into workplans, contracts, and partner coordination mechanisms.
- **Monitoring equity impacts:** Health emergencies often intensify existing inequalities. M&E systems should continue to track differential effects on women, youth, people with disabilities, remote households, and other vulnerable groups at heightened risk of exclusion.

There are many sources which detail considerations for COVID-19 in M&E, including from [ODI](#) and [WHO](#). CanWaCH also has a [recorded webinar](#) on COVID-19 adaptations in M&E.

## 4.2 Ethical Considerations

Ethical considerations need to be addressed in detail in your M&E plan. A formal ethics approval is not simply a checkbox; it helps identify potential ethical challenges, builds relationships with local officials, and facilitates data collection planning. The purpose is to ensure you collect data and implement your M&E plan without causing harm. Adhering to ethical norms when collecting data from human participants is crucial in international development and global health work.

**NOTE:** While some may argue that formal ethics clearance is not required for evaluation data, this is not always the case. With efforts focused on decolonization, some countries (such as Tanzania) require formal ethics approval for all data collection (including monitoring and evaluations) and a data transfer agreement if the data is being taken outside of the country (which it would be for an NGO based in Canada). In your plan, you should demonstrate that you are informed of the relevant requirements and legislation in the country/countries in which you are working by noting what these are in your plan. The WHO has a list of ethics committees by country as a starting point.

Formal ethical approval takes time and resources, so it is not sufficient to state that you will seek the relevant ethical clearance without outlining how this will be done. You must include details of the requirements, and when and how your project is meeting them. If formal ethics approval is not possible due to budget or timing constraints, in-country approval at the local level may be obtained. Regardless of the level of ethics approval, data must be collected in accordance with ethical standards for human participant research, such as [Canada's Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans](#). Each country has its own ethical guidelines and/or forms that you need to follow. Following these ethical standards ensures that:

- The benefits of the data you are collecting outweigh any harm
- Participants are informed about potential harms so they can decide whether or not they want to take part
- Confidentiality of data is ensured and participants' privacy and safety are protected (for example, plans are in place for data collection and storage, including detailing how long the data will be kept, restricting who has access to the data, ensuring privacy by design (e.g., not collecting identifying details unless critically necessary), anonymizing the data when identifying details are collected, etc.)
- A referral or resource form is developed to provide to participants during or after data collection, should support services be needed.

- Those collecting the data (e.g., enumerators and facilitators) are trained in ethics, ensuring they understand its importance and follow appropriate protocols.
- Participants provide free and informed consent (or assent for children and adolescents, with parental consent). This may be verbal or in writing, depending on the country's requirements. For participants with low literacy, a thumbprint may be an alternative method of identification.
- You are using existing data (e.g., secondary data) and are not collecting more than necessary to avoid overburdening the community. Therefore, there should be an analysis, use, and learning plan for all collected data.

Please see “[Defining ethical and quality evaluation standards](#)” on BetterEvaluation for more information.

### 4.3 Risks and Mitigation Responses

In the M&E plan, identify the risks that may be present, the results statement most directly impacted by each risk, and your response (i.e., what you can do to mitigate each risk). **GAC provides a detailed description of how to develop these components, along with a table that can be used for this purpose**, as well as scales (with corresponding criteria) for assessing the likelihood and impact of each risk. This format can be applied to M&E plan considerations. Information on risks to gender equality from GAC is also available [here](#).

As with other aspects of the M&E plan, this section provides an opportunity to thoroughly assess risks, clarify assumptions, and identify mitigation opportunities during planning with your organization and partners. These could be areas that remain unknown (e.g., implementing partners may lack the capacity to implement X and collect data on Y), creating opportunities to conduct further research to mitigate risk as you develop the M&E plan. Risks will likely emerge and be addressed throughout the project; however, it is essential to articulate the initial risks. Focus on specific risks and provide a detailed response, rather than a very long list of vague considerations.

### 4.4 Assessing Capacity to do Monitoring, Evaluation and Learning (MEAL)

It is important to **assess your team capacity** for MEAL as part of the M&E plan. At the initial stage, not all staff may be in place, of course, so this section (like others) may evolve over time. There may be tasks that the team can conduct internally in Canada or in the country where the program is being implemented. For other tasks, you may have to hire national or international staff or consultants.

There may also be opportunities for **increasing the capacity** of your team in the development and implementation of the M&E plan (and thus make it more efficient). Your timelines and budgets will need to reflect this, and brief narrative descriptions can help communication between organizations and donors or PTLs.

You will need to detail the **roles and responsibilities** in the M&E plan, including by indicator and tool, as well as the overall steps. This is a helpful tool for you to use internally, ensuring it is clear who is responsible for what and that there is sufficient capacity for the plan.

You can find ideas for [strengthening evaluation capacity](#) from BetterEvaluation.

## 4.5 Feminist MEAL Principles

In the recent [Technical Guidance note on Measuring Women’s and Girl’s Agency in the Global Health Sector](#), the following recommendation concerning feminist principles was shared.

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*“Feminist monitoring and evaluation is an approach that emphasizes participation, challenges power relations, and brings voice to those who have traditionally not held power. In feminist monitoring and evaluation, women and girls have agency as full participants in the collection, analysis, and use of data, and have power over the narratives that are told about them. Feminist monitoring should be conducted routinely, including the engagement of women and girls in data collection, analysis, and utilization. Detailed guidance on feminist approaches to monitoring and evaluation should be referenced and used in evaluation planning.*

*Feminist monitoring and evaluation can be expensive and time-consuming, and requires specific expertise. As a critical component of women’s empowerment, feminist monitoring and evaluation must be adequately resourced and planned at the outset of the project, and incorporated into the gender strategy and monitoring and evaluation plan.*

*While feminist monitoring and evaluation practices, such as using a co-creation process and ensuring that women and girls have ownership over their data, are recommended throughout this note, there is much more to feminist monitoring and evaluation than can be covered within the scope of this text. Furthermore, we acknowledge that there exists a tension between some of the recommended guidance available in existing literature and feminist principles and methods.*

*These challenges, and associated strategies, should be discussed between stakeholders as part of the project development process.”*

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Please refer to that guidance note for other relevant resources. Additionally, a [Checklist for collecting data with a gender-sensitive/feminist lens](#) from SPUR Change, Inter-Council Network, Salanga, and the Government of Canada can be found here.

Additional references on feminist MEAL can be found in various sources, including Oxfam ([here](#) and [here](#)), Better Evaluation ([here](#) and [here](#)), and the [Equality Fund](#).

## 4.6 Anti-Racism and Decolonization Principles

As part of the overall M&E plan, it is also important to apply anti-racism and decolonization lenses. [Many resources](#) can help you and your organization understand these issues more broadly, which are outside the scope of this guidance note.

Some considerations directly related to M&E planning include:

- Ensuring local leadership and governance (e.g. meaningfully involving participants, local consultants, and country office staff in monitoring and evaluation, including in developing the M&E plan, collecting the data, analyzing the data, and disseminating the data)
- Using available data collection tools from in-country (e.g. from the Ministry of Health) to support existing country systems
- Ensuring ethical procedures are followed (please see section above on ethics)
- Paying attention to language (e.g. re-thinking use of terms such as “beneficiaries” or “third world countries”) (see more [here](#) and [here](#)).

See also the section on community-driven approaches below. If you reference the application of these principles in your plan, you must be specific about what this means to you and your stakeholders, and what it will look like in practice.

## 4.7 Intersectionality and Population Considerations

As outlined in GAC’s [Feminist International Assistance Gender Equality Toolkit for Projects](#), in addition to gender-based inequalities, “*Canada’s approach also recognizes that inequalities exist along intersectional lines*”. This intersectionality needs to be part of your M&E plan. As highlighted in Canada’s [FIAP](#),

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“...women often face additional intersectional discrimination, including on the basis of their race, ethnicity, religion, language, sexual orientation, gender identity, age, ability, or migrant or refugee status, among other aspects of personal identity”.

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As part of the M&E plan, it is important to consider how you will monitor and evaluate intersectionality for the population(s) your project engages. This should be considered when deciding whom to collect data from and how to analyze the data (e.g., which populations). This may also influence your sampling, as you might need to ensure adequate representation of specific subpopulations who might otherwise be overlooked. However, as noted above in the ethics section, you must also ensure that no harm is caused. (Over)-segmenting data could cause unintended harm (e.g., by identifying vulnerable groups), and this needs to be carefully considered.

## 4.8 Community-Driven Approaches

As outlined in GAC’s [Feminist International Assistance Gender Equality Toolkit for Projects](#),

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*“Canada’s feminist approach requires that our international assistance be informed by a gender-based analysis that includes evidence of meaningful consultations with women and girls before a project begins”.*

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From a feminist and decolonization perspective, participatory approaches and meaningful engagement with participants are critical to a project, and in turn, to the M&E plan. There are different perspectives on what this looks like in practice. At a minimum, meaningful consultation with the community is necessary throughout the

(re)development and implementation of the M&E plan. This may include establishing an advisory committee of community members for M&E and routinely seeking their feedback on which indicators matter to them.

For more information on community-led MEAL approaches, including FAQs, viability assessments, and webinars, please visit [CanWaCH's website](#). The Community-led Monitoring, Evaluation, Accountability and Learning (CoIMEAL) methodology created by [Salanga](#) builds on the Feminist MEAL and FIAP enhancing GAC's RBM approach to MEAL that capacitates diverse community members/change agents, including the marginalized and vulnerable people, to continually monitor, analyze, share, and reflect on progress against their community development plans based on outcomes and indicators/metrics they define to take action to achieve their goals/vision. GAC's RBM document has a [section on taking a participatory approach](#) on pages 26-27.

As noted above, specificity is key – your plan should outline how specifically you will reflect these principles in your work.

## 5 Detailed Guidance Checklist

Below is a checklist to help ensure you have considered the key areas for your M&E plan. You may use these as section headings in your plan if helpful to ensure you have included all the important information.

We have chosen not to include a sample evaluation plan template. This is for several reasons, including recognition that projects, organizational capacity, and learning needs vary widely, so no single template is likely to be adequate or meet the preferences of everyone involved. The ideal template is clear and useful to the relevant stakeholders for that project. If desired, you may ask partners, including funders or PTLs, whether they have preferred templates you can draw inspiration from. You may also find it helpful to reach out to colleagues working on similar projects to see what has worked for them. The resources below may also be helpful, and we invite you to contact the CanWaCH Metrics Working Group if you would like to discuss further with other experienced Canadian partners (email [info@CanWaCH.ca](mailto:info@CanWaCH.ca) to be connected with this group). However, we encourage you to focus on the utility of your individual plan for you and your stakeholders, rather than adhering to a specific outline unless your funder provides one.

Areas for Consideration	Comments	Yes	No
<b>1. Evaluation Questions</b>	Clear evaluation questions are articulated and guide the overall plan.	<input type="checkbox"/>	<input type="checkbox"/>
<b>2. Indicators</b>	We have included details on indicators including why each was chosen, how it will be calculated (e.g. numerator and denominator), what tool(s) will be used to collect the data, how often the data will be collected for each indicator, and by whom the data will be collected.	<input type="checkbox"/>	<input type="checkbox"/>

	We have described plans for disaggregation of data in detail by indicator.		
<b>3. Methods and Approaches</b>	<p>We are collecting data using multiple sources (such as coverage surveys, secondary data such as HMIS, DHS, MICS, qualitative methods/formative research [e.g. focus groups and interviews]).</p> <p>Approaches are clearly articulated and relevant to the evaluation purpose.</p>	<input type="checkbox"/>	<input type="checkbox"/>
<b>4. Tools</b>	<p>We have included all data collection tools and described how each monitoring and evaluation tool will be operationalized (by country where applicable). This includes purpose, which indicators the tool will measure, how data will be disaggregated, and how the tool will measure progress towards outcomes.</p> <p>We have clearly stated all timelines for all data collection tools.</p>	<input type="checkbox"/>	<input type="checkbox"/>
<b>5. Sampling</b>	We have explained the sampling for each tool, including a description of the sampling strategy and sample size, with explanation.	<input type="checkbox"/>	<input type="checkbox"/>
<b>6. Targets</b>	We have set realistic, evidence-based targets for each indicator based on available evidence and information and provided a rationale.	<input type="checkbox"/>	<input type="checkbox"/>
<b>7. Data Collection, Management &amp; Analysis</b>	<p>We have outlined how all data will be collected, analyzed, stored and used in detail by tool, and developed a plan to support ownership of the entire process by the team and relevant stakeholders.</p> <p>We have detailed plans for how data will be triangulated where relevant.</p>	<input type="checkbox"/>	<input type="checkbox"/>
<b>8. Reporting, Learning &amp; Use</b>	We have a detailed plan (including tasks, timelines, and budget) to use the data for learning as well as performance.	<input type="checkbox"/>	<input type="checkbox"/>

<b>9. Timing</b>	Throughout the plan and/or in a designated section, we have provided details on expected timelines, and any potential risks or influences which could affect them.	<input type="checkbox"/>	<input type="checkbox"/>
<b>10. Budget</b>	Specific budget is allocated for each M&E tool and activity.	<input type="checkbox"/>	<input type="checkbox"/>
<b>11. Ethical Considerations</b>	<p>We have included a detailed ethical plan (e.g. where ethical approval will be sought, consent forms, training plans) for each tool by country.</p> <p>We have considered intersectionality, while also understanding the implications for data collection from an ethics point of view (e.g. do no harm).</p> <p>We have further considered timely concerns such as COVID-19 and their impact on the M&amp;E plan.</p>	<input type="checkbox"/>	<input type="checkbox"/>
<b>12. Risk and Mitigation</b>	We have a clear risk and mitigation plan which helps ensure that we do no harm.	<input type="checkbox"/>	<input type="checkbox"/>
<b>13. Community-Driven Approaches &amp; Feminist MEAL Principles</b>	<p>We have identified adequate opportunities for dialogue with key stakeholders, and community engagement, throughout the development and implementation of the M&amp;E plan.</p> <p>We have considered how to apply feminist MEAL principles throughout this process.</p>	<input type="checkbox"/>	<input type="checkbox"/>
<b>14. Digital M&amp;E Readiness and Data Ethics</b>	We have assessed digital literacy, device and connectivity access, and cybersecurity needs. We have ensured responsible data governance aligned with FAIR (Findable, Accessible, Interoperable, Reusable) and CARE (Collective Benefit, Authority to Control, Responsibility, Ethics) principles, and embedded these into data collection, storage, sharing, and use.	<input type="checkbox"/>	<input type="checkbox"/>
<b>15. Climate, Planetary Health, and Gender Equality</b>	We have included indicators and analysis that capture climate resilience and environmental co-benefits as well as gender outcomes, and we have applied a	<input type="checkbox"/>	<input type="checkbox"/>

	gender-responsive and intersectional lens to assess differential impacts, access, agency, and benefit.		
<b>16. Adaptive Management Capacity</b>	We have established systems that support real-time learning, structured reflection cycles, and timely adjustments to implementation based on emerging evidence and context changes.	<input type="checkbox"/>	<input type="checkbox"/>
<b>17. Localization and Power-Sharing Mechanisms</b>	We have ensured active and meaningful engagement of local organizations, women, youth, and Indigenous partners in decision-making, data interpretation, and ownership of findings and outcomes.	<input type="checkbox"/>	<input type="checkbox"/>
<b>18. AI/ML Applications and Data Privacy Compliance</b>	We have confirmed that any use of AI or machine learning tools is transparent, bias-aware, rights-respecting, and fully compliant with data privacy, data sovereignty, and responsible technology standards.	<input type="checkbox"/>	<input type="checkbox"/>

## 6 Additional Tools to Support M&E Plans

### Coverage Survey Tools

- **Coverage Survey Tool** from the **Real Accountability: Data Analysis for Results (RADAR) project** (via an **Institute for International Programs at the Johns Hopkins University** project funded by GAC)
  - For more information on how to use the RADAR tools, please see CanWaCH's July 2020 webinar: **John Hopkins University Training Session 1: The RADAR Coverage Survey Tool**
- **Demographic and Health Survey**
- **UNICEF's Multiple Indicator Cluster Survey**

### Impact Modeling

- The MSI Impact2 tool to measure the impact of programs in the area of reproductive health
- **The Lives Saved Tool** to help estimate the impact of coverage change on mortality in LMICs from the **Real Accountability: Data Analysis for Results (RADAR) project**

### Quality of Care Tools

- **The Quality of Care Tools** from the **Real Accountability: Data Analysis for Results (RADAR) project**

### Project MEAL Design

- While your project may use templates provided by GAC for the Logic Model and PMF Design, you may wish to take a look at **Kinaki**, a Canadian, cloud-based tool that is set up for GAC's RBM approach.

### CanWaCH Resources

- CanWaCH's **Data Exchange** provides data, maps, and guidance on the impact of development, humanitarian, human rights and gender equality work done by Canadian organizations and their partners.
- CanWaCH has a **Project Explorer** website that provides a list of various development, humanitarian, human rights and gender equality projects globally. The **Analytics Portal** can be used to visualize the Project Explorer's aggregated data.

## 7 Resources

### Web pages and tools:

BetterEvaluation. <https://www.betterevaluation.org>

Global Affairs Canada (GAC). [Results-based management](#)

MEASURE Evaluation. <https://www.measureevaluation.org>, including [Country profiles](#). People in Need (PIN). [IndiKit - Gender Equality](#)

RADAR Project '[sampling calculator](#)', developed through a partnership between GAC and Johns Hopkins Bloomberg School of Public Health as part of the PS-MHCH Initiative for MNCH/SRHR surveys.

Canadian Journal of Program Evaluation. [Interactive Voice Response Technology as a Data Collection Tool Compared to a Household Survey: What We Learned](#)

The DHS Program (Demographic and Health Survey). [Data](#)

UNICEF. [Multiple Indicator Cluster Surveys \(MICS\)](#)

United Nations. [SDG Country Profiles](#). United Nations/Department of Economic and Social Affairs/Statistics Division

University of North Carolina at Chapel Hill / Data4Impact Project (D4I). [Family Planning and Reproductive Health Indicators Database](#)

World Health Organization (WHO). [Maternal, Newborn, Child and Adolescent Health and Ageing Data portal](#)

United Nations Evaluation Group (UNEG) Data and AI Working Group. [Ethical Principles for Harnessing AI in United Nations Evaluations](#). New York: UNEG; 2025.

UN Sustainable Development Group System-Wide Evaluation Office (SWEO). ["Enhancing Evidence Use with AI: The UN System-Wide Approach."](#) *OECD Development Co-operation Tips, Tools, Insights and Practices*. Paris: OECD Publishing; 2024.

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UNICEF and EvalPartners; 2020–present. (Global advocacy campaign documents and outputs vary by year.)

IDEAS Conference 2022. [Power of Evaluation: Influencing Decision Making for a Better and More Equal World](#). Bonn: German Institute for Development Evaluation (DEval); 2022.

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World Health Organization. **Evidence, Policy, Impact: WHO Guide for Evidence-Informed Decision-Making**. Geneva: WHO; 2021. ISBN: 9789240039872.

Centre for Intellectual Property and Information Technology Law (CIPIT), Strathmore University. **The State of AI in Africa Report 2023**. Nairobi: AI4D Africa Program (IDRC and Sida); 2023.

International Development Research Centre (IDRC) and Swedish International Development Cooperation Agency (Sida). **Artificial Intelligence for Development in Africa (AI4D Africa) Programme**. Ottawa: IDRC; 2020–2025.

### **Resources on Feminist Monitoring and Evaluation:**

Haylock, L. & Miller, C. (2015). **Merging Developmental and Feminist Evaluation to Monitor and Evaluate Transformative Social Change**

Oxfam. (2020). **Guidance Note on Feminist MEAL**.

Oxfam. (2017). **Applying Feminist Principles to Program Monitoring, Evaluation, Accountability, and Learning**.

Podems, D.R. (2014). **Feminist Evaluation and Gender Approaches: There's a Difference?**

Podems, D. & Negroustoueva, S. (2016) **Feminist evaluation**. BetterEvaluation.

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BetterEvaluation. in: **Manager's guide to evaluation**, consulted in 2021

BetterEvaluation (2013). **Manage an evaluation or evaluation system**, May, 2013

BetterEvaluation. **Manage data** (under: *Methods and processes* › *Describe | activities, outcomes, impacts and context*). Consulted in 2021.

BetterEvaluation. **Support use** (under: *Methods and processes* › *Report & Support Use of findings*). Consulted in 2021.

BetterEvaluation. **Strengthen evaluation capacity**. (under: *Methods and processes* › *Manage an evaluation or evaluation system*). Consulted in 2021.

BetterEvaluation (2016). **Process Tracing**, Last update: 28 April, 2016

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Brittany S. Iskarpatyoti, Beth Sutherland, Heidi W. Reynolds (2017). **Getting to an Evaluation Plan: A Six-Step Process from Engagement to Evidence. A Workbook**. MEASURE Evaluation.

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- Global Affairs Canada (GAC) (2021). **Feminist International Assistance Policy Indicators**, Last update: 25 May, 2021
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- Global Affairs Canada (GAC) (2016). Gabarit, **Performance Measurement Framework..** GAC 2662E (2016-03-17) PDF
- Global Affairs Canada (GAC) (2018). **International Assistance Results Reporting Guide for Partners**, Beta Version, 2nd Edition.
- Global Affairs Canada (GAC) / Results-Based Management Centre of Excellence (RBMce) (2018). **International Assistance Results Reporting Guide for Partners**, including **Glossary of Terms**.
- Global Affairs Canada (GAC) (2017). **Results-Based Management Tip Sheet 3.1 – Selection of Performance Indicators by Level of Outcome**
- Global Affairs Canada (GAC) (2017). **Results-Based Management Tip Sheet No. 3.2 – Outcomes, Indicators, Baseline, Targets and Actual Data: What's the Difference?**. Last update: July, 2017.
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