

Content

- Defining (semi-)remote M&E activity, its opportunities and challenges
- Risks and mitigation measures for face-to-face M&E in case of epidemics/pandemic etc.
- Planning and process of an entirely remote M&E activity
- Remote M&E Methods: challenges and tips

Remote M&E - Definition

Remote = from a distance, from a location other than the project/intervention

- Entirely remote, i.e. no direct interaction by the M&E team with the project/target groups
- Semi-remote or combined, i.e. some persons interact directly with project partner/target groups and some persons steer or cooperate from a distance
- Using virtual methods and technology

Remote M&E

Opportunities

- Assessment where no direct interaction is possible, e.g.
 - in risk contexts, during pandemic and in movement restricted contexts

- Flexibility with timing and resources
- Avoids travel and can reduce cost and environmental impact

Limitations

- No direct judgement of situation on the ground
- No direct interaction with service users/beneficiaries
- No body language observable
- Limitation in building trust with interviewees
- Additional time for coordination and regular online briefings
- Technical challenges potential for several time consuming attempts
- No visual confirmation

Alternatives for remote M&E

- Consider urgency of M&E activities and re-schedule instead of forcing them to happen in a risk setting
- Consider combining evaluations into thematic or portfolio evaluations
- Consider conducting synthesis of previous evaluations for learning purposes
- Prefer ongoing or real-time monitoring of humanitarian action
- Consider real-time rather than post distribution monitoring, i.e. observations at distribution points and delivery of assistance

Risks and Mitigation Measures during pandemic/epidemic/disease outbreak in case of semi-remote M&E activities with direct contacts to stakeholders

Safety for persons involved

- Ensure safety and security for visitors, consultants, enumerators, community members, target groups etc.
- Limit exposure of stakeholders to risk potential (hazards, infections)
- Provide most recent WHO guidance and National/local protection regulations and restrictions
- Ensure awareness of the risks, mitigation measures (personal hygiene),
 and right to refuse to participate (as interviewer/enumerator)
- Provide protective equipment (masks, gloves and hand sanitiser) in particular in health service related project as needed
- Ensure that neither consultants/enumerators nor their household members have displayed infection/illness symptoms at start of activity
- Consider stopping M&E activities in areas with high incidences

Safety during interviews

Mitigate risks for the most vulnerable incl. elderly, persons with disabilities, persons with autoimmune conditions etc. by

- complying with all National/local hygiene regulations
- keeping distance and explain reasons for hygiene measures
- reducing contacts and contact time by focusing on essential information
- conducting door-step interviews or at distribution points
- conducting meetings in open and well ventilated spaces
- focusing on easy to reach key informants incl.
 - Leaders/member of OPDs, self-helf groups, VSLA groups etc.
 - Shop owners (for voucher modalities)
 - Bakery owners (for food assistance modalities)
 - Contractors (for infrastructure and civil works interventions)

Adaptation with (Health) Service Providers

- Visit service facilities outside of regular working hours to minimize personal contact and allow professionals to focus on their tasks
- Include questions and observations that assess whether and how partners are applying actual WHO/National hygiene guidance during service delivery
- Conduct frequent verification activities, e.g. verifying the technical aspects of delivery, such as the results of water quality tests and inspections of infrastructure, and the contents of food and non-food kits at warehouses

Entirely remote M&E activities

Planning Remote M&E Activities

- Prepare focused TOR:
 - agree on purpose/topics (e.g., partner assessment, quality management visit, environmental snapshot, assessment of inclusive eye health services etc.)
 - set and test technology requirements
 - set responsibilities and preparations
 - confirm availability of persons
 - confirm timeframe and schedule
 - allow external team members/consultants to come up with methodology suggestions
 - Leave opportunities for adjusted methodology

Process of remote monitoring visit

- Introductory meeting:
 - Getting to know each other (set aside sufficient time due to virtual setting)
 - Agreeing on detailed implementation
 - Briefing on actual state-of-affairs
- Work sessions:
 - Smaller groups to cover specific monitoring aspects/items
 - Conduct brief training sessions as needed
 - Keep sessions short/schedule follow-up sessions
- Virtual site inspection (optional consider immediate need and limitations; potentially for health facilities):
 - equipment, medical storage, patient files, accessibility features and solar power/water collection
 - Observation of services provided, e.g. examination of patients, conduct of biometry, hand scrubbing performance
 - Potentially observation of surgeries
 - Debriefing: Reflect on observations; discuss actions and way forward

Remote M&E Methods

Key Informant or Expert Interviews and (Focus) Group Discussions

- Use well trained and briefed local facilitator/enumerator
- Use local expert, member of a DPO/CSO, staff of partner organisation, or CBM staff as facilitator
- Ensure survey and language competencies

Construction, infrastructure and facilities

- Ask partners to take photographs, short videos (smart phone or photo camera)
- Consider data/file size for transfer to M&E team leader/CBM

Change Stories

- Ask beneficiaries to use diaries
- Ask people to write down stories of change (Most Significant Change)

Before Remote Interviews – Consent

- Prepare short consent text (in local language) for interviewee, incl. consent for photos/videos as needed
- Test this text with a few people for understanding and time required
- Explain purpose of interview and introduce yourself
- Get verbal approval of interviewee and document it
- Start interview only after explicit answer, such as "Yes, I agree"
- Allow for discontinuation of interview if interviewee feels uncomfortable

Remote Interviews - Technical Preparation

- Ask target groups to share their phone number or to call back
- Suggest calling back at convenient time
- Send text message reminder 1 hour before call
- Explain reason and time for survey
- Plan 30 minutes maximum per interview
- Consider compensation via mobile money or air time
- Provide/use SIM card to be used for this survey, only or dongle for enumerators/ interviewers
- Ensure people can go to a quiet and safe place during interview
- Ensure interviewer is in a quiet and safe place during remote interview

Remote Interviews – Tips

- Eliminate sensitive questions avoid risks for interviewees
- Use local language for interviews
- Test interview with small sample first
- Train enumerators
- Upload data to a secure server in real time, or
- Ensure data is uploaded every day onto a secure device (consider the risk of losing the phone or the laptop)
- Enumarators to sign confidentiality/data security agreements
- Use CBM preferred software such as MS Teams for online communication
- Don't share personal details (names, locations) of people who are, may be or have been affected, infected or sick with anyone other than key team members and medical providers.

Telephone Interviews - Tips

Mostly used for individual (Key Informant) interviews

- Check and ensure availability of interviewees
- Check who can be reached and who not (make it inclusive!)
- Consider transfer of airtime for mobile phone users
- Consider specific SIM card to be used by enumerators
- Ensure quiet/safe places for interviewer and interviewee
- Limit distractions
- Make advance announcement of call time
- Suggest call-back option at convenient time
- Collect explicit consent
- Allow for withdrawel at any time
- Limit interview time (max 30 min)

Video Conferences – Tips 1

- Have a facilitator/coordinator on location
- Consider local internet connectability, signal strength, video quality, and ease of use
- Ensure best possible familiarity with the technology
- Prepare yourself your environment, your attire, the visual and acustic background while "on air"
- Prepare people video conferencing might be new to participants
- Explain functionality of tool at beginning
- Ask for use of video when speaking (creating trust)
- Explain mute/unmute to avoid echo and disturbances
- Minimise visual and audio distractions (e.g., a moving fan in the background, audio of other devicec in the room)
- Stop other apps to pop up during call

Video Conferences – Tips 2

- Set clear time frame
- Consider sufficient brakes (devide days into 2 or more sessions or use 2-3 shorter days)
- Consider division into smaller groups per function/role
- Consider accessibility how will persons with visual or hearing impairment be involved?
- Use interactive methods, let people present, use polls
- Summarise key points or write minutes for sharing and later reference
- Consider stable installation of camera to improve video quality
- If observations of localities/infrastructure are recorded, consider safe upload and storage











Remotely and Safely.







