



# LESSONS LEARNT: MONITORING AND EVALUATION OF MHPSS

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## 1. Introduction to the topic of the webinar (M&E)

Monitoring and evaluation are used to collect data to evaluate if an intervention is effective in reaching its goal and meeting the needs. There are different phrases, PMER, MEAL, and M&E, however, planning is important to start an intervention, which includes a needs assessment and project design with a logical framework, output, and outcome indicators.

- Planning: Assessment, develop a logical framework with Specific, Measurable, Achievable, Relevant and Time-bound (SMART) indicators, and plan how you will measure them.
- Monitor progress on indicators and evaluate your intervention.
- Need to plan the intervention first to be able to measure. Need to know the means of verification, when to collect, how to use it, and who to use it. Ethical data collection, what to measure, and how to use the information.
- M&E can be done continuously and also at specific points of a project i.e. midterm and at the end.

A brief on what is monitoring and evaluation:

- Monitoring is the routine collection and analysis of information to track progress against set plans and check compliance with established standards. It helps identify trends and patterns, adapt strategies, and inform decisions for project/programme management.
- Evaluation is an assessment, as systematic and objective as possible, of an ongoing or completed project, programme, or policy, its design, implementation, and results. The aim is to determine the relevance and fulfillment of objectives, developmental efficiency, effectiveness, impact, and sustainability.

Some Examples:

- Care for Staff & Volunteers
- Outcome: A supportive and caring working environment is achieved and sustained for staff and volunteers.
- e.g. of SMART Outcome indicator: % of NS managers, staff and volunteers aware of their NS self-care and



team care policies, procedures and resources (e.g. materials, referrals) for volunteers.

- e.g. Output indicator: # of NS managers, supervisors and programme staff trained in staff and volunteer care policies and procedures, systems and support skills [relevant to their role].
- PS-service provision
- Outcome: The target population achieves and sustains personal and interpersonal well-being and capacity.
- Outcome indicator: The target population reports a change in personal well-being (e.g. self-confidence, concentration).
- e.g., Output indicator: Estimated # of target beneficiaries reached with PFA within a specified time frame from exposure to a crisis event.

## **2. Challenges with M&E**

- Well-being is subjective and therefore harder to measure.
- People are often not used to talking about well-being.
- The contact with the target population is often brief (inappropriate to ask, AND/OR difficult to trace the person helped).
- MHPSS/PFA is often merged with other more practical aid provided (shelter/livelihoods/food).
- MHPSS interventions are often preventive (treatment is easier to measure).
- Financial challenges/capacity.

## **3. Opportunities with M&E**

M&E allows an organization to plan from the outset, the element of change they want to bring with their intervention and find indicators both for regular program monitoring and of the results they could achieve, based on their intervention design or not. Both results are good: if the results were not achieved, there is a learning that happens so the intervention can be tweaked to meet the needs and achieve the results, and if the intervention meets the results, it provides evidence to continue an effective intervention, and thus receive further funding.

- Advocacy - findings to advocate for the need for these MHPSS.



#### **4. Learnings from case studies**

The model of Helping the Helpers, with the intention to target:

- compassion fatigue
- secondary traumatic stress
- burn-out
- work-related stressors

allows organizations to design and implement an intervention that targets these domains of MHPSS and provides an arsenal of tools for healthy continuation in humanitarian aid.

#### **5. Building blocks in M&E**

- Start with: What do you want to change with the intervention that you want to do? Follow the Theory of Change paradigm.
- Based on what you want to change, look for tools, or design local tools and validate those in the constructs that measure the change you want to bring.
- Considerations: When using standard tools, cultural adaptations need to be made during translations.  
<https://www.intestcom.org/page/28>

#### **6. Advocating for M&E**

- Organizations could contact the Reference Centre or academic institutions for a partnership to learn more about this issue.
- A rigorous M&E element in your project proposal allows the donor to see that you are serious about measuring outcomes, and you are more likely to get funding. Some donors already ask for 10% of the budget to be allocated to M&E. This trend will most likely continue.

#### **7. Webinars, trainings, podcasts**

- Recording from Webinar 3
- MHPSS-Evidence-Building-Toolkit\_2024.pdf (pscentre.org)
- Webinars - PS Centre



- monitoring - PS Centre
- IASC M&E framework
- PS Centre M&E Tools