

NOTE FROM THE EDITOR

This issue of the MEASURE Evaluation PIMA (MEval-PIMA) *Activity Update* highlights the development of guidelines for M&E institutionalization in the health sector.

Developing Guidelines to Support Institutionalization of M&E Within the Health Sector in Kenya

Since its inception in 2012, the MEASURE Evaluation PIMA (MEval-PIMA) project has initiated various activities aimed at strengthening health systems and improving the quality and use of data in Kenya for the sustainable delivery of quality services. Part of this support has focused on creating enabling structures—including policies, strategies, and plans that support the development of needed capacities for monitoring and evaluation (M&E). MEval-PIMA has supported target programs at the national level and select departments of health at the county level to develop the tools and assess the existing capacity for M&E, as well as build individual skills and competencies for M&E. It has also supported data generation, management, and use of information for decision making.

While these efforts represent clear milestones towards creating a supportive environment for the development of an M&E system in the health sector, there has not been a uniform approach to guide Kenya in investing resources to best improve the performance of the M&E system. To address this challenge, MEval-PIMA has been working collaboratively with the M&E Unit at the Division of Health Informatics, Monitoring, Evaluation, and Research at the Ministry of Health to develop guidelines for institutionalization of M&E.

The guidelines are based on the findings from baseline assessments undertaken in five national programs and in 17 counties across the country. Results from these assessments identified diverse constraints in terms of the capacity to implement a fully functional M&E system in the health sector. These include the lack of a unified vision and a framework for M&E, disjointed M&E interventions, inadequate resources to implement M&E activities, a lack of clear skills and competence among professionals tasked with carrying out M&E responsibilities, and the absence of guidance on how to utilize data from the system to inform decision making and planning.



Photo by Yvonne Otiemo, MEval-PIMA

Dr. David Soti, Head of the Division of Health Informatics, Monitoring, Evaluation, and Research following a presentation during a National M&E technical working group meeting in Nairobi in July 2016.

The guidelines for institutionalizing M&E aim to fill this void by defining a minimum set of common standard for defining M&E, developing consensus on the characteristics of a functional M&E system and the organizational structures that are needed, and staffing the establishment and governance of coordination forums to rally support for M&E activities within the health sector.

The guidelines were developed using a participatory approach involving key stakeholders in the health sector. The process was initiated by the Ministry of Health through appointment of a national taskforce comprising state and non-state actors to oversee both technical development and consultative processes.

Three workshops were held to generate the content of the guidelines, including several rounds of consultation with various departments within the Ministry of Health, county health departments, health programs, development partners, and several non-state actors. The first workshop was devoted to the development of a conceptual framework and aimed to generate consensus on the way forward. Following this consensus, MEval-PIMA provided technical assistance to support completion of the next steps, including development of the technical content, and refinement and subsequent validation with development partners, the private sector, and county departments of health. The final guidelines are expected to be launched during the forthcoming Annual Health Congress, later in 2016.

Figure 1. Components of a Well-Functioning M&E System



Source: Adapted from Gorgens M. and Kusek J. Z. (2010). Making Monitoring and Evaluation

Stakeholders involved in the development of these guidelines included the World Health Organization (WHO), the United Nations Population Fund (UNFPA), German International Cooperation (GIZ), the Japan International Cooperation Agency (JICA), and other partners.

These guidelines are based on the 12 components of a functional M&E system. The guidelines provide a uniform approach to be used at the sector level, and detract attention from vertical M&E systems that have developed within the health sector over time.

The guidelines also provide a detailed implementation framework, with roles and responsibilities identified for various offices to ensure the establishment of functional M&E units in health sector organizations. They also ensure that these are cascaded and that staff are oriented at national and county levels on their application to improve evidence-based planning and decision making.

About PIMA

MEASURE Evaluation PIMA works to strengthen health systems and improve the quality and use of data in Kenya for the sustainable delivery of quality services. We support the Government of Kenya's national health strategic plan to build and strengthen M&E systems in key programs within the Ministry of Health, in collaboration with other public and private sector partners and stakeholders. Support in the Development of the guidelines is within the PIMA mandate. Visit <http://www.measureevaluation.org/measure/pima> for more about MEval-PIMA.



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