Integrated Planning Process

Project Design & Proposal Writing Guide

American Red Cross

International Services

*Targeting the vulnerable through
increased access &
equitable service delivery*

International Services: Project Design & Proposal Writing Guide

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Acronyms

AIDS	Acquired Immune Deficiency Syndrome
ARC	American National Red Cross
CAS	Cooperation Assistance Strategy
DIP	Detailed Implementation Plan
EOA	Environmental and Organizational Assessment
ISD	International Services Department
LOP	Life of Program
MCUA	Multiple Criteria Utility Assessment
M&E	Monitoring and Evaluation
NGO	Non-governmental Organization
NHQ	National Headquarters
NIRC	Needs, Interest, Resources, and Capacities
NS	National Society
OD	Organizational Development
ONS	Operating National Society
PDP	Performance Development Plan
PMP	Performance Monitoring Plan
PNS	Participating National Society
PRA	Participatory Rural Assessment
PVO	Private Voluntary Organization
RCRC	Red Cross and Red Crescent Societies
RF	Results Framework
RRA	Rapid Rural Appraisal
SWOT	Strength, Weaknesses, Opportunities, and Threats
TS	Technical Solutions
UNAIDS	United Nations (agency on) AIDS
UNICEF	United Nations International Children's Fund
USAID	United States Agency for International Development
WHO	World Health Organization

INTRODUCTION

Document Purpose:	The project design tool provides industry standard guidance in the development of high impact projects regardless of sector or core competency area. The document provides detailed instruction and tools in producing sound project design and as well as guidance on ways to excel in proposal writing. It also clarifies the logical framework used by ARC and others and compares it to the results framework of USAID.

Author: ARC field personnel, regional program officers and technical staff responsible for project design and proposal writing; where ARC has a presence, field staff will lead the project design and proposal writing process; desk and Technical Solutions staff will assist in this process as requested and as availability permits. Where ARC does not have a presence, regional program officers, supported by Technical Solutions will lead the process.

Benefits: All ARC projects require some level of project design and the majority of these designs are captured within a proposal that will be funded by an external donor. Sound project design allows resources to be used more effectively and efficiently. It draws upon and learns from lessons in the past; and it helps identify root causes of problem and interventions that are necessary and sufficient to contribute to the resolution of the problem.

Output: The precise format of the proposal will depend upon the requirements of the specific donor. The terminology and tools used herein will cover the majority of requirements from ARC International Services' traditional donors. However, for externally-funded projects, proposal writers should always follow the donor's instructions. Internally-funded proposals should follow the template provided by ARC.

Output for externally funded proposal:

See Donor requirements

Output for ARC-funded proposal:

1. Executive Summary
2. Introduction/Country Overview & Assessment Findings
3. Overview of target area
4. Project Goals, Objectives, Interventions and Critical Activities
5. Information on Beneficiary Population
6. Timetable
7. Coordination
8. Training Plan (if applicable)
9. Major Challenges
10. Performance Monitoring Plan
11. Capacity Building
12. Sustainability
13. Project Team & Relevant Experience
14. Budget and Budget Narrative
15. Timetable
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1. Introduction to Project Design & Proposal Writing

Project Design Overview

Project design is the process by which solutions to clearly identified problems are identified and structured in a way that makes them implementable. Comprehensive project design starts with a needs assessment and follows with diagnostics concerning the causes and consequences of the identified problems. These steps lead to the definition and selection of appropriate project interventions. After these steps have been completed, the overall design will be summarized in a design plan (logical framework or logframe) and monitoring and evaluation (M&E) plan or in a results framework with a performance monitoring plan.

> **What is Project Design?**
>
> **Project design is the systematic identification and prioritization of problems, their causes and consequences, and the planning of interventions that will address these issues.**

Structured project design is a comprehensive process that is both artistic and scientific. It requires involvement of stakeholders and consideration of their needs, interests, resources, and capacities. Relevant issues and aspects of the operational environment (the project context) must be reviewed. Project design includes both the initial assessment and additional considerations about implementation, as well as monitoring and evaluation. Logframes and results frameworks are each essential tools for linking design, implementation, and monitoring and evaluation.

Fit within the Integrated Planning Process

All ARC projects should be designed in partnership with the proposed target communities and the ONS, beginning with the assessment phase. Other key stakeholders should also be fully involved as relevant, including other PNSs, donors, and ministries. ARC projects should be consistent with higher level (country, region, ISD) strategic plans and objectives, and be designed to meet the needs, interests, resources, and capacities of ARC/ONS target communities. All projects must include an OD component that is designed to strengthen the local partner's ability to implement the project. This approach acknowledges our commitment to the International Programs strategic pillar of capacity building and if pursued successfully, will augment our value to the ONS and ensure the durability of our interventions. Finally, all new ARC projects should explicitly reflect lessons learned in the same country, region, and sector.

> **Other ARC definitions important for Project Design**
>
> **Project** – A set of activities linked by a common goal/objectives that are sector and geographic specific.
>
> **Program** – The total sum of multiple projects and activities that have an impact on the same sector or geographic area.
>
> **Project Management** - The planning, scheduling, controlling, monitoring, evaluating, and reporting of project activities to meet project objectives.

Linkages to Strategic Planning

The Regional Strategic Plan will identify specific program objectives the delegation is hoping to achieve within the subsequent three-year period. While program strategic objectives prioritize specific geographic and/or beneficiary groups for intervention, this area or group may be too large to intervene with on an individual project basis. Further, depending on

what the project hopes to achieve, a project design may need to address multiple strategies under a regional strategic objective.

Proposal Writing Defined

A project design focuses on the assessment and analysis required to determine the most efficient and effective means to achieve a desired change in a specific target group. However, the designer must be able to communicate that design in a clear, concise manner to managers/donors who need to approve and fund it. Therefore, a proposal must document and summarize the overall project rationale and design. Additional details and tools on project design and proposal writing are included in the "Training Package" of this guide.

Project Design	Proposal Writing
• **Participatory process to identify problems/needs and to strategize solutions** • **Involves a team and includes multiple stakeholders** • **Idea-driven, creative process** • **Language and format determined by design team** • **Detailed Logframe or Results Framework with M&E Plan and workplan** • **Basic schedules and budgets developed** • **One project design can facilitate the development of one or several proposals**	• **Documents the results of a design process** • **Written by a few staff members** • **Emphasizes clear, concise communication** • **Language and format determined by donor** • **Basic Logframe/Results Framework, including M&E plan or PMP** • **Includes workplan** • **Detailed budgets with narratives, other compliance documents**

The Importance of Project Design

Projects that succeed (according to donors, ARC, and community participants) do so because of appropriate interventions that are responsive to the communities' needs and are designed in a systematic, comprehensive manner. Such projects exhibit common features including:

• Accurate identification of the problem and its causes
• Recognition of the communities' real and perceived needs
• Involvement of the communities in the project design and implementation
• Timely monitoring and evaluation to show progress toward objectives and to allow problems to be detected and corrected before they become irreversible.

There are often very real pressures for expediting a project design-approval-implementation cycle. Sometimes the donor's window for submission is very tight or ARC may have begun the process late. However, it is ARC's policy that the complete project design process (i.e. assessment, project design with the ONS and key stakeholders, and complete proposal development and approval processes) must be undertaken for all projects.

If you don't have the time to design the project well,
when will you find the time to re-design it ?
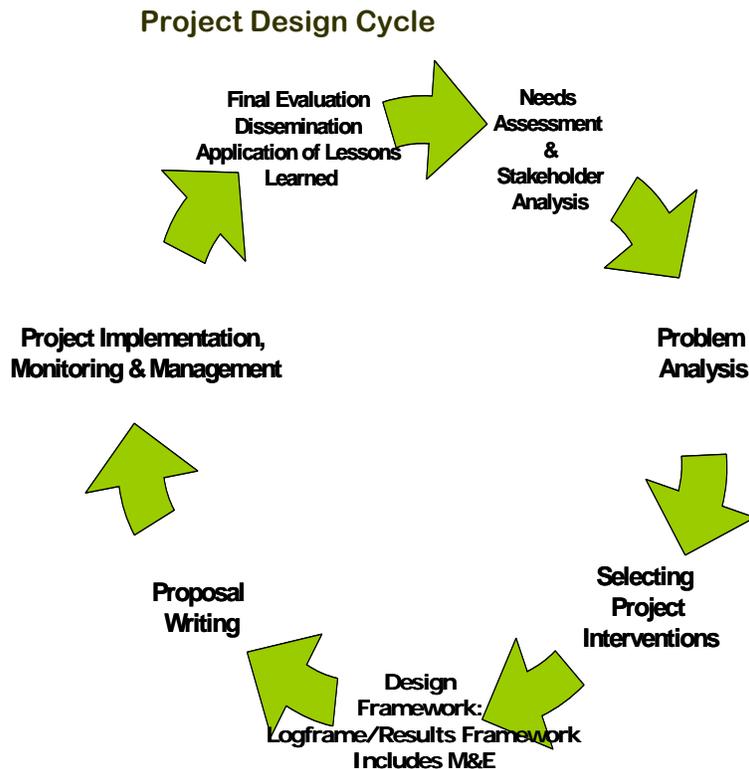
The Project Design Cycle

The design process itself can be broken down into two main components:

1. Understanding the problem(s) and,
2. Designing the solution(s)

Underlying these two components is a cycle that consists of:

- Needs assessment and stakeholder analysis
- Problem analysis
- Project design and planning framework [logframe or results framework]
- Implementation of a baseline to measure key indicators
- Development of a detailed implementation plan
- Project implementation and monitoring
- Follow up measurement of key indicators including a mid-term review of performance or impact (final survey)
- Final evaluation and lessons learned
- Project close-out, renewal, extension or handover to community and ONS
- Development of new projects using lessons learned.

Each phase of this cycle is equally important. The monitoring and evaluation systems should form the basis for the lessons learned. These lessons should then contribute to ongoing adaptation of the current projects, and lead to the assessment and design of subsequent projects. Thus, project design is part of a cycle of activities through which ARC projects can continually improve.

Project Design Cycle

Final Evaluation Dissemination Application of Lessons Learned · Needs Assessment & Stakeholder Analysis · Problem Analysis · Selecting Project Interventions · Design Framework: Logframe/Results Framework Includes M&E · Proposal Writing · Project Implementation, Monitoring & Management

2. Needs Assessment and Stakeholder Analysis

Needs assessments provide insight into communities' real and perceived needs. They also provide insight into the infrastructure and institutions (including the ONS) that may be required to support or participate in some aspects of the project. By obtaining this insight before the project starts, the design can potentially accommodate any imposed constraints or limitations.

This is a process in diagnostics. There are two directions in diagnostics: breadth and depth. Assessment helps to identify the problem, its causes and consequences as it explores the breadth of a problem. In contrast to this, design explores the depth of the causal relationships explaining the problem, to identify a wider set of interventions.

Assessment vs. Design

Assessment: problem, cause, and consequence identification

Assessment work explores the of problems and opportunities and looks for synergistic relationships.

Project design explores the **depth** of causal relationships using identified problems and target groups.

Design: analysis

The combination of these two elements provides a diagnosis describing the operating environment. This refers to the collective set of elements in the proposed project's setting and context that can affect the success of the project. Many of these elements draw from the EOA and should be used as a starting point, provided the information from the EOA is still current.

Components of the project setting include:

- People (demographics): population numbers, ages, gender, density, rural versus urban distribution
- Physical environment: natural environment, agro-ecological zones, climate, natural resources, major crops, livestock, constraints on food production, susceptibility to natural disasters
- Infrastructure: roads, schools, government facilities, health care facilities, schools, community centers, water and sanitation projects that are relevant to potential projects
- Human resources: education level, size/composition of the labor pool
- Beliefs and practices: cultural, religious, social, political
- Economics: wealth, distribution of economic classes, sources of income, employment potential
- Red Cross partners, relationships and levels of interest: with the ONS, the Federation, other PNSs
- External institutions and policies: government, donors, NGOs, PVOs
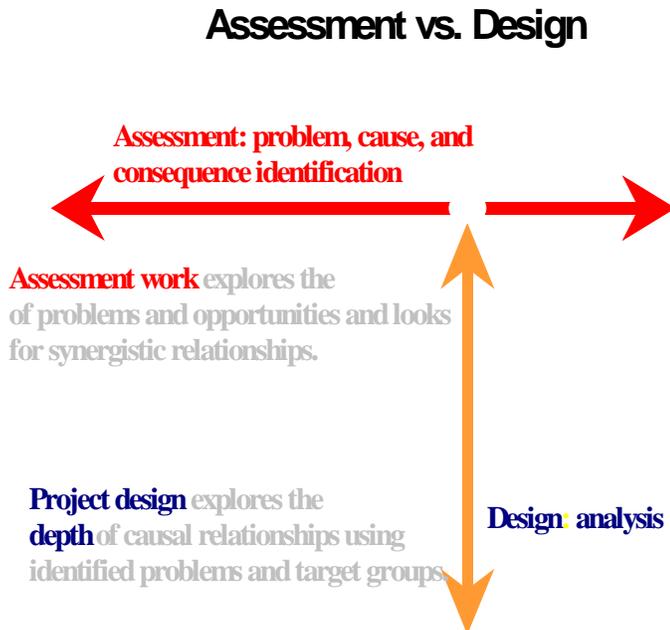
Community Needs Assessment: Understanding the Problem

A needs assessment is carried out to gain an understanding of the real and perceived needs of the proposed project beneficiary communities. Communities themselves may have strong opinions about the principal problems they are facing and their desired interventions, but these perceived needs may not be consistent with needs as determined by more objective standards. Bridging this gap is one of the most challenging aspects of participatory program design.

The needs of communities can be classified in at least three different ways, all important in project design:

- Felt Needs: Perception of needs within a community

- Normative Needs: External and international standards for desirable or acceptable conditions. Needs as determined by experts or professionals or policies defining what conditions are desirable or acceptable

- Relative Needs: The level of need in the proposed project area compared to other communities, for example, as measured against national standards. Typically, relative needs are assessed when a project is being identified at concept stage. By the time you are designing a project, you should have good information on how the target area compares with the rest of the country or region in terms of needs

> **_Example - Child Survival Project_**
>
> **The community may report that what they need is a fully equipped health center with surgical facilities to deal with emergency cases [felt need]. The design team may determine during the needs assessment that there are very few medical emergencies requiring a full health center (relative need). Transport can be organized to take people to the nearest facility. However, infants are dying due to untreated or inappropriately treated cases of diarrhea (normative need). This could be effectively treated at home, if mothers had more knowledge and access to oral rehydration salts.**

Simply by asking the community to state its needs or perceived problems can raise community expectations of a possible solution. If ARC decides in the example above to develop a community health education program, while assisting with very limited upgrading of the existing health facility, the community may feel that ARC has not been responsive to their needs. It is extremely important during the planning process to come to a common understanding of both the fundamental problems to be solved and the best all-around solutions.

The different components of the overall needs assessment require different methods of data collection. For example, felt needs can often be best assessed through Participatory/Rapid Rural Assessment (P/RRA). In contrast to this, normative needs are often determined through the collection of quantitative data and reference to various standards (water quality, infant mortality rates, etc), including those maintained by the government and other agencies. These methods for assessing different types of needs are complementary, and should be used together: neither method of collecting information is sufficient in isolation.

Stakeholder Analysis

Any person, group, or organization that can place a claim on an organization's attention, resources, or outputs is considered a stakeholder. The entire range of stakeholders for any given project can be fairly broad and oftentimes it is difficult to completely identify the group. Stakeholder analysis is often limited to beneficiaries, donors, and partners (such as the ONS), and too often we stop there. Other stakeholders that may also need to be considered include other potential partners: government ministries, community and any other groups and individuals working with the ONS and, sometimes, all the PNSs operating in the country. Stakeholders may also change over the course of implementing the project, but this first stakeholder analysis should be a snapshot of what exists at that time. While the levels of involvement of stakeholders may vary considerably, the failure to anticipate legitimate expectations among some – the Ministry of Health, for example, where a health project is planned – can doom the project to failure. If working in a new environment, be sure to consult with local colleagues, ONS staff, and others to identify the cast of stakeholders.

> **Stakeholder Analysis:**
> *Analyzes the characteristics, roles, and responsibilities of individuals and institutions expected to contribute to or benefit from a project*
>
> ☐ **List different types of stakeholders for a given project**
> ☐ **What do you need to know from them?**
> ☐ **How will you find this out?**

The basic steps in a stakeholder analysis are:

* Identifying stakeholders, their relative importance, and their stake in the ARC project(s)
* Determining each stakeholder's criteria for judging ARC's performance, and the extent to which the relevant ARC project component meets those criteria
* Determining the ways in which the stakeholder can influence and make an impact on the ARC component.

> *Stakeholder Analysis*
> *Analyzes the characteristics, roles, and responsibilities of individuals and institutions expected to contribute to or benefit from a project*
> ☐ **Stakeholder analysis is done throughout the needs assessment**
> ☐ **Stakeholder tools in EOA and Strategic Planning materials may be useful**
> ☐ **Need for triangulation**
> ☐ **In general, identify various stakeholder and determine their impressions of:**
> - **Priority problem(s)**
> - **Potential solutions**
> - **Opinion of ARC and NS in facilitating response**
> - **Ideas on sustainability, partners, what's worked, what has not worked in the past, etc.**

This is the beginning of a negotiation between needs and resources, and this leads to greater precision in refining the project design..

3. Problem Analysis

After a good assessment has been conducted, problem analysis is used to analyze and interpret the information. The better a problem is understood, the better the project can be designed to address it, and the greater the beneficiaries can be assisted.

There are several ways of conducting problem analysis. Before proceeding with the methods of analysis, it is important to define terms precisely as they are used in project design:

What is Problem Analysis?

A systematic process used to determine causes and consequences of a problem and to link them in a cause-effect relationship.

ARC definitions important for Project Design

Problem: **A specific negative situation related to the human condition. NOTE: This is not the absence of a solution. In this context, high mortality is a problem, lack of money for medicine is not.**

Cause: **Underlying factor(s) that exist in the household, community, organization, or otherwise in the external environment that have brought about the problem. Thus drought or inadequate medical service delivery could both be causes of high mortality.**

Consequence: **Social, environmental, political or economic conditions, usually negative, that result from the problem. Thus, drought could be causing high mortality resulting in increased rural to urban migration.**

Identification of the Problem

With a complete needs assessment we often find that the beneficiary community has many problems. Many of the problems are interrelated. (However, it is critical to remember that each problem has its own unique cause and effect paradigm.) The needs assessment shows us the breadth of the situation in a target area, but the problem analysis provides us with a tool to go more deeply into the underlying causes and effects of specific problems.

No organization can do all things for all people at the same time. It is therefore important to prioritize which problem the project will address first. Projects that try to work on a wide range of issues are often ineffective. Resources may be spread too thin and the analysis and problem solving which underlie the project may be superficial and fail to hit root causes. Remember that a good needs assessment can lead to the development of different projects that address a range of problems. Just because a starting point is a first priority does not mean that other problems will not be addressed.   To determine which problem to target, we often triangulate the most frequently cited problems. Consensus on priority problems emerges when stakeholder assessments converge.

NB: Development projects typically address causes of problems, while emergency and relief activities deal with the consequences of problems, such as floods forcing relocation.

There are several steps to undertake within Problem Analysis, including:
1. Writing the Problem Statement
2. Determining Problems, Causes, and Consequences and framing it in a Problem Tree

3. Prioritizing & selecting the causes and consequences to be addressed
4. Using Problem Analysis Tools to identify leverage points (i.e. those areas where you are likely to have the most impact)
5. Identifying the potential interventions and tying everything together into a logic statement, the Project Hypothesis

Problem Statements

Once the problem to address has been selected, it must be framed correctly. A proper problem statement should contain the "Who," "What," and "Where" of the problem. This is important because causes of a problem can vary from one geographic area to another and from one target group to another. Consider the following example:

Poor Problem Statement	*"Some poor people in parts of Slavistan do not have enough money to provide good health care for their children, who suffer from diseases for which there are available immunizations."*

This problem statement does not tell us who is affected or where they are located, and it states the problem as the absence of a solution (lack of money) rather than as the presence of a problem (high disease rates among children). It fails all the criteria that a problem statement should meet (i.e., Who, What, Where).

A better way to phrase it might be:

Better Problem Statement	*"High measles rates are found in children <5 in urban Slavistan"*

Development of Problem Trees

Although the basic concepts of problem analysis are easily understood, there can be different levels and types of causes. These include causes arising from a community's knowledge, attitudes, and beliefs, causes arising from community/individual behavior, and from conditions. The relationships of these causal levels with each other, with the problem, and with the consequences are illustrated in the following figure.

Causes, the problem, and consequences
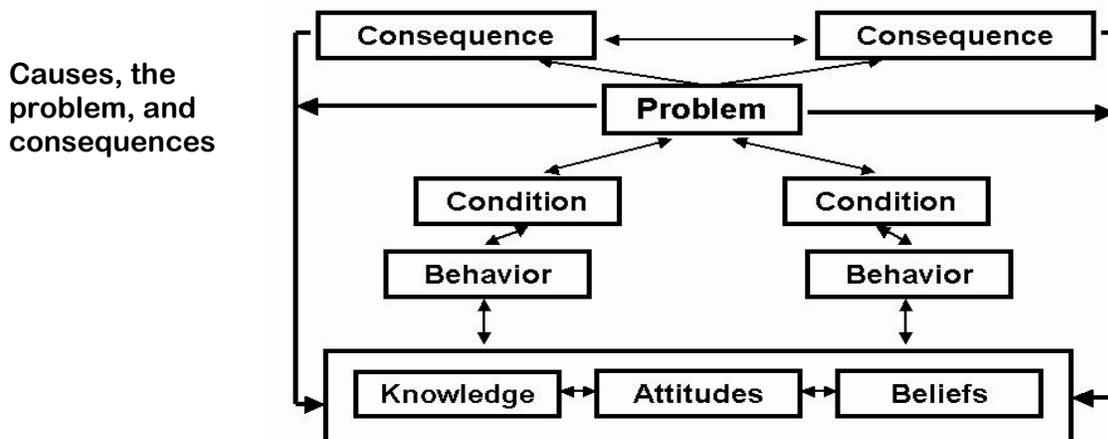
In this figure, in its simplest form, the word **cause** can be substituted for the word **condition.** This diagram illustrates the overall flow from lower level causes up through different causal layers to the problem itself and through to the consequences. Note that this is a feedback system. The consequences can change or reinforce existing knowledge, attitude, and beliefs thereby providing a mechanism either for OR against change. In any given situation some layers of causes may be absent or less significant.
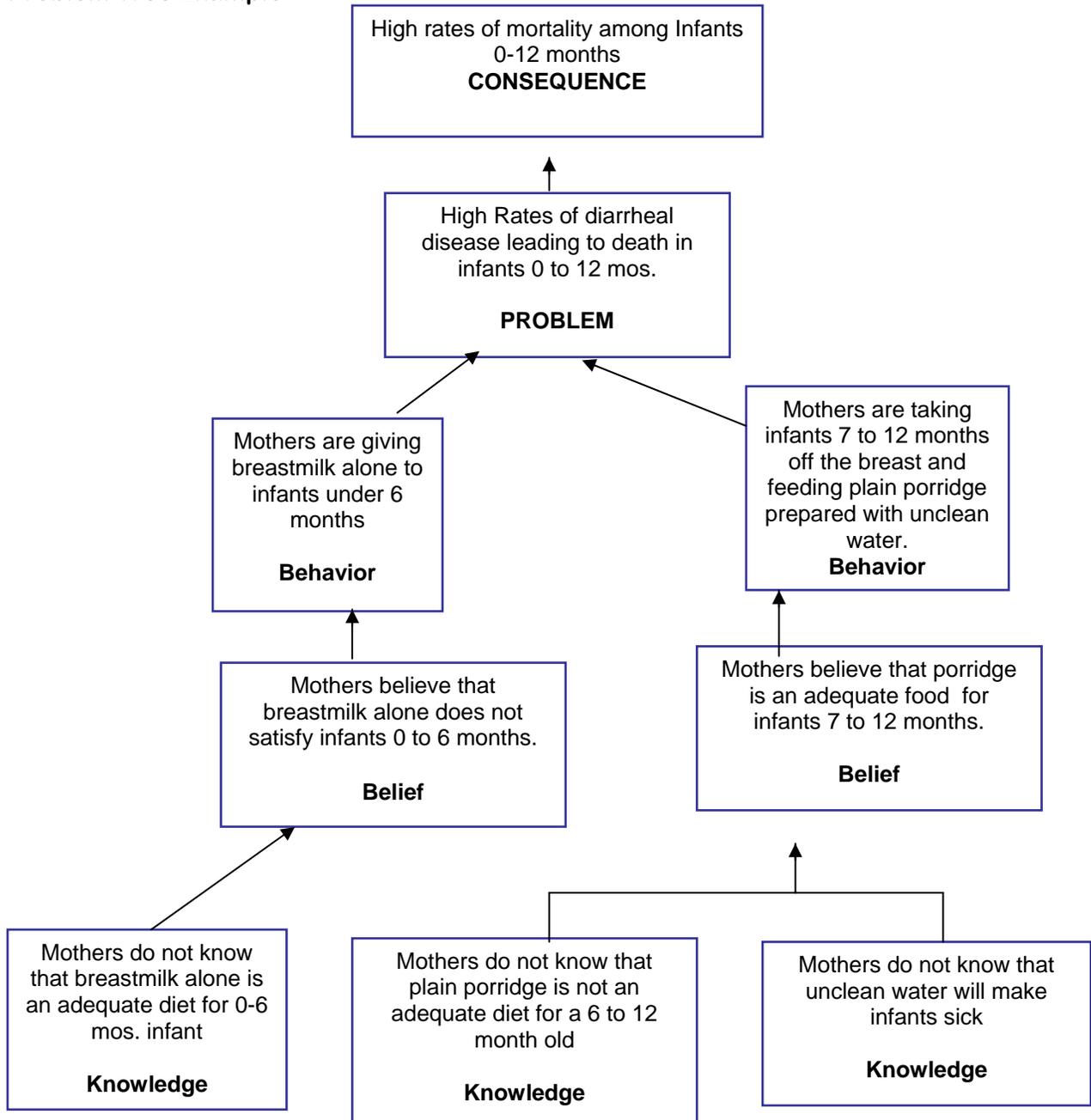
Once the problem is understand in terms of layers, it becomes clearer that certain project interventions can try to break this cycle by addressing the problem through the elimination or reduction of one or more causal streams. The following examples (in table and graphic form) show a set of cause and effect linkages arising out of a problem analysis. In this case, two separate behaviors are contributing to the problem; this means that separate activities and interventions may be needed to deal with the whole problem. This is a common situation. problems rarely have one cause. Choosing where to begin this analysis may be based on available resources, the openness of the community points, and how quickly results are estimated to take.

Cause and Effect Relationships: Infant Mortality

ANALYSIS OF PROBLEM	LEVEL
High rates of mortality among infants 0-12 mos. WHY?	CONSEQUENCE
Diarrheal disease rates are very high among infants 0-12 mos; many die from diarrhea WHY?	PROBLEM
Mothers are giving breastmilk substitutes to infants under 6 months Mothers are taking infants 7 – 12 mos. off the breast and feeding plain porridge prepared with unclean water WHY?	BEHAVIORS
Mothers believe that breastmilk alone does not satisfy infants 0-6 mos. Mothers believe that porridge is an adequate food for infants 7 – 12 mos. Grandmothers insist on following traditional practices WHY?	BELIEFS
Mothers do not know that unclean water will make infants sick Mothers do not know that plain porridge is not an adequate diet Mothers do not know that an infant does not need other foods besides breastmilk up to 6 mos. Mothers do not know that an infant benefits from breastmilk up to two years.	KNOWLEDGE

One way to think about the logical steps in identifying causes of a problem is to ask the question "why?" after each level. In answering that question – and there may be more than one answer – you will be moving down the logical structure toward causes. When arriving the lowest point at which you feel the program can contribute toward reducing or eliminating the cause, you are ready to begin the steps in designing a project. In the example above, you may decide to tackle the issue of breastfeeding and weaning behavior by looking at how you can influence women's beliefs about infant nutrition. The "why?" method works well with community groups because the logic is easy to understand, and it moves everyone toward looking for deeper causes of the problem.

Problem Tree Example

```
                    ┌─────────────────────────────────┐
                    │ High rates of mortality among    │
                    │ Infants 0-12 months              │
                    │ CONSEQUENCE                      │
                    └─────────────────────────────────┘
                                   ▲
                    ┌─────────────────────────────────┐
                    │ High Rates of diarrheal          │
                    │ disease leading to death in      │
                    │ infants 0 to 12 mos.             │
                    │                                  │
                    │ PROBLEM                          │
                    └─────────────────────────────────┘
```

High rates of mortality among Infants 0-12 months
CONSEQUENCE

High Rates of diarrheal disease leading to death in infants 0 to 12 mos.

PROBLEM

Mothers are giving breastmilk alone to infants under 6 months

Behavior

Mothers are taking infants 7 to 12 months off the breast and feeding plain porridge prepared with unclean water.
Behavior

Mothers believe that breastmilk alone does not satisfy infants 0 to 6 months.

Belief

Mothers believe that porridge is an adequate food for infants 7 to 12 months.

Belief

Mothers do not know that breastmilk alone is an adequate diet for 0-6 mos. infant

Knowledge

Mothers do not know that plain porridge is not an adequate diet for a 6 to 12 month old

Knowledge

Mothers do not know that unclean water will make infants sick

Knowledge

The problem tree helps to visualize the problem in an integrated way and helps to define intervention strategies. This type of visual, demonstrating the problem, causes, and consequences, often prompts more questions and discussions about whether or not relevant causes have been identified.

When analyzing a problem tree and attempting to interpret it, there are several questions that the analyst should ask:

- *Is each cause-effect link logical?*

- *Can causes be identified at each level in the problem analysis hierarchy? Ask "why?"*

- *What is the relative contribution of each causal stream to the problem? Can good interventions be identified to target the causes that seem most significant?*

- *Do some factors appear as causes in more than one causal stream? Can we potentially achieve a bigger impact more efficiently by addressing those repetitive causes?*

The way in which the findings of a diagnosis and needs assessment can be more easily organized into a set of cause and effect relationships, especially when these are complex, is by constructing a **problem tree**. The causes of the problem are the roots of the tree, the problem itself is the trunk of the tree, and the consequences of the problem are the branches and leaves of the tree. Some problem trees, expanded to their full array, present a daunting challenge. Concentrating on one or two causal streams and partnering with others to address other causal streams will simplify project design. Ultimately, the selection of interventions will depend not only on the problem tree and its identified causes (needs) but also on ARC's and other stakeholders' interests, capacities, and resources.

A Note on Causes and Consequences in Emergency and Development Projects

Some project designs focus on the causes of a problem, while others target the consequences. In general, emergency relief projects target the consequences of problems such as floods, earthquakes, droughts, and other disasters, by providing immediate assistance with food, shelter, medical needs, or water and sanitation. In contrast to this, development projects in the same areas may look at the same communities and, recognizing their vulnerability to these disasters, try either to improve communities' coping ability and preparedness for the next event or to address the economic or other circumstances that cause communities to live in disaster-prone areas. Other development projects might be directed to other problems by defining and implementing interventions that target their underlying causes; for example health, water and sanitation, agricultural development, or economic development projects.

Selecting Causes of the Problem to Address in Your Project

The basis for defining specific interventions to fix your stated problem is the selection of causes or causal streams from the problem tree. Just as the problems to address had to be prioritized, causes or causal streams must also be prioritized. Each design team should try to establish criteria based on the ARC filters of needs, resources, capacities, and interests. Two of the primary criteria for doing this are:

Which causal streams are more responsible for a larger part of the problem--those whose reduction or elimination will contribute more to reducing the overall problem?

Which causes were explicitly identified in any parts of the needs analysis?
These include issues related to felt, normative, or relative needs. If causes related to felt needs are selected, this will help to increase beneficiary involvement and project buy-in.

Which causes do we have capacities to address?

There is no 100-percent-correct answer for the causes the project should prioritize and address. Rather, what is important is that the different stakeholders reach consensus at each stage of the design process. The rationale for the decisions should be documented and made transparent to subsequent reviewers. Remember during implementation, stakeholders may come and go; the operating situation may change, or stakeholders may change personnel. If the rationale for key decisions have been documented, it will be much easier to maintain consensus.

4. Selecting Project Interventions

The selection of specific interventions is based on the prioritization of causes and the ARC filters of needs, resources, capacities, and interests. Having selected the causes to address in our project, the next step is to brainstorm potential interventions that are likely to address this problem. Sources of the proposed interventions can include:

- Best practices and technical standards (e.g., operations research from other projects)
- Lessons learned from previous projects (ARC's as well as other organization's)
- Inputs from communities and other stakeholders on desired solutions
- Review of external organization experiences
- Technical information based on a wide variety of sources, including published studies

In selecting project interventions, at a minimum, one should always carry out a literature search, network with colleagues and staff in other organizations, talk to national institutions – ministries, universities and research organizations and local NGOs -- in the country where we are working before making decisions. Since problems may be very similar across societies in many of the countries where ARC works, it is safe to assume that solutions to them may have been identified by other organizations. They may also be able to share experiences of both successes and failures, so that ARC can incorporate lessons learned.

In addition to finalizing the problem analysis and defining a candidate list of interventions, the location and population will also be narrowed and selected. It is very important to examine available resources, the size of the problem, the specific groups affected and the trends in the problem early in the design process.

Given limited resources and capacity, interventions must be developed with a clear understanding of resources and constraints. They also must coincide with the interests of the target community. Interventions must be prioritized and numerous community-based methods of prioritizing exist; this could include developing a short list of interventions by giving weights to different factors such as cost, potential for community participation, sustainability, cost effectiveness and ONS capacity. There are many tools to help prioritize, such as MCUA or pairwise ranking.

Tools to assist in prioritizing and selecting interventions

1. The Multiple Criteria Utility Assessment (MCUA)

The Multiple Criteria Utility Assessment (MCUA) is a quantifiable method for selecting "best" intervention(s) from among many different 'candidate' options.

The steps are:

- Generate list of 'candidate interventions' for each cause of the problem listed in the project design
- Create a table for each set of possible interventions. Write the corresponding cause at the top of the table
- Determine and list the criteria against which to evaluate each potential intervention
- Assign a numerical value (weight) to each criterion according to its importance relative to others (1-least important, 5-most important)
- List the alternative interventions
- Score each from 1 – 3 (1=least favorable, 3=most favorable)
- Score x Weight (multiply the score of the criteria by its weight and enter the value)
- Total. Add the values under the S x W column. The greatest values are those strategies which are the 'best' according to MCUA

EXAMPLE: MCUA Analysis of Possible Interventions for a Water Distribution System

Cause: Lack of Availability of Clean Drinking Water

Criteria	Weight	Interventions					
		Individual Household Connection		Yard Connection (3 houses share)		Village Connection (Village Shares)	
		Score	S x W	Score	S x W	Score	S x W
Technical Effectiveness	5	2	10	3	15	1	5
Cost Effectiveness	3	1	3	2	6	3	9
NS Comp. Advantage	4	3	12	2	8	1	4
Community Participation	5	1	5	2	10	3	15
Sustainability	5	1	5	3	15	2	10
TOTAL			35		54		43

Yard = Better Intervention Option

Tools to assist in prioritizing and selecting interventions

2. Pairwise Ranking Matrix

Another tool that is frequently used for participatory prioritization of intervention options is the Pairwise Ranking Matrix. This tool is less precise than the MCUA but is a bit simpler and perhaps more comprehensible to partners new to these methodologies. This tool facilitates the comparison of different interventions.

The steps are:

- Generate list of candidate interventions for each cause of the problem listed in the project design
- Create a matrix as below
- Each option should be written sequentially in both the row and the columns
- Each intervention should then be compared with the others. Through voting, consensus, or other means, the team should decide which intervention is preferable for each pair
- The 'winner' should be noted in the square where the row and column meet for the two items being compared.
- The team should then repeat this process for each unique pair of options

EXAMPLE: Pairwise Ranking Analysis of Possible Interventions for a Water Distribution System

	Household Connection	Yard Connection	Village Connection
Household Connection		Yard	Village
Yard Connection			Yard
Village Connection			

Yard = the better intervention option.

5. Project Hypothesis

The project hypothesis ties together the proposed interventions with the stated problem/causes.   The hypothesis succinctly explains the project's expected results if the cause(s) of the problem are adequately addressed by the proposed interventions.

A project hypothesis is an "if……then" statement postulating that the proposed interventions will produce the intended results. It uses the following format:

IF we do these interventions THEN these causes of the problem will be eliminated or reduced and the problem will thereby be eliminated or reduced.

For example,

IF *mothers are educated on the nutritional value of feeding leafy green vegetables to their children*
   AND *they grow such produce in home gardens*
      AND *they feed these vegetables to their children*
         THEN *children's dietary intake will improve*
            THEREBY *contributing to reductions in childhood malnutrition.*

> *ARC definitions important for Project Design*
>
> **Problem**:   A specific negative situation related to the human condition. **NOTE: This is not the absence of a solution. In this context, high mortality is a problem, lack of money for medicine is not.**
>
> **Cause**:   Underlying factor(s) that exist in the household, community, organization or otherwise in the external environment that have brought about the problem. Thus drought or inadequate medical service delivery could both be causes of high mortality.
>
> **Consequence**: Social, environmental, political or economic conditions, usually negative, that result from the problem. Thus, drought could be causing high mortality resulting in increased rural to urban migration.
>
> **Intervention**:   A discrete package of activities that are designed to directly address a cause (or causes) of an identified problem
>
> **Project Hypothesis**:   A project hypothesis is an "if……then" statement postulating that the proposed interventions will produce the intended results

Hypothesis Validity Testing

Ultimately, the project's final evaluation will determine if the hypothesis is true by determining if project interventions and resulting outputs did indeed produce the intended results (achievement of project objectives). This is why it is absolutely essential to evaluate achievement of the objectives of your project. However, the following questions will help determine the likelihood that the proposed interventions will achieve the expected results. There are some guidelines to consider when the team is developing the project hypothesis.

1. The hypothesis rests on …
   - The validity of the assumptions that the causes of the problem have been correctly identified AND that the interventions have been properly defined to address these causes.
   - The validity of the interventions to actually address problem causes

2. Tests to help determine if hypothesis is likely to be true for your project include:
   - What is the applicable industry standard?

- What is locally recommended by others who may be involved in the geographic and/or sectoral area?
- What is recommended by donors?
- What does the evaluation research indicate?

EXAMPLE: Project Hypothesis

IF: [PROBLEM]
Mothers are educable about proper breastfeeding and appropriate weaning processes, and
They breastfeed exclusively until the infant is six months and
They use appropriate weaning foods through two years of age,

THEN: [SOLUTION]
Infants' and toddlers' vulnerability to diarrhea will decrease THEREBY
Causing a reduction in diarrhea-related mortality.

---

6. Project Design Hierarchy and Planning Frameworks

The project design hierarchy is a logical structure, showing the relationship between resources, activities, and desired results.

If objectives are achieved   -----→ goals can be achieved

If outputs are produced   -----→ objectives can be achieved

If activities take place   -----→ outputs can be produced

If inputs are available   ----→ activities can take place

Each level of this hierarchy is linked to the one below through the question "how?" so that if we state the project's goal, and ask "But how?" the answer to this should reflect the objective(s) of the project.

Hierarchy of a Typical Project

GOAL

OBJECTIVES

OUTPUTS

ACTIVITIES

INPUTS
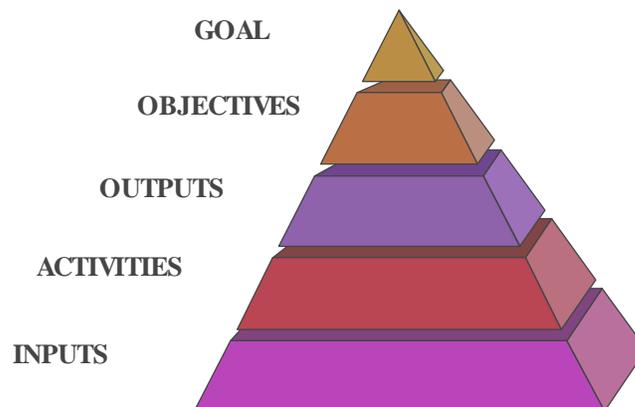
In the example given earlier, the sequence would look like this:

GOAL   Reduced infant mortality rate.

HOW?
OBJECTIVE   Reduce the rate of diarrheal disease (which is a cause of death) among
              infants

              HOW?
OUTPUTS: 1. early introduction of breastmilk substitutes
              2. early weaning with poor weaning diets

              HOW?
ACTIVITIES/INTEVENTIONS

- By teaching mothers about the importance of exclusive breastfeeding through six months,
- By encouraging mothers to establish good breastfeeding patterns at birth,
- By providing rewards (community approval) to mothers whose infants remain free of diarrhea through the first year,
- By teaching mothers about the value of local foods for infants who are being weaned,
- By teaching mothers about the importance of using boiled water to prepare meals for infants.

Five possible interventions have now been identified, all linked to encouraging mothers to practice improved infant nutrition. You may have rejected other interventions, like free distribution of weaning foods or powdered milk or introduction of piped water at the household level.

Inputs are what we, as the American Red Cross, bring to the project. Activities are what we do together with the communities to carry out interventions. Interventions achieve certain results or outputs. Together, these outputs lead to objectives being achieved (outcomes) that represent both household changes (objectives) and those that are 'larger than community social changes (goals).

PROJECT PLANNING FRAMEWORKS: The Logframe and the Results Framework

ARC supports two widely used project planning frameworks: the Logframe and the Results Framework. Currently, the Federation uses logframe planning while USAID has adopted the Results Framework. (There are many other models used.) Both of these use the same logic; the donor you are targeting may require either. One framework can easily be translated into the other. Both models are discussed herein so that project design teams can learn to use both. However, throughout the project design tool, logframe terminology will be used for clarity and consistency. The USAID Evaluation Publication, TIPS series (specifically Building a Results Framework Tips No. 13), is a good source of more information about results frameworks.

Comparison of Logframe and Results Framework

Logframe	Results Framework
Simple and direct	Shows project hierarchy visually
Widely used and familiar (30 years)	Less familiar but standard for key donor [USAID]
Includes indicators and project elements in the same table	Requires a separate Performance Monitoring (M&E) plan to show indicators
Shows only your project and your results	Can show results to be achieved by other actors in the same environment [shaded boxes]
Links to higher level or broader objectives are indirect	Links with higher level objectives—of donors, government, etc.-- are direct.

Options for ARC Project Design

To meet American Red Cross project planning requirements and donor requirements, you will be able to choose one of three options:

1. Logframe that describes all levels of the project, including activities and inputs, with indicators, targets, and assumptions; together with an M&E plan;
2. Logframe that includes goal, objective, and output-level statements with indicators and targets plus separate workplan or Gantt chart with activities described; again, together with an M&E plan;
3. Results Framework [no indicators/ targets] plus Performance Monitoring Plan with and M&E data collection plan + brief workplan with activities;

Note that each of these options includes the key elements in a good project design:
> **The project logic**: goal, objectives, outputs
> **The indicators, targets, and methods of measurement** to determine whether the logic is effective
> The **workplan** with activities and inputs
> The **critical assumptions** behind the project design.

A project that is fully designed includes a detailed budget, based on the activities and inputs, as described in the workplan. There is no shortcut that allows a project to be designed without serious thought to activities, inputs, and resource levels. When you are uncertain about the scale of activities, make estimates, providing ARC and the donor with the rationale behind them. This will make it possible for you to adjust the scale of required activities and resources in line with what is available and possible. It is preferable to make educated guesses rather than to fail to address key issues such as the size of the target population, the number of staff (volunteer and paid) the project will need, or the scope of activities. The finance associate or delegate should be part of the team assisting in the project design and should be able to provide assistance in budget development.

If a Results Framework is used for project planning, you will need to prepare a separate comprehensive monitoring and evaluation plan, or Performance Monitoring Plan (PMP). A logframe also requires monitoring and evaluation information, but much of this will be included in the logframe itself (it will be operationalized or defined in the M&E plan). For each goal and objective identified by the project in the Results Framework PMP, the performance indicators are described in detail and data acquisition is explained. See the Appendix for a full PMP sample.

Fields to be addressed in a Results Framework Performance Monitoring Plan

Performance Indicator			Data Acquisition				
Performance Indicator	Indicator Definition and Unit of Measurement	Sub-Indicators (data elements)	Data Source	Method of Data Collection or Calculation	Schedule/ Frequency	Responsible Person/ Organization	Analysis, Use, and Reporting

Definitions of a Logframe

A logframe is one tool for organizing and summarizing project information. Logframes have now been in use for more than 30 years, and their overall structure has changed very little since they were first developed. When USAID first began to use logframes, they served mainly as guides to project design and to make evaluation possible, by clearly identifying objectives and indicators.   Now they serve as a guide to the logical project structure and the expected impacts and results--and they are useful project management tools, as well as still making evaluation possible.

> **A logframe:**
> 1. **Contains a summary of the project design and its indicators**
> 2. **Provides a formal structure for defining project components and their relationships for project management and M&E purposes**
> 3. **Provides the basis for defining the measurement of project implementation**

When developing a project logframe, a quick rule of thumb is to look at the length. If the logframe is too long, the project is not focused. It may involve too many activities in too many sectors (trying to do everything for everybody all at the same time) or unnecessary details on activities which belong in a workplan or a detailed implementation plan. If the logframe is too short, the project may not be well thought out. It may be missing part of the analysis, skipping levels that are needed to understand the causes and solutions to the problem(s) presented. If you can still ask 'how?' questions when a logframe has been drafted (with the accompanying draft workplan showing activities), then it is not complete.

Project Hierarchy or Logframe Definitions

Goal:	*Main overall objective that project will achieve usually framed as a sustainable improvement in human conditions or well being. May go beyond what this individual program can achieve, reflecting a larger or longer term aim.*
Objective:	*Major changes or results that need to be achieved to make an impact on the problem. These are often changes in conditions/utilization/behavior/practices or household resources.*
Output:	*Needed in order to achieve objectives. These are often defined as results of project interventions or sets of activities.*
	Activities and inputs usually will be included in a workplan rather than in the planning framework (logframe or results framework).
Activity:	*Actions carried out as part of an intervention.*
Input:	*Resources used to carry out an activity or series of activities.*

The following diagram shows the elements of the logframe currently in use in the American Red Cross. The definitions of the different elements of the logframe will be given in subsequent sections.

LogFrame Format

Column 1 **Project Hierarchy Narrative**	Column 2 **Indicators and Targets**	Column 3 **Verification: Measurement method, data source, and frequency of data collection**	Column 4 **Assumptions**
Goal:			
Objectives:			
Outputs:			
Activities:			
Inputs:			

The Results Framework

The Results Framework (RF) is a planning framework that USAID developed in 1994 to diagram the process of long-term strategic country and agency level planning. It is both a management and a planning tool, and can be used at the country, program, or project level. The need for flexibility in a Results Framework so that it can be used at many levels means that objectives and results can be broad if it is not carefully done. They require further definition through the identification of good indicators and carefully estimated performance targets.

Some RF characteristics are:

- Results are expressed in terms of a desired future condition, often ending or beginning with the words 'increased' or 'decreased'. They do not normally include indicators (although they may); therefore indicators must be elaborated in a performance monitoring plan
- They usually show a direction for change, but do not tell how quickly a change will be enacted or exactly where the end point (target) will be
- Objectives and outputs can be outlined on a single page, so that the hierarchy of relationships is easy to see
- These interactions among the hierarchy can also be drawn (lines or dotted lines), so the ways each objective affect another are also easy to see.

Logframe Terminology: The Federation and ARC

The Federation uses a slightly different set of terms from ARC. Because ARC terminology differs from Federation, this guidance emphasizes ARC terms. When talking with USAID or the Federation staff, you may want to reference the following table to make sure you communicate successfully.

Different uses of terms

USAID	ARC	Federation
Goal		
Strategic Objective	Goal	Project Goal
Intermediate Result	Objective	Project Objective
Sub intermediate result	Output	Expected results
	Activities	Activities

These definitions may not match up with other organization's definitions of project hierarchy. The important thing is to understand how they are used within ARC and then to apply the definitions consistently.

7. Project Goals, Objectives, Outputs and Activities

A. Establishing the Goal of the Project

The first step in designing a project is to formally recognize and then state what the overall purpose of the project is; this is the goal. It is intended to address what has been identified as the problem. Since we work through our ONS partners, within ARC it is desirable to achieve this through sustained service delivery of the ONS.

A Goal represents:
- The ultimate aim or purpose of the project. This is written to reflect a sustainable improvement in human conditions in a target group through quality service delivery by the ONS.
- The anticipated improvements in some aspect of the lives of the target population. It describes expected changes after ARC interventions have been completed.

The goal may not be immediately attainable. Some goals are only reached well after the end of the project.

Example of a Project Goal

Decrease the mortality rate among infants 0 to 12 months of age in the target population.

Note: This is a long-term goal that probably cannot be achieved during the life of this project.

B. Establishing Objectives for the Project

Objectives represent the stepping stones to achieving the project goal. They reflect changes in the human condition, in behavior or practices that lead to achieving the goal. Unlike the project goal, objectives must be achieved and measured by the end of the project, and should also continue afterwards without additional external resources. This is what is meant by sustainability.

For example, changes in behavior, (adopting better breastfeeding practices) should continue indefinitely after a health education project has ended. For this reason, objectives are set in alignment with the direct causes of the problem we are trying to address through our interventions. Objectives represent an elimination or reduction in the factors that have been identified in the problem analysis as the key underlying causes of the problem.

Objectives:
- Reflect the intended changes in systemic conditions or behaviors that must be achieved to accomplish the goal/strategic objective
- Should have measurable indicators which show what, when, and how conditions, behaviors, and practices will change
- Must be verifiable at some point during the execution of the project
- Should continue to be met even after the project's end

Example of a Project Objective

> *Reduced rates of diarrheal disease among infants 0-12 months*
> **(This is a change in the human condition: fewer babies getting sick).**

> Note: The project could have another objective/ intermediate result, for example, reductions in the rates of acute respiratory infections (also known to be fatal to infants). For purposes of illustration, only diarrheal disease will be included here.

C. Establishing Outputs

Outputs are the direct results of the project interventions (i.e., sets of activities). When determining outputs, think back to the hypothesis and proposed interventions; consider: 'What are the key results from the proposed interventions that will be both necessary and sufficient to achieve the stated objectives results?' The question " how?" is helpful in defining the outputs that will contribute toward the achievement of your objectives. The logframe generally summarizes a cluster of two to three outputs that together are both necessary and sufficient to achieve EACH of the proposed objectives.

Example of a Project Output

Increased percentage of mothers who, exclusively breastfeed infants.

D. Establishing Activities

Activities should be outlined in the logframe or described in a workplan or Gantt chart, but must still be carefully thought out and planned during the project design process.

Activities are specific actions carried out to achieve outputs such as hiring field staff, designing and carrying out training sessions, making home visits, etc.

As a general guideline, the project design should summarize several related activities that are both necessary and sufficient to achieve each of the intended outputs or results. You will see that the inclusion of activities in the logframe extends its length as a project with, for example, two objectives and two outputs for each objective may have as many as 20 to 28 separate activities. This is why it is recommended hat activities be outlined on a Gantt chart or workplan. This will also enable you to decide their timing, to avoid conflicts or overloads, and to ensure that they are in accord with seasonal and other constraints on implementation. For example, in agricultural support programs, farmers must be provided with seeds, training, or other inputs before the planting season. They should be interviewed about yields, marketing and other factors relating to production during or shortly after the harvest. In a health program, the onset of the rainy season may affect disease incidence. All these will affect your implementation. If you are intending to use program volunteers or staff to collect data, your recruitment and training must precede the implementation of the baseline survey.

For example, if training is the intervention, the activities may comprise 1) development of a training curriculum, 2) field testing message and training materials, 3) training of trainers, 4) identifying training participants, 5) implementation and completion of the actual trainings, 6) monitoring quality of training, etc.

Example of a Project Activity

> *Health volunteers will visit mothers in target area at least four times during the first six months after the infant's birth to provide information about good breastfeeding and weaning practices.*

E. Establishing Inputs

Inputs are resources used to implement activities. These include field staff, facilities, equipment, or money. If training is the intervention, for each activity you should think of the critical inputs that will be needed. These can include the materials, trainers, venue, and logistical support. In the case shown below, the trained health workers are a project input, produced through the use of prior inputs needed to carry out the training program. This double layer of inputs is common in projects with a big training component.

As with the activities, inputs should not be in the logframe. Where a detailed work plan or Gantt chart has been prepared, activities and inputs will be shown. They MUST be reflected in the annotated budget required for any full project design.

Example of a Project Input

> *Twenty-five trained health workers with breastfeeding counseling skills and the means to make home visits (transport, educational materials, etc.).*

8. Indicators and Targets

Indicators and Targets at Different Levels of the Project Hierarchy

Both the Logframe and the Results Framework call for the definition of indicators and targets as part of project planning. The indicators, targets, and methods of verification are shown in the second and third columns of the logframe. When using a results framework for project planning, indicators, targets, and methods of measurement will be described in a performance monitoring plan. Processes for identifying good indicators and estimating targets are the same regardless of the planning framework used.

A Note on Target Populations

Targeted indicators, discussed below, specify not only the degree of change expected, but also the target group or groups among whom change is expected. Both the detailed workplan and budget require this information. In Red Cross projects, which frequently depend on a combination of volunteer activity facilitated by the ONS and paid staff, it is particularly important to review these factors and make calculations with care. If the objective is based on changes that will result from the provision of services to 5000 households, you will need to know how many staff members are needed to reach these households and what resources are required to mobilize those staff. You will need to know which 5000 households are the focus of the project. Without this information you cannot collect data on indicators at baseline, nor monitor or evaluate the project.

Indicators

Up to now, we have developed a needs-based design for our emerging project. Interventions have been identified, and the inputs and resources needed to carry out those activities have been scoped out. We should have a sound hypothesis, based on close consultation with community members and a thorough knowledge of past program experiences and the technical literature in the field. It will be essential to try to measure our progress through the use of the right number of carefully selected indicators. (Think about necessary and sufficient as the key conditions to demonstrate results, rather than every piece of data being equally useful.)

> **What is an Indicator?**
>
> **Indicators are the measurements that show how and by how much a project is achieving its intended results.**

Indicators apply at different levels of the project hierarchy. Good ones are clear, direct, and can be unambiguously calculated. Indicators are often used to measure change over time, and the objective or results statement will show the direction of change desired (increase or decrease). Indicators provide a definition of the variable to be measured without specifying the amount of change that is to be expected. For example, body temperature is an indicator that may show that illness is present. In order to use this indicator to diagnose illness, it is necessary to know, at a minimum, how far above the normal level the temperature is. Since most of Red Cross work is with groups of people in communities, many of the indicators used measure the percentage or proportion of people (children and/or adults) who have achieved some desired condition.

Example of an Indicator

> *Percentage of children age 12 to 23 months who are fully vaccinated (against the five vaccine-preventable diseases) before their second birthday in the target area by the end of 2005.*

This indicator tells us whom, what, where, and by when. The direction will have been stated in the objective, for example, "To increase the percentage of children 12 to 23 months old who are fully vaccinated.... from XX to XX" by the end of 2005.

Identifying good indicators

This is a question raised in every project design exercise. It is important to all agencies and donors who want to demonstrate solid results or good performance to their stakeholders. It is equally important to demonstrate these findings to all other stakeholders, especially partner organizations and the beneficiary populations.

Most beginner-level project design and M&E trainings refer to indicators as needing to be SMART, SMAART, or SMARRT. These generally are defined as:

S	Specific		
M	Measurable		
A	Appropriate	Area-Specific	Acceptable
R	Reasonable	Rational	Realistic
T	Time-bound		

Technical Characteristics of Targeted Indicators (SMART)

Specific	Is it clear in terms of what, how, when, where and who the situation will be changed?
Measurable	Are the targets measurable (for example, how much of an increase for how many people, over what length of time)?
Area-Specific	Does the statement delineate an area (village, province, agricultural zone) and/or a population group (sex, age, occupational group)?
Realistic	Is the project able to obtain the level of involvement and change reflected in the statement?
Time-bound	Does the statement reflect a time period in which it can reasonably be accomplished?

Indicators should be SMART. While people can generally remember, for the most part, what SMART stands for, they may not fully appreciate the rationale or the full implications of each descriptor. The following table gives the characteristics of good indicators along with an explanation for each using slightly different terms from those found in SMART.

Characteristics of Good Indicators

Indicator Characteristic	Indicator	Improved Version of Indicator	Explanation
Direct	Percent of farmers in target population who	Percent of farmers in target population who are planting	The improved indicator measures practice, rather than

	can name two methods of increasing yields	in rows	knowledge; practice is more directly linked to changes in yields. The knowledge indicator would come at a lower level (output , for example, depending on the duration of the project.)
Objective/ Precise	Percentage of mothers reporting using correct protective measures against malaria	Percentage of mothers who report that their children under 5 sleep under treated bednets	The improved indicator is very specific, relating to a practice which reduces malaria; the first is too general to measure protection data.
Adequate	Improved infant feeding practices	Exclusive breastfeeding until 6 months Introduction of appropriate weaning foods after 6 months	The improved indicators, while more, cover the two key aspects of breastfeeding and are, therefore adequate to measure improvements in this practice
Practical/ cost effective	All foods given to children 12 to 23 months old during the previous week	Number of times in past week the child ate green leafy vegetables	While the first indicator is more 'scientific' it is time consuming to collect this information and there is a risk of poor accuracy. The improved indicator is simpler and a proxy; these is still a risk of poor accuracy, but it is lower than asking for complete recall.
Standardized	Average age at which young women 15-24 report having had first sexual experience	Age by which one half of young women 15-24 have had sex.	The improved indicator closely resembles the first indicator. However, it is a standard indicator now used by UNAIDS to measure initiation of sexual activity among young people. This will enable you to compare your data with other settings.
Quantitative	Percentage of communities which have high capacity in disaster response	Percentage of communities which have developed disaster response plans and have held at least two community drills	The improved indicator emphasizes the community actions and does not require the additional definition that 'high capacity' requires.

Good indicators have six main certain characteristics:

1. Direct: They are closely related to the result they are intended to measure and they are precise. Start by identifying the level of analysis by asking yourself, "Where does the change take place?" Determine if it is among (from lower to higher levels) individuals, groups, institutions, or the state. Try not to use indicators that measure the result at a higher or lower level than the event you want measured, or can be interpreted in a variety of ways.

> *For example: Percent of farmers in target population who can name two methods of increasing yields measures knowledge, but not practice. If your objective relates to improved practice, you will need an indicator such as, Percent of farmers in target population who have been observed to plant in rows, which is a direct measure of practice.*

Proxy Indicators: If direct indicators are not feasible, use credible proxy, or indirect, measures. Only use indirect measures when data for direct indicators are not available or feasible to collect at regular intervals.

> *For example: For an objective of improved solid waste collection services, a good proxy measure would be percentage of municipal residents who rate municipal solid waste collection as good or better on an annual survey.*

2. **Objective**: Indicators are precise, unambiguous and unidimensional as well as consistent over time.

> *For example: Percentage of mothers reporting correct protective measures against malaria for themselves and their children at home is less precise than Percentage of mothers who report that they and their children under age 5 sleep under an insecticide treated bednet.*

The percentage of mothers in target population who practice exclusive breastfeeding for six months and introduce appropriate weaning foods at six months is not unidimensional - it measures two things: exclusive breastfeeding practices and use of weaning foods. A better indicator would be percentage of mothers in target population who practice exclusive breastfeeding for six months. If use of weaning foods is also an objective, then you would use a second, separate indicator such as, percentage of mothers of children 6 to 12 months old who reported giving two high calorie foods to them during the previous day.

Child immunization rates is not a good indicator, as it can be interpreted in many ways (it is ambiguous), while immunization rates for measles in children 12 to 23 months old is unambiguous. You could make the first one less ambiguous as well: % children fully immunized by age two.

3. **Adequate**: Indicators should be sufficient to reflect or measure progress toward the objective.

> *For example: In the infant feeding example above, if your objective relates to improved infant feeding practices, you will need two indicators, one measuring exclusive breastfeeding and the other measuring appropriate weaning practices. You will not need extra indicators, once you have defined the ones which are necessary and sufficient to measure your goal/strategic objective, objective or output. Additional indicators will raise the cost of collecting data and make the process more complex.*

4. **Practical or cost effective**: The costs and benefits of measuring a specific indicator should always be weighed. The data needed to measure an indicator should not be too expensive or too difficult to collect, unless there is no other way to collect the information

and it is deemed critical. The expense and difficulty measuring and indicator should be weighed against the benefits of having the information.

> *For example: Some proposals have included measures of seroprevalence rates for HIV (percentage of women 15 to 24 years old who are HIV positive in a target population, for example.) In addition, there may be issues of confidentiality, technical competence and Ministry of Health regulations. In this case, a less direct indicator, probably at objective rather than goal level, will be better, such as % women 15 to 24 years old referred to VCT.*

Or we might want to know exactly what foods a sample of project mothers give to their children 12 to 23 months old. We know, however, that the best way of measuring this is to ask for a full recall of all foods given over 24 hours. This is difficult and expensive (because it takes a lot of time), and is also subject to bias and error (because it is often difficult to remember what foods have been consumed). In this case we would probably look for another less precise indicator to measure quality of diet instead, such as the range of foods reported in the last week.

So, instead of measuring caloric and nutritional value of dietary intake of 12 to 24 month olds, we would measure "Reported frequency of consumption of iron-rich foods by children 12 to 24 months old." The second measure is less scientific and less precise, but it may be more cost effective for an NGO project.

5. **Standardized**: Indicators should, when possible, be similar to those widely used in the sectors where project results are being measured. Selected indicators should match generic or national indicators for similar projects, where appropriate. This will make it easier to compare results.

> *For example: Indicators used in the demographic and health surveys or by the World Bank at national level can, in some cases, be collected within a project. This will enable you to compare the situation in your project area with the national level. Examples would include the ratio of male to female enrollment in primary schools or the percentage of women who give birth with a skilled and medically qualified birth attendant.*

Although we want to be able to make these comparisons, we should always be careful to collect our own project-specific data; many good regional or national level statistics cannot be disaggregated to give us information on our project area.

6. **Quantitative**: Where possible and appropriate, we should try to identify quantitative indicators. This will make it easier to compare changes over time, to determine how reliable the measurements are and to strengthen objectivity. Having said that, we need to be careful not to give too much weight to quantitative measurements alone. Behavioral changes and changes in family condition, assets, quality of life are complex and may not be easily captured by quantitative indicators. We should also recognize that it is easy to give too much weight to a quantitative indicator. Where qualitative indicators are used, they should be framed in such a way that

> ***Quantitative:*** *Number, amount, ratio, percentage, proportion, average scores, rating, weighted or non-weighted index, etc.*
>
> ***Qualitative:*** *Description of the status of an intended achievement, documented observations, representative case descriptions, perceptions, opinions of value, etc.*

results can be compared before and after a project. Many qualitative measurements can be quantified if collected appropriately, so do not be too quick to rule out qualitative indicators as somehow less scientific or less valuable.

However, in addition to technical characteristics there are also management characteristics to consider when selecting indicators and targets. For example, in an HIV/AIDS project some indicators about disease detection might require extensive blood sampling and testing, which would be too expensive and intrusive to be feasible, so less objective indicators might be used

This is why it is critical to determine the means of verification for your proposed indicators at the same time as you determine the actual indicator. This will allow you to choose the most appropriate indicator of your project's needs, interest, resources, and capacities.

Many programs and organizations are now developing lists of state-of-the-art indicators-- these can be used in ARC projects. Most of these are available either on the Internet or on CD-ROMs. Make sure you ask the technical advisory people both in the field and in the Technical Solutions Unit about best practices, as new information is generated all the time.

Indicator Sources

Health: Demographic and Health Surveys. These measure maternal and child health: Child Survival Surveys: Measure child health and nutrition.
http://www.measuredhs.com/Child Health survey technical materials, including the new KPC 2000+ questionnaire, can be found at http://www.childsurvival.com/. UNAIDS/ Measure: National AIDS programs: A Guide to Monitoring and Evaluation – available on CD-ROM and on the Internet at http://www.measureprogram.org/
USAID Health and Family Planning Indicators: A Tool for Results Framework, July 1999. Volumes 1 and II.

Nutrition: Food and Nutrition Technical Assistance (FANTA) Project: has produced manuals that include both indicators for nutritional assessment and information on measurement. These are available on the Internet. http://www.fantaproject.org/
The United Nations: Administrative Committee on Coordination, Sub Committee on Nutrition (ACC/SCN) has produced materials on nutrition on the Internet at http://acc.unsystem.org/scn/

Agriculture: Food Aid Management (FAM), while it was still operational, maintained a website with many excellent materials developed for and with NGOs working on food security issues; the website is now at: http://www.foodaidmanagement.org/

Water and Sanitation: FANTA has produced a manual on measuring the impact of water and sanitation programs, available at their website http://www.fantaproject.org/; WHO has various resources posted at their website:
http://www.who.int/water_sanitation_health/wss/O_M/ToolsAssess.pdf

General Indicators :

- The World Bank posts all the World Development Report indicators at their website: http://www.worldbank.org/
- USAID posts all of the indicators used in the annual country reports filed by USAID missions at: http://www.dec.org/partners/pmdb/r42002_list.cfm
- UNICEF's website has both technical manuals and information about monitoring and evaluation at http://www. UNICEF.org.

Be sure to review the websites that are listed in the sectoral checklists provided with the guidelines for preparation of the EOA.

Target Setting for Indicators

The rate or amount of change expected in the indicator is represented in the value that is set for the indicator. Targets provide specific values (desired levels or benchmarks) for the variables to be measured. An indicator with a target will tell you whom, by how much, where, and when the change is expected.

Sample Targets for Full Immunization Coverage

Targets for % Immunization Coverage for children under 2 years

Year	% Children <2
Baseline*	50
Midterm	65
Final	85

* Measured (actual)

Example Indicator with Target

At least 85 percent of children aged 12 to 23 months are fully vaccinated (against the five vaccine-preventable diseases) before their second birthday in Boroboro by 2005.

How are Targets set?
Targets will always reflect the condition that is expected at the end of the project or the end of a particular measurement period. You could have annual targets, for example, that add up to a cumulative target over the life of a project. As in the identification of good indicators, the estimation of targets is based on a number of factors. Ultimately it is an educated guess in the field of development. Since results are affected by a wide range of variables, and some of these are beyond our control, we will need to review and revise targets as needed, usually an annual basis. Some interventions have general guidance about the relative levels of targets they want each project funded to achieve, and these will be included in requests for proposals or via technical websites affiliated with different donors.

Some factors which should be considered in setting targets:

1.**The baseline value of the indicator**: The baseline is the starting point and it is important to have this information. If you have not yet carried out a baseline survey to measure key indicators – and normally you do this after the project has been designed – you may want to use national-level data or data from similar projects to estimate the baseline. The good news is you can and should adjust your targets if you find they are too high or too low.

With some indicators, a low baseline value will give you room to grow, so that you may project targets that are much higher than your baseline. However, some results are very hard to achieve when the starting point is very low, so you need to consider other factors. With high baseline values, the scope for change is less, but change may be very hard to achieve because you need to reach vulnerable or hard-to-reach groups.

2. Trends before the program started: It is important to know what the rate of change has been in the same area before your program started. Where, for example, agricultural production has consistently been low in an area you may not want to project a major change during the life of your program. One guideline is to take the existing trend and add on the increase you expect your project to produce.

3. Level of resources in the program: The level of change you can expect will relate both to the implementation strategy and the level of resources you are able to put into the program to tackle that particular objective.

4. What experts predict/ what research tells us/ what others have done elsewhere in similar programs: It is essential to try to find out what research and past experience tell us about the achievable levels of change. For child survival programs, a meta-analysis that looked at the changes shown across a large number of programs on some key indicators such as immunization coverage and management of diarrhea by mothers has shown expected levels of change (and the confidence interval).

5. Stakeholder expectations: You may need to take account of the expectations of your key stakeholders, not to make unrealistic estimations of targets, but to ensure that other factors are in line to meet these, and that you can explain the reasons for your choices.

You may want to select an end-of-project-target and then work back from that to estimate what can be achieved during each year of the project. You may also want to look at the achievements of an agency or organization having a reputation for high performance, and see whether you can come close.

One note of caution: If you are working in a new geographical area, with a new implementation strategy or in a new sector, or in a situation with many risks, you may want to be conservative in your targets.

Example: In a recent ARC proposal for services to people living with HIV and AIDS, the determination of targets included the following steps:

Collection of data on estimated numbers of persons with HIV infection and AIDS, including estimates of the number of persons with HIV who might be expected to develop AIDS during the life of the project (BASELINE VALUE / TRENDS / EXPERT PREDICTIONS)

Consideration of implementation model, including the capacities, resources, and staff (paid and volunteer) (RESOURCES)

Review of policies of the Ministry of Health and the local bodies dealing with HIV and AIDS. (STAKEHOLDER EXPECTATIONS)

How are targets expressed?

Targets usually take one of four forms:

1.   A number which represents an absolute level of achievement, service delivery, etc. This is generally only appropriate for inputs and activities. For example:

   - *1500 women will have been trained in the importance of giving children 0-59 months supplementary Vitamin A by 2004*
   - *2000 hectares of land will have been put under cultivation by the end of the project*

2.   A percentage change in the indicator (over the baseline level). For example:

   - *Primary school completion rates among girls will have increased by 25 percent during the life of the project*
   - *Volunteer retention will have improved by 50 percent during the life of the project*

The target should be defined (numerator and denominator) so the relative magnitude of that change can be easily understood. (In these cases, if your baseline is very low, your final percentage will still be low, even when an improvement has been shown. So if only 10 percent of the girls who enroll in primary school graduate, an increase up to 12.5 percent would be a 25 percent increase. You usually still set targets even if the overall percentage increase is low, such as in this example.)

3.   A percentage change in relation to the overall eligible population. For example:

   - *80 percent of girls in the target area who are school aged will be enrolled and attending primary school*
   - *75 percent of the volunteers who join the program when it starts will be participating at the end of year*

In these cases, you are predicting an impact on a target population including all the eligible individuals, for example, "girls who are school aged" or "volunteers who join the program."

4.   Creation of something new. In some OD projects, you are trying to facilitate the creation of new institutions, so your indicator might be the impact of a policy change or a new piece of legislation. Here the quantity of change is low and difficult to achieve.

Project timeframe and expected rates of change.

There are three basic types of rates of change that indicators may have. These are:

- Rapid, fast change with a tapering off over time. One example would be a supplemental feeding program where there is initial dramatic improvement in nutritional status that declines gradually.
- Constant, steady change. No sudden, dramatic increases but rather a steady improvement. Education programs tend to demonstrate this type of increase
- Slow, initial change—then rapid change later. This is often pegged to behavior changes that are dependent on underlying knowledge or attitude changes. As those changes become more widespread, the pace of the behavior change will also accelerate

All targets expressed as percentages or proportions have numerators & denominators. In order to express these clearly you need to be clear on your target population and area of operations. These will define your numerator and denominator. You need to define the denominator in the text or as a footnote; otherwise the percentage/proportion is meaningless.

When developing indicators, it is important to realize that many indicators have multiple data elements represented in them. The Logframe Worksheet is a simple tool that can be used to supplement your summary logframe to determine what data elements are required to calculate a given indicator. Look at the following table to see what kinds of data elements are needed to calculate the indicator.

Logframe or Indicator Worksheet

Hierarchy Level	Logframe Indicator	Data Elements	Formula
Objective	Percentage of children aged 12-23 months who are fully vaccinated (against the 5 vaccine preventable diseases) before their second birthday.	1. Number of children aged 12-23 who received Polio 3 (OPV3) before the first birthday validated on the child's vaccination card. 2. Number of children aged 12 to 23 months who have a vaccination card (seen by interviewer)	Number of children aged 12 to 23 months with BCG, DPT3 OPV3, and measles (card-confirmed) before first birthday _____ x 100 Total no. of children 12 to 23 months with cards.

Indicators and Targets in the Planning Framework

Regardless of a logframe, indicators, and targets for key levels of the project hierarchy will still need to be defined in order to explain how the data needed to measure them will be collected, and to show who will do this and at what intervals. The traditional logframe allows for the inclusion of the indicators, with targets, in the second column and for most of the rest of this information in the third column. The Results Framework is always presented with a Performance Monitoring Plan, showing the indicators and targets, the method of measurement, and the frequency of data collection. For purposes of planning and management, it is useful to show the data collection and reporting responsibilities: these should be in the project M&E Plan (or system) and included in reporting requirements to management and/or the donor.

ARC Example Narrative Summary, Indicators and Targets, with Means of Verification

NARRATIVE SUMMARY	INDICATOR & TARGET	VERIFICATION: Measurement Method, Data Source and Frequency of Data Collection
Goal: Decreased HIV seroprevalence among adolescents aged 15 to 24 in Rio Blanco Province by 2005.	10% decrease in percentage of women ages 15-19 and 20-24 whose blood tests positive for HIV by 2005.	Baseline and end of project blood testing during multi-stage cluster sample household survey of target population.
Objectives: Increased median age at first sex among adolescents aged 15 to 24 in Rio Blanco Province by 2005.	20% increase in the age at which one half of men and women aged 15 to 24 have had penetrative sex (median sex), of all young people surveyed by 2005.	Baseline and end of project multi-stage cluster sample household survey of target population.
Outputs: Decreased incorrect beliefs about AIDS among the whole population in Rio Blanco Province by 2005.	40% decrease in proportion of target population who correctly rejects that 1. AIDS can be cured by sleeping with a virgin and 2. AIDS is transmitted through witchcraft and 3. Correctly identifies that a healthy looking person can transmit AIDS by 2005.	Baseline and end of project multi-stage cluster sample household survey of target population. Annual LQAS survey of target population.
Activities: To implement health education plays about common misconceptions of HIV/AIDS to different target groups in Rio Blanco Province by 2005.	One play per month in each of eight districts performed by Red Cross Volunteers by 2005.	Red Cross quarterly/annual project reports including findings of annual external audit.
Inputs: 160 trained, RC community health volunteers in Rio Blanco Province by 2005.	By 2005, there are at least 160 trained RC community health volunteers on 'active' status in the project on an annual basis.	Red Cross quarterly/annual project reports including findings of annual external audit.

Assumptions at Different Levels of the Project Hierarchy (Fourth Column of the Logframe)

Assumptions are conditions or factors over which the project does not exert control or does not HAVE control. Therefore, assumptions lie outside the accountability of the project, but are may affect the performance of the project. Determine the assumptions by asking the question: What conditions must exist to achieve each level of the project hierarchy?

So, what external conditions around inputs MUST exist if activities are to be implemented as planned? What external conditions around activities MUST exist if outputs are to be implemented as planned?

Assumptions:
- Can be formulated as desirable, positive conditions,
- Should be linked to each project level
- Should be specific
- Can be monitored by the project, and
- Should only be the critical assumptions for the project

The project team should avoid assumptions that are unrealistic, such as no inflation or those things that are not critical to the causal logic of the project or that trivialize the design. For example, an assumption such as 'no outbreak of war' is surely an important condition; however, it does not HELP the design. If there IS a war, it may be self evident that there will be no project as planned. Once assumptions have been specified and targeted, they can be used to guide decisions about project design and management.

We complete our HIV/AIDS example here by inputting some important assumptions at each level of the project hierarchy.

Example of Important Assumptions

Narrative Summary	Indicator and Target	Verification: Measurement Method, Data Source & Frequency Of Data Collection	Assumptions
Goal: To decrease the HIV seroprevalence among adolescents aged 15 – 24 in Rio Blanco Province by 2005.	10% decrease in percentage of women ages 15 to 19 and 20 to 24 whose blood tests positive for HIV by 2005.	Baseline and end of project blood testing during multi-stage cluster sample household survey of target population.	Early intercourse among adolescents is a main cause of high rates of HIV infection; so if abstinence is increased, infection rates will decrease.
Objectives: To increase the median age at first sex among adolescents aged 15 – 24 in Rio Blanco Province by 2005.	20% increase in the age at which one half of men and women aged 15 – 24 have had penetrative sex (median sex), of all young people surveyed by 2005.	Baseline and end of project multi-stage cluster sample household survey of target population.	The project hypothesis regarding causes of early sexual intercourse, and interventions to reduce that behavior, is correct.
Outputs: To decrease incorrect beliefs about AIDS among the whole population in Rio Blanco Province by 2005.	40% decrease in proportion of target population who correctly rejects that 1. AIDS can be cured by sleeping with a virgin and 2. AIDS is transmitted through witchcraft AND 3. Correctly identifies that a healthy looking person can transmit AIDS by 2005.	Baseline and end of project multi-stage cluster sample household survey of target population. Annual LQAS survey of target population.	The MoH messages will continue to align with Red Cross messages regarding incorrect beliefs.
Activities: To implement health education plays about common misconceptions of HIV/AIDS to different target groups in Rio Blanco Province by 2005.	One play per month in each of eight districts performed by Red Cross Volunteers by 2005.	Red Cross quarterly/annual project reports including findings of annual external audit.	Red Cross Volunteers will not face ridicule from communities for spreading HIV/AIDS prevention messages.
Inputs: 160 trained RC community health volunteers in Rio Blanco Province by 2005.	By 2005, there are at least 160 trained RC community health volunteers on 'active' status in the project on an annual basis.	Red Cross quarterly/annual project reports including findings of annual external audit.	RC Volunteers will not lose or damage their costumes during the life of the project.

9. The Project Hierarchy and Short Term Projects

The hierarchy is generally used for development projects of three years or more in duration. However, for transitional projects for a length of two years or less it may not be practical to expect to achieve a change in behavior. As such, the following guideline is provided for ARC staff to 'adjust' their design criteria for different timeframes.

Recall that many emergency and transitional projects become development ones. Better organization of short-term interventions leads towards better organization once you are designing a longer-term project. Longer-term projects face considerable management challenges in retrofitting a cluster of ad-hoc and reactive outputs from earlier, short-term, projects. This is why whenever it is appropriate, ARC teams should start thinking more in terms of the long-term rather than the short-term right from the start.

ARC 'Slide' of the Project Hierarchy

Project Component	Less than 18 Month Project	24 to 36-month Project*	36-month Project
Goal	Utilization/Behavior/Practice	Condition Change	Condition Change
Objective	Knowledge Attitude/Belief Availability of Systems/Services Access to Systems/Services Skills	Utilization/Behavior /Practice	Utilization/Behavior/ Practice
Outputs	Completion of Activities	Knowledge Attitude/Belief Availability of Systems/Services Access to Systems/Services Skills	Knowledge Attitude/Belief Availability of Systems/Services Access to Systems/Services Skills

*Projects of 24 to 36 months in duration can affect and measure utilization/behavior and practice changes if inputs and interventions are comprehensive.

Exceptions to Consider
- Mass Immunization campaigns
- Coverage Objective = Managed one-time behavior change
- Food Distributions < 18 Months
- Consumption = Managed one-time behavior change

10. Project Design: Monitoring and Evaluation

Monitoring and evaluation is a combined management systems. Monitoring and evaluation is part of an overall program/project continuum which is why some key elements in the M&E Plan is summarized in the Logframe (and why a full-blown M&E plan is a required element for most donors).

As already discussed, the project cycle consists of assessment (or problem identification), project design, project implementation, and project close-out. Monitoring and evaluation activities play an integral role in each of these parts of the cycle. Each phase of the cycle is equally important.

> *Monitoring is the standardized, ongoing oversight of the implementation of project interventions. Monitoring establishes the extent to which project inputs (e.g., $'s), work timetables, and targeted outputs (e.g., the amount of learning people are doing) are proceeding according to plan. A good monitoring system ensures an effective system of checks and balances is in place in an organization*

In ARC monitoring systems, data will be routinely gathered to track progress made toward agreed-on project schedules, especially progress towards key indicator targets. Discrepancies between actual and planned implementation, or between actual and planned expenditures, can be identified and corrective actions taken if necessary.

Monitoring is a part of program evaluation, but evaluation goes beyond the output level of simply asking: Did we do what we were supposed to do? A good evaluation asks the questions: Did we do what we were supposed to do? What changed, improved, didn't improve, or got worse as a result of project interventions and activities?

> *Evaluation is a process that attempts to determine as systematically and objectively as possible the outcome and impact of project interventions relative to specific target objectives. Evaluation occurs less frequently than monitoring, which allows for a more in-depth analysis of a project's progress and impact (i.e., achievement of objectives and sometimes, the goal).*

M&E systems are designed to:

- Improve management of programs, projects and supporting activities to ensure programs are meeting targets, and are making optimum use of funds and other resources
- Help us to learn from and share experiences to improve the relevance, methods, and outcomes of programs
- Meet donor requirements to see whether resources are being used effectively, efficiently, and for agreed-on objectives
- Provide information to enhance advocacy for policies, programs, and resources

To evaluate means to ascertain the value or worth of, according to its Latin root. Although evaluations are usually retrospective, they are forward looking in their purpose. That is, evaluation applies lessons learned from past experiences to decision-making about current and future programs. A good evaluation is an excellent learning tool, as well as a means to improve program performance and demonstrate accountability.

Too often evaluation is perceived as threatening and dogmatic when it is intended to be constructive and educational. For example, an evaluation can be used to develop human

resources and improve management and planning capabilities. Evaluation results can also be used in advocacy and fundraising efforts to obtain greater support from governments, private organizations, and the general public.

The development of an M&E Plan is part of the overall project design process. An M&E Plan is a systematic plan for the collection, entry, editing, analysis, and interpretation of all data needed for project management, including resources and activities required to implement the M&E activities. The M&E Plan will help to refine the logframe and will ensure realistic expectations for M&E aspects of the project.

Just as there is a project design framework, there is also a framework for monitoring and evaluating your project. Your overall project design, and duration of the project, will dictate which elements of this evaluation framework are applicable to your project.

Generally, all ARC projects of three years or more will require a baseline, a detailed implementation plan (DIP), a mid-term review, a endline survey, and a final evaluation.

Baseline and Endline Surveys: Assessment of a selected set of indicators before the initiation of project interventions and just prior to the end of those interventions. A baseline describes the situation in a target population before the start-up of a project in that target population. Baseline data are used to set appropriate and achievable objectives and targets for a project, and data collected in monitoring and evaluation systems are compared with these baseline data to determine if a program is meeting its specified targets. The baseline also serves as part of the foundation of the detailed implementation plan. Endlines give you the situation in a target population at the end of the project cycle, establish final levels of achievement for many indicators, and provide a quantitative basis for comparison of results from beginning to end of project.

Detailed Implementation Plans (DIP): A proposal summarizes the overall design of a Project. By contrast, a Detailed Implementation Plan (DIP) provides the overall approach and specific plan of action for actually implementing that project.   Further, the reality is that between project design, proposal writing, and funding -- six months to a year may have elapsed. New project managers may have just been hired to implement the project, and some local counterparts who may have been involved in the original design process may have changed. The ARC project team will therefore want to once again check and validate its hypothesis and proposed interventions based on more recently available data. For this reason the DIP is developed based on primary, quantitative data collected from the project target area--usually data obtained from the baseline.

As with the overall design of the project, the ONS and other stakeholders develop the DIP in collaboration, often in a workshop setting. The DIP workshop is an opportunity to review the findings of the baseline survey results together with partners, and to develop key sections of the DIP. Many PVOs translate and distribute copies of the DIP (or key parts of the DIP) to all partners and staff members involved in project implementation. The DIP serves as a common road map to guide the program towards achieving its primary goal and objectives.

The DIP workshop also enables the project team:

- To use baseline quantitative and qualitative data to inform program strategies
- To continue the dialogue of a shared vision among all program partners

- To revise, if necessary, and refine program goals, objectives, and indicators from the proposal
- To strategize on specific details related to implementation of major interventions
- To plan critical project tasks and activities
- To clarify implementing groups' specific roles and responsibilities
- To set priorities for activities for the life of the project (LOP)

Periodic Review: Internal assessment of progress and performance of the project over successive quarterly/biannual/annual periods. This generally provides information for project management in resource allocation, and often examines lower levels in the project design, such as inputs, activities, and outputs. These reviews may occur annually.

Mid-term Evaluation or Review: Assessment of project performance in the interest of making mid-course corrections. This allows you to measure progress towards achieving impact (usually not the impact itself), as well as review project management & administration and management.

Final Evaluation: Assessment of outcomes and impacts generated by the project as well as its cost-effectiveness and management.

Ex-post (or Impact) Evaluation: Study of sustainability of project results on the target population after project termination.

11.   Proposal Writing

A. General Guidance
The main purpose of this guidance is to help ARC staff articulate strategic and business plans and designs into award-winning proposals for donors.

Efficient and effective management of grants is also a critical part of good planning. Guidance is offered to delegates on matters such as budgeting, grants compliance, and other related management issues via the ARC International Services Business Operations Unit, the Finance Department, and the Program Associates at NHQ and in the field. Anyone with questions regarding these matters should refer to the Budget Guidance Handbook and Grants Compliance Training -- all available through Business Operations. Please contact the manager of Business Operations or senior associate for information about grant management.

>   *First, feel pride in being part of the Red Cross Movement. If you believe in your organization, this will come through in the proposal.

>   *Secondly, write a full-proposal for every project, even ones that don't require you to submit a full proposal.

The Foundation Center has said the following about this important step.

"Use this [full proposal] to pull together and organize your information on projects. Use it also to make sure the idea you have in mind tracks logically. In those cases where you have to prepare a full proposal in the funder's format use your proposal format to organize your facts and figures before writing them out in the funder's format. In those cases where you write inquiry letters and fill-out applications you will only have one chance to summarize your full proposal. You will do a much better job if you summarize from a written proposal than if you try to do this from the top of your head".

<div align="center">

Read the directions.
Read the directions.
Read the directions.

</div>

Even if you don't like the directions, think the directions are stupid, or think the directions are repetitive, follow them!

The following is a list of helpful tips in writing your proposal.

* **Plan ahead**. Allow plenty of time for those involved to meet, discuss, and review progress in the grant writing process. Also, allow enough time to get the required signatures and to get the proposal to the funder.

* **Make it a team effort**. Assign specific roles and responsibilities to people in terms of developing the proposal. But remember, if you ask your budget person to develop the budget, they need the design FIRST! You cannot budget that which you don't understand, let alone what doesn't exist.

- **Be realistic** in what you are proposing; what can reasonably be accomplished in the scope time and resources) of this grant?

- **Be a learning organization**. Learn from your own and others experiences with the same donor! Read the reviews of other proposals that have been submitted to the same donor if is possible. USAID will often make proposal reviews public.

- **Demonstrate partnerships.** Give evidence to the donor of the ARC/ONS partnership, as well as other RCRC Movement partners if applicable. This partnership is one of the distinguishing factors of the Red Cross Movement that will make your proposal stand out, especially when addressing sustainability questions.

- **Clarify ONS role.** Make sure there are ONS inputs to the project. This reflects the ONS commitment to the proposed project and its willingness to invest in it as well as ARC.

- **Be factual and specific**. Don't talk in generalities or in emotional terms. Be sure to substantiate all statements in your proposal, otherwise don't make them.

- **Limit technical and organizational jargon.** Use language anyone will understand--no abbreviations, initials, or jargon. Don't assume the reader will understand your acronyms or abbreviations, and also make sure to include an acronyms page.

- **Obtain organizational approvals prior to submission.** Have the correct approval on all proposals from ARC before donor submission.

- **Call the donor if you have questions**. Realize that many others will be calling as well and don't wait until the last minute. When you call, be organized: be clear on what you need to know and how to ask for it. Call the staff yourself. They may ask questions about the project that only the designers can answer.

- **Consider collaborating with other organizations.** At a minimum, find out what other proposals are being submitted to the same donor at the same time.

- **Clarify partner's roles and responsibilities.** When collaborating with partners, be sure you have determined who will be responsible for what. After the project is funded is not the time to discover there were differing opinions

- **Read the guidelines carefully**! Make your proposal fit the funding requirements. Don't ask for things that are outside of the intent of the grant. This is why we have stated that one project design can elicit multiple proposals (as different grants together could meet elements from different needs assessments, either in the same region or the same country).

- **Measure twice, cut once.** Go over the proposal template usually provided by the donor (twice!) and make sure each item is addressed.

- **Clear format.** Choose a format that is clear and easy to read. Readers are overloaded with proposals and appreciate legible, attractive proposals. Make sure tables are legible and easy to figure out.

- **Keep within page limits.** Stick to the specified number of pages. Extra pages or attachments may either be removed before the proposal is read, or may disqualify your entire proposal from the reading process.

- **Originals and copies**. Make sure you include the requested number of copies of your proposal. Keep both an electronic and hard copy backup of the final proposal that was submitted in a central and accessible location.

- **Don't over commit staff.** Be clear about the type and amount of staff development required, and the amount of time necessary for staff to feel confident about implementing the project. Be realistic!

- **Be aware of donor priorities**. Carefully match your project with an appropriate funding source. The primary difference between successful grant writing and inefficient proposal submission is the amount of time invested in the strategic identification of appropriate funders.

Use ACTION WORDS when writing your proposal

For a powerful and energetic proposal, avoid passive construction (was built vs. built) that hide the agent of action. Avoid static verbs that lack movement: am, is, are, be, being, been, had, have, has, do, did, does, could, should, would. Replace overused verbs (get, went, put) with more precise active verbs such as the following (*courtesy of the Foundation Center*).

Action Words to Use in Proposal Writing

ACHIEVE	DIRECT	INVESTIGATE	REPORT
ALLOW	DISCUSS	INVOLVE	RESEARCH
ANALYZE	DISTINGUISH	KNOW	RESTORE
ANNOUNCE	EDUCATE	LACK	RESULT
APPEAL	ELEVATE	LEAD	RETURN
APPLY	ENGAGE	LEARN	REQUIRE
ASSEMBLE	ENSURE	MAINTAIN	REVEAL
ASSESS	ENTAIL	MAKE	REVIEW
ASSIST	ENVISION	MANAGE	SAMPLE
BALANCE	EQUAL	MODIFY	SEARCH
BECOME	ESTABLISH	MOTIVATE	SEND
BEGIN	EVALUATE	MOVE	SHOW
BELIEVE	EXCEL	NEGOTIATE	SIGNAL
BELONG	EXEMPLIFY	NEED	SPECIFY
BRING	EXHIBIT	OBSERVE	START
CHANGE	EXPERIMENT	OCCUR	STATE
CHOOSE	EXPLAIN	OFFER	SUGGEST
CLARIFY	EXTEND	OPERATE	SUPPORT
COACH	FIND	ORGANIZE	SURVEY
COMBINE	FOCUS	PERFORM	SYNTHESIZE
COMPARE	FORM	PLAN	TAUGHT
COMPOSE	GIVE	PORTRAY	TEACH
CONCLUDE	HELP	PREPARE	TEND

CONNECT	HINDERS	PREVENT	TEST
CONSTITUTE	IDENTIFY	PRODUCE	TRANSLATE
CONTAIN	ILLUMINATE	PROHIBIT	TRY
CONTRAST	ILLUSTRATE	PROMOTE	UNDERSTAND
COORDINATE	IMPLEMENT	PROVIDE	USE
CREATES	INCLUDE	PURSUE	VALIDATE
DECIDE	INDICATE	REALIZE	VERIFY
DEFINE	INFORM	RECEIVE	WISH
DEMONSTRATE	INSPIRE	RECOGNIZE	WORK
DEPEND	INSTRUCT	REFINE	WRITE
DESIGN	INTEND	REFLECT	WROTE
DEVELOP	INTRODUCE	RELY	
DIAGNOSE	INVENT	REMAIN	
DIFFER	INVEST	REMIND	

B. Putting the Proposal Together[1]

1. Each proposal should have a designated proposal manager, who is responsible for assigning the different sections, receiving the finished sections, and putting together the final version. Too often we hurriedly try to put a proposal together at the last minute, slapping sections together, with no system of coordination or main point of contact.

2. The proposal manager should have regularly scheduled meetings to assess the proposal's progress and determine any problems. Overseas writers always should be included via conference call.

3. Establish a timeline for the proposal process at the outset and send it to all participants. Discuss it in the first proposal meeting. Set interim deadlines. This will help combat the "last minute rush."

4. Begin working with the finance and contract people immediately rather than waiting until the proposal body is finished.

5. Tell each writing participant what kind and size of font, margins, etc. so that all sections are written in a consistent format to save time and reduce inconvenience when putting the final proposal together. (If you are really sorely pressed to meet a page-limit requirement, consider using the font Garamond—which takes up less space.) Agree on these at one of the first meetings—it saves time when the final proposal is being put together if fonts, etc., do not have to changed.

6.   If you use the formatted headings in Windows, it is then very easy to do the table of contents automatically.

7. If you want to include a complicated illustration or chart, get someone who is knowledgeable about layout and graphics to help you. Make sure you can still modify

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[1] Suggestions from Pat Weeks.

the text or the information – there is nothing more frustrating than a great diagram that needs to be re-drawn from scratch with every design modification in the text.

8. Break the proposal up into small and simple subsections--especially if more than one person will be writing. Give each subsection headings and subheadings (referring again to the RFP), and stick to this outline. Using subheadings liberally will not only help you organize your material but will also guide reviewers through your perhaps not altogether flawlessly organized narrative.

9. Be sure to compare your budget and your text to ensure that for every cost figure a corresponding activity is mentioned and justified in the text. If different versions are circulating, remember to date the version at the bottom of the page. Sometimes people will be working on the wrong version. When a new version comes out, keep the old versions in separate files – sometimes the first version of the text really is the best.

10. Don't give the editor the proposal until the final version is ready. It is too difficult and time-consuming to keep trying to incorporate new revisions.

11. People who are not involved in the writing of the proposal should review it. Many organizations have a "red team" proposal review—with all the reviewers being from the outside. Their suggestions and questions are then incorporated (if appropriate) before the final version is prepared. It is important to consider the value of the suggestions—and not just automatically accept all suggested changes.

Some stylistic suggestions:

1. The person in the donor's organization reading the proposal often is not familiar with Red Cross structure and terminology. (Even the term "delegate," is not generally understood as our name for a field worker.) Be sure your proposal gives a sufficient explanation of Red Cross terms and what National Societies are—and their relationship with the American Red Cross. We are different from most NGOs with respect to this established and mandated partnership. Make that difference clear.

2. Use active verbs and verb forms. "The distribution of the food was achieved by the national society" is much weaker than: "The national society distributed the food." The meaning of passive sentence structures sometimes is harder to grasp quickly. Strong subjects and verbs lead to shorter, clearer sentences.

3. Remember to "call out" acronyms the first time they are used. Never assume the reader knows what a particular acronym means.

4. Although an old Red Cross style sheet says that you don't need a comma before the final "and" in a series of three, the present usage is that a comma should always precede the "and." (It really does make things clearer in cases where an item in the series contains an "and"---such as water and sanitation.)

5. Do not, for the sake of saving time, skip using an editor. Schedule this step in the beginning timeline. We have submitted too many sloppy, disorganized proposals in

the past—something that could have been avoided easily by allowing enough time for a careful edit.

C. Writing Proposals for USAID[2]

Following are some proposal writing tips that may be helpful in vying for competitive grants from USAID. I know that most of these tips will be "old news" for many of you, but it still is good to review them. Some of you recycle proposals when they are turned down by one donor. When you do that, be sure to adapt them specifically for the new donor rather than just doing a global search and changing the donor's name. With USAID, you need to work within the current climate of meeting strategic objectives and develop your proposals accordingly.

Become familiar with the specific strategic objectives (SOs) of the particular USAID Mission in the country of your national society partner (e.g., Rwanda's SO3: "increased ability of rural families in targeted communities to improve household security"). (USAID's website is: www.usaid.gov.) Then make a clear and concise link between what your partnership proposes to do and the development results that the USAID Mission wants to achieve.

Reviewers place tremendous importance on the Mission's response as validation (or non-validation) of the proposed project's relevance to USAID's development objectives for the host country. Absence of this response usually spells immediate doom for the application. Therefore, communicate early and often with the relevant USAID Mission. Remember that USAID staff are not pleased when they receive a Mission response form a few days before the application deadline.

Reporting numbers of workshops or training programs – or how participants feel about them – does not go far enough, expect as output indicator. Results should indicate what development-related skills or conditions will change and how these will be measured or known. Match proposed indicators with Mission ones, as appropriate.

Reviewers respond better to applications that indicate the proposed collaboration is of keen interest to both partners and that the ideas have been developed jointly. Letters of support that all read the same or that all only say it is fine for the Red Cross to conduct their program activities in that country are less convincing. You need specifics.

Explain how you and your partners intend to sustain your collaboration beyond the grant period aside from saying "We plan to look for additional funding." (For instance: Will you leave behind a "legacy" of a trained group of local technicians? Will you have developed capacity for water and sanitation project implementation at your national society?)

Try to convince the reviewers that the grant would be a good investment for development. Remember that reviewers have an obligation to identify the applications that are most responsive to the stated evaluation criteria; that is, responsive to USAID interests, well conceived, likely to achieve significant development results -- hence, a good use of taxpayers' money.

Provide a detailed budget narrative by line item, which explains how you arrived at the figures. The budget narrative should also give specific details about the cost share calculations by line item. Do not use lump sums for line items but show the basis for

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[2] By Pat Weeks.

each figure. Be sure in your budget narrative to fully explain the cost share and other contributions of all involved partners. USAID usually does not care for using grant funds for equipment-related costs. In-kind equipment contributions are encouraged. Make sure that all your calculations are correct, both in the budget charts and in the budget narrative, and consistent with any figures on the title page and project description.

12. Writing an ARC Proposal: Guidance by Proposal Section

Proposals seeking ARC internal funding should be summarized according to the Proposal Template below. Proposals for external donors should follow the template or format provided by that specific donor; but should still include these elements in the final draft. Our format gives you enough detail to help create the DIP the donor may require, even if they don't need this level of detail in the proposal.

1. Executive Summary (one to two pages)
> In two pages or less summarize the entire project, highlighting the dollar amount you are requesting, the timeframe (start and end dates), goal, objectives, critical activities and implementing partners. Briefly summarize why this project is necessary (what is the problem and how does this project contribute to the solution?). Briefly state the organization's experience in implementing such a project.

2. Introduction/Country Overview & Assessment Findings (>2 pages)
> Briefly introduce the country and its primary characteristics (population, economic, socio-political, security, etc.) Summarize the nature of the problem the project is addressing. Identify the causes and effects or consequences. Highlight any primary or secondary quantitative data collection the assessment team may have collected.

3. Overview of Target area (>2 pages)
> Briefly describe the location of the proposed program and include a map. Discuss the primary characteristics of the target area in detail as they relate to the project being proposed (i.e. morbidity & mortality rates, number and condition of health posts, ethnicity, literacy, etc.) Discuss how this area was chosen over others.

4. Project Goals, Objectives, Interventions and Critical Activities (1/2 – 1 page)
> Describe project goal, objectives, interventions, and critical activities following the guidance and definitions contained in earlier sections. Link the project's goal, objectives, and interventions to the assessment findings or situational analysis

5. Information on Beneficiary Population (~2 paragraphs)
> Describe the targeted population in greater detail than section three. Include beneficiary estimates broken down by gender where available. Include any quantitative and qualitative data (either from secondary research or the needs assessment).

6. Coordination (~1-2 paragraphs)
> Describe other actors working in the area, demonstrating how the project being proposed will lead to a balanced portfolio in the target area and not produce overlaps. Briefly describe the type and frequency of activities that will be undertaken to ensure coordination among the various local and international organizations working in the area.

7. Training Plan (if applicable)
> Include a training plan in table format highlighting the learning objectives, training methods, key activities, key personnel, and audience.

8. Major Challenges (~1-2 paragraphs)

Summarize major challenges the project team expects to face and how they will be dealt with.

9. Monitoring & Evaluation Plan (~ ½ page)

Discuss how progress toward objectives will be monitored and measured. Describe how and when the baseline, mid-term and final evaluations will be carried out. Describe current data collection systems already in place in the target area. Discuss how the project's data collection systems will complement those already in place. Briefly describe the qualifications of the personnel implementing the evaluation plan.

10. Capacity Building (~ ½ page)

Discuss the capacity of the implementing partner(s) in carrying out the proposed interventions. Describe key activities that will build the capacity of the partners to implement the program in a quality and sustainable manner. Provide an overview of any institution assessment that may have been conducted to determine capacity of implementing partners, including the one proposing the project.

11. Sustainability (~1/2 page)

Describe how key activities will continue after project funding ends OR describe how the impact of the project will continue after key funding and critical activities end. Include the roles various actors, partners, and communities members expect to play in ensuring sustainability. Where available, cite evidence from other projects or similar project in different regions attesting to the likelihood of sustainability given certain interventions.

12. Project Team & Relevant Experience

Describe the proposed management structure for the project. Include key responsibilities for each staff person proposed along with reporting relationship and key qualifications (in table form).

13. Budget and Budget Narrative

Use ARC budget template along with standard categories and codes.

14. Timetable

In table or Gantt chart form, provide a timetable for key activities throughout the life of the project.

15. Appendices

Include any relevant appendices (documents that may have been too lengthy to include in the body of the proposal, e.g. resumes of key personnel, summary of needs assessments, logframe or results framework, etc.)