

March 22, 2007

Summary

SMART Methodology Version 1
Presentation & Demonstration
Tuesday, March 6, 2007

Objectives:

- To introduce SMART Methodology Version 1 to NGO partners
- To provide hands-on experience with Nutrisurvey software program
- To discuss NGO monitoring and evaluation (relief and development)

Background

The interagency *Standardized Monitoring and Assessment of Relief and Transitions* (SMART) Initiative seeks to ensure that reliable and consistent data, starting with three critical data points on mortality, nutritional status, and food security, are rapidly accessible for policy and resource decision making. For data consistency, SMART developed a survey manual and analytical software program that integrates the planning, collection and analysis of nutritional status and mortality rate. Pilot tests were undertaken in Chad, Madagascar, Mali, Niger, and Somalia. The food security model is a work in progress with positive feedback from the initial pilot-testing that accurately predicted food insecurity problems. Medecins sans Frontieres (MSF) and Action Against Hunger/Action Contre la Faim (AAH/ACF) are planning further field work in Africa.

Data reliability is facilitated by the software program (Nutrisurvey) that simplifies the tedious process of survey planning, data entry and analysis with built-in statistical manipulations that generate sampling size, design effect, cluster groupings, and automatic standard tables and graphs. SMART is a simple, user-friendly tool to enable frequent, good quality surveys needed for monitoring fragile situations. Its built-in data quality assurance (plausibility check) program eliminates data entry errors.

SMART Version 1 draws from core elements of several existing methods and current best practices. It is iterative with continuous upgrading to be informed by research and field experience. Version 1 gathers the most critical, basic information needed in acute emergencies, with migration adjustment for population displacement in fragile, conflict-prone countries. The flexibility of the software program enables the easy addition of other indicators and other adjustments depending on the context.

This was the first HQs-based demonstration of the SMART tool for NGOs since the official launch in June 2005.¹ Since then, field-level training activities have been undertaken in several countries (Cameroun, Ethiopia, Madagascar, Mali, Tanzania). Future training activities are planned for Mauritania (March) and Burkina Faso (July).

¹ For information, visit www.smartindicators.org

With funding from DFID-UK, Action Against Hunger will undertake surveys/training in Burundi, Niger, and Uganda.

Expectations

SMART is intended for NGO and host government users -- to simplify the collection and reporting of good quality data. NGO and other partners are not required to use this tool, but are encouraged to try it on a voluntary basis as opportunities arise to help improve the next iterative version. Version 1 users will be part of the evaluation process that will provide feedback on field application and recommendations for developing Version 2. In particular, further testing in non-acute emergency contexts is needed to explore the potential of this tool for bridging the relief to development monitoring gap, and modifications needed in the software program to triangulate SMART indicators with other tools and datasets, such as routine health information system and clinic-based surveillance data.

Discussion

The meeting was attended by 42 participants, representing 21 organizations that included 15 NGOs with health/nutrition programs. The meeting focused on the practical demonstration of the Nutrisurvey analytical software program that makes the SMART survey tool unique.

Most of the NGOs collect nutrition data but not mortality data. Some of the NGOs work only in development context and were not sure how the mortality component (developed for acute emergencies) would apply to their work. Participants were shown how to use Nutrisurvey and then asked to assess it. All participants assessed the SMART tool to be easy, and user-friendly, and requested technical support and training. Because it is easy to understand and apply, NGO country staff, once trained, could be self-sufficient and not require HQ technical staff to do the work for them. Participants liked the integration of nutrition, mortality and food security and that analysis was done by one software program for the nutrition/mortality component (rather than the tedious stitching together of analysis in Epi.Info and Excel or SPSS). They liked the ease of sample size calculation, and the quality check feature. Participants encouraged continued (and quicker) work on the food security component. One NGO volunteered to pilot test the food security component to complement pilot work being done by European NGOs (ACF and MSF). Participants mentioned the importance of missions (donors) ensuring this new system was being used at the field level.

Problems/weaknesses were also identified. Participants indicated that work is needed on guidance on data interpretation (which one group recommended should be specific to the context or NGO project). There is a problem in disaggregating by age or region. In some countries, neonatal mortality is not counted as death – SMART should ensure that these are included.² Although best practices determined the current SMART definition of

² SMART assumes all deaths are being reported.

“household”, further work is needed especially in dynamic situations with population displacements. The software has needed minor adjustments, and glitches are being fixed as feedback is received. Other software adjustments await further work such as the completion of the section on interpreting data.

In addition to this discussion, the technical presentation by Action Against Hunger that has applied SMART in several countries highlighted some remaining issues:

- With the focus on data quality, SMART recommends a standardization test (page 63 of manual) to ensure all members of the survey team are able to undertake precise measurements. 10 children (6 – 59 months) are measured twice and the team’s measurements are compared, and rated. Any misunderstanding or errors in technique are corrected during the training. While it can be (and has been) done, field practitioners’ experience is that children have little patience to go through the measurement process twice. Can the number of children be reduced for the standardization test?
- Edema: Weight-for-height is not calculated anymore for edematous children, and these children appear as “data errors” in the plausibility check. Therefore, there is a risk that such data are deleted by field workers which may bias the survey results.
- SMART recommends a (starting) standard prevalence of 50% for global acute malnutrition (GAM) in acute emergencies (to determine study sample size, design effect). Is there a recommendation for Crude Death Rate (CDR)?

The last session focused on monitoring and evaluation, bridging the gap on information from the relief to development continuum, and the need to triangulate data from surveys, surveillance, census and vital statistics, and the various new M&E tools available. Since SMART collects all nutritional indices (wasting, underweight, stunting) it relates to several components of the Foreign Assistance Framework.³ Under the Functional Objective, it relates to Humanitarian Assistance and Investing in People (Health, Social Services and Protection For Especially Vulnerable Populations). Under the Country Category, it relates to Rebuilding Countries, and Developing Countries (and perhaps others).

NGOs are currently using different tools depending on their projects, for example, KPC, LQAS, child-to-child growth monitoring, verbal autopsy, and depends whether the project is Title II food aid or Child Survival. There is information gap and lack of agreement on how to monitor/evaluate the continuum from relief to development. While the usefulness of anthropometry (nutritional status) and growth monitoring/promotion in non-emergency situations is understood, the use of mortality is less clear and to be further explored, along with other direct and indirect measures (deaths averted, excess mortality, disability, etc.). Since SMART Version 1 focused on acute emergencies, the mortality measure is specifically for determining emergency level. It was not clear how this component could be applied in non-emergency contexts.⁴

³ Foreign Assistance Framework, Office of the Director of US Foreign Assistance, January 29, 2007.

⁴ This will be deliberated by the expert team for Version 2. Since SMART is modular, the nutrition component can be used by itself for collecting all nutritional indices.

Finally, an issue raised is how USAID partners working in both humanitarian assistance and in health (e.g., Investing in People) can take advantage of multi-year funding and use a more integrated tool. Can SMART be that integrative tool in an M&E tool kit, to provide ongoing information along both sides of the relief to development continuum? Can it be used as part of an early warning system to help preparedness planning for an impending disaster or emergency?

Recommendations and Follow-up

- Establish a community-of-practice of NGO SMART users to share field experiences
- Evaluate the experiences in using SMART for M&E and for decision making
- Provide technical support to NGOs to apply SMART
- Move faster on the SMART food security component
- Integrate food security analysis into one program (with the nutrition/mortality software)
- Consider a public donor declaration that SMART is an acceptable tool or require its use⁵
- For Version 2, research the (a) the need for triangulation of rapid survey methods (LQAS) with longitudinal surveillance data, and routine census and vital statistics data, and (b) consider other issues (e.g., adding rapid indicators of vulnerability to household food insecurity)
- Include NGO participants (from this group) in developing Version 2

⁵ USAID encourages its use so improvements can be made based on realistic field contexts.

Annex 1

SMART Methodology Version 1
Presentation & Demonstration

Tuesday, March 6, 2007
11 a.m. – 5 p.m.
1201 Pennsylvania Avenue, NW, Suite 200
OFDA Main Conference Room
Washington DC 20004

Objectives:

- To introduce SMART Methodology Version 1 to NGO partners
- To provide hands-on experience with Nutrisurvey software program
- To discuss NGO monitoring and evaluation (relief and development)

- 11:00 Welcome & Introductions: Caroline Abla (USAID/OFDA), Judith Light (USAID/Knowledge for Development Facilitator)
- 11:20 SMART Methodology Overview: Anne Ralte (USAID/PPC)
- 11:30 Differences with Traditional Survey Methods: Marie-Sophie Simon (Action Against Hunger)
- 12:30 Lunch
- 1:30 Nutrisurvey Exercise: Marie-Sophie Simon
- 3:00 Break
- 3:15 Discussion of Exercise, Q&A: Judith Light, Marie-Sophie Simon
- 4:15 Discussion on Monitoring and Evaluation Needs to Bridge Relief to Development: Charles Teller, USAID/Global Health
- 4:45 Wrap up & Recommendations: Judith Light
- 5:00 End of Session

Annex 2

Group Task

As we work through the exercise, keep the following questions in mind:

How are you currently doing monitoring and evaluation of mortality, nutrition, and food security?

What information system(s) are you using? For what purposes? (describe/discuss)

- How satisfied are you?
- (How) do you fill the information gap between relief and development?

Does SMART seem user-friendly?

- If so, why?
- What would you modify (and how/why?) to make it more user-friendly?

If you were to use SMART, think about/discuss

- What purposes would it be suited for, to bridge the gap?
- How could it be used? By whom?
- What other changes or modifications would you suggest to meet your needs

What else? Other general reactions or recommendations?

Choose a moderator/facilitator and a recorder.

Record your ideas on a flip chart.

Plan for a 3-minute report-out from your group's experience and discussion.