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# THE POWER OF MONITORING AND EVALUATION (M&E) IN STRENGTHENING PREVENTION PROGRAMMES

Prevention programmes play a vital role in safeguarding communities from terrorism and violent extremism. However, their effectiveness hinges on a crucial element: **Monitoring and Evaluation (M&E)**.

Far from being a punitive exercise, M&E serves as a cornerstone for programme success, enabling us to measure progress, identify areas for improvement, and ultimately maximize the programme's impact.

## DEMYSTIFYING M&E: A BOON FOR PREVENTION PROGRAMMES

M&E operates within a cyclical framework encompassing four distinct phases. Within each phase, specific actions are undertaken to ensure the programme's effectiveness throughout its lifecycle and a strong evidence-based foundation.

**Planning:** The planning phase serves as the bedrock of the M&E process by setting goals and selecting indicators. Developing a robust Theory of Change (ToC) plays a critical role when designing an intervention. It serves to answer the question *from what to what?* That is, what is the current state, and where do we want to be after the intervention? The *to what* then becomes specific, measurable, achievable, relevant, and time-bound (SMART) programme goals. By elucidating the programme's intended impact, the ToC facilitates the identification of relevant indicators. These indicators act as crucial benchmarks that will capture progress made towards established prevention goals.

**Designing:** Informed by the ToC and established indicators insights, the design phase revolves around selecting the most suitable intervention strategy. Even if an intervention has delivered demonstrably positive results in past applications, contextual factors and underlying assumptions warrant careful reevaluation to (re)adapt the intervention. The critical question becomes: is this intervention the optimal solution for the current context, and is there sufficient evidence to support its past effectiveness in preventing the target issue? A robust M&E framework necessitates a critical eye towards past interventions, ensuring they remain relevant to the evolving needs of prevention efforts.

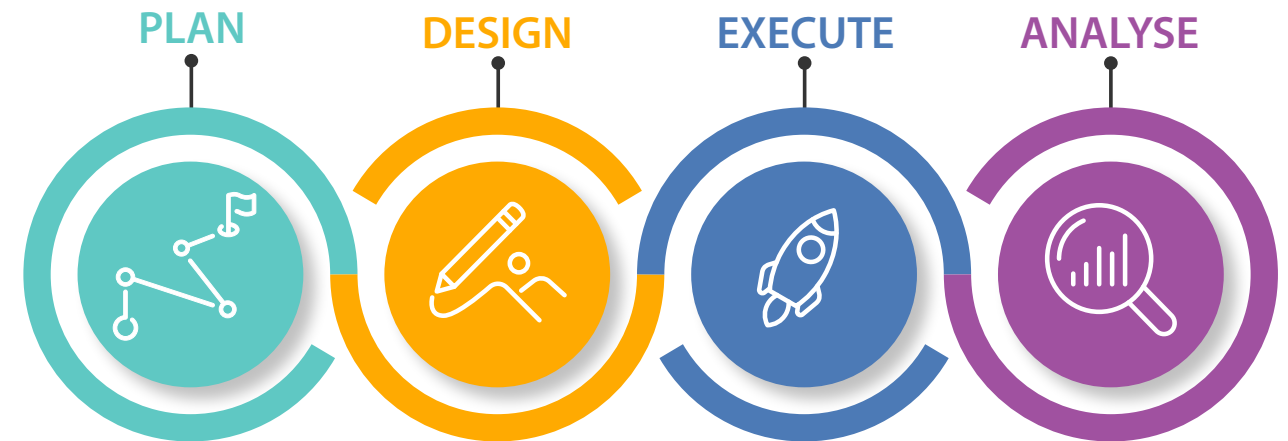
**Execution:** The execution phase involves both implementing the plan and analysing the results. Data collection activities commence, adhering to the pre-determined indicators outlined during the planning phase. It is encouraged to use various methods (or the combination of qualitative and quantitative methods) for allowing more rigorous analysis and insights from the data received. Such methods include surveys, interviews, or focus groups, and many free online tools exist to help create such methods and collect data. The quality and integrity of collected data are paramount, as they form the cornerstone of analysis in the subsequent phase.

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**Analysis and Adjustment:** The analysis phase involves thorough scrutiny of the collected data. This data is analysed to assess the program's progress towards its established objectives. Emerging trends and patterns within the data provide valuable insights, revealing areas where the programme is exceeding expectations as well as areas where adjustments may be necessary. By critically evaluating the data, programme managers can identify potential shortcomings within the intervention strategy or even within the ToC itself.

This cyclical nature allows for continuous improvement. Informed by analysis, programme developers can refine the intervention or ToC to enhance effectiveness. This iterative process ensures the programme remains adaptable to evolving needs.

By integrating a robust M&E framework, prevention programmes evolve from good intentions into evidence-based strategies. M&E's power lies not in pronouncements, but in guiding continuous improvement to ensure programmes deliver on their promise of a safer future.



## HOW MANY PHDS DO YOU NEED FOR M&E?

A pervasive misconception surrounding M&E equates effective evaluation with extensive academic qualifications. This perception discourages valuable contributions from individuals who may not possess a high academic degree but possess a wealth of practical experience. The reality is far more inclusive. M&E thrives on the engagement of all stakeholders involved in an intervention. Second, M&E is thought of as using complex research methods and heavy statistics. M&E can be much simpler and accessible as indicators are designed to fit the programme. Most of the time, simple questions can be enough to determine a baseline and then evaluate an intervention's impact.

**“ M&E is not about failure or success, nor is it about PhDs and statistics. Rather, it looks at how well the objectives were reached.**

Programme developers, community members, and intervention beneficiaries (to name just three) all possess valuable insights that can contribute significantly to the M&E process. Programme developers bring a deep understanding of the programme's goals and the intended impact pathway. Community members offer a unique perspective on the context within which the intervention operates, including pre-existing challenges and cultural nuances. Intervention beneficiaries, the individuals directly affected by the programme, provide firsthand accounts of their experiences, highlighting successes and potential areas for improvement.

By fostering an inclusive environment where all voices are heard, M&E transcends the limitations of a purely academic exercise. The collective knowledge and diverse perspectives of all stakeholders enrich the evaluation process and increase the evidence-based nature of interventions, leading to the development of more comprehensive and impactful interventions. Furthermore, empowering stakeholders through capacity-building initiatives

equips them with the necessary skills to actively participate in M&E activities. This not only strengthens the evaluation process but also fosters a sense of ownership and accountability among those invested in the program's success.

Even with a well-designed M&E plan, technical challenges can arise, such as the counterfactual: the situation that would arise had the programme not been implemented. The difficulty lies in isolating the programme's effect from other external factors. Another challenge is the limited use of randomised controlled trials (RCTs), which are considered the evaluation gold standard. RCTs involve randomly assigning participants to either a treatment group (receiving the programme) or a control group (not receiving). By comparing the outcomes of the two groups, the programme's impact is evaluated. However, RCTs can be expensive, time-consuming, and are not be feasible in all contexts.

Finally, M&E also needs to consider ethical questions. For example, which group should receive the treatment or not in an RCT? Another consideration relates to obtaining informed consent from participants before collecting data, and ensuring that the data follows privacy guidelines, such as GDPR.

Despite these limitations, M&E is a robust and valuable tool for measuring a programme's impact. By carefully considering the programme's context and employing a mixed-methods approach, programme developers can develop strong ToC and develop a comprehensive understanding of a program's effectiveness.

## CONCLUSION

Effective M&E transcends the need for extensive academic qualifications. Foundational concepts like “evidence-based practice,” “theory of change,” and “programme logic” are all accessible tools that empower programme developers to design interventions with a clear roadmap for success. By embracing M&E as a core component of programme development, we can ensure that prevention strategies deliver tangible results and make a lasting impact.

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