

Monitoring and Evaluation framework to assess progress of the implementation of ESAR COVID-19 RCCE response

Progress/activity indicators						
related behavioural drivers		INDICATOR	FRQUENCY	MEANS OF VERIFICATION	INDICATOR EXPLANATION	COMMENTS
	1.1	# of people trained on IPC, community engagement and risk communication	Weekly	<ul style="list-style-type: none"> • Implementation activities inputs. • Implementing partners reports. • Programme documents 	Kindly specify who is being trained as per country plan, e.g. Health workers, journalist, social mobilizers in each week	Please adjust these indicators according to your activities - Also COs to define the periodicity of monitoring based on the activities (for instance training of partners may not be collected on a weekly basis)
	1.2	# of household reached with door-to-door or other community-based activities	Weekly	<ul style="list-style-type: none"> • Implementation activities inputs. • Implementing partners reports. • Programme documents 	Kindly specify how many households reached as per country plan in each week	
	1.3	# of IEC material produced (TV, radio spots, printed material, media statement etc.) and disseminated / broadcasted	Weekly	<ul style="list-style-type: none"> • Implementation activities inputs. • Implementing partners reports. • Programme documents 	Kindly specify how many spots broadcasted as per country plan in each week	
	1.4	# of people reached through social media on key lifesaving behaviour change messages	Weekly	<ul style="list-style-type: none"> • Implementation activities inputs. • Implementing partners reports. • Programme documents 	Kindly specify how many posts broadcasted as per country plan in each week	
	1.5	# of high-level advocacy events conducted	Weekly	<ul style="list-style-type: none"> • Implementation activities inputs. • Implementing partners reports. • Programme documents 	Kindly specify how many high-level advocacy events as per country plan in each week	
	1.6	# National RCCE coordination team meetings	Weekly	<ul style="list-style-type: none"> • Implementation activities inputs. • Implementing partners reports. • Programme documents 	Kindly specify how many national RCCE coordination meetings as per country plan in each week	

	1.7	# Sub-national RCCE coordination team meetings	Weekly	<ul style="list-style-type: none"> • Implementation activities inputs. • Implementing partners reports. • Programme documents 	Kindly specify how many sub-national RCCE coordination meetings as per country plan in each week	
	1.8	# of rumor tracking reports shared	Weekly	<ul style="list-style-type: none"> • Implementation activities inputs. • Implementing partners reports. • Programme documents 	Kindly specify how rumor tracking reports shared in each week	
Community Engagement	1.9	Number of people who participate in COVID-19 engagement actions	Every two weeks	<p>Data on the number of people engaged through community engagement actions will be aggregated based on regular reporting from UNICEF partners, as well as UNICEF internal reports documenting community engagement actions.</p> <p>If possible, mechanisms for monitoring engagement actions through “sectors” should be integrated through standard monitoring platforms in order to increase accountability to feedback and follow-up to community needs.</p>	This is a measure of the number of people engaged through RCCE engagements to promote prevention and access to services, and to support communities during the COVID-19 pandemic and build community resilience. This involves the development and implementation of community-based action plans that involve two-way communication and dialogue, local ownership, leadership, inclusion, participation, and local adaptation. This measure captures participation in two-way community engagement actions, which include, but are not limited to: activities to track and respond to rumours and misinformation; interactive digital and social media engagements; interactive radio platforms/programs (especially community radio), community and key influencers engagements; adolescents/youth engagement; and door-to-door activities when possible, in accordance with local and national COVID-19 safety and prevention recommendations.	High Frequency indicator. This is a HAC indicator

People reached with information	1.10	# of people reached on COVID-19 through messaging on prevention and access to services	Every two weeks	<ul style="list-style-type: none"> • Implementation activities inputs. • Implementing partners reports. • Programme documents 	Kindly specify how many people reached as per country plan in each week.CO to calculate the number of people reached based on the media with the highest reach to avoid double counting.	High Frequency indicator. This is a-HAC indicator
Output indicators (These indicators should be part of your rapid assessment/KAP survey or any assessment conducted at CO level to develop the baseline)						
related behavioural drivers		INDICATOR	FREQUENCY	MEANS OF VERIFICATION	INDICATOR EXPLANATION	COMMENTS
knowledge and awareness	2.1	% of respondents reached with accessible information who recall at least 3 preventive practices	Monthly or bi-monthly	<ul style="list-style-type: none"> • U-Report or any other online survey. • Phone survey. • Quantitative data (see ESARO guidance note on data collection). • Rapid Assessment / KAP / other surveys conducted for baseline, midline and endline. 	Respondents should be selected among people reached with messages	
knowledge and awareness	2.2	% of respondents reached with accessible information who recall at least 2 signs and symptoms of COVID19	Monthly or bi-monthly	<ul style="list-style-type: none"> • U-Report or any other online survey. • Phone survey. • Quantitative data (see ESARO guidance note on data collection). • Rapid Assessment / KAP / other surveys conducted for baseline, midline and endline. 	Respondents should be selected among people reached with messages	

Social Accountability / Community feedback	2.3	Number of people sharing their concerns and asking questions/clarifications for available support services to address their needs through established feedback mechanisms	Every two weeks	<ul style="list-style-type: none"> • Feedback mechanisms reports. • Implementation activities reports. • Implementing partners reports. • Programme documents. 	Kindly specify how many people used established feedback mechanisms through the various platforms supported by UNICEF (U-Report, Radios collecting feedback, community-based mechanisms etc.) reached as per country plan in each week. COs to calculate the number of people using feedback mechanisms based on the platform with the highest number of users to avoid double counting.	High Frequency indicator. This is a HAC indicator
knowledge and awareness	2.4	% of respondents reached with accessible information who know what to do in case they demonstrate symptoms of the disease	Monthly or bi-monthly	<ul style="list-style-type: none"> • U-Report or any other online survey. • Phone survey. • Quantitative data (see ESARO guidance note on data collection). • Rapid Assessment / KAP / other surveys conducted for baseline, midline and endline. 	Respondents should be selected among people reached with messages	
Stigma	2.5	% of respondents who think they would be stigmatized if they contract Covid-19	Monthly or bimonthly	<ul style="list-style-type: none"> • U-Report or any other online survey. • Phone survey. • Quantitative data (see ESARO guidance note on data collection). • Rapid Assessment / KAP / other surveys conducted for baseline, midline and endline. 		

Outcome indicators						
related behavioural drivers		INDICATOR	FREQUENCY	MEANS OF VERIFICATION	INDICATOR EXPLANATION	COMMENTS
Intent	3.1	% of respondents reached with accessible information that declare being willing to take the recommended actions in case of signs and symptoms	Monthly or bi-monthly	<ul style="list-style-type: none"> • U-Report or any other online survey. • Phone survey. • Quantitative data (see ESARO guidance note on data collection). • Rapid Assessment / KAP / other surveys conducted for baseline, midline and endline. 	Respondents should be selected among people reached with messages	These indicators should be part of your rapid assessment/KAP survey or any assessment conducted at CO level to develop the baseline.
Trust	3.2	% of respondents reached with accessible information who have confidence in their health service provider	Monthly or bi-monthly	<ul style="list-style-type: none"> • U-Report or any other online survey. • Phone survey. • Quantitative data (see ESARO guidance note on data collection). • Rapid Assessment / KAP / other surveys conducted for baseline, midline and endline. 	Respondents should be selected among people reached with messages	
Self-efficacy	3.3	% or respondents reached with accessible who feel confident that they can prevent COVID-19	Monthly or bi-monthly	<ul style="list-style-type: none"> • U-Report or any other online survey. • Phone survey. • Quantitative data (see ESARO guidance note on data collection). • Rapid Assessment / KAP / other surveys conducted for baseline, midline and endline. 	Respondents should be selected among people reached with messages	

Risk perception	3.4	% of respondents reached with accessible information who perceive COVID19 as high-risk disease	Monthly or bi-monthly	<ul style="list-style-type: none"> • U-Report or any other online survey. • Phone survey. • Quantitative data (see ESARO guidance note on data collection). • Rapid Assessment / KAP / other surveys conducted for baseline, midline and endline. 	Respondents should be selected among people reached with messages	
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