CI - FNS Indicators for Technical Pillars

General Information:

- *All indicators should be collected in a sex + age + economic classification (but they should be meaningful) disaggregated way and looked at how we are impacting men and women differently. At the Household level, we should be looking at Male Headed Households and Female Headed Households*
- *All data should be coming at least at baseline and endline, if not also built into monitoring plans – data weight - should we count this or not? Mention if this would be population or beneficiaries based survey other key hints*
- *Wherever possible, we should be looking at counterfactuals—what is happening for people not in the program(especially at external mid-term and final evaluations)*
- *Data collection must done at the same season/time of year for allowing relevant diachronic analysis*
- *Representative sample or census -- Data collection must follow the methodology developed for each indicator - . The CI MEL Group will make available to project teams links to required materials (questionnaires, sampling methods and data analysis and interpretation methods) and will carry out required capacity building for practitioners*
- *Data quality should be at center* – use appropriate tools and instruments across
- *Unit of measures, direction of desired changes (+ or -)*
- *Gender, governance, environment, resilience, sustainability cost and time per indicator, etc – should be taken into account adequately*

Domain 1 - Sustainable Agriculture Systems,

INDICATOR 1: Percentage of agricultural area under sustainable agricultural and natural resource management practices[1]

Why this indicator? What will it measure and provide information for?

This indicator measures the portion of land under use and on which is applied at least one sustainable agricultural and natural resource technology and/ or management practice, against the total area under use for productive activities for commercial or consumption purpose (agriculture, livestock/grazing areas, fisheries/aquaculture, and forestry)[2].

SDG goal 2, target 2.4 aims to ensure sustainable food production systems and resilient agricultural practices that increase productivity and production, maintain and enhance ecosystems and strengthen capacity for adaptation to climate change, and environmental degradation. CARE sees building community and system resilience to extreme weather, drought, flooding and other disasters and that progressively improve land and soil quality.

The key main groups of sustainable agricultural practices include:

1.1. Improved land and water management practices
1.2. Improved soil fertility and crop and livestock management practices
1.4. Other climate resilient, environment friendly agricultural practices (Fuel Efficient Energy, Improved fisheries and aquaculture management; climate information)

NB: *As much as possible, this indicator should be applied to a local or regional scale (micro to medium scale), as national averages can mask significant variations.*

What Sustainable Development Goal is the indicator connected to?

- SDG Goal 2.4.1 green list Nov 2015;
- SDG Goal 6;
- SDG Goal 7;
- SDG Goal 13;
- SDG Goal 14;
- SDG Goal 15

Definitions and key terms

- Total area of land under agricultural use
- Total area of land under sustainable agricultural and natural resource management practices

Data and information required to calculate the indicator

- Numerator: total area of land under productive activities (per administrative unit: ward, district, country, region, etc.)

[1] We will need to list all practices that fall under this categories as a guide for users of this indicator

[2] After assessing agricultural context vulnerabilities and climate change impacts (CVCA and/or other), the next step is to identify and evaluate both ongoing and promising agricultural practices in the key production systems that have shown potential in delivering SuPER outcomes. This can be done through literature reviews and interviews with key stakeholders but analysis should apply a SuPER lens to existing initiatives, and highlight opportunities. Practices/services/activities can then be designed in relation to SuPER principles. Seven primary practice options are listed by FAO here. In this indicator, sub-components for sustainable practices should contribute to 'climate-resilience' (e.g. food, income, water, soil, risk, carbon, nitrogen, energy). This is a critical aspect of situation analysis, as it grounds the concept of sustainable practice and SuPER in specific actions and

Denominator: total area of (the above) which is under sustainable agricultural and natural resource management practices and technology adoption

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Suggested method for data collection

- Primary data collection: household data survey + routine monitoring
- Secondary data Datasets and GIS information from technical partners such as FAO, ICRAF, CIAT and national meteorological offices/services
- For more information: XXX?
- Qualitative methods (FGDs and KIIs) supplement quantitative data collection to better understand climate change adaptation, Climate Smart Agriculture and other CARE resilience initiatives; affected people's perception of wellbeing in the face of climate change and variability.

Possible data sources

- Data from different administrative levels land use/occupation information systems: local, national, and regional
- Primary data collection: project household surveys
- Secondary data

Resources needed for data collection

The quantitative and qualitative data collection, storage and analysis can be conducted by CARE. Partners (including research, university partners in the CG system and in government). It needs to be included in the monitoring and evaluation plan and budgeted for.

Reporting results for this indicator: number of people for which the change happened

- Reporting Purpose: ☑Baseline ☑Progress ☑ Evaluation
- A change in the percentage of productive land area under sustainable agricultural and natural resource management practices
- The number of households practicing sustainable agriculture and/or natural resource management practices

Questions for guiding the analysis and interpretation of data (explaining the how and why the change happened, and how CARE contributed to the change)

- This indicator provides a measure of changes in the scale of application of sustainable agricultural and natural resource management practices and adoption of new technologies as a result of project support (in different geographical/administrative areas) and contributes to documenting the success or failure of the actions taken to promote sustainable productive systems and natural resource bases and ecosystems services.

Other considerations

- This indicator should be applied at several levels: institutional, community and people's scales to allow a comprehensive analysis of the scope of observed changes in sustainable agricultural and natural resources management practices
- CARE objects to any carbon sequestration burden being placed on vulnerable small scale food producers but where affordable and practicable it is possible to measure mitigation in farm landscapes (adaptation with mitigation outcomes). Agricultural sources (including energy, soils, livestock etc.) emit methane, nitrous oxide and/or carbon dioxide. Changes in land use, particularly conversion of high carbon land uses ('sinks') such as forests and peatland for agriculture is particularly damaging. The use of this indicator allows us to demonstrate positive action towards mitigation by returning or fixing carbon or nitrogen in the landscape. A simple metric for measuring mitigation is tracking fuel wood consumption.

INDICATOR 2: Increased yield per unit area (or productivity (in yield) per unit area; also to cover forests, fisheries, livestock etc.)

Why this indicator? What will it measure and provide information for?

This indicator will provide information for agriculture yield growth rate (cereal, livestock, aquaculture, fisheries, etc.) (% p.a.), with sustainable agriculture practices. This will help to measure how well sustainable agriculture practices are helping to close the yield gap (Productive and Sustainable parts of the SuPER principles). Methodology includes standard monitoring of yields against baseline over time and at post-harvest intervals. FGDs and KIIs can provide qualitative verification.

What Sustainable Development Goal is the indicator connected to?

- SDG Goal 2;
- SDG Goal 13;
- SDG Goal 15

Definitions and key terms

Changes to productivity can be measured in different ways. The most common approach is to measure yields. Yield measurement techniques vary between crops, and range from weighing harvested grain from the entire field to weighing representative samples from a plot area after plants have reached physiological maturity (Lauer 2002). There are also many mathematical approaches for computing basic yield. Improving the nutritional relevance of food security measurement means using indicators that capture both macro- and micronutrient consumption, that can be measured at the individual level, and that give some sense of acute food insecurity (such as seasonal shortfalls or consumption shocks). Examples of indicators used to measure productivity include:

- Yield (e.g. product per unit of land or area, water, energy, nutrients, labour)
- Income (e.g. gross margin, net present value – covered in Pillar 2)
- Labour (e.g. person hours, labour allocations by gender – covered in Indicator 4 below and Pillar 2)

In the case of agriculture, the most commonly used unit is kg/ha or MT/ha which can evolved depending on the physical elements (soil quality, water availability, temperatures, etc.) and on technological aspects (agricultural techniques).

Data and information required to calculate the indicator

- Numerator: total output per unit area for each crop/product (kg/ha or MT/ha for example)
- Denominator: total unit area cultivated for each crop (in ha for example)

Suggested method for data collection

- Methodology would include standard monitoring of yields against baseline over time and at post-harvest intervals.

Possible data sources

- Data from different administrative levels: local, national, and regional
- Primary data collection: project household surveys
- Secondary data

Resources needed for data collection

- Primary data collection: project household surveys
- Secondary data
- Local/national/regional agricultural statistics

Reporting results for this indicator: number of people for which the change happened

- Reporting Purpose: ☑Baseline ☑Progress ☑ Evaluation

- Number of households experiencing increased production
- Number of additional tons of food produced per hectare

Questions for guiding the analysis and interpretation of data (explaining the how and why the change happened, and how CARE contributed to the change)

- This indicator provides the total output per unit area and indicative information on the productive systems efficiency

Other considerations

- Focus group discussions can provide qualitative verification, especially regarding to external factors (climate, pests and diseases, insecurity, input markets, prices, etc.) which could have affected the productivity performance.
- Should be collecting data at the same time of year, ideally post-harvest, every year

INDICATOR 3: Percentage of women farmers with access to, control over, or ownership of a core set of productive resources, assets, and services

Why this indicator? What will it measure and provide information for?

Productive resources such as land, water, pasture, inputs, tools, extension, information, finance, and veterinary services etc. are important assets for women and for men. Methodology includes standard monitoring against baseline and through focus group discussions and household surveys.

What Sustainable Development Goal is the indicator connected to?

SDG Goal 1;
SDG Goal 2;
SDG Goal 5

Definitions and key terms

This indicator is focused on productive assets, services and capitals that enable women to make strategic life choices and build resilience. It aims to capture economic status and fall-back position.

Data and information required to calculate the indicator

- Denominator: Total number of productive assets owned by the household and level of accessibity to women
- Numerator: number of those assets on which women can make their own decision [without] consulting their spouse regarding their use or sale or donation (*de facto* rights to inherit or bequeath to others through sale, gift, inheritance).

Suggested method for data collection

- Primary data collection: household survey
- Secondary data analysis
- Qualitative methods like FGDs and KIIs to supplement quantitative data collection to provide a better understanding of subjective dimensions of asset ownership such as social norms and barriers analysis.

Possible data sources

- Primary data; project participant surveys
- Local government services providers
- Other local stakeholders (agro-dealers, market actors, community leaders)
- Secondary data from government and partner reports
- Asset photography as a monitoring tool and validation of reporting

Resources needed for data collection

The quantitative and qualitative data collection, storage and analysis will have to be conducted by CARE and partners (potentially including research / university partners). It needs to be included in the monitoring and evaluation plan and budgeted for.

Reporting results for this indicator: number of people for which the change happened

- Reporting Purpose: ☑Baseline ☑Progress ☑ Evaluation

A change in the level of women's control over households' assets:
Number of households where women have increased control over assets.
Number of households where women are reporting changes in receipt of extension, information and advisory services

Questions for guiding the analysis and interpretation of data (explaining the how and why the change happened, and how CARE contributed to the change)

- What are assets women have /don't have control over and what are the services that they are receiving?
- What are the implications of that level of women's control over assets and receipt of services on their ability to enjoy sustainable, productive, profitable and resilient livelihoods?
- Does the enabling environment support positive change in favor of women in regards to their level of control over household's assets?
- What are the differences between Male Headed Households and Female Headed Households?

Other considerations

- Focus group discussions and social norms and barriers analysis can provide qualitative information and verification, regarding socio cultural and external factors (climate, pests and diseases, insecurity, input markets, prices, etc.). Further information from CARE here, IFPRI here and at FAO here.

INDICATOR 4: Months of Adequate **Household Food Provisioning (MAHFP)**

Why this indicator? What will it measure and provide information for?

Food access depends on the ability of households to obtain food from their own production, stocks, purchases, gathering, or through food transfers from relatives, members of the community, the government or donors. A household's access to food also depends on the resources available to individual household members and the steps they must take to obtain those resources, particularly exchange of other goods and services.

This indicator addresses aspects of household resilience, by providing information on the length of hungry seasons and is especially useful for families relying largely on their own food production. Consider combining with dietary diversity and either HHS or FCS to understand quantities and diversity at different times of year. Measuring the MAHFP has the advantage of capturing the combined effects of a range of interventions and strategies, such as improved agricultural production, storage, and interventions that can increase the household's purchasing power.

What Sustainable Development Goal is the indicator connected to?

SDG Goal 1
SDG Goal 2

Definitions and key terms

Household food access is defined as the ability to acquire a sufficient quality and quantity of food to meet all household members' nutritional requirements for productive lives. This indicator provides a proxy measure of household food access. Over time, the MAHFP indicator can capture changes in the household's ability to address *vulnerability* in such a way as to ensure that food is available above a

minimum level year round.

Data and information required to calculate the indicator

- Denominator: the total number of household surveyed
- Numerator: the number of households who are unable to provide adequate food supply throughout the past year to its members

Suggested method for data collection

- Manual available at: http://bit.ly/2a5CmiS
- Qualitative methods like focus group discussions and key informants interviews should supplement the quantitative data collection to provide a better understanding of underlying causes the prevailing situation.

Possible data sources

- Primary data collection: household survey
- Secondary data
- USAID FANTA project data
- FEWSNET/FAO: IPC data

Resources needed for data collection

The quantitative and qualitative data collection, storage and analysis will have to be conducted by CARE and partners (potentially including research / university partners). It needs to be included in the monitoring and evaluation plan and budgeted for.

Reporting results for this indicator: number of people for which the change happened

- Reporting Purpose: ☑Baseline ☑Progress ☑ Evaluation
- Percentage of households experiencing one or several food shortages periods over the yearly calendar

Questions for guiding the analysis and interpretation of data (explaining the how and why the change happened, and how CARE contributed to the change)

- Identify the households that were unable to adequately provide for the household for the entire year
- Identify also the households
- What is the number of months when the household did not have access to sufficient food to meet its needs?
- What do the numbers look like for the larger district/area? (Counterfactual)

Other considerations

- The data collection should take place during the period of greatest shortages (e.g.: immediately prior to harvest) and subsequent data collection must done at the same period.
- The data must collected over a 12 months recall period, starting with the current month
- The interview should applied to an adult person who has the whole or partial responsibility of food preparation in the household did have adequate food supply throughout the past year, which should be included in the tabulation of the denominator of the indicator ("total number of households") or the level of food insecurity will be overestimated.
- Focus group discussions can provide qualitative verification, especially in regards to other external factors (pests and diseases, insecurity, inputs' market instability, etc.) which could have affected the food availability/access.

INDICATOR 5: Increased adaptive capacity among households and communities dependent on small-scale food production

Why this indicator? What will it measure and provide information for?

Resilience (including to climate change and variability – as per impact indicator above) is built through improving adaptive capacity of households and communities. This indicator is thus required in order to capture and describe progress in building resilience to climate change – meeting both FNS+CCR outcome area requirement and also delivering evidence on the success of CARE's Resilience Approach.
Resilience indicators are challenging, with both proxy and process indicators commonly used but in here measurement relates to numbers of community-based adaptation approaches and/or risk reducing actions adopted – using Tracking Adaptation and Measuring Development (TAMD) (http://pubs.iied.org/pdfs/10100IIED.pdf) and other tools. CARE's Adaptation Good Practice Checklist (AGP) describes metrics and should be consulted and the CARE CBA milestones and indicators framework is applicable: http://bit.ly/29XW92W
Other guidance of use is DFID/Garama 3C: http://bit.ly/1t9xcn2 ; and the Local Adaptive Capacity (LAC) Framework (any link to this?)
This indicator should be documented at local, sub-national, national and regional scales in our programming context.

What Sustainable Development Goal is the indicator connected to?

SDG Goal 5
SDG Goal 7,
SDG Goal 13,
SDG Goal 15

Definitions and key terms

TAMD is a conceptual framework to monitor and evaluate climate change adaptation.
Measuring adaptation, adaptive capacity and resilience is complicated and they tend to be measured in terms of attributes of the system (rather than as outcomes for farms and people). Context-specificity is important – for example, a more diverse system is more adaptive in many cases (but not always; diversification should be pursued with caution).Examples of indicators used to measure adaptation and resilience include:

Social indicators

- Access to capitals (financial, human, social/political, physical, natural)
- Access to services (particularly climate information services)
- Level of skills, knowledge and access to extension on climate change
- Diversity in livelihoods and income sources
- Market access (for food, agricultural inputs and agricultural product markets)
- Gender equity (e.g. labour burden, income differences)

Biophysical indicators

- Biodiversity (e.g. species and landscape variety, nitrogen %)
- Pests/pathogens (e.g. % loss, damage rates, frequency/seasonality of attacks)
- Erosion/Soil loss (e.g. kg/ha)
- Soil quality (e.g. changes in carbon, nitrogen, soil water balance, etc.)

Economic indicators

- Income levels
- Savings and access to credit
- Land rights/tenure

- Access to insurance
- Proportion of income from climate-prone sources

Institutional indicators

- Enabling policy and regulation environment
- Incentive systems and subsidies (directed away from maladaptive practices towards resilience practices)
- Safety net schemes
  Early warning systems and disaster recovery strategies

Data and information required to calculate the indicator

- Numerator: Numbers of people (by gender) better able to build resilience to the effects of climate change and variability
- Denominator: Total number of people (by gender) affected by climate change and variability impacts

Suggested method for data collection

- TAMD manual: http://pubs.iied.org/pdfs/10100IIED.pdf
- CARE Community-Based Adaptation manual: http://bit.ly/29XW92W
- CARE (ALP) Adaptation Good Practice Checklist: link?
- DFID/Garama 3C manual: http://bit.ly/1t9xcn2
- ACCRA Local Adaptive Capacity Framework (LAC): http://careclimatechange.org/files/adaptation/ACCRA%20Local_Adaptive%20Policy.pdf
- Qualitative methods (focus group discussions and key informants interviews, etc.) and thematic impact studies should supplement quantitative data collection.

Possible data sources

- Primary data collection: household survey
- Secondary data
- National and local adaptation plans and data
- CVCAs (or other vulnerability analyses such as social norms and barriers analysis – these will contain baseline data).

Resources needed for data collection

The quantitative and qualitative data collection, storage and analysis will have to be conducted by CARE and partners (potentially including research / university partners). It needs to be included in the monitoring and evaluation plan and budgeted for.

Reporting results for this indicator: number of people for which the change happened

- Reporting Purpose: ☑Baseline ☑Progress ☑ Evaluation
- Risk management capacity levels in both soft forms (institutions, committees, tasks forces, etc.) and hard infrastructures (bridges, basins, dams, protection walls, etc.)
- Changes in understanding of climate risks amongst populations and key stakeholders
- Number of communities with community-based adaptation plans of action or with disaster risk management plans
- Level of adoption (number of households) of sustainable agricultural and natural resource management practices (e.g. conservation agriculture, water-smart agriculture, safe and fuel efficient energy sources, agroforestry etc. Link to indicator 1.)

Questions for guiding the analysis and interpretation of data (explaining the how and why the change happened, and how CARE contributed to the change)

- How are supported households and communities better able to adapt climate change and variability?
- What are the adaptation practices used by supported households and communities?
- How communities and households are prepared for anticipating and absorbing shocks?
- What actions or interventions have transformed household and communities' ability to become resilient to climate change?

Other considerations

- Focus group discussions, key informant interviews, secondary data reviews can provide qualitative verification, especially regarding other external factors (insecurity, political instability, disasters, etc.) which could have affected the implementation of adaptation plans/initiatives.
- Community-Based Adaptation (CBA) is recognized as an approach to build the capacity of vulnerable communities and people to adapt to the impacts of climate change. The approach is grounded in good development practice, focusing on sustainable livelihoods, attention to differences within communities of impacts and adaptive capacities, integrating rights-based approaches, and addressing gender inequality and marginalization to ensure that the most vulnerable groups and people are able to adapt.

CI FNS Domain 2 – Nutrition

Indicator 1: Wasting – Moderate and severe: Percentage of children aged 0–59 months who are below minus two standard deviations from median weight-for-height (WHZ < -2SD) of the WHO Child Growth Standard

Why this indicator? What will it measure and provide information for?

Wasting or thinness indicates in most cases a recent and severe process of weight loss, which is often associated with acute starvation and/or severe disease and is strongly correlated with under-5 mortality. However, wasting may also be the result of a chronic unfavorable condition. Provided there is no severe food shortage, the prevalence of wasting is usually below 5%, even in poor countries.
If possible, measurements (height, weight, age) are generally taken at the same time. Hence, data for the stunting indicator (height-for-age) will also be collected.

What Sustainable Development Goal is the indicator connected to?

SDG 2: "End hunger, achieve food security and improved nutrition, and promote sustainable agriculture 2.1 by 2030 end hunger and ensure access by all people, in particular the poor and people in vulnerable situations including infants, to safe, nutritious and sufficient food all year round. 2.2 by 2030 end all forms of malnutrition, including achieving by 2025 the internationally agreed targets on stunting and wasting in children under five years of age, and address the nutritional needs of adolescent girls, pregnant and lactating women, and older persons".

Definitions and key terms

Underweight: weight for age < –2 standard deviations (SD) of the WHO Child Growth Standards median
Stunting: height for age < –2 SD of the WHO Child Growth Standards median
Wasting: weight for height < –2 SD of the WHO Child Growth Standards median
Overweight: weight for height > +2 SD of the WHO Child Growth Standards median

Data and information required to calculate the indicator

- Numerator: a) number of children under five under moderate wasting and b) number of children under five under severe wasting
- Denominator: Total number of children under 5 surveyed
- Disaggregation: geographical area and sex

Suggested method for data collection

- User Manuals:
  - FANTA project (for method): http://www.fantaproject.org/tools/anthropometry-guide
  - WHO (for interpretation): http://www.who.int/nutrition/nlis_interpretation_guide.pdf
  - WHO: http://www.who.int/childgrowth/software/en/
  - WHO: http://www.who.int/childgrowth/standards/weight_for_length_height/en/
  - UNICEF: http://data.unicef.org/resources/child-nutrition-interactive-dashboard-2015-edition.html#

Possible data sources

- Household survey
- Local, sub-national, national or regional nutritional surveys
- WHO regional or global nutritional data
- UNICEF regional and global nutritional data

Resources needed for data collection

The quantitative and qualitative data collection, storage and analysis will have to be conducted by CARE

and partners (potentially including research / university partners). It needs to be included in the monitoring and evaluation plan and budgeted for.

Reporting results for this indicator: number of people for which the change happened

- Reporting Purpose: ☑Baseline ☑Progress ☑ Evaluation
- The percentage and rate of children under five under moderate or severe wasting

Questions for guiding the analysis and interpretation of data (explaining the how and why the change happened, and how CARE contributed to the change)

- What is level of wasting amongst children under five year?
- What are the underlying causes of the deteriorated nutrition?
- How are boys and girls impacted differently?
- This indicator provides information about the quality of food provision and of child care practices.

Other considerations

- Focus group discussions can provide qualitative verification, especially in regards to other external factors (insecurity, political instability, disasters, fail crops, diseases outbreak, market's inflation, etc.) which could have affected food availability, access and utilization or hygiene, sanitation and health conditions.

Indicator 2: Proportion of children 6–23 months of age who receive a minimum acceptable diet (MAD) (apart from breast milk)

Why this indicator? What will it measure and provide information for?

This indicator measures the proportion of children 6-23 months of age who receive a minimum acceptable diet (MAD), apart from breast milk. The "minimum acceptable diet" indicator measures both the minimum feeding frequency and minimum dietary diversity, as appropriate for various age groups. If a child meets the minimum feeding frequency and minimum dietary diversity for their age group and breastfeeding status, then they are considered to receive a minimum acceptable diet.

It is recommended that the indicator be further disaggregated and reported for the following age groups: 6–11 months, 12–17 months and 18–23 months of age, if sample size permits.

This indicator is primarily used for:

- *assessing*: to make national and sub-national comparisons and to describe trends over time;
- *targeting*: to identify populations at risk, target interventions, and make policy decisions about resource allocation;
- *monitoring and evaluating*: to monitor progress in achieving projects' goals and to evaluate the impact of interventions;

What Sustainable Development Goal is the indicator connected to?

SDG Goal 2.1.
SDG Goal 2.2.

Definitions and key terms

This indicator measures the proportion of children 6-23 months of age who receive a minimum acceptable diet (MAD), apart from breast milk.

Data and information required to calculate the indicator

- Numerator: Number of children 6-23 months who receive a minimum acceptable diet
- Denominator: Total number of children 6-23 months surveyed

Suggested method for data collection

- WHO (for method): http://bit.ly/2a6p18G
- WHO (for definitions): http://bit.ly/29Ly64V

Possible data sources

- Household survey

- Demographic and Health Survey (DHS) is implemented every 5 years
- WHO regional or global nutritional data
- UNICEF regional and global nutritional data

Resources needed for data collection

The quantitative and qualitative data collection, storage and analysis will have to be conducted by CARE and partners (potentially including research / university partners). It needs to be included in the monitoring and evaluation plan and budgeted for.

Reporting results for this indicator: number of people for which the change happened

- Reporting Purpose: ☑Baseline ☑Progress ☑ Evaluation
- A Change in the number/percentage of children 6–23 months who receive a minimum acceptable diet (apart from breast milk)

Questions for guiding the analysis and interpretation of data (explaining the how and why the change happened, and how CARE contributed to the change)

- Breastfed children 6-23 months of age who had at least the minimum dietary diversity and the minimum meal frequency during the previous day?
- Breastfed children 6-23 months of age?
- Non-breastfed children 6-23 months of age who received at least 2 milk feedings and had at least the minimum dietary diversity not including milk feeds and the minimum meal frequency during the previous day?
- Non-breastfed children 6-23 months of age?

Other considerations

- Focus group discussions can provide qualitative verification, especially in regards to other external factors (insecurity, political instability, disasters, fail crops, diseases outbreak, market's inflation, etc.) which could have affected food availability, access and utilization or hygiene, sanitation and health conditions.
- DHS surveys are not conducted annually in any specific country, so data may not be available at the optimal intervals for evaluation.

Indicator 3: Percentage of women (15-49 years) who consume at least 5 out of 10 defined food groups (Minimum Dietary Diversity – Women)

Why this indicator? What will it measure and provide information for?

MDD-W is outcome focused and is promoted by USAID and FAO. It focuses on dietary diversity and quality. Lack of dietary diversity has been shown to be a crucial issue, particularly in the developing world where diets consist mainly of starchy staples with less access to nutrient-rich sources of food such as animal protein, fruits and vegetables. Women and children are particularly vulnerable to ill effects.
This indicator tracks dietary diversity, a vital element of diet quality, by measuring the consumption of a variety of foods across and within food groups, and across different varieties of specific foods, to ensure adequate intake of essential nutrients and important non-nutrient factors. Research has demonstrated a strong association between dietary diversity and diet quality, and nutritional status of children.
This indicator complements the "Minimum Dietary Diversity" (MDD) indicator previously defined for infants and young children; see: WHO. 2008. Indicators for assessing infant and young child feeding
Indicator should be linked to other household dietary diversity scores (HDDS) and can be used as a proxy to describe women's diet quality (micronutrient adequacy) at national and sub-national levels.

What Sustainable Development Goal is the indicator connected to?

SDG Goal 2.1

Definitions and key terms

MDD-W is the acronym for "**Minimum Dietary Diversity-Women**." MDD-W is a dichotomous indicator of

whether or not **women** 15-49 years of age have consumed at least five out of ten **defined** food groups the previous day or night.

Data and information required to calculate the indicator

- Numerator: Number of surveyed women 15-49 years of age have consumed at least five out of ten defined food groups the previous day or night
- Denominator: Total number of children 6-23 months surveyed

Suggested method for data collection

- FAO (for method): http://www.fao.org/3/a-i5486e.pdf
- WHO (for definition): http://whqlibdoc.who.int/publications/2008/9789241596664_eng.pdf

Possible data sources

- Household survey
- Demographic and Health Survey (DHS) is implemented every 5 years
- WHO regional or global nutritional data
- UNICEF regional and global nutritional data

Resources needed for data collection

The quantitative and qualitative data collection, storage and analysis will have to be conducted by CARE and partners (potentially including research / university partners). It needs to be included in the monitoring and evaluation plan and budgeted for.

Reporting results for this indicator: number of people for which the change happened

- Reporting Purpose: ☑Baseline ☑Progress ☑ Evaluation
- Changes in the quality of the diet of women 15-49 years of age

Questions for guiding the analysis and interpretation of data (explaining the how and why the change happened, and how CARE contributed to the change)

- Numerator: What is the number of women (15-49 years) leaving in the project area who consume at least 5 out of 10 defined food groups?
- Denominator: what is the number of women (15-49 years) leaving in the project area?
- This indicator can help assess progress (success or failure) against food diversity activities targeting specifically women 15-49 years of age.

Other considerations

- Focus group discussions can provide qualitative verification, especially in regards to other external factors (insecurity, political instability, disasters, fail crops, diseases outbreak, market's inflation, etc.) which could have affected food availability, access and utilization or hygiene, sanitation and health conditions.
- The data collection for this indicator should be carried out at the same period of the year considering the food access and availability seasonality in low income and developing countries which can compromise data quality.

Indicator 4: Percentage of women of reproductive age (15-49 years) with anemia
Percentage of children 6-23 months/ 6-59 months with anemia

Why this indicator? What will it measure and provide information for?

Anemia is associated with increased morbidity and mortality for children and women, and reduced work output among adults. Micronutrient deficiencies are especially devastating to pregnant women and children, as deficiencies during the first 1000 days can have lifelong effects on physical, mental, and emotional development. Anemia is a multi- factorial disorder caused mainly by iron deficiency and infections and to a lesser extent by deficiencies of vitamin A, vitamin B12, folate, and riboflavin. It is estimated that half the cases of anemia are due to iron deficiency. Anemia in women of reproductive age serves as a proxy for micronutrient deficiencies in the absence of more comprehensive indicators.

What Sustainable Development Goal is the indicator connected to?

SDG Goal 2.1.
SDG Goal and 2.2.

Definitions and key terms

Anemia, according to the WHO, is a condition in which the number of red blood cells or their oxygen-carrying capacity is insufficient to meet physiologic needs, which vary by age, sex, altitude, smoking, and pregnancy status.

Data and information required to calculate the indicator

- Numerator: Numbers of women of reproductive age (15-49 years) with anemia / number of children (boys and girls) of children 6-23 months/6-59 months with anemia
- Denominator: Total number of surveyed women of reproductive age (15-49 years) / Total number of surveyed children 6-23 months/6-59 months

Suggested method for data collection

- WHO: http://bit.ly/29NlVEN
- WHO: http://www.who.int/vmnis/indicators/haemoglobin.pdf

Possible data sources

- Household survey
- Data from clinics/health centers
- Demographic and Health Survey (DHS) is implemented every 5 years

Resources needed for data collection

The quantitative and qualitative data collection, storage and analysis will have to be conducted by CARE and partners (potentially including research / university partners). It needs to be included in the monitoring and evaluation plan and budgeted for.

Reporting results for this indicator: number of people for which the change happened

- Reporting Purpose: ☑Baseline ☑Progress ☑ Evaluation
- Changes in percentage of anemia amongst women of reproductive age and children of 6-23 months/6-59 months

Questions for guiding the analysis and interpretation of data (explaining the how and why the change happened, and how CARE contributed to the change)

- Denominator: What is the number of women (15-49 years) and children 96-23 months & 6-59 months) leaving in the project area?
- Numerator: What is the number of women (15-49 years) and children 96-23 months & 6-59 months) leaving in the project area diagnosed with anemia?
- This indicator can help assess progress (success or failure) against nutrition activities targeting specifically women of reproductive (15-49 years) and children of children 6-23 months/6-59 months

Other considerations

- Focus group discussions can provide qualitative verification, especially in regards to other external factors (insecurity, political instability, disasters, fail crops, diseases outbreak, market's inflation, etc.) which could have affected food availability, access and utilization or hygiene, sanitation and health conditions.
- The data collection for this indicator should be carried out at the same period of the year considering the food access and availability seasonality in low income and developing countries that may influence the prevalence of anemia amongst the targeted populations.

Indicator 5: Exclusive breastfeeding under 6 months: Proportion of infants 0–5 months of age who are fed exclusively with breast milk

Why this indicator? What will it measure and provide information for?

Breastfed children have at least a six-times greater chance of survival in the early months than non-breastfed children. An exclusively breastfed child is 14 times less likely to die in the first six months of life than a non-breastfed child, and breastfeeding drastically reduces deaths from acute respiratory infection and diarrhea, two major child killers.

The potential impact of optimal breastfeeding practices is especially important in developing country situations with a high burden of disease and low access to clean water and sanitation. Exclusive breastfeeding also has a protective effect against obesity and certain non-communicable diseases later in life.

It is recommended that the indicator be further disaggregated and reported for the following age-groups: 0–1 month, 2–3 months, 4–5??? months and 0–3 months.

What Sustainable Development Goal is the indicator connected to?

SDG Goal 2.1.

SDG Goal 2.2.

Definitions and key terms

Exclusive breastfeeding: is defined as no other food or drink, not even water, except breast milk (including milk expressed or from a wet nurse) for 6 months of life, but allows the infant to receive ORS, drops and syrups (vitamins, minerals and medicines).

Data and information required to calculate the indicator

- Numerator: infants (girls and boys) 0-5+wk?? months of age who received only breast milk during the previous day
- Denominator: infants 0-5+wk?? months of age

Suggested method for data collection

- WHO (for method): http://bit.ly/2a6p18G
- WHO (for definitions): http://bit.ly/2a6p18G

Possible data sources

- Household survey
- Nutrition centers
- Demographic and Health Survey (DHS) is implemented every 5 years

Resources needed for data collection

The quantitative and qualitative data collection, storage and analysis will have to be conducted by CARE and partners (potentially including research / university partners). It needs to be included in the monitoring and evaluation plan and budgeted for.

Reporting results for this indicator: number of people for which the change happened

- Reporting Purpose: ☑Baseline ☑Progress ☑ Evaluation
- A change in the number/percentage of children (girls and boys) who are exclusively breastfed.

Questions for guiding the analysis and interpretation of data (explaining the how and why the change happened, and how CARE contributed to the change)

- What is the total number of children (girls and boys) under 5 months leaving the project area?
- What is the total number of these children (girls and boys) who are exclusively breastfed?
- This indicator provides a measure of changes in children under 6 months exclusive breastfeeding and contributes to documenting the success of failure of the actions taken to improve the adoption of children under 6 months best feeding practices and more broadly best children care practices

Other considerations

- Focus group discussions can provide qualitative verification, especially in regards to other external factors (insecurity, political instability, disasters, fail crops, diseases outbreak, market's inflation,

etc.) which could have affected food availability, access and utilization or hygiene, sanitation and health conditions.

- The data collection for this indicator should be carried out at the same period of the year considering the food access and availability seasonality in low income and developing countries that may influence the breastfeeding women nutrition status and ability to exclusively breastfeed their child.

Indicator 6: MUAC for children 5-59 months and women of reproductive age 15-49 years

Why this indicator? What will it measure and provide information for?

The MUAC is usually used by humanitarian health workers to screen and assess for acute malnutrition among children (5-59 months) and women of reproductive age (15-49 years).

At the individual level, MUAC can be used to initially screen individuals for admission to selective feeding programs or therapeutic nutrition care. For pregnant women of any age BMI is an inadequate nutritional index and MUAC is recommended. At the population level, it is recommended that MUAC information is collected in nutrition surveys for use in program planning, but that MUAC should not be used as the single measure in anthropometric surveys. Research is underway to determine appropriateness of using MUAC to estimate population level nutrition status.

Excerpt from HTP, module 6: MUAC has been successfully used with low-skilled staff given training and supervisory support, and is especially suitable for use in the community. It does not require heavy material and can be used with a single cut-off for boys and girls. It is increasingly being incorporated into guidelines for the treatment of severe and moderate malnutrition. However, there are drawbacks to using MUAC in emergencies. The chance of inaccurate measurement is high due to differing techniques, and there is limited evidence documenting ethnic differences in MUAC measurements.

What Sustainable Development Goal is the indicator connected to?

No SDG Indicator

Definitions and key terms

Mid-Upper Arm Circumference (MUAC) is the **circumference** of the **left upper arm**, measured at the **mid**-point between the tip of the **shoulder** and the tip of the elbow (olecranon process and the acromium).

Data and information required to calculate the indicator

- Numerator: children 5-59 months and women of reproductive age 15-49 years with diagnosed severe and moderate malnutrition
- Denominator: children 5-59 months and women of reproductive age 15-49 years surveyed

Suggested method for data collection

- FANTA Project (for method): http://bit.ly/2abA2IC
- WHO (for definition & method): http://bit.ly/2a0TLIY
- UN SCN (for method): http://www.unscn.org/en/gnc_htp/modul.php?modID=27

Possible data sources

- Household survey
- Nutrition/health centers
- Demographic and Health Survey (DHS) is implemented every 5 years

Resources needed for data collection

The quantitative and qualitative data collection, storage and analysis will have to be conducted by CARE and partners (potentially including research / university partners). It needs to be included in the monitoring and evaluation plan and budgeted for.

Reporting results for this indicator: number of people for which the change happened

- Reporting Purpose: ☑Baseline ☑Progress ☑ Evaluation
- A change in the number/percentage of children (girls and boys) and women of reproductive age

suffering from acute malnutrition
Questions for guiding the analysis and interpretation of data (explaining the how and why the change happened, and how CARE contributed to the change) • This indicator provides a measure of changes in acute malnutrition amongst children 5-59 months and women of reproductive age 15-49 years and contributes to documenting the success of failure of the actions taken to improve children under five and women or reproductive health nutrition status
Other considerations • MUAC is not the best index for use in nutrition assessment surveys as it does not for example tell if children are chronically malnourished, and as in some areas, chronic malnutrition may be more important than acute malnutrition; this methodology may represent an important limit to the study carried out. Therefore, it is highly suggested to use (when possible) the weight-for-height tool for measuring acute malnutrition instead of the MUAC.

CI FNS Domain 3 - Sustainable economies

Indicator 1: % increase in income compared to baseline for HH and/or impact population
Why this indicator? What will it measure and provide information for? Income is an important pathway for food and nutrition security as well as for resilience to financial shocks or disaster. Increased income is assume to have a positive impact on all livelihoods components (assumptions will need to be tested and spending of additional income will vary depending on HH priority). As much as possible, this indicator should be analyzed against the minimum leaving wage for capturing also poverty levels.
What Sustainable Development Goal is the indicator connected to? SDG Goal 1 SDG Goal8
Definitions and key terms • Income: weekly income of entire family combined • Livelihoods: sources of income • HH Active member(s): who earns ~~urns~~ an income at HH level?
Data and information required to calculate the indicator • Numerator: income assessed among total sample at 2nd data point • Denominator: income assessed among total sample at 1st data point
Suggested method for data collection • Annual survey by CARE or CARE implementing partners
Possible data sources • Project household survey data
Resources needed for data collection The quantitative and qualitative data collection will have to be conducted by CARE and partners. It needs to be included in the monitoring and evaluation plan and budgeted for.
Reporting results for this indicator: number of people for which the change happened • Reporting Purpose: ☑Baseline ☑Progress ☑ Evaluation • A change in total income at household level (for both male and female headed household) • Livelihoods diversification level (sources of income), which can also inform on the household resilience status
Questions for guiding the analysis and interpretation of data (explaining the how and why the change happened, and how CARE contributed to the change) • This indicator provides a measure of change in household income and contributes to documenting the level of success or failure of the actions taken to promote sustainable economies for project participants and their communities. • What are the income trends (increase/decrease/unchanged) in the project area? • Who (male/female) earns more? • What are the main livelihoods of project male and female participants in project area? • To what extent the implemented activities and adopted methodologies were successful in improving HH's income? • To what extent the implemented projects were able to increase female headed and male headed households' income towards living wage?

Other considerations

- Need to consider seasonal fluctuation in income;
- Groups of income;
- Needs to consider some religious/cultural events that may influence income;
- Need to consider dignified working conditions, including child labor; income could increase due to longer working hours, resulting in unsafe working practice or other kinds of exploitation.
- Should be analyzed and compared with asset or household expenditure (proxy-indicators), where possible

Indicator 2: Total amount of savings made by impact population

Why this indicator? What will it measure and provide information for?

Access to financial services is a decisive factor in eliminating poverty and generating local development. Informal saving is a corner stone of community social safety net and social entrepreneurship promotion, especially amongst poor women. The group saving also offers a safe and convenient space for women to discuss and raise their voices on issues of concern in their communities. Informal saving groups are self-managed, don't receive any external funding and provide to their members a safe place to save their money, to access loans and to obtain emergency insurance. Thus they contribute also to reinforcing women leadership and positioning them as key members of their community development mechanisms.

This is important given our reliance on informal savings (re-VSLA) in many of our programs.

What Sustainable Development Goal is the indicator connected to?

SDG Goal 1

Definitions and key terms

A Village Savings and Loan Association (VSLA) is a group of people who save together and take small loans from those savings. The activities of the group run in cycles of one year, after which the accumulated savings and the loan profits are distributed back to members. The purpose of a VSLA is to provide simple savings and loan facilities in a community that does not have easy access to formal financial services.

Data and information required to calculate the indicator

- Number of VSLA groups established
- Total membership of VSLA groups
- Total amounts of savings
- Number of supported social small scale businesses

Suggested method for data collection

Methodology would include CARE VSLA monitoring /routine monitoring and evaluation tools

- CARE VSLA functionality tool 2: link?
- CARE VSLA form: link?

Possible data sources

- Primary data: VSLA groups and members surveys
- Baseline data (pre project data)

Resources needed for data collection

The quantitative and qualitative data collection, storage and analysis will have to be conducted by CARE and partners (potentially including research / university partners). It needs to be included in the monitoring and evaluation plan and budgeted for.

Reporting results for this indicator: number of people for which the change happened

Reporting Purpose: ☑Baseline (base value) ☑Progress ☑ Evaluation

- A change in the total amount of savings achieved by informal saving groups and individual members

Questions for guiding the analysis and interpretation of data (explaining the how and why the change

happened, and how CARE contributed to the change)

- Is your household a member of an informal saving group membership?
- What is the number of active informal saving groups?
- What the total amount of savings the informal saving group has made for the most recent activity period?
- What are savings trends in your informal saving group?

Other considerations

- Recognizing the most of rural informal saving groups members livelihoods rely on productive (farming, animal husbandry or petty trade based on farm/livestock products) incomes, a particular attention needs to be paid to the seasonal fluctuation of their incomes.
- Focus group discussion can provide valuable qualitative information for better documenting the informal saving groups performances

Indicator 3: # of policies, norms and practices changes for more gender inclusive and sustainable economies

Why this indicator? What will it measure and provide information for?

CARE's vision of a just world emphasizes on promoting good governance in each of its programming sectors, by a) empowering poor people to know and act on their rights and present their interests, b) influencing those in power (public servants and politicians, traditional/faith leaders, and private sector actors) to be more responsible, responsive and accountable, and c) brokering linkages and convening spaces which enable effective and inclusive relations and negotiation between project participants and power holders.

What Sustainable Development Goal is the indicator connected to?

SDG Goal 1
SDG Goal 8

Definitions and key terms

Inclusive: economies that enable effective and meaningful participation of women, men, youth, communities and private sector and public policies design, implementation, monitoring and review
Sustainable: economies that are

Practises: effective application and use of adopted policies (as sometimes rules are set, but not effectively or appropriately applied)

Data and information required to calculate the indicator

count of changes in policies;
log of norms and practices that have changed for more inclusive and sustainable economies

Suggested method for data collection

- Log / database for policy changes
- Qualitative data collection (survey interviews) on changes in norms and practices

Possible data sources

- Annual CARE survey or survey by CARE partners on norms and behavior.
- Policy review by CARE or partners.

Resources needed for data collection

The quantitative and qualitative data collection will have to be conducted by CARE and partners. It needs to be included in the monitoring and evaluation plan and budgeted for.

Reporting results for this indicator: number of people for which the change happened

Reporting Purpose: ☑Baseline ☑Progress ☑ Evaluation

- Number policies, norms and practices changed/adopted that ensure more inclusive and

sustainable economies
- Number of male and female who effectively benefit from changed/adopted policies and practices

Questions for guiding the analysis and interpretation of data (explaining the how and why the change happened, and how CARE contributed to the change)

What changes have happened in policies, norms and practices that support a stronger economic power of women in their communities?

What changes have happened in men's attitudes towards women's economic participation and economic / financial decision making?

Other considerations

- Social norms are, in certain contexts, deeply rooted in centuries of communities' history and bringing change to these societal constructions may require long, hard and continuous long term effort. Thus, where appropriate proxy indicators should be used for documenting project impacts.

Indicator 4: # of sustainable enterprises supported contributing to FNS&CR outcomes

Why this indicator? What will it measure and provide information for?

Ending poverty can't be achieved without a local development environment which ensures a stable and competitive improved production, and increased service provision and market access opportunities, equally for men, women and youth. Markets, must work with and for the poorest in order to ensure productive and profitable livelihoods that can help end poverty.

This is to encourage the use of a market based mechanism to sustain our work in development.

What Sustainable Development Goal is the indicator connected to?

SDG Goal 1

SDG Goal 8

Definitions and key terms

Sustainable: [From an economic point of view, you might want to define it depending on what stage the business is in: pre start up, start up, profitable business etc. For a mature business, sustainability includes financial viability (ratio profit/operating costs) and sustained profitability (trend of profit and growth), but for a start-up, you might want to look at growth rate, equity, ratio investment/profit, business plan/strategy in place, ratio profit/operating costs]. Relevant skills of entrepreneur and her/his perception about future viability and vision for growth business development are useful indicators, too.]

Enterprise: [CARE supports a variety of enterprises, but primarily micro enterprises or subsistence enterprise (starting with one entrepreneur doing something in addition to household chores or other work). So, maybe refer to that, but include larger ones as well).

Data and information required to calculate the indicator

- Survey data collected by CARE or CARE partners annually, broken down by sex

Suggested method for data collection

- Survey among supported entrepreneurs annually

Possible data sources

- Survey data and statistical data from community, municipal and national level
- Supported entrepreneurs surveys databases, broken down by sex

Resources needed for data collection

The quantitative and qualitative data collection will have to be conducted by CARE and partners. It needs to be included in the monitoring and evaluation plan and budgeted for.

Reporting results for this indicator: number of people for which the change happened

Reporting Purpose: ☑Baseline ☑Progress ☑ Evaluation

Number of new effective enterprises created or effective enterprises supported

[effective = annual increase in profitability; enterprise improving practices as a result of business development, of

micro/small/medium enterprises diversified).

Number of new sustainable enterprises created [contributing to FNS&CR outcomes[3]]

Number of sustainable enterprises supported [contributing to FNS&CR outcomes]

[sustainable start up = annual growth rate, equity, ratio investment/profit, business plan/strategy in place, ratio profit/operating costs; sustainable scale up business = monthly trend in customers (churn rate), financial viability (ratio profit/operating costs) and sustained profitability (trend of profit and growth), growth rate[expected to rise sharply]; evidence of testing and revision approach or product;
sustainable business = financial viability and sustained profitability, growth rate [expected to saturate]; evidence of testing and revision approach or product]

Female entrepreneurs have relevant skills to run business profitable

Questions for guiding the analysis and interpretation of data (explaining the how and why the change happened, and how CARE contributed to the change)

- Do you run a micro-enterprise?
- Is your micro-enterprise annually growing and profitable?
- Do you have a business plan/strategy for your enterprise?
- Is your customers' base growing annually?
- Are your annual sales growing?

Other considerations

-

Indicator 5: # of new employment created for impact population (women, youth)
Why this indicator? What will it measure and provide information for? Employment can be self-employment, informal or formal employment with wages. This helps to emphasize employment creation in addition to micro and small enterprise development.
What Sustainable Development Goal is the indicator connected to? SDG Goal 1 and 8
Definitions and key terms Employment: temporary? Or do we want to prescribe minimum time?
Data and information required to calculate the indicator -
Suggested method for data collection - Survey among representative sample of target group annually
Possible data sources survey data
Resources needed for data collection The quantitative and qualitative data collection will have to be conducted by CARE and partners. It needs to be included in the monitoring and evaluation plan and budgeted for.
Reporting results for this indicator: number of people for which the change happened -
Questions for guiding the analysis and interpretation of data (explaining the how and why the change happened, and how CARE contributed to the change)

[3] FNS indicator for 'Sustainable Economies'.

-

Other considerations

-

Indicator 6: % adults actively using a financial service (formal and informal, including a mobile money service) in the past 12 months

Why this indicator? What will it measure and provide information for?

This indicator is relevant for financial inclusion programmes/projects which aim to ensure equal access to and use of financial services. Access to financial services allows for a better planning of the economy and the ability to invest in business. It gives people a better opportunity to deal with fluctuating incomes and provides a safety net during difficult periods. It also makes bigger loans and savings possible than what is offered by the VSLAs. It also addresses some of the safety concerns attached to having large amounts of cash at home.

What Sustainable Development Goal is the indicator connected to?

SDG 8: Inclusive and sustainable economic growth, indicator 8.10.2 (green list, Nov 2015)

Also linked to SDG 5 "Achieve gender equality and empower all women and girls" and SDG 8 "Promote sustained, inclusive and sustainable economic growth, full and productive employment and descent work for all". Yet, not actually listed amongst the SDG indicators.

Definitions and key terms

Financial services: Financial services are economic activities and services provided by the finance industry and include business, credit union, banking service, insurance, accountancy, stocks and investments. The services include savings or deposit services, payment and transfer services, credit and insurance The relevant financial services will be contexts specific. Only financial services that are considered beneficial to women should be included.

Informal financial services: Informal financial services are those that are provided outside the structure of government regulation and supervision.

Formal financial services: Formal financial service are economic services provided by financial institutions regulated and supervised by government, semi-formal financial services are not regulated by banking authorities but are usually licensed and supervised by other government agencies.

Data and information required to calculate the indicator

- Number of people that have actively used a financial service over the past 12 months
- Denominator: total number of people surveyed

Suggested method for data collection

- The relevant financial services to be measured should be discussed and agreed with representatives of the impact group. It is important that financial services considered negative or exploitative are excluded. This could be part of a gender analysis.
- The information should be collected from a representative sample of the impact group.
- The data should be collected at baseline, then followed up annually (but will depend on the country context).

Qualitative methods like focus group discussions and key informants interviews should supplement the quantitative data collection to provide a better understanding of barriers and potential negative consequences of inclusion in financial services.

Possible data sources

- Annual survey data collected by CARE or CARE partner

Resources needed for data collection

The quantitative and qualitative data collection will have to be conducted by CARE and partners. It needs to be included in the monitoring and evaluation plan and budgeted for.

Reporting results for this indicator: number of people for which the change happened

Reporting Purpose: ☑Baseline ☑Progress ☑ Evaluation

Proportion changes in the number of project participants actively using at least one formal or informal financial service:

- Numerator: Number women, men, girls and boys actively using a least one formal or informal financial service
- Denominator: Number of women, men, girls and boys supported by the project

Questions for guiding the analysis and interpretation of data (explaining the how and why the change happened, and how CARE contributed to the change)

- What is the number of project participants 9 women, men, girls and boys) who actively use informal financial services?
- What is the number of project participants (women, men, girls and boys) who actively use formal financial services? What contributed to the change in the active use of formal financial services by (women, men, girls and boys)?
- What contributed to the change in the active use of formal financial services by (women, men, girls and boys)?
- Has the overall accessibility (independent of CARE) of informal and formal financial services increased in the same period for women, men, girls and boys?
- What are the types of financial services that have seen a noticeable increase or decrease in use for women, men, girls and boys?
- From the qualitative data: What are barriers for women's and adolescent girls' use of financial services?
- Are there any negative consequences of using financial service women and adolescent girls?

What are the recommendations from women and youth (girls and boys) on the utilization of formal and informal financial services?

Other considerations

- If data about repayment rate of loans or information about women who fail to pay on time (past dues) is available, this should be added to the analysis of the data as it sheds light on the appropriateness of the levels of the loans.
- If data about the opportunities access to financial services have given to women is available, this should be added to the analysis.
- The appropriateness of the products in the market could also be considered.
- Care needs to be taken when planning and conducting data collection (quantitative and qualitative) to avoid leading questions.

CI FNS Domain 4 – Humanitarian Action

Indicator 1: Food Consumption Score (FCS)
Why this indicator? What will it measure and provide information for? Developed by WFP. Percentage of households with sufficient food consumption. Food access indicator, based on both dietary diversity, and the frequency of food groups consumed. The FCS is a score calculated using the frequency of consumption of different food groups consumed by a household during the 7 days before the survey. The FCS is used to classify the observed population into three groups (with poor, borderline and acceptable consumption).
What Sustainable Development Goal is the indicator connected to? SDG Goal 2
Definitions and key terms The Food Consumption Score (FCS) is a proxy indicator of household food security based on the **weighted frequency** (no. of days in a week) of intake of 8 different **food groups**
Data and information required to calculate the indicator • Numerator: the number/percentage of people with poor, borderline or acceptable FCS index • Denominator: The total number of surveyed people
Suggested method for data collection • WFP (for method): http://documents.wfp.org/stellent/groups/public/documents/manual_guide_proced/wfp197216.pdf
Possible data sources • Primary data collection: project household surveys • Secondary data • Local/national/regional food security assessments
Resources needed for data collection The quantitative and qualitative data collection, storage and analysis will have to be conducted by CARE and partners (potentially including research / university partners). It needs to be included in the monitoring and evaluation plan and budgeted for.
Reporting results for this indicator: number of people for which the change happened • Reporting Purpose: ☑Baseline ☑Progress ☑ Evaluation • Baseline: How have food consumption patterns changed as a result of the crisis? • Progress: Measuring results attributable to projects that aim to improve access to food? • Evaluation: Measuring the impact of projects in improving food access
Questions for guiding the analysis and interpretation of data (explaining the how and why the change happened, and how CARE contributed to the change) • What food items did you eat during the last 7 days? • How many times a day did you eat each of them during in your household during the last 7 days? • Listed food items should be classified by food group and the appropriate ranking applied (please refer to the tool guidance notes) • This indicator provides information on the frequency and diversity consumed food by people in specific geographical area and ultimately the quality of their diet
Other considerations • Food access can be affected by several factors such as insecurity, markets' functionality, poverty,

social discrimination. Thus, qualitative data collection is highly recommended to triangulate FCS score findings
- Also, food availability and access is highly seasonal in developing countries, and more pronounced in fragile states. Therefore, it is highly recommended to carry diachronic FCS assessments during the same period of the year to allow data relevant data comparison over a period of time
- The FCS does not consider foods consumed outside of the household;
- It does not provide any information on intra-household food distribution;
- It does not provide any information on intra-household food distribution;
- By collecting data on the number of days each food item was consumed in the last 7 days, it makes it impossible to consider quantity of food eaten;
- By using a seven day recall period, it provides a short term picture of food security irrespective of seasonality.

Indicator 2: Household Dietary Diversity Score (HDDS)

Why this indicator? What will it measure and provide information for?

Used by WFP and FAO for food security assessments in emergencies the Household Dietary Diversity Score is a qualitative measure of food consumption that reflects household access to a variety of foods, and is also a proxy for nutrient adequacy of the diet of individuals. The dietary diversity questionnaire represents a rapid, user-friendly and easily administered low-cost assessment tool. Scoring and analysis of the information collected with the questionnaire is straightforward. It focuses on energy and micro-nutrients. The HDDS is often used to measure dietary diversity of children and adult women. It is the simple sum of the number of food groups (from 0 to 12) consumed at household level, based on a 24h recall.

What Sustainable Development Goal is the indicator connected to?

SDG Goal 2

Definitions and key terms

Household dietary diversity, defined as the number of unique foods consumed by household members over a given period (24h recall).

Data and information required to calculate the indicator

- Food consumption patterns before the crisis in the specific cultural, social and economic context of the affected area/community
- Food consumption patterns changes as the result of the crisis
- Sex disaggregation: women and male

Suggested method for data collection

- Primary data collection: household survey
- Secondary data analysis.
- For more information: http://www.fao.org/docrep/014/i1983e/i1983e00.pdf
- Qualitative methods like focus group discussions and key informants interviews should supplement the quantitative data collection to provide a better understanding of barriers to food access.

Possible data sources

- Primary data collection: household survey
- Secondary data analysis.
- Food Security surveillance / early warning systems: IPC, cadre harmonisé, etc.
- Qualitative methods like focus group discussions and key informants interviews should supplement the quantitative data collection to provide a better understanding of barriers to food access.

Resources needed for data collection

The quantitative and qualitative data collection, storage and analysis will have to be conducted by CARE and partners (potentially including research / university partners). It needs to be included in the monitoring and evaluation plan and budgeted for.

Reporting results for this indicator: number of people for which the change happened

- Changes in food consumption patterns, especially the increase in the frequency and diversity of consumed food groups

Questions for guiding the analysis and interpretation of data (explaining the how and why the change happened, and how CARE contributed to the change)

- Baseline: How have food consumption patterns changed as a result of the crisis? How were food consumption patterns before the crisis?
- Progress: What are changes in food consumption patterns that are attributable to projects that aim to improve access to food?
- Evaluation: How projects have contributed to improving diversified food access in supported communities?

Other considerations

- Food access can be affected by several factors such as insecurity, markets' functionality, poverty, social discrimination. Thus, qualitative data collection is highly recommended to triangulate FCS score findings
- Also, food availability and access is highly seasonal in developing countries, and more pronounced in fragile states. Therefore, it is highly recommended to carry diachronic FCS assessments during the same period of the year to allow data relevant data comparison over a period of time

Indicator 3: Coping strategies Index (household asset base and coping ability)

Why this indicator? What will it measure and provide information for?

Developed by WFP and CARE, the Coping Strategies Index (CSI) is an indicator of household food security that is relatively simple and quick to use, straightforward to understand, and correlates well with more complex measures of food security.

Indeed, affected households may use coping strategies to deal with a reduced ability to access food. Understanding the extent to which coping strategies are used can provide a quick indication of the level of food insecurity which is immediately useful for programmatic decision-making. Coping strategies can also be used to measure the /results impact of humanitarian assistance which can be assessed through several indicators, including the reduced Coping Strategy Index, the Household Hunger Scale or similar hunger experience indicator.

The CSI measures behavior change: the things that people do when they cannot access enough food. There are a number of fairly regular behavioral responses to food insecurity - or coping strategies - that people use to manage household food shortage. These coping strategies are easy to observe. It is quicker, simpler, and cheaper to collect information on coping strategies than on actual household food consumption levels.

What Sustainable Development Goal is the indicator connected to?

SDG Goal 2

Definitions and key terms

The **Coping Strategies Index** (CSI) is a tool that measures what people do when they cannot access enough food.

Data and information required to calculate the indicator

- Behaviors applied to cover food and non-food items prior to the crisis under social, cultural, natural and economic context of the affected community/area

- Behaviors applied to cover food and non-food items prior to the crisis under social, cultural, natural and economic context of the affected community/area as a result of a crisis

Suggested method for data collection

- Primary data collection: household survey
- Secondary data analysis.
- For more information WFP: http://bit.ly/12WYbdi
- Qualitative methods like focus group discussions and key informants interviews should supplement the quantitative data collection to provide a better understanding of barriers to food access.

Possible data sources

- Primary data collection: household survey
- Secondary data analysis.
- Food Security surveillance / early warning systems: IPC, cadre harmonisé, etc.
- Qualitative methods like focus group discussions and key informants interviews should supplement the quantitative data collection to provide a better understanding of barriers to food access.

Resources needed for data collection

The quantitative and qualitative data collection, storage and analysis will have to be conducted by CARE and partners (potentially including research / university partners). It needs to be included in the monitoring and evaluation plan and budgeted for.

Reporting results for this indicator: number of people for which the change happened

- Changes in behavior to cover food and non-food items, especially the decrease in the use of *negative or non-reversible* coping strategies as result of a humanitarian assistance

Questions for guiding the analysis and interpretation of data (explaining the how and why the change happened, and how CARE contributed to the change)

- Reporting Purpose: ☑ Baseline ☑ Progress ☑ Evaluation
- Baseline: what were the behaviors applied to cover food and non-food items gaps before the crisis? What are behaviors applied to cover food and non-food items gaps as a result of the crisis?
- Progress: Have pre-crises behaviors change re-established?
- Evaluation: Has provided humanitarian assistance triggered a decrease in the use of "negative or non-reversible" coping strategies?

Other considerations

- Food access can be affected by several factors such as insecurity, markets' functionality, poverty, social discrimination. Thus, qualitative data collection is highly recommended to triangulate FCS score findings
- Also, food availability and access is highly seasonal in developing countries, and more pronounced in fragile states. Therefore, it is highly recommended to carry diachronic FCS assessments during the same period of the year to allow data relevant data comparison over a period of time

Indicator 4: Livelihood Protection Deficit

Why this indicator? What will it measure and provide information for?

This indicator uses the household economy approach (HEA) methodology to determine households' survival and livelihoods protection thresholds and with shocks, their ability to meet their needs, using their coping strategies, as per the baseline. People's ability to gain access to enough food, rather than only their ability to produce it themselves, determines their level of food security. The Household Economy Approach is a livelihoods-based framework for analyzing the way people obtain access to the things they need to survive and prosper.

Reporting Purpose: ☑ Baseline ☑ Progress ☑ Evaluation

What Sustainable Development Goal is the indicator connected to?

SDG Goal 1
SDG Goal 2

Definitions and key terms

A **livelihood protection deficit** means that total resources are insufficient to cover both livelihood expenditures and survival costs. Households may have enough to meet their survival needs but income is insufficient to pay for necessary livelihood inputs as well as school fees and medicine.

Data and information required to calculate the indicator

-

Suggested method for data collection

-

Possible data sources

-

Resources needed for data collection

Reporting results for this indicator: number of people for which the change happened

- Change in expenditure patterns in % terms, especially on items such as food, health, education, housing, transportation, clothing fuel and water among others.
- Change in % share devoted to food is a proxy of food insecurity. When a HH spend more than 75% of its resources on food other essential expenses have to be cut thus undermining the welfare of its individuals.

Questions for guiding the analysis and interpretation of data (explaining the how and why the change happened, and how CARE contributed to the change)

- Baseline: How did people meet their needs prior to the crisis?
- Progress: Have post-crisis levels been re-established?

Other considerations

-

Indicator 5: Quantity consumed in terms of Kcals per person per day

Why this indicator? What will it measure and provide information for?

What Sustainable Development Goal is the indicator connected to?

SDG Goal

Definitions and key terms

Data and information required to calculate the indicator

-

Suggested method for data collection

-

Possible data sources

-

Resources needed for data collection

Reporting results for this indicator: number of people for which the change happened

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Questions for guiding the analysis and interpretation of data (explaining the how and why the change happened, and how CARE contributed to the change)
•
Other considerations
•

Indicator 6: Livelihood change (strategies and Assets)
Why this indicator? What will it measure and provide information for?
What Sustainable Development Goal is the indicator connected to? SDG Goal
Definitions and key terms
Data and information required to calculate the indicator •
Suggested method for data collection •
Possible data sources -
Resources needed for data collection
Reporting results for this indicator: number of people for which the change happened •
Questions for guiding the analysis and interpretation of data (explaining the how and why the change happened, and how CARE contributed to the change) •
Other considerations •