



Measuring the impact of our work with beneficiaries and partners is not an easy process. Collecting data on service users and how their lives have changed as a result of an intervention is a lengthy and complicated process **requiring careful monitoring systems from trained development actors**. So, how can we be sure that the energy and resources on actions provided have a **positive effect** on the people they are meant to serve as well as **value for money** for the donors who are funding them?

In trying to respond to this Humanity & Inclusion has developed ScoPeO, a data collection tool to help measure outcomes of development initiatives on the quality of life (QOL) of beneficiaries who have accessed our projects and those of our partners. Based on field experience and academic knowledge, Humanity & Inclusion has designed the Score of Perceived Outcomes (ScoPeO) whereby a personal perspective on an individual's life is measured and asks the question, "How do they feel about their life now?"

Why measure "quality of life"?

Inclusion of disabled people in development and humanitarian activities is a right which has been enshrined in the UN Convention on the Rights of People with disabilities, contributing to the fulfillment of all human rights for all persons with disabilities on an equal basis with others. The fact that any intervention is effective and life changing for individuals, families and communities is implied in the 2010-2015 Millennium Development Goals (MDGs), and has to be measured. Development actors have hence come to realize that monitoring and evaluation, associated with impact evaluation plays a central role in ensuring the quality, accountability and efficiency of the development actions implemented ⁽¹⁾⁽²⁾.

Measuring quality of life of beneficiaries:

- ensures that actions are focused on reaching real and measurable results;
- proves a positive change among beneficiaries according to what makes sense to them;
- confirms the relevance of the actions implemented; and
- meets accountability requirements towards funding bodies, partners and, above all, beneficiaries.

How does Scopeo work?

The aim of the ScoPeO tool is to produce reliable data on the QOL of beneficiaries before and after the interventions⁽³⁾. Made up of **three components**: a) 'quality of life' (comprising five internationally, scientifically recognized dimensions: 'Physical and Mental Health', 'Social and Personal Relationships', 'Subjective Well-being', 'Basic Needs' and 'Material well-being'); b) 'perceived safety'; and c) 'participation in society and family life', the tool is primarily subjective in its design⁽³⁾. Taking personal perspective on an individual's life, the ScoPeO tool examines how they feel about their life and whether they feel their life has improved as a result of development interventions.

The ScoPeO Tool is free, user friendly and scientifically field tested.

Target beneficiaries are:

- Men and women;
- 18 years-old or older;
- Living with or without impairment or disability;
- Living condition: urban/ rural
- Setting: reconstruction/ post-emergency/ chronic crisis/ development.

ScoPeO integrates:

- the subjective dimension of the quality of life;
- the multidimensional aspect of the quality of life.

ScoPeO allows:

- calculation of scores before and after development interventions to measure a potential impact;
- data disaggregation according to gender, age and types of impairments to compare situations of different sub-groups.



Measuring progress in Rwanda

The ScoPeO tool is being used to measure the impact of a project promoting access to health services and community inclusion of people who have epilepsy in the Western Province of Rwanda. It is being used to measure the quality of life experienced by beneficiaries after improvements to accessing information and the strengthening of the healthcare system. Data collected has also been used by the field team to motivate other stakeholders to invest more in the fight against epilepsy.

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How can humanitarian and development actors measure impact?

Service Providers/Development agencies

- Develop an adapted and efficient system to measure the outcomes of their interventions through specific evaluation techniques, and include the collection and use of baseline and end of project data, for all projects, in order to measure a change.
- Use appropriate and reliable tools and methodologies such as ScoPeO to measure quality of life among the data collected for review as part of a project evaluation that will inform future project planning.
- Invest adequate resources (time, finance, human, know-how) to implement impact evaluation.
- Disaggregate data (by gender, age, disability and other characteristics).
- Ensure the participation of all different groups, e.g. people with disabilities and their representative organizations, in the planning, implementation, monitoring and evaluation of services.
- Share knowledge and experiences in impact evaluation to ensure lessons are learned and best practice implemented.

Donors

- Consider sustainable and measurable results as a key condition for reaching the end goals of development aid, which is to reduce inequalities and poverty.
- Dedicate appropriate share of funding of the development budget to baseline/end of project studies, M&E and learning systems and impact evaluation.
- Integrate the improvement of an individual's quality of life as an overarching goal of any project.
- Share knowledge and develop links with other development agencies using quality of life approaches.

Humanity & Inclusion is using ScoPeO to measure changes in the quality of life for survivors of 'explosive remnants of war' and disabled people in a victim assistance project in the regions of Timbuktu and Gao in Mali. As a first step, ScoPeO is used to assess the level of vulnerability of each individual, identify their priority needs and define individual action plans. ScoPeO baseline data revealed that the most problematic issues were those related to material well-being, basic needs and physical and mental health. End of project data will be collected after intervention to see what impact, if any, there has been on the quality of life of its beneficiaries.

- Support the government to ensure equal access to services and increasing societal progress that is responsive to gender, age and disability issues and other forms of inequality.

States

- Could use impact information to refine their understanding of population situation and needs, priorities and to adapt/orient policies and services provisions.
- Could consult, listen to and integrate the perceived quality of life and expressed subsequent requests from the population and their representatives as a result of data collection, particularly from the most vulnerable people, to develop a beneficiaries-centered approach.
- Should encourage gender, age and disability responsive development, e.g. supporting the data disaggregation or programming actions adapted to women and girls, and people with disabilities.
- Should measure impact of State owned actions, e.g. encouraging statistical institutes to collect and analyze data to monitor the change at national level through sample population tools.

How to measure progress?

"Raise quality of life of vulnerable people" recognized as a major development indicator.

- Legislation, policies and strategies are in favor of equal and gender & disability sensitive development.
- Development aid matches with expressed needs of the population.
- Donors calls require and fund reliable and serious impact evaluation.
- Specific attention is given to quality, efficiency and accountability during the project development and throughout implementation.

A complete set of ScoPeO tools are available:

- A practical guide;
- 2 questionnaires for data collection (baseline and end of project);
- 2 Excel matrices for data analysis (baseline and end of project);
- The coding dictionary for data entry into the database;
- Interviewer training tools.