THE POLITICS OF MONITORING AND EVALUATION
UNDER CHANGING AID MODALITIES:
TOWARDS A CONCEPTUAL FRAMEWORK AND
SELECTED FINDINGS FROM RWANDA’S HEALTH
SECTOR

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Résumé
Depuis le tournant du siècle, un changement a eu lieu dans les modalités d’aide préconisées pour les pays à faible revenu. Ce changement accorde une nouvelle importance au Suivi et Évaluation (S&E), tout en imposant simultanément un ambitieux calendrier de réformes à tous les acteurs impliqués. Un enjeu est resté sous-exploité : celui de l’importance de la politique dans le cadre du S&E. Cet article élabore un cadre conceptuel qui permet de comprendre les relations entre la politique et le S&E dans un contexte de changement des modalités d’aide, et l’applique au cas du Rwanda. En nous basant sur l’évidence empirique du secteur de la santé au Rwanda, nous élargissons l’approche technocratique du S&E et nous présentons l’influence de la politique sur les différentes dimensions de celui-ci. Le présent papier met également l’accent sur l’importance de faire appel à un S&E intelligent qui reconnaîsse l’imbrication d’un tel système dans l’environnement politique et institutionnel. Ceci pourrait permettre de fonder les débats sur des bases plus factuelles, de poser mieux les questions les plus sensibles dans le domaine de la négociation et, éventuellement, de contribuer à l’ouverture d’environnements politiques fermés.

1. INTRODUCTION

Since the turn of the century, the framework for international development cooperation has been under reconstruction. The reform agenda for donor and recipient countries set out in the 2005 Paris Declaration and taken stock of in the context of the 2008 Accra and 2011 Busan conferences centres around five core principles, namely country-ownership, results-orientation, harmonisation, alignment and mutual accountability. Aid modalities that most obviously match this evolution are sector and general budget support whereby donors support government’s policies (i.e. sector policies or national poverty reduction strategies papers, PRSPs) and directly disburse aid money in sector or national budgets. In combination with policy dialogue, technical assistance (TA) and well-aligned pilot projects, the aim is to improve sector

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1 The authors would like to thank the two anonymous referees for their comments and suggestions and Liesbeth Inberg for her valuable contributions to the study of Rwanda’s health sector M&E system, on which this article is partly based (see HOLVOET, N., INBERG, L., Stocktaking and Assessing M&E arrangements in Rwanda’s health sector: evidence from desk and field study, Antwerpen, IOB, 2011). All remaining errors are the sole responsibility of the authors.

and national policies and systems which should lead to better service delivery and increased poverty reduction on the ground.

The shift in the aid architecture both confirms and redefines the importance of monitoring and evaluation (M&E). First, increased value is attached to results orientation, iterative learning and evidence-based policy-making. Realisation of these basic principles depends upon a strong and well-functioning M&E system which delivers information on inputs, outputs, outcomes and impact. Second, not only learning but also accountability for service delivery and poverty reduction stand central in the changing aid architecture. Without independent information on implementation and progress, it is difficult to hold those responsible accountable. A third major principle is an increased role and responsibility of the national governments in managing the entire M&E system. Donors are expected to dismantle their own ‘parallel’ M&E apparatus, to increasingly rely on and align to national and sector M&E arrangements and systems.

It seems that, in response to the new approach it had been itself pushing, the international donor community is adopting an overly fragmented approach to M&E. Firstly, there remains an over-emphasis on the input side (Public Finance Management) which has over the past decade been coupled with a strong upsurge of donor-steered data collection on Millennium Development Goals (MDG). Secondly, our own 2008 and 2012 reviews of Sub-Saharan countries’ M&E systems have demonstrated that M&E is more often than not confined to ‘monitoring’ while evaluative analysis is seriously downplayed. Thirdly, our reviews have also pointed at an unbalanced focus on technocratic dimensions of recipient M&E systems, such as quality of statistical systems, quality of indicators and targets (indicatorism), at the detriment of the broader policy and systemic issues. One crucial issue that is stubbornly overlooked is that recipient M&E takes place in a socio-political and economic context in which different stakeholders have different – at times even competing – interests. This political blindness is typical of the whole PRS approach which has been criticised for “being based upon an unwarranted faith in a technocratic, depoliticised mode of governance.”

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The fact that politics are part and parcel of M&E has already long ago been acknowledged in the context of project and program evaluation. First, evaluations are supposed to feed into decision-making and reports necessarily enter the political arena. Second, evaluations implicitly make political statements about legitimacy, utility and appropriateness of projects and programs. Third, since projects are creatures of political decisions that remain subject to pressures during implementation, politics are inevitable during evaluation. The third relationship between politics and evaluation is – potentially – the most negative one, when inspired by interests that may be contrary to genuine evaluation interests. Yet, not all political aspects of evaluation are to be understood negatively. For example, for utilisation-focused evaluations the usage is the driving force. Consequently the evaluator is encouraged to tie the evaluation into the specific political context and needs of the users. All three aspects of politics and evaluation are important, but the focus in this article lies on the third aspect: the relationship between interests of different stakeholders and M&E policy and practice.

Weiss has argued that, with the broadening of the scope of programs, effects of politics of evaluation will reach the national level instead of being localised under bounded projects. One may indeed assume that the political tensions of evaluation become more prominent as one moves from projects to the sector and national level, and the number of stakeholders and the interests involved are multiplied. Killick refers in this respect to the suggestion often made that « the potential seriousness of the tensions among evidence on the one hand and preferences of politicians and incentive structures to which they are responding has been magnified by the trend within the new aid agenda for aid modalities to become more ‘macro’-based. » We suggest that on the basis of the above the way in which politics influence M&E should be high on the research agenda.

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7 WEISS, C., *op. cit*.


9 WEISS, C., *op. cit*.

While there have recently been some contributions that have pointed at the importance of taking a broader perspective on M&E\textsuperscript{11}, so far there has been no research that explicitly identifies and explores linkages between ‘politics’ and ‘M&E’ in the context of the new aid modalities. This paper aims at filling this gap through combining insights from political theory and M&E theory and practice. In doing this, we elaborate a conceptual framework that builds on the concept of Political Opportunity Structure (POS) and that helps to understand the relationships between powers and interests and various dimensions of M&E. We subsequently draw upon case-study material from Rwanda and illustrate how ‘politics’ influence various M&E dimensions. We also argue that there are ways in which ‘smart’ M&E might be used as an entry-point for advancing public debate and opening up of closed political environments.

2. POLITICS OF M&E IN A CONTEXT OF CHANGING AID MODALITIES: TOWARDS A CONCEPTUAL FRAMEWORK

The logic of the changing aid architecture puts the partner country in the driver’s seat, and this also applies to M&E. With the national government at the wheel, national power relations and interests – in short: national politics – can be expected to loom very large in all decisions that have to be taken with respect to M&E. In the following section we link a number of established concepts from political science and M&E-research into one overarching conceptual framework (see Figure 1) that we consider useful in exploring the relationships among politics and M&E in a context of changing aid modalities.

2.1. Political Opportunity Structure

The ‘Political Opportunity Structure (POS)’ (reproduced at the left-hand side of Figure 1) refers to the political context in which stakeholders operate. Initially the POS was considered a static framework of institutional variables, including stable aspects of government structure such as the administrative structures or institutional entities that could influence the position and power of stakeholders in society\textsuperscript{12}.


Figure 1. The politics of M&E: a conceptual framework

POS

Stable elements
1. Political framework (e.g. regime – e.g. parliamentary democracy or not, institutional organisation, history of conflict or not)
2. Socio-economic framework (e.g. degree of poverty, socio-economic cleavages)
3. Cultural framework (e.g. traditions of strong civil society or not)

Volatile elements
1. Political decisions (e.g. procedures of decision taking, change in power relations, strong political figure, respect for human rights, outburst of conflict)
2. Socio-economic changes (draught, harvest, retreat of donor assistance, social tensions, discriminations)
3. Cultural aspects: culture seldom changes rapidly

POS

Interests of stakeholders
A. Actors involved in developing countries
1. Government, national authorities
2. National civil society
3. International donor community
4. International civil society
B. Interests in M&E: Learning and accountability
1. Who are champions / cheerleaders
2. Beneficiaries / losers

M&E

Institutional set-up
Capacity
Targets, indicators, data collection and methodology
Feedback

Source: authors’ own compilation.

Later, the POS theory evolved towards a more dynamic model, by giving recognition to the influence of more volatile aspects such as national policies, a turnover of power and shifts in election outcomes. The POS of a

country is considered to be in continuous evolution and the evolution of stable and volatile aspects depends very much upon the interests and power of the political elite. However, as Meyer and Staggenborg\textsuperscript{14} argue, changing or influencing the POS is not the sanctuary of the political elite. By defending their own interest, all sorts of stakeholders, including interest groups, donors etc. may influence the POS, in particular its more volatile aspects. Of course the room to manoeuvre of non-state actors will crucially depend on governmental organisation and structures. But the success of non-state actors, such as civil society, the private sector or the donor community, will also depend upon the behaviour of other non-state actors. Non-state actors can thus reinforce or jeopardise each other’s causes. They will also determine the positioning of the political elite and the way it chooses to defend its interests. When a government feels threatened in its existence by certain movements it may for example adopt restraining legislation and this will influence the POS for all actors involved. This dynamic, interactionist conception of the POS is key to our framework.

\section*{2.2. An M&E system decomposed}

Many decisions have to be taken in the development of M&E systems. Decision-making is by definition a political matter; therefore it is interesting to see who takes what type of decision or defends which position in the M&E system of a country and to what extent this is explained by interests and power positions. Four components of M&E are distinguished in the conceptual framework reproduced below (see right-hand side of Figure 1): the institutional set-up, capacity, identification of indicators and targets and feedback.

Firstly, the institutional set-up is determined by many sub-questions such as the legal M&E framework, the mandate, its degree of independence, the place of the unit of coordination and central oversight, the place of the statistical office, the role of non-state actors and the relationship between M&E at line/sector and central ministries, M&E at the central and decentralised levels. The second field is that of M&E capacity: are capacities present, who receives training, on what issues? When a lack of capacity is not remedied it has of course implications on the M&E system and its functioning. The third field is the one of determining indicators and targets: what are the type, number and quality of surveys, which indicators are chosen, what are the levels of disaggregation and which targets are set? Finally, deciding upon feedback of M&E includes issues related to the dissemination of M&E results as well as its usage and integration: who has access to what type of results, what are the barriers and the incentives to

\textsuperscript{14} MEYER, D., STAGGENBORG, S., “Movements, counter-movements and structure of political opportunity”, \textit{American Journal of Sociology}, Vol. 101, 1996.
distribute and use results, what is the linkage between policy-making, planning, budgeting and M&E, which stakeholders do what with which results?

2.3. Stakeholders in developing countries and their M&E interests

Who takes the M&E decisions and what are the interests at stake? Decision-making is not a one-dimensional enterprise, decisions often result from complex constellations in which many stakeholders strive for the assurance of their interests. To what degree they can influence decision-making or non-decision-making has to be put in perspective of the POS in which they operate. The number of stakeholders and thus also the POS, is different in developing countries and western societies. Donors and international NGOs are important stakeholders with own interests in highly aid-dependent developing countries.

In short, we distinguish four categories in our framework (see middle of Figure 1):
- the national authorities of the partner country with its various components (the executive, the legislative, Auditor General, etc.);
- the national civil society;
- the international donor community;
- the international NGOs (or more broadly the international civil society).

Moreover, none of these groups of stakeholders necessarily constitutes a homogeneous group.

In terms of M&E basic functions of ‘accountability’ and ‘learning’ each of the groups of stakeholders (and their sub-components) has its own interests and the extent to which they are able to make their interests heard largely depends on the POS. First, Paris Declaration principles put the national government in the M&E driver’s seat and international donors are encouraged to support and increasingly use the national system(s). It is expected that a government committed to poverty reduction is eager to learn about its own policies in order to improve future decision-making. When additionally the government is very open and strongly democratic, it is likely that external accountability will be encouraged. However, a government that is not committed to poverty reduction will be inclined to shield off the non-effectiveness or negative externalities of its policies as it may lead to critical questioning. As pointed out by Gordillo and Andersson, in particular authoritarian regimes are unlikely to stimulate the external accountability aspect of M&E as this may directly jeopardise their power position. They


rather tend to use M&E as an instrument to hold lower layers of government accountable to the central top-level (i.e. ‘upward within government accountability’). In addition, the lack of information on the effects of policies widens their room to manoeuvre in deciding upon the direction of policies.

The actions undertaken by governments to curtail critical analysis and insight may range from overt forms of repression and blunt human rights abuses (such as no freedom of speech and arbitrary detentions) to more covert forms. Bratton distinguishes in this respect among dissolution, cooptation, coordination and monitoring. Institutions can be impeded to function autonomously for example by dissolution; parliamentary power can be curtailed; autonomous organisations (such as the Auditor General’s Office) can be captured, guided or infiltrated by a government agency (cooptation). At times governmental interference can be very subtle in the form of coordination or monitoring. Centralised organisational functioning may for instance lead to over-centralised decision-making, bureaucratic delay and suffocation of initiative. Parallel to this stands government monitoring of independent actors by due registration and compulsory reporting, amongst others.

Second, in the context of the changing aid architecture, civil society organisations, both national and international, are considered important actors of the M&E demand and supply side with genuine interests in learning and accountability. Through their ‘preferential’ contacts with direct beneficiaries they may provide policy-makers with interesting information about the beneficiaries needs and incentives as well as about the implementation and impact of service delivery and policy processes. They may also request reliable information and objective assessment of outcomes as to hold governments accountable to their citizens (‘downward accountability’). However, apart from the public interest – such as poverty reduction or the protection of human rights – civil society organisations may have also more private interests such as the survival of the organisation. Furthermore, personal careers and ambitions of personnel can also play a role in organisational behaviour.

Third, donors have also their vested interests in a partner country. Given their large financial involvement in aid-dependent countries the learning interest of donors can be expected to be of the same level as that of a sincerely committed government. In terms of accountability a distinction can be made between ‘upward accountability’ and ‘accountability to the home constituency’. ‘Upward accountability’ is the accountability of the recipient

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to the donor agency, while at the same time donor agencies are themselves held accountable by their own constituencies for the assistance delivered. How are decisions made on budgets and aid modalities; how effective is aid delivery; what is the impact on the ground? ‘Upward’ and ‘home’ accountability are not necessarily smoothly reconcilable. ‘Upward accountability’ puts a donor agency in the assessor position, while it is the assessed in ‘home accountability’. Assessing and being assessed may lead to schizophrenic tensions, particularly in the context of budget support. This mix of interests, even within groups of stakeholders, is likely to turn technical M&E processes into true politics of M&E.

In the next section we probe into case-study material from Rwanda to illustrate how politics intrude the M&E system. We argue that while donors’ current shallow technocratic approach towards M&E may be conceived ‘politically neutral’ and be presented as the only one that is realistic, a ‘politically blind’ approach, tends to worsen the political deficiencies of the recipient government and may eventually even jeopardize M&E’s technical soundness.

3. PUTTING THE NARROW TECHNOCRATIC APPROACH TOWARDS M&E IN PERSPECTIVE: EVIDENCE FROM RWANDA’S HEALTH SECTOR

3.1. Case selection, setting and data collection

The Rwandan case is particularly interesting because Rwanda scores relatively well on ‘technocratic’ governance while enthusiasm is muted for its handling of ‘political’ governance. This is amongst others well illustrated by the governance indicators of Kaufmann, Kraay and Mastruzzi. The six categories they define are grouped as ‘governance’, yet in terms of content they comprise two very different aspects of governance. Rwanda scores substantially better on ‘government effectiveness’, ‘regulatory quality’ and ‘control of corruption’, which go back to more technical matters, than on ‘voice and accountability’, ‘political stability’ and ‘rule of law’. While from 2008 onwards Rwanda scores above the regional average (Sub Saharan Africa) and income category average (low income) on five sub-indicators, it persistently lags behind when it comes to ‘voice and accountability’ where it scores in the 10th-25th percentile as compared to 25th-50th percentile of the regional and income group average (see http://www.govindicators.org). Particularly striking is Rwanda’s sharply differentiated ranking on control of corruption (70.8 percentile rank in 2010).

and ‘voice and accountability’ (10.9 percentile rank in 2010)\textsuperscript{21}. Various sources\textsuperscript{22} and interviewees point in this regard at the absence of effective pluralism and the overwhelming power of the Rwandese Patriotic Front (RPF), Rwanda’s ruling party, and its leader President Kagame. While Rwanda’s one-party government has among others steered Rwanda’s outstanding performance on public finance management (PFM), it has at the same time narrowed down the room to manoeuvre of independent and potentially dissenting voices and (downward) accountability actors (such as national and international civil society organisations, media) by cooption, increased control and monitoring while also undermining parliament’s watchdog function and mandatory oversight role in M&E\textsuperscript{23}. Similarly, the Office of the Auditor General, Rwanda’s supreme audit institution since 2003, mainly restricts its portfolio to financial auditing and the technical input level of the public sector, disregarding other critical, but politically more sensitive issues, such as the intermingling of the public and private interests\textsuperscript{24}.

The Rwandan case is also relevant because of the considerable shift in aid modalities which has taken place over the past decade. At the end of 2000, Rwanda’s interim PRSP was endorsed by the WB and the IMF and the first final PRSP\textsuperscript{25} was approved in July 2002. Since its adoption the PRSP provides the general framework for donor assistance in Rwanda. In 2008, Rwanda’s second PRSP (called the EDPRSP; ED standing for Economic Development), which sets out priorities for the period 2008-2012, was endorsed\textsuperscript{26}. Rwanda has become a true donor darling with ODA totaling 20 per cent of the Gross National Income (GNI) in 2008 and 18.5 per cent in

\textsuperscript{21} Ibid.
\textsuperscript{23} REYNTJENS, F., op. cit.; THOMSON, S., op. cit.
\textsuperscript{24} PURCELL, R., DOM, C., AHOBAMUTEZE, G., Joint Evaluation of General Budget Support 1994-2004. Rwanda Country Report, Birmingham, International Development Department and Associates, 2006, p. S9 indicate that “Corruption, as a broad political governance issue, is not addressed in the PGBS dialogue. This is because it is generally perceived as not being a problem in Rwanda. However, risks may be increasing, especially of subtle forms of corruption through exclusion patterns (e.g. lack of recognition of rising inequality) and concentration of economic power. It is unclear how the PGBS dialogue might position itself vis-à-vis these risks.”
The social sectors, and particularly the health sector, are largely responsible for the increase in ODA: in 2008, 60 per cent of ODA was provided to social sectors, which remained about the same in 2010-11 (56%). Budget support and particularly sector budget support have become more prominent over the past decade. Compared to 2007 the volume of budget support has sharply increased (general budget has doubled while sector budget support has even quadrupled) and its proportion has risen from around 30 per cent of ODA in 2004 to 41 per cent in 2009-10. While more than half of aid to Rwanda’s health sector still comes in as project support, some bilateral donors provide sector budget support, and in this way align their aid to the 2009-2012 Health Sector Strategic Plan II and the health sector system, including its M&E system. Thus far, donors do not invest much in systematic analysis of the quality of the M&E system. During joint sector reviews in which different stakeholders take stock of the progress in the health sector they draw upon information from the health sector M&E system, without however monitoring and analyzing the quality and the progress in the development of this M&E system. In those instances where the M&E system itself is on the agenda, the discussion is oftentimes confined to a narrowly technocratic focus on indicators and data collection sources. In what follows we broaden this technocratic vision towards the more institutional, policy and demand side dimensions of M&E while we also showcase the embeddedness of M&E within the country’s POS. In doing this, we use and illustrate the insights from the conceptual framework elaborated in section 2.

Our Rwanda case study draws upon a combination of secondary literature and primary data collection. Primary data has been collected during various field missions over the past decade using semi-structured interviews with a wide range of individuals from diverse settings (central and local government, national and international civil society, donors, academics) as well as through participant observation during one of the joint health sector reviews.

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31 In 2009 Belgium, Germany and the UK signed an agreement with the Ministry of Health to provide sector budget support.
3.2. M&E institutional set-up and capacity: fragmented and under continuous reform

Setting up coherent and well functioning M&E systems has proven far from evident, even where substantial improvement in sub-components such as statistical data capacities have been made\(^{33}\). This also holds for Rwanda’s health sector. Various useful documents which outline sections of the health sector M&E policy and system circulate, including the Health Sector M&E Policy, the Health Sector M&E Strategy, the Health Sector System Strengthening Framework, sections of the Health Sector Strategic Plans as well as the M&E chapter of Rwanda’s second PRSP (i.e. the EDPRS). However, cross-references are lacking, sometimes documents conflict with each other and remain unvalidated. Along the same line, various components of the health sector M&E system exist that are largely developed (including health statistics), yet there is no oversight health sector M&E unit within the Ministry of Health which coordinates among the various actors involved during different stages of data collection, analysis and feedback. In fact, again and again a new structure, format and location is proposed. The M&E Task Force which was established in February 2008 to strengthen (amongst others) M&E coordination and oversight was later dissolved. At the moment of our June 2011 field mission, it was not clear yet how the new M&E oversight unit would look like, where it would be located or how many staff members would be involved. Due to continuous reforms institutional arrangements are never given a chance to mature, to be thought through practically, let alone to be tried out and mainstreamed. Such frequent changes in the institutional M&E framework are not unique to Rwanda. As highlighted by Bamberger\(^{34}\), who observed a similar pattern of ever changing institutional M&E arrangements in South Asia, this situation is largely related to competition amongst agencies involved to control M&E and to the fear that some units will become too powerful.

The location of the M&E oversight unit is of course not without consequences. As Valadez and Bamberger\(^{35}\) highlight there is no ideal set up and different scenarios are possible, including one M&E unit or monitoring and evaluation functions being spread over different units; a location closer

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or further away from implementation. Each set-up has different implications for the twin M&E objectives of ‘accountability’ and ‘learning’. Whereas accountability necessitates some level of independence and autonomy, ‘learning’ is bolstered by a certain degree of functional integration into decision-making, policy and operational arenas, or at least by early buy-in of different stakeholders. At the time of our 2011 field research, the only person with a clear oversight M&E mandate in Rwanda’s health ministry was located in the planning department. Interestingly this staff member was the M&E focal point installed by the Ministry of Finance and Economic Planning (MINECOFIN) in each of the sector ministries to guarantee feedback from the sector ministries to the monitoring and evaluation of the EDPRS. The clear M&E leadership role taken by MINECOFIN, the strong horizontal linkage among M&E at sector and central (EDPRS) level, as well as the strong degree of vertical integration from local level M&E to central level M&E all hint at a high level of within-government ‘upward’ accountability. This institutional set-up of the M&E system does not really come as a surprise. It is perfectly in line with the picture of omnipresent highly centralised government that seeks to ensure implementation of top-down policies through the roll-out of a state apparatus that heavily monitors and controls local-level officials and the population in general. As discussed below, also the use of performance-based management and budgeting may well be understood from this vantage point.

3.3. Indicators, targets, data collection and methodology: strong on data collection and monitoring, weaker on evaluation

The components of the health M&E system that have been well established so far mainly focus on the ‘monitoring’ component of the M&E system and more specifically on the identification of indicators, baselines, targets and the set up of various data collection sources. Indicators and targets are particularly important against the background of Rwanda’s move towards performance-based financing in the health sector, which is discussed at more length in section 3.4. While there is a continuous tendency of donors and particularly vertical health programmes to push for additional indicators, the Ministry of Health is relatively successful in prioritizing and harmonizing among partially overlapping indicator sets of different donors.

Health census and surveys which mainly collect data on health outcome and impact indicators (such as life expectancy, maternal mortality, child and infant death rates, etc.) are of high quality, in line with Rwanda’s

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outstanding performance on statistical capacity building\textsuperscript{37}. Additionally, significant efforts have been made to upgrade the Health Management Information System (HMIS)\textsuperscript{38}, i.e. the routine data collection on health activities and outputs (such as number of health centre visits, number of deliveries at hospital, client satisfaction records, etc.) administered at the level of health facilities.

However, improved data collection and increased monitoring has thus far not been translated into more and better data analysis, rather to the contrary, the reporting and monitoring bombardment tends to crowd out evaluation. Quality of data analyses is undermined by a lack of cross-reading among various data sources that are administered by different entities, including amongst others the Institute of Statistics of Rwanda and the Ministry of Health. Somehow related is the lack of integration of indicators specified at input, output, outcome and impact levels into a kind of causal chain. The lack of causality chains is related to the poor articulation of an underlying programme theory during the formulation of programmes, which subsequently also puts into perspective their ‘evaluability’\textsuperscript{39}. Finally, analytical quality is also hampered by a lack of disaggregation alongside relevant issues of concern. While differences alongside lines of gender and age generally receive the necessary attention in Rwanda’s health sector, disaggregation alongside the existing horizontal inequalities\textsuperscript{40} is largely absent. While most donors, particularly budget support donors, adhere to a rigid ‘hands-off’ policy, Brown and Stewart\textsuperscript{41} identify at least three instrumental reasons why focus on horizontal inequalities is indeed legitimate: they impact negatively on poverty reduction targets and on economic efficiency, and they can be a source of violent conflict.

The lack of analytically in-depth evaluative exercises is also evident from the quality of progress reports which are mainly limited to an overview of progress without providing insight into the underlying reasons for progress or lack of progress. If anything, it seems that for the government of Rwanda there is currently little incentive to invest in evaluative exercises that move

\textsuperscript{37} Rwanda’s 2012 score on the statistical capacity building indicator is 77 (scale 0-100), compared to an average of 68 for low and middle-income countries. See http://bbsc.worldbank.org.

\textsuperscript{38} GOVERNMENT OF RWANDA, op. cit.


\textsuperscript{40} Stewart defines horizontal inequalities as “(social, economic and political) inequalities among groups with shared identities – identities formed by religion, ethnic ties or racial affiliations, or other salient ways that bind groups of people together”. They are often an important element behind mobilization for conflict. See STEWART, F., “Policies towards Horizontal Inequalities in Post-Conflict Reconstruction”, WIDER Research Paper no. 2006/149, Helsinki, UNU-WIDER, 2006.

beyond the input and aggregate level given the fact that substantial amounts of sector and general budget support can already be generated. As Pritchett\(^{42}\) puts it: “if a program can already generate sufficient support to be adequately funded then knowledge is a danger”.

3.4. Feedback and use of M&E: ad-hoc, selective and within government

Whereas evaluative exercises still remain underdeveloped and/or of low analytical quality, there do exist ad-hoc instances of learning and changes in programmes on the basis of evidence collected on the ground. This has for instance been the case in the area of maternal and child death, where Rwanda was lagging behind the SSA-average and where several measures (including performance based financing and health insurance schemes) have been taken to successfully redress the situation. The effective use of evidence and speed of policy remediation is particularly strengthened through the strong linkage among planning and M&E, central government’s leadership and the effective functioning of the state’s institutional apparatus. However, when it comes to the more sensitive issues, amongst others related to claims of inequality in the health sector or the uncovering of heavy-handed political interference, evidence and analysis is less prevalent.

There is also little evidence of use of locally collected data for local-level evidence-based learning and policy making. While some believe that the ongoing decentralization and the establishment of district development plans and joint action development funds for citizen participation might increase local level discretion and citizen’s input in policy-making, others are more skeptical. They hint at the fact that joint action development funds thus far rather function as state surveillance instruments to control local citizens and civil society organizations\(^{43}\). Moreover, the decentralisation reform that took off in January 2006 and which replaced the 2001 decentralisation has also suffocated a lot of the earlier initiated capacity building efforts, including those in decentralised M&E.

As highlighted before, there is a particularly strong inside-government accountability from the local to the central level, which is amongst others evident from the performance contracts that district mayors have signed with the president since 2006 (the so-called inihigos) and that include a set of targets on which the different districts are yearly evaluated (‘naming and shaming’) during a presidential ceremony. While the inclusion of citizen’s


needs into target setting could also transform this results-based management instrument into a system of state-citizen downward accountability, it is currently mainly used to assess local alignment with central government policies. As discussed in Ingelaere, there are as well plans to expand the performance contract system towards households which in principle could turn accountability relationships completely upside down.

Some interviewees pointed out that the strong central state control and leadership might also partly explain the success of the performance-based health financing system which has been generalized throughout Rwanda’s health sector after a positively evaluated experiment. More specifically, it is believed that commonly recorded side effects of performance based financing such as ‘gaming’ and ‘crowding out’, which lead to misreporting and a unique focus on those issues that are captured in targets, might have been reduced as a result of frequent supervision and control visits. Others highlight that these side effects are also still prevalent in Rwanda and hint at the fact that the strong political willingness which drives some government interventions (such as performance based financing in the health sector and the health insurance system, i.e. mutuelles) also prevents negative or unwanted effects from being unveiled which suffocates the ‘public’ debate with respect to these policies.

More specifically, there are concerns about the selection of targets which are considered to be particularly favorable for medical doctors, focusing on some health threats and neglecting others such as non-maternal female morbidity and mortality, ‘over-5’ male morbidity and mortality or problems of mental health. An often heard claim is that indicators and targets are centrally determined without much local-level involvement, disregarding specific local level needs and contexts. Particularly interesting in this respect is Thomson’s analysis of the gap between Rwanda’s widely praised progressive policy on HIV/AIDS and the neglect of local level dynamics

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44 ANSOMS, A., op. cit.; INGELAERE, B., op. cit.; PURDEKOVA, A., op. cit.; THOMSON, S., op. cit.
45 INGELAERE, B., op. cit.
47 KALK, A., PAUL, F. A., GRABOSH, E., “Payment for performance in Rwanda: does it pay off?”, Tropical Medicine and International Health, Vol. 15, No. 2, 2010 point at the fact that there is a tendency to neglect non-remunerated activities, to perform unnecessary clinical interventions to fulfill requirements and to falsify documents.
50 Ibid.
which shape specific needs and patterns of (non) care seeking of HIV/AIDS affected men and women.\footnote{THOMSON, S., \textit{op. cit.}}

This is also in line with what elsewhere\footnote{UVIN, P., \textit{Aiding violence. The Development Enterprise in Rwanda}. Connecticut, Kumarian Press, 1998.} has been described as the ‘prejudicial’ and ‘infantilising’ interaction between the state and its rural population. Even where participatory methods are used, ‘participation’ and ‘consultation’ is more often than not understood as ‘persuasion’ and ‘consciousness raising’ of what is best for the people.\footnote{POTTIER, J., “Land reform for peace? Rwanda’s 2005 land law in context”, \textit{Journal of Agrarian Change}, Vol. 6, No. 4, 2006.} Targets are also extremely ambitious and they often incorporate non-realistic goals such as ‘moving from 1% of improved toilets to 100%’ over a short period of time. Holding district level state authorities accountable for the achievement of such targets during the yearly ceremony obviously creates a powerful instrument in hands of central authorities to dismiss whomever they want. As Gordillo and Andersson argue “in political regimes where incentives to share M&E information with actors outside the immediate sphere are low, M&E information is often used as a mechanism to exert top-down control, monitor and restrain their agents.”\footnote{GORDILLO, G., ANDERSSON, K., \textit{op. cit}, p. 310}

The strong within-government accountability stands in sharp contrast to the lack of accountability to outside government actors. In fact, primary and secondary data collection lends us to believe that independent M&E demand and supply is severely curtailed in Rwanda by the strong top-down control of the ruling party.\footnote{ANSOMS, A., \textit{op. cit.; INGELAERE, B., op. cit.; JORDAAN, E., “Inadequately self-critical: Rwanda’s self-assessment for the African Peer Review Mechanism”, \textit{African Affairs}, Vol. 105, No. 420, 2006; PURDEKOVA, A., \textit{op. cit.; REYNTJENS, F., op. cit.; THOMSON, S., \textit{op. cit.}}} For civil society organisations, research institutes, parliamentary committees, etc. benefits of information generation, analysis and dissemination do not outweigh the costs. Donors, finally, could have some say. However, the at times strongly discordant assessments of the commitment of the Rwandan government undermines their bargaining position. Various (particularly budget support) donors’ interviewees also highlighted that they feel insufficiently informed about interventions and implementation realities on the ground. While fora for dialogue and exchange among the government and (budget support) donors formally exist in the health sector, they do not function satisfactorily. Various interviewees highlighted deficiencies in the way in which joint health sector reviews have been organised in the past and particularly pointed at the short duration and the limited access to information which lowers the opportunity to discuss

\footnote{Interviewees; BROWNE, S., “Aid To Fragile States: Do Donors Help or Hinder?”, \textit{UNU-WIDER Discussion Paper}, Vol. 2007, No. 1, Helsinki, UNU-WIDER, 2007.}
progress. In fact, the sector reviews have so far mainly been conceptualised as forward looking rather than backwards looking events. This is in line with evidence from the Public Expenditure and Financial Accountability assessments\textsuperscript{57} in which forward looking components of the public finance management system (e.g. budget planning) also generally outperform backward looking components (e.g. reporting).

Besides limited public availability of information, various independent M&E actors, including donors, also adopt themselves a kind of ‘self-censorship’ which strengthens the monopoly of government M&E supply and further lowers down ‘voice and accountability’. Against this background, flaws in policies tend to be hided and reinforced, which is particularly pernicious in a context of potentially exclusionary practices\textsuperscript{58}. In fact, budget support donors can themselves often not afford too much critical evidence regarding policies’ impact they are supporting themselves through budget support, without by the same token undermining the credibility of the latter\textsuperscript{59}. However, downsizing of independent M&E hampers the application of the entire Paris Declaration logic which incorporates the need for independent M&E as a source for accountability and evidence-based learning.

4. **HOW TO ESCAPE THE TRAP?**

In what follows we argue that ‘smart’ M&E offers a powerful entry point for reversing the downward spiral of a ‘depoliticized’ technocratic approach to M&E. ‘Smart’ M&E acknowledges first and foremost the institutional and political embeddedness of M&E and stresses its potential leverage on inclusive poverty reduction and opening up of closed political opportunity structures. It fully taps the role M&E could play in unveiling ‘conceptual flaws’ in policies and bringing more ‘sensitive’ issues into the bargaining area. In practice it involves more emphasis on evaluative exercises, disaggregation, triangulation of data sources, and changing incentives for ‘independent’ actors at the M&E supply and demand side. When assessing a country’s national or sector M&E systems in the context of alignment efforts, it entails the adoption of diagnostic schemes that move beyond the purely technocratic dimensions of M&E and that put M&E within the context of a country’s political opportunity structure. In what follows we highlight the usefulness of ‘smart M&E’ in the Rwandan case and indicate how donors could better use the marginal room to manoeuvre they do have.


4.1. The power of disaggregation and evaluative exercises

One of the key issues in the current debate on poverty reduction is the degree of ‘inclusiveness/exclusiveness’ of economic development. In his cross-country analysis for a broad range of developing countries, Ravallion\textsuperscript{60} showcased that similar rates of growth can bring different rates of poverty reduction depending upon the initial level of inequality and changing income distribution over time. The discussion is particularly relevant in the case of Rwanda where the 2006 Poverty Update based on a comparison of the results of two rounds of the Household Living Conditions Survey\textsuperscript{61} revealed that unequal distribution of growth coupled to high initial levels of inequality has impaired the potential poverty reducing effects of economic growth.

A powerful way to expose and avoid ‘exclusive’ policies is to disaggregate alongside relevant categories through the entire policy cycle. Disaggregation in budget and impact analysis, as is done in benefit incidence analysis and Poverty and Social Impact Analysis (PSIA) may e.g. unveil that government policies and related expenditures impact differentially upon various groups of individuals. Reversely, categories as ‘gender’, ‘age’, ‘ethnicity’, ‘geographical location’ also determine take-off positions and the way individuals react to policy incentives. For policies to be effective different take-off positions of individuals need to be mapped and taken into account during policy-making, monitoring and evaluation.

Also within the health sector, the need for more qualitative analysis and disaggregation is likely to become more prominent in the near future when the impressive ‘aggregate’ achievements in Rwanda’s health sector will slow down and when additional measures will need to be taken to reach the less accessible sections of the population. Research on the impact of Rwanda’s mutuelles demonstrates for instance that while the health insurance schemes have strongly improved medical care utilization and protected households from catastrophic health spending, households in the lowest expenditure quintile still have the lowest probability of using care when ill while they also have significantly higher rates of experiencing catastrophic health spending than higher quintiles\textsuperscript{62}. In her case study on access and utilization of HIV/AIDS care and treatment, Thomson, particularly points at the importance of studying relationships between ordinary HIV/AIDS affected individuals and their local officials as well as gendered household relations


\textsuperscript{61}NATIONAL INSTITUTE OF STATISTICS RWANDA (NISR), Preliminary Poverty Update Report Integrated Living Conditions Survey 2005/06, Kigali, NISR, 2006.

in order to understand and tackle the remaining bias in HIV/AIDS care and treatment\textsuperscript{63}.

If anything, Thomson’s study clearly demonstrates the importance of ‘evaluation’. However, in Rwanda, as in other countries, ‘monitoring’ is currently crowding out ‘evaluation’ while it are particularly evaluative exercises that allow to address the ‘why’ question and to differentiate between ‘doing the right things’ and ‘doing things right’. Theory-based evaluation\textsuperscript{64} which moves beyond black box evaluation and distinguishes among ‘process’ and ‘impact’ evaluation might be particularly useful in this respect. A first step in theory-based evaluation is to reconstruct the underlying program theory behind policies and interventions to identify (potentially killing) assumptions and risks, some of which might also be political. Process evaluation then assesses actual service delivery and use by different target groups while impact evaluation analyses the extent to which service use leads to the expected final outcomes\textsuperscript{65}. Such evaluative exercises that identify and analyse possible bias in service delivery coverage and study to what extent services and delivery modalities and channels correspond to the specific needs of the target are particularly relevant against the background of a top-down government that tends to develop policies without much prior assessment of specific needs at local level and take-off positions of different groups of individuals. Evaluative exercises may also be particularly useful to counterbalance some of the negative side-effects of performance-based management which have hinted at in section 3. More specifically, evaluation may unveil whether targets that have been centrally identified are also locally relevant and feasible while it may also detect unintended impact of performance contracts and induce more balanced analysis of (lack of) achievements, dealing as well with issues of attribution\textsuperscript{66}.

An easy starting point for evaluative analysis that gives insights into service delivery (under) coverage in the health sector is cross-reading among data from the health and demographic surveys which includes the entire population with data from the Health Management Information that only includes data on individuals that already have access to and use the health care system. Such cross-reading among data sources may provide interesting insights on exclusionary practices and is an example of smart M&E that can

\textsuperscript{63} THOMSON, S., op. cit.
\textsuperscript{65} See ROSSI, P. H. \textit{et al.}, op. cit.
easily be justified on purely technical grounds as triangulation is nowadays widely recognised as best practice to increase validity of research findings.

Triangulation is also a practice that may be triggered and applied by the donor community itself. In particular, exchange of information from project donors collected at the level of individual projects (often conceived as experiments or pilot projects that focus on innovative activities or vulnerable groups) and overall sector data collected by budget support donors might contribute to learning and accountability. ‘Project’ level information provides interesting reality checks for budget support donors who increasingly focus on the aggregate picture, often being cut off from local realities on the ground. Reversely, by participating in Joint Sector Reviews, access to sector performance information and issues at stake, project donors are able to contextualise their own project M&E. The current move towards portfolio approaches whereby a donor combines different aid modalities in a coherent package is also relevant in this respect. Having within one donor agency access to different types of information might be particularly valuable in cases, such as the Rwandan, where sharing of data among different types of donors is less likely because of their, at times, sharply differing views with respect to the government’s behaviour.

4.2. Changing the incentive structure for independent M&E demand and supply

In the era of budget support and particularly in societies with a closed POS, where failures in policies stand a high chance to remain covered, the added value of independent M&E demand and supply actors and the need to take their contributions at heart, becomes all the more important. However, given the features of the current POS, costs do not outweigh benefits for most national independent M&E actors.

Donors obviously also have their responsibilities in guaranteeing the production of reliable data and analysis and support organisations and institutes that could provide them, not with the purpose of creating opposition to power but as critical input to improve policy and poverty reducing impacts on the ground. While such spaces for critical reflection in Rwanda are exceptional, there does exist a limited number of outside government actors which collect data and provide analysis on sensitive issues and who seemingly have found the balance between self-censorship on the one hand and confrontation on the other hand. Strengthening the

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capacity of such instances of non-government M&E and research is important as well as the use of their insights into evidence-based policy dialogue.

Currently, however, in Rwanda, donors’ support is one-sidedly limited to financial support to NGOs, CBOs or research institutes, while they disregard the sometimes highly relevant data and analysis that is produced with their funding. While there is no univocal evidence about the degree to which donors use data from (inter)national independent actors in their decisions about aid allocations, there are cases where donors have been strongly influenced by such data. Information on governance issues provided the Ugandan Debt Network for instance has fed into the decision of DFiD to cut back its budget support to the Ugandan government69. Obviously, by merely using the data from independent sources, donors already increase benefits for independent M&E supply actors. Promoting networks among diverse independent M&E actors, and increasing in particular the ‘analytical’ capacity of local research institutes and NGOs is another means of changing the incentive structure. It is particularly the ownership of ‘information analysis’ rather than ‘information’ as such that generates ‘power’70. In the Rwandan context, twinning with M&E networks in other countries, international experts and research institutes might be another way of increasing the room to manoeuvre.

5. CONCLUSION

The realization of Paris Declaration key principles of results-orientation and mutual accountability is dependent on the effective functioning and use of monitoring and evaluation (M&E) systems. So far however, an overly fragmented approach to M&E has been adopted. The focus is overwhelmingly on the way recipients handle inputs; on monitoring, at the detriment of evaluative analysis; on statistical data collection and methodological issues, largely neglecting the more systemic and institutional issues.

The hypothesis of the paper challenges the purely technocratic character of M&E and postulates that politics heavily intrude M&E systems. The fact that politics are part and parcel of M&E has been acknowledged long before in the context of projects and program evaluation. One may assume that with the move towards the sectoral and national level, stakeholders and interests are multiplied and politics thus become all the more present. Therefore it is

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69 CORDAID, Beyond Data. A Panorama of CSO Experiences with PRSP and HIPC Monitoring, Den Haag, Cordaid, p. 31.
evident that the way in which politics influence M&E in the contemporary development paradigm should be high on the research agenda.

While there have recently been some contributions that have pointed at the importance of taking a broader perspective on M&E, so far there has been no research that explicitly identifies and explores the linkages between politics and M&E under the changing aid modalities. The conceptual framework established in this article builds on the concept of Political Opportunity Structure (POS) and furthers the understanding of the relationship between powers and interests and various dimensions of M&E, including its institutional set-up, capacity, indicators, targets and data collection as well as its feedback and use for learning and accountability.

The central ideas of this article are illustrated by case-study material from Rwanda’s health sector, yet findings can be extrapolated to other settings and other sectors. In fact, we expect the influence of politics on sector M&E to be even more outspoken in sectors such as agriculture or natural resource management where interests are higher and often more conflicting and tensions among diverse stakeholders involved larger.

The Rwandan case illustrates how donors tend to stick to an overly technocratic M&E approach, thereby constantly downsizing their ambitions, while politics are carving down the limping system from within. It highlights that persistent exclusion and denial of the importance and presence of political issues in M&E may undermine both M&E’s functions of ‘accountability’ and ‘learning’. Reversely, ‘smart M&E’ acknowledges the political and institutional embeddedness of M&E and adheres to the potential leverage of M&E on inclusive poverty reduction and a country’s political opportunity structure. ‘Smart M&E’ taps the role M&E could play in bringing more sensitive issues into the bargaining area, shifting debates on a more factual basis, unveiling impacts on the ground, disentangling deficient implementation from inherent conceptual flaws in policies, and discriminating between ‘doing things right’ and ‘doing the right things’.

‘Smart M&E’ requires more donors that better use the marginal room to manoeuvre they do have in the context of changing aid modalities. Refraining from doing this may turn the political embeddedness of M&E into a killing assumption to the entire development enterprise under the Paris Declaration framework.

Antwerp, May 2013