Save the Children

CHILD SENSITIVE INDICATORS FOR POVERTY ALLEVIATION PROGRAMMING

Indicator Manual

14 July 2017

Savethechildren.org.uk
Registered charity England and Wales (213890) Scotland (SC039570)

List of authors who contributed to the development of this manual:

Bruce Ravesloot, Vice-President

Raniya Sobir, Research Associate

Jeremie Kaelin, Research Associate

CONTENTS

Contents..... **2**
Acronyms **3**

Section A **4**
I. Introduction **4**
II. The Analytical Frameworks **10**
III. The Menu of Indicators **14**

Section B **16**
Indicator Reference Sheets **16**

Section C **66**
Standard FSL Indicators and Tools **66**

Appendix **70**
Indicator Reference Sheet Template **70**

Save the Children

TABLE 1: LIST OF ACRONYMS

Acronym	Definition
CCT	Conditional Cash Transfer
CD	Child Development
CRC	Convention on the Rights of the Child
CSI	Child Status Index
CSS	Comprehensive School Safety
DDS	Dietary Diversity Score
ECCD	Early Childhood Care and Development
EiE	Education in Emergencies
ESS	Education Statistical Systems
FANTA	Food and Nutrition Technical Assistance project
FAO	Food and Agriculture Organization
FCS	Food Consumption Score
FGD	Focus Group Discussion
FS	Food Security
FSL	Food Security and Livelihood
HDDS	Household Dietary Diversity Score
HEA	Household Economy Approach
HH	Household
HIV	Human Immunodeficiency Virus
IDDS	Individual Dietary Diversity Score
IPC	Integrated Food Security Phase Collection
IYCF	Infant and Young Child Feeding
KII	Key Informant Interview
MAHFP	Months of Adequate Household Food Provisioning
MEAL	Monitoring, Evaluation, Accountability and Learning
MICS	Multiple Indicator Cluster Survey
NGO	Non-Governmental Organization
PCASS	Pacific Coalition for the Advancement of School Safety
PLW	Pregnant/Lactating Women
SC	Save the Children
SPSS	Statistical Package for the Social Sciences
UCT	Unconditional Cash Transfers
USAID	United State Agency for International Development
WASH	Water, Sanitation and Hygiene
WEAI	Women's Empowerment in Agriculture Index
WHO	World Health Organization

SECTION A

INTRODUCTION

Why this Manual?

Within the Child Poverty Theme, poverty alleviation programs form a key pathway to achieve the three breakthrough goals stated in Save the Children's global strategy: "all children survive, learn and are protected from violence". However, current research shows that increased economic wellbeing at the household level does not automatically lead to improved child wellbeing outcomes in terms of education and learning, health, nutrition and child protection. A review of multiple impact studies indicates that economic strengthening programs can have many positive benefits for children of beneficiaries, or for children themselves when targeted directly. At the same time, evidence shows they can also have insignificant or no impacts or cause harm to children.[1] To design relevant and child poverty programs, it is essential to better understand the linkages between (1) the commonly measured economic strengthening results at household level, and (2) the lesser-understood results of these programs for children.

Glossary of key terms you will encounter when using this manual

An intervention which is 'SC-supported' - refers to an intervention which is made possible through any of the following types of support provided by Save the Children or its implementing partners direct provision of substantial technical and/or financial support for training and capacity building of duty-bearers e.g. technical assistance to government departments; organisational capacity building for a facility providing services to children, direct provision of services, substantial community mobilization, substantial rehabilitation of a facility. You will need to use your discretion when determining whether the support provided by Save the Children is substantial. A general guideline is to assess whether or not the intervention in question could have been provided to an acceptable standard without Save the Children's technical/financial/material input.

Breakthrough is defined as *'a remarkable and sustainable shift from the current trend in the way the world treats children'* in the Save the Children's global strategy: Ambition for Children 2030 and 2016 –2018 strategic plan Building a better world for and with children.

Direct and indirect interventions - Direct interventions refer to economic strengthening/poverty alleviation interventions that directly engage children; for example, livelihood transition for children engaged in harmful work. Indirect interventions refer to economic strengthening/poverty alleviation interventions that target the household or the parent/caregiver (for example, cash assistance to parent or caregiver) with the assumption that these interventions result in improved well-being of children.

Poverty Alleviation or Economic strengthening: In the context of Save the Children's programming, this includes a range of Food Security and Livelihood (FSL) interventions, cash-based programming, social protection and some aspects of youth livelihoods work.[2]

Investments in children: Investments in children includes household spending on children's health or school expenses, caregiver's time use or decision making on child nurturing, providing nutrition or providing protection and care.

Reducing practices that harm children: Children in the poorest households are most at risk of not surviving, missing school and of being harmed. Practices that harm children refer to negative coping strategies that households adopt, that could be harmful to children. This include for instance removing children from school, refraining from seeking medical care, putting children in institutions, engaging children in harmful work to support the family's economic needs as well as reducing time spent on childcare and feeding.

[1] Josh Chaffin and Cali Ellis. 2015. OUTCOMES FOR CHILDREN FROM HOUSEHOLD ECONOMIC STRENGTHENING INTERVENTIONS: A RESEARCH SYNTHESIS. SAVE THE CHILDREN;

[2] For a more detailed list of programs included under child poverty, please see Save the Children's position papers on Child Sensitive Livelihoods and Child Sensitive Social Protection, which can be found here:

Glossary of key terms continued…

Child-sensitive programs and interventions: programs and interventions that explicitly aim to maximize the benefits for children and minimize any harm. They do so by:

- Assessing and monitoring both positive and negative impacts for children, disaggregated by the age, gender and vulnerabilities of the child.
- Listening to and taking account of the voices and views of children in their planning, design, implementation and review.

The most deprived children: children who are deprived in multiple and severe ways as a result of not fulfilling or being at high risk of not fulfilling the SDG targets of surviving, learning and being protected from violence.

What is the manual for?

The overall aim of this manual is to strengthen Save the Children staff understanding of the extent to which economic strengthening/poverty alleviation interventions cause benefit or harm to children. The specific purpose of the manual is to assist Save the Children staff to apply an appropriate combination of indicators to measure results of economic strengthening/poverty alleviation programmes for children.

Figure 1: Results Hierarchy

The manual provides a menu of indicators to bridge the gap between measurement of poverty results at household level and breakthrough results for children (see Figure 1).

The menu of indicators in this manual includes only indicators most directly related to economic changes within the household, and that provide a direct or indirect measure of changes in child level wellbeing. The menu of indicators focusses on measuring change for children at two levels; household level and child level.

- At the household level, indicators measure household investment in children or reduction of practices that harm children. These indicators relate to financial ability/affordability of households to meet child expenses and or relate to time-use and decision making within the household, among adults and children, that impact child development.
- At the child level, the indicators provide a more direct measure of wellbeing due to increased investments in children (e.g. increased expenditure on nutritious food for children), and or reduced practices/coping strategies that could be harmful to children (e.g. removing children from school for economic reasons).[3]

The menu of indicators in the manual does not include:

- Indicators for the global breakthrough goals as sufficient guidance on this already exists.
- Indicators for breakthroughs that are not related to economic strengthening or poverty alleviation themes, for example on school management or education policies under learn or strengthening case management systems under be protected.
- Full reference sheets for indicators that measure economic impacts of poverty alleviation programs at household level such as income/assets or food security or livelihood resilience, as sufficient guidance and tools exist within the global Food Security (FS) cluster and beyond. Although not in the menu of this manual, we have provided a complementary list of indicators and tools in Part C of this manual for reference purposes.

It is important to note that most Save the Children programs, to varying degrees, carry out multi-thematic programming. This means that programs often integrate economic interventions with other interventions on education, child protection and health to improve child well-being. This includes "push-side" or poverty alleviation interventions such as skills training, asset transfers, cash grants, business development, microcredit and savings programming and "pull-side" interventions such as subsidized health insurance, school feeding, or waivers on school fees, which do not aim to build assets or income per se, but may increase household capacity and interest to invest in children's education, protection or health. The guidance in this manual on indicator selection focuses specifically on the 'push side' interventions. It is assumed that if multi-thematic programming is considered, the user will identify and select indicators also using available guidance material developed by other Themes/Sectors.

The intended users of the manual are program managers, MEAL and technical advisors in country, regional and member offices with a practical need for guidance on measuring how economic wellbeing at the household level translates into child wellbeing results. Save the Children staff can make use of the manual for multiple purposes: development or review of a strategy on child well-being, project or programme design or redesign, log-frame or results framework development, MEAL planning, and implementation stage of MEAL of a project or program. The manual is also relevant to Save the Children partners and subcontractors

[3] A separate indicator manual on adolescent programming is being developed by the Child Poverty Theme for Adolescent Skills for Successful Programming (ASST).

How to navigate the manual

Part A has three sections:

- Section I provides the rational for developing the manual, describes the manual scope and provides guidance for using the manual.
- Section II presents three analytical frameworks, developed in collaboration with Save the Children technical experts. Each framework presents different levels of changes that are commonly associated with poverty alleviation programs under each one of the breakthrough goals. The analytical frameworks provide a conceptual basis for the indicators included in the menu of this manual. It indicates the type of changes that the indicators are expected to measure. The indicators in the menu of this manual were identified based on literature review and in consultation with Save the Children technical experts. The indicators included in the menu were considered based on the most common and documented type of changes that economic strengthening/poverty alleviation programs have on child well-being. The analytical frameworks are not meant to be used as standard results frameworks but as guidance for understanding the relevance of the indicators we have in the menu, to broader Save the Children programming.
- Section III presents a menu of suggested indicators to measure many of the results presented in the three analytical frameworks in Section II; not all results listed in the three frameworks have associated indicators presented in this manual.

Part B contains a series of indicator reference sheets that detail the characteristics of each indicator and provide practical guidance for measurement. Part B should be navigated by clicking (ctrl + mouse click) on the indicator names listed in the indicator menu in Part A, Section III. Each menu indicator contains a hyperlink that directs the user to the respective indicator reference sheet. The indicator reference sheets have a section that cross-references the indicator to the relevant areas of the in the analytical frameworks in Section II.

Part C provides an indicative and complementary list of common Food Security and Livelihood (FSL) indicators, which are often used in typical Save the Children economic strengthening/poverty alleviation programmes. These indicators can be used as a starting point for users to round out their MEAL framework.

It is important to note that:

- Measuring changes in FSL/poverty indicators at the household level is key and needs to be done well for us to be able to show how economic improvements at the household level translate into benefits for children.
- Every project or programme is different, with different activities and objectives. Therefore, there is no universal framework of indicators. Indicators should always be developed to be locally relevant, drawing on this guidance where helpful.

How to select the right indicators

The typical user will pick up this manual to identify a combination of indicators appropriate to their program and within their resources to measure. Users should not be limited to the indicators contained in this manual nor should users feel obliged to use all the indicators outlined in this manual. The choice of appropriate indicators will vary according to relevance to the objectives of the program; the MEAL capacity available internally or through external partnerships; the costs and feasibility associated with data collection; and the effectiveness of the indicators for creating and supporting economic strengthening/poverty alleviation policies, improving program implementation, and, last but not least, reporting on program results, including both positive and possible unintended negative impacts on children.

First-time users of the manual are advised to refer to existing resources aimed at guiding the design and MEAL of child-sensitive poverty alleviation programming, such as the Child Sensitivity in Poverty Alleviation Programming, an Analytical Toolkit.

In brief, the selection of indicators should follow the 5 steps below:

Step 1 →

Clearly define your specific program expected results and the causal pathways to achieve them. Don't forget to include all possible unintended risks children may be facing along the pathway of change.

To do so, the first step is to undertake a comprehensive "child sensitive" context, needs, situation and risk analysis to inform the formulation of appropriate program results. For an example of how to organize context analysis for economic strengthening/poverty alleviation in the nutrition domain, please refer to Save the Children (2016) Maximizing Economic Strengthening Programmes' Nutrition Outcomes for Children – A Guide to Ensure Context Analysis Supports Integrated Programming.

Once the final child level results you want to achieve is clearly defined, map the causal pathway or process through which you expect change to happen. Make explicit all the assumptions about what needs to be in place for the change to occur as well as the possible risks children may be exposed to (e.g. increased in children's time allocated to productive work) considering all contextual factors which influence the pathways of change (e.g. norms on children engagement in work or on intra household decision making around time allocation).

If the assumptions and results (positive as well as unintended negative results and risks) for your project are appropriate and clearly formulated, the indicator selection process to measure these results and track risks will be more straightforward.

Step 2 →

Identify relevant results in the analytical frameworks in Section II.

Identify which breakthrough areas (learn, survive, protection) your project is contributing to and review the framework for that breakthrough. Make a note of the results relevant to your program. (Note again that your program will have a specific Theory of Change or Results Framework which will not need to mirror those in Section II).

Step 3

Identify relevant indicators under your selected results in the Section III menu.

Use the menu in Section III to identify indicators associated with your step 2 results, which tell you the most about your programs expected result (positive and negative). Once you identify a relevant indicator, you can click (ctrl + mouse click) on the indicator title in the menu to jump to the respective indicator reference sheet, in Part B of the manual. When reviewing indicators against the analytical frameworks, it is important to note that the indicator name in the menu may not have the same the language as the results statements in the analytical frameworks. For example, the indicator school attendance rate refers to results statement 'Improved year-round school participation/completion, including during times of stress under learn. To verify which result statement the indicator is relevant to, please review the indicator sheet, section 'reference to analytical framework'.

Step 4

Assess the appropriateness of each indicator to your needs and resources.

Review the indicator sheets for the indicators identified in Step 3. Each indicator sheet provides detail on the following indicator characteristics: reference to the analytical framework result(s), definition, rationale, unit of measure, expected change direction, required variables, calculation, disaggregation, data collection method, tools/resources, level of data collection, frequency and timing of data collection, time input required, financial input required, roles and skill requirement, general assessment of resource intensity to measure this indicator, data limitations and significance. To assess which indicators are right for your program, keep the following in mind:

- The technical capacity available to you internally or through external partners to properly measure the indicator. Many of the indicators are measured through mixed method approaches, which assume sufficient knowledge of quantitative and qualitative data collection techniques, and sampling techniques. When in doubt, ask your MEAL technical advisor.
- The resources required to measure this indicator; specifically, time and money. Consider whether the program has sufficient budget to organize the data collection and analysis activities for your set of indicators, including outsourcing the entire measurement to a firm, or hiring and training enumerator teams directly. Direct costs associated with data collection are commonly correlated to sample size, frequency and timing of data collection, geography, and complexity of tool and level of skills of enumerators required. Also, consider the Save the Children staff time required to develop – or oversee the development of – survey protocols and tools, field work plans, direct support to data collection, and review and revision of findings and analysis.

Step 5

Select indicator(s). Consult with colleagues to refine the list of selected indicators, as necessary. Select a manageable level of indicators. A rule of thumb is to select no more than 3 indicators per result. Include the selected indicators in your program log-frame or results framework.

II. THE ANALYTICAL FRAMEWORKS

This section provides three frameworks that link child poverty results to the three breakthrough domains.[4] The purpose of the analytical frameworks is to provide a **conceptual basis for the set of indicators identified in this manual; they are not meant to be used or replicated as program specific result frameworks.** A few key notes for the reader:

- The analytical frameworks are meant to show basic and generalized causal pathways from the intervention level all the way to the breakthrough goals, indicating the changes we generally expect to see at different stages/levels in the pathway towards impact. The frameworks focus exclusively on typical poverty alleviation programs and the types of changes commonly associated with these programs. Users should take these visuals as a tool to identify the types of changes expected from your program and then select indicators relevant to those changes.
- The frameworks focus on programming in a development or protracted relief context, and to a lesser extent reflect aspects of humanitarian programs.[5] In addition, each indicator sheet provides guidance as to whether the indicator can be adapted in a humanitarian context based on existing experience within Save the Children.
- These change statements purposely state direction of change, for example *reduction* in children engaged in harmful work or improved nutritional status. For results relevant to humanitarian contexts, the frameworks state 'continued' or 'maintained' to emphasize desired change in these contexts.
- The frameworks acknowledge the relevance and necessity of other result areas that do not relate directly to economic strengthening/poverty alleviation programs, as indicated by the white boxes, but these are not detailed in this manual as guidance is or will be available from other Themes/Sectors.
- The frameworks do not encompass all the changes that could contribute to the higher-level results.
- These frameworks show the basic chain of causality in a typical (and simplified) economic strengthening/poverty alleviation program.
- The bottom layer of the analytical frameworks also presents typical poverty alleviation or economic strengthening intervention modalities carried out by Save the Children and does not necessarily provide a comprehensive or detailed package of activities for such programming.
- The analytical frameworks and the guidance in this manual recognize cross-linkages between the three breakthrough areas. For example, access to nutrition contributes to both the Learn and the Survive breakthroughs. In such cases, associated indicators are presented as cross-cutting indicators in the menu in Section III.

[4] The analytical frameworks were developed based on Save the Children's thematic strategies and available outcome framework documents. The goal and outcome level statements were mostly taken directly from Save the Children documents for the Education, Protection and Health and Nutrition Themes. The outcome statements for the survive breakthrough were mostly formulated in consultation with the Global Thematic Team. The results at child and household level, which are the focus of this manual, were formulated in consultation with the Child Poverty Theme group and the reference group appointed for the development of this manual including representatives from multiple members and different thematic expertise. The work to refine these analytical frameworks will continue in consultation with the other Global Themes and in the context of the Global Results Framework currently under development. For more information, please contact the Global Theme's Deputy Director Silvia Paruzzolo at sparuzzolo@savechildren.org

[5] Explicit documentation to support the linkages between the Save the Children organizational focus of child-protection in emergencies (CPiE) and economic strengthening was not available. Consultations to refine the framework will continue with the Child Protection Global Theme.

Breakthrough: Children learn - All children learn from a quality basic education

All children learn from quality basic education.

All children caught up in humanitarian crises have access to quality education.

L1 Child poverty related area: Deprived children attend good quality inclusive basic education and demonstrate relevant learning outcomes.

Other thematic areas:

- Access to improved and safe infrastructure/ learning space
- Policy and practice to reduce barriers to learning

L2. Child poverty related area: Deprived children access good quality inclusive early childhood care and development and demonstrate improved child development outcomes.

Other thematic areas:

- Access to improved and safe infrastructure/ learning space
- Policy and practice to reduce barriers to learning

L3. Child poverty related area: Reduction investments in learning and stimulation linked to learning at home, in times of shock, prevented.

Other thematic areas:

- School rehabilitation
- School kits/relief
- Temporary learning space

a. **L 1.1 Child level results**Error! Reference source not f ound. Improved year-round school participation/completion, including during times of stress.
b. Improved enrolment of girls, children with disability, linguistic minorities, those from poorest homes.
c. Improved nutritional status from ability to afford/access sufficient quantity and quality food
d. Reduction in time spent on IGA /HH chores at the expense of education.

L 1.2 HH level results

a. Improved ability to meet child's school expenses and nutrition/food needs.
b. Improved ability to send children to school regularly.
c. Increased ability to allow time for children's learning at home.
d. Improved ability to provide home learning support (books, toys, interactions).

L 2.1 Child level results

a. Improved year round ECCD participation/completion, including during times of stress
b. Improved enrolment of girls, children with disability, linguistic minorities, those from poorest homes
c. Improved nutritional status from ability to afford/access sufficient quantity and quality food

L 2.2 HH Level results

a. Improved ability to meet child's school expenses and nutrition/food needs.
b. Improved ability to send children to school regularly.
c. Increased ability to allow time for children's learning at home.
d. Improved ability to provide home learning support (books, toys, interactions).

L 3.1 Child level results

a. Continued attendance in primary school and ECCD
b. Reduced risk of drop out due to inability to afford education or migrate to work
c. Reduced exposure to child labor, exploitation or marriage as an economic coping strategy following disaster/emergency
d. Healthy nutritional status maintained from ability to afford/access sufficient quantity and quality food

L 3.2 HH level results

a. Continued ability to meet child's school expenses and nutrition/food needs / following disaster.
b. Continued ability to send children to school regularly.
c. Continued ability to allow time for children's learning at home.

CHILD POVERTY INTERVENTIONS

Cash assistance to HH (social protection) - FSL support to HH (assets, skills, credit, grant, savings) - Financial literacy/HH expenditure management

Breakthrough: Be protected - Violence against children is no longer tolerated

All children, including those on the move and in emergencies, have appropriate care from either their own families or community-based alternatives.

Children are protected from physical and humiliating punishment in the home and in school, sexual violence and from violence in conflict situations.

Boys and girls are protected from harmful work.

P1. Child poverty related area: Children are provided with quality care by their families, while communities actively support family-based care.

Other thematic areas:

- Direct interventions on care provision
- Legal and policy reforms

P2. Child poverty related area: Children are protected from violence linked to economic choices made by them and/or their

Other thematic areas:

- Case management
- Legal and policy reforms

P3. Child poverty related area: Children and families have access quality intervention services including education, livelihood and protection, appropriate to the best interest of the child.

Other thematic areas:

- Private sector collaboration
- Legal and policy reforms

P 1.1 Child level results

a. Reduction in the likelihood of non-family based/ alternative care (e.g. orphanages, koranic schools) due to parents migrating for work or parents not being able to afford covering costs for their basic needs.
b. Reduced need for households to rely on children migrating unaccompanied for work.

P 1.2 HH level results

a. Families are empowered and supported to create a safe and nurturing home that is economically secure.
b. Income stabilized for HH affected by disaster/emergency.

P 2.1 Child level results

a. Reduction in the likelihood of child marriage, trafficking and sexual exploitation for economic reasons.

P 2.2 HH level results

a. Families are empowered and supported to create a safe and nurturing home that is economically secure.
b. Income stabilized for HH affected by disaster/emergency.

P 3.1 Child level results

a. Reduced need for households to rely on children's involvement in work that is harmful

*** Note that the outcomes relating to directly supporting children and youth transitioning from harmful to decent work will be covered under the ASST Results Framework and Indicator Menu.*

P 3.2 HH level results

a. Improved income opportunities for adult and child headed households that creates an economically secure environment.
b. Income stabilized for HH affected by disaster/emergency.

CHILD POVERTY INTERVENTIONS

Cash assistance to HH (social protection) - FSL support to HH (assets, skills, credit, grant, savings) - Financial literacy/HH expenditure management

Breakthrough: Children survive - No child dies from preventable causes before their fifth birthday

Preventable new-born and child death are eliminated	Rates of chronic malnutrition are halved and child wasting eliminated	All children in humanitarian contexts have equitable access to frontline healthcare services.
S1 Child poverty related area: Deprived children and mothers have improved health outcomes and can access good quality inclusive preventative and curative	**S2 Child poverty related area:** Deprived children access to a good quality and diverse diet including exclusive and continued	**S3 Child poverty related area**: All children have access to frontline healthcare services in humanitarian contexts.
Other thematic areas: • Availability and coverage of good quality safe healthcare • Policy and practice to reduce barriers to healthcare	**Other thematic areas:** • Food availability • Knowledge, attitudes and behaviours towards optimal nutrition practices • Availability and coverage of WASH, health and nutrition services • Policy and practice to reduce barriers to healthcare	**Other thematic areas:** • Coverage of good quality clinical care in emergency • Policy and practice
S 1.1 Child level results a. Continued access to essential healthcare year-round for all children in the HH, including during times of stress. b. Health shocks suffered by members of the HH requiring unforeseen expenditure do not result in coping strategies that harm children c. Increased ability to allow time for children's (including adolescents) and mother's preventive and curative care as well as for receiving education on SRH/health behaviours.	**S 2.1 Child level results** a. Continued access to nutritious food year-round for all children and PLW in the household, including during times of stress. b. Increased expenditure on and consumption of nutritious food. c. Mothers delay return to work after delivery.	**S 3.1 Child level results** a. Improved or sustained health outcomes of boys/girls, children with disability, linguistic minorities and those from poorest homes in a humanitarian context. b. Continued access to essential healthcare year-round for all children in the HH, including during times of stress.
S 1.2 HH level results a. Improved ability to meet child's healthcare expenses (all costs, including opportunity costs). b. Improved ability of pregnant mothers to attend healthcare services regularly (time/decision making/cost). c. Increased ability to access & afford WASH services and inputs.	**S 2.2 HH level results** a. Improved ability (cost/decision making power) of mother to make informed decisions- about nutrition. b. Improved ability to cover cost/allow time for accessing nutrition services. c. Increased ability to access & afford WASH services and inputs. d. Livelihoods (location and hours) allow for optimal IYCF practices.	**S 3.2 HH level results** a. Continued ability to meet the costs of accessing health and nutrition services. b. Continued ability to allow time for accessing health and nutrition services.

CHILD POVERTY INTERVENTIONS

Cash assistance to HH (social protection) - FSL support to HH (assets, skills, credit, grant, savings) - Financial literacy/HH expenditure management

III. THE MENU OF INDICATORS

This section provides the list of indicators relevant to this manual. The indicators are organized by breakthroughs and the menu provides the relevant reference of the indicator to the child level and household level results in the analytical frameworks in section II. Each indicator has been assigned a unique number (for example school attendance rate is I1). Where indicators are common to multiple breakthroughs, the indicators are stated as cross cutting indicators (for example CC1 Household ability to provide nutritious food). The indicators are listed here by indicator names. The indicator names are brief and are not phrased based on method of measurement. This level of detail is provided in the respective indicator sheet which provides the indicator definition and calculation. Similarly, the rationale section in the indicator sheets explains the relationship or desired change that the indicator is expected to measure and specifies the relevance of the indicator to economic strengthening programming or poverty alleviation further. Therefore, to better understand the role of the indicator, it is important to review the indicator sheets and not refer to the indicator name in this menu.

Hyperlinks ahead!

The indicators listed below include hyperlinks to facilitate navigation across the list of indicators in Section B.

Table 1 Summary table of selected indicators

Learn	Be Protected	Survive
Child level results (L1.1, 2.1, 3.1)	Child level results (P2.1, P2.1, P3.1)	Child level results (S.1, S2.1, S3.1)
Indicator name: I1. School attendance rate Indicator name: I2. Students not returning to school after a disaster or stress event	Indicator name: I3. Children in harmful work Indicator name: I4. Children left without appropriate care Indicator name: I5. Household with children embarking in unsafe migration	Indicator name: I6 Individual child dietary diversity score Indicator name: I7. Maternal dietary diversity score Indicator name: I8. Minimum meals per day by children Indicator name: I9. Time between birth and mother returns to work/livelihood activities outside the home Indicator name: I10. Mothers who took increase day time rest during last pregnancy

Household level results (L1.2, L2.2, L3.2)	Household level results (P1.2, P2.2, P3.2)	Household level results (S1.2, S2.2, S3.2)
Indicator name: I11. Indirect and direct costs as a barrier to attend school Indicator name: I12. Home environment - Books and toys for child development		Indicator name: I13. Household ability to pay for their children's health costs at all times.
Cross-cutting indicators		
Indicator name: CC1. Household ability to provide sufficient nutritious food Indicator name: CC2. Household ability to cover costs of children's education and healthcare Indicator name: CC3. Household expenditure spent on child well-being Indicator name: CC4. Households with children that are adequately supported Indicator name: CC5. Households with children who have three minimum basic material needs Indicator name: CC6. Households impacted by shocks and stresses that resorted to negative coping strategies that affect children Indicator name: CC7. Women decision-making power over household resource allocation III. The menu of indicators		

SECTION B

INDICATOR REFERENCE SHEETS

Within the Child Poverty Theme, poverty alleviation programs form a key pathway to achieve the three breakthrough goals stated in Save the Children's global strategy: *"all children survive, learn and are protected from violence"*.

Click here to return to the indicator menu

Indicator name: I1. School attendance rate	
Reference to analytical framework	Breakthrough: Children learn • L1.1a and L2.1a Improved year-round school participation/completion, including during times of stress; • L3.1a Continued attendance in primary school and ECCD.
Definition	• Percentage of students present in school on a given number of days during the year. The indicator can be monitored annually or quarterly depending on the type of interventions for the purpose of L1.1a and L2.1a. • The indicator can capture school attendance patterns during times of stress and or shocks/disasters for the purpose of L3.1. • For stresses such as lean seasons where children are taken out of school, school attendance patterns can be assessed by monitoring attendance in the lead period to the stress event if predictable, during the stress event, and after the recovery period of the stress event. • For assessing education continuity after a major shock/natural disaster, attendance can be measured after the shock, during frequent time intervals. • If staff involved in economic strengthening or poverty alleviation programs face difficulty to access school based or data or school based data collection, the indicator can be measured through household data collection. Household level measurement of attendance can be opted if the project teams do not have authorized access to school for data collection, unavailability/unreliability of attendance records in the schools and or if the project intervention is at targeted at specific/limited number of households in a school catchment area.
Rationale	The indicator assumes the following causality: • Improved household income or reduced poverty status leads to improved attendance of the child. This can be due to households being able to afford expenses associated with sending children to school (eg. bus fares, snacks/school meal, expenses for school projects) and that households depend less on the child for domestic chores and to assist with livelihood activities. • Improved or more stable household income reduces the likelihood of children's education being compromised during times of shock or stress, as a coping strategy (to reduce costs associated with sending children to school or due to the need to send children to work to increase sources of income/share HH productive and non-productive responsibilities). • Stress events can also include seasonality for example, taking children out of school for harvesting/planting seasons or for seasonal migration for quarrying).
Unit of Measure	• Students
Expected Change Direction	• Percentage
Required variables	• Mean attendance by class/year /school/region. • If school attendance is measured at household level, HH – the variable is 12 month –recall of school attendance of school going children, in a given household. Attendance can be categorized as full attendance or less than full attendance. Full attendance could mean all school days of the month minus two school days.

	• For monitoring pre and post attendance during times of stress such as lean periods – the variables are attendance, the type of stress, lead time to the stress if predicted, recovery period for stresses known. • Post-disaster attendance – attendance can be sampled 5, 10, 20, 30, 40, 50 school days after impact and cohort at beginning of next school year (this is a standard indicator under the Comprehensive School Safety (CSS) Framework). • Reasons stated as barriers to school attendance.
Calculation	• Expressed as a percentage. • Numerator: The total number of boys or girls observed in the classroom on a given day. • Denominator: The total number of girls or boys enrolled in the program on that day. [6] • Denominator may change as children transfer in or out, i.e. (% day 1 + % day 2 + % day 3)/ 3. If percentages vary by factors greater than 2, verify that there are no exceptional circumstances, e.g. disease epidemic or festival. [7] • If measured at household level – the numerator is number of households who reported full attendance in the 12 month recall period and the denominator will be number of households surveyed.
Possible disaggregation	• The level of disaggregation depends on the type of project, intervention or type of stress/disaster context. The data can be disaggregated by: • Age/grade; • Geographic - region/ urban or rural/ level of impact of shock or stress; • Type of school – primary/secondary/ECCD • Type of shock/disaster; • Gender; Female/male headed households/ female and male students • Poverty; this can be based on income poverty (defined according to national or regional poverty lines) or it can be based on household categorization of food insecurity or other similar poverty dimensions that are most relevant to your project intervention. Household income/wealth index quintiles – poorest, second, middle, fourth, richest can also be applied. • Households and children who belong to linguistic, religious and or ethnic minority. • Household with a Person with Disability or children with disability. • Households and children who have refugee/migrant status, etc.
Data collection method	• Attendance data can typically be obtained from government education databases such as ESS and school records. • To validate secondary data, it is recommended that spot checks be undertaken: a school attendance rate reported number is the average of three unannounced spot checks on non- consecutive days throughout the year. Spot checks should be conducted via programme staff visits or special data collection forms administered on a pre– selected number of specific days that take into account weekends, holidays, and seasonal and other factors affecting regular attendance. Days for count visits must be random, and advance warning to school authorities should not be given. Spot check form can be used as the data collection tool. • To measure attendance through household data collection, a household survey with a module on 12 month recall of attendance can be administered to the household respondents (parent/caregiver). • To better understand whether affordability and household income status were a factor that contributed to attendance especially in times of stress or post-disaster, it is recommended that focus group discussions are organized with parents, in selected schools from the sample, to understand the reasons for significant changes in attendance. The focus group discussion should be guided by a topical outline.

[6] Save the Children. 2010. The Common Approach to Sponsorship-funded Programming. School Health and Nutrition Module. Page 51. Available at: http://www.savethechildren.org/atf/cf/%7B9def2ebe-10ae-432c-9bd0-df91d2eba74a%7D/CASP%20COMMON%20APPROACH%20MODULE_2010_COMPRESSED.PDF

[7] Save the Children. 2010. The Common Approach to Sponsorship-funded Programming. School Health and Nutrition Module. Page 51. Available at: http://www.savethechildren.org/atf/cf/%7B9def2ebe-10ae-432c-9bd0-df91d2eba74a%7D/CASP%20COMMON%20APPROACH%20MODULE_2010_COMPRESSED.PDF

	• To plan for attendance monitoring in periods of climate related stress – secondary data from recurrent monitoring of seasons/ weather patterns can be obtained from local meteorological information sources.
Where to find tools and resources?	• Save the Children Menu of Indicators – 2008 • Save the Children. The Common Approach to Sponsorship-funded Programming – 2010
Level of data collection	• If data collection is carried out using school based data collection, a sample of schools related to project catchment areas can be used. In these sample schools, the proposed secondary data can be gathered and spot checks can be conducted. • If data collection is carried out at household level, the sample of households can be selected from the total number of project beneficiary households. • The number of schools /households depend on time and resources available with the aim of having maximum representation and convenient sampling as the last option. • Focus group discussions can be targeted to households, purposefully selecting households or schools, based on monitoring results (i.e. exceptional attendance, or unexpectedly low attendance).
Frequency and timing of data collection	• Attendance monitoring in a development context – attendance can be monitored monthly or quarterly depending on the type of intervention. At household level, the proposed 12 month recall can be carried out at the baseline, mid-line and end line data collection of a project. • Spot checks can be undertaken three times, within the year to validate secondary data. • For monitoring attendance during periods of stress, and for those events that are predicted, attendance can be monitored in the lead time, during and recovery period. • For monitoring attendance after a disaster, attendance can be sampled 5, 10, 20, 30, 40, 50 school days after impact and cohort at beginning of next school year.
Time input for data collection and analysis	• Two hours per school for obtaining/reviewing school attendance records. If attendance data is available online and access is authorized to the project team members, downloading/consolidating the data can take up to 30 minutes. • Spot checks would take an hour per school, depending on student/classroom sample. • Household 12 month recall interview will take 5 minutes.
Financial input for data collection and analysis	• Obtaining school records physically and conducting spot checks can be part of program staff monitoring visits, thus bearing minimal financial inputs that would include for instance travel costs, accommodation and per diem. • If data is collected at household level, through a household survey, the financial resources depend on the scale of the survey, sample size and duration of the interview. The cost of the survey will vary from US$ 30,000 to 50,000.
Project/program personnel typically responsible for collecting and analysing the data & level of skill/training required.	• Spot checks can be carried out by field staff or MEAL staff of a project. The staff collecting data should be familiar with the spot check form. • For secondary data analysis, depending on the level of analysis, this may require proficiency in statistical analysis software such as advanced Microsoft Excel, which can also be outsourced. • If a survey is administered at household level, to measure attendance, a third party firm can be hired. Data collection team should have basic enumerator skills and the data analysis team should have advanced proficiency in statistical software. • The project field staff can conduct focus groups. They should be familiar with basic focus group techniques.
Level of resource intensity	• Medium
Known Data Limitations and Significance (if any)	• Difficult to assess quality of data. Availability of secondary data may not be consistent or reliable. • Self-reporting of households for the 12 month recall maybe unreliable but more practical for economic strengthening/poverty alleviation program staff. • Disease, epidemic and festivals are factors that can influence the data collection

	process. Thus spot checks should be carefully planned and scheduled accordingly.

Click here to return to the indicator menu

Indicator name: I2. Students not returning to school after a disaster or stress event	
Reference to analytical framework	Breakthrough: Children learn • L3.1.b Reduced risk of drop out due to inability to afford education or migrate to work; • L3.1c Reduced exposure to child labour, exploitation or marriage as an economic coping strategy following disaster/emergency.
Definition	• Number of students not returning to school in the aftermath of a disaster and/or due to a stress event. This indicator is not equivalent to drop-out rate but includes number of students dropping out of the education system permanently. The indicator also includes number of students not returning to school for a long period, after a disaster event. • Drop out is defined using the local context and education policies determining drop-out (e.g. not attending school for 10 consecutive days – is a measure of drop-out in some countries in normal development contexts). This can be adapted to the disaster context – and should be determined by factoring recovery period after disaster, school re-opening period and community recovery period such as access to relief, transport access etc. Drop out should not be confused with displacement where children who relocate may re-enrol in a school in the relocated area. • This indicator can inform the number of student dropout and those that miss school for a long period, due to an emergency or disaster or due to stress event experienced at household/individual level. • Disaster refers to a natural hazard or large scale shocks. • The timing of the measurement will have to factor school closure, re-opening, relocation of students to other schools and displacement of students. • If staff involved in economic strengthening or poverty alleviation programs face difficulty to access school based or data or school based data collection, the indicator can be measured through household data collection. Household level measurement can be opted if the project teams do not have authorized access to school for data collection, unavailability/unreliability of attendance records in the schools and or if the project intervention is targeted at specific/limited number of households in a school catchment area.
Rationale	The indicator assumes the following causality: • Economic barriers result in children dropping out or not returning to school for a long period, after a disaster.
Unit of Measurement	• Students
Expected Change Direction	• Decrease
Required variables	• Number of drop-out students or children not returning to school for a long period. Long period can be defined based on the recovery period after disaster, it can be typically 6 months up to one year. • Number of total enrolled students. • Reasons for dropping out.
Calculation	• Expressed as a number. • Difference between the total numbers of students enrolled in the school before and after the emergency situation. Students who have not returned to school after the disaster event. This should be validated with displaced students who may have relocated and re-enrolled in school in the relocation area.
Possible disaggregation	The disaggregation will depend on type of disaster, type of household livelihood and vulnerability to disaster. Recommended disaggregation are: • Geographic representation –representation of schools by extent of damage and damage scenarios for example – include areas where school unaffected, but community affected and vice versa; • Household livelihood vulnerability to disaster;

	• Gender; female headed households, female/male students. • Poverty; this can be based on income poverty (defined according to national or regional poverty lines) or it can be based on household categorization of food insecurity or other similar poverty dimensions that are most relevant to your project intervention. Household income/wealth index quintiles – poorest, second, middle, fourth, richest can also be applied. • Households and children who belong to linguistic, religious and or ethnic minority. • Household with a Person with Disability or children with disability. • Households and children who have refugee/migrant status, etc
Data collection method	• Enrolment and attendance data can typically be obtained from government education databases such as ESS and school records. Enrolment data can indicate drop out and attendance data after the disaster will indicate children who have not returned to school. • To measure the indicator through household data collection, a household survey with a module on children's school attendance after the disaster can be administered. • To better understand whether affordability and household income status were a factor that contributed to children returning to school post-disaster, it is recommended that focus group discussions are organized with parents. The focus group discussion should be guided by a topical outline with lines of inquiry on challenges to attending schools such as transport access, availability of uniforms/school text books, availability of food, shelter, the need to assist families with rebuilding homes or assisting in livelihood recovery etc.
Where to find tools and resources?	• Resource: Save the Children, Menu of Outcome Indicators – 2008 • The EiE is defined as "the provision of uninterrupted, high quality learning opportunities for children affected by humanitarian crisis". The CSS Framework was developed more recently and proposed by the Asian Coalition for School Safety in October 2012. Save the Children Fiji (SCF) has supported EiE capacity development in Fiji from June 2010 onwards. Key projects implemented to promote EiE and CSS include the EiE capacity building project (2012-2014) and the PCASS project (2015 - 2016). CSS Output Target #2. Is relevant to this indicator.
Level of data collection	• If data collection is carried out using school based data collection, a sample of schools related to project catchment areas can be used. In these sample schools, the proposed secondary data can be gathered and spot checks can be conducted. • If data collection is carried out at household level, the sample of households can be selected from the total number of project beneficiary households. • The number of schools /households depend on time and resources available with the aim of having maximum representation and convenient sampling as the last option. • Focus group discussions can be targeted to households, purposefully selecting households or schools, based on monitoring results (i.e. exceptional attendance, or unexpectedly low attendance).
Frequency and timing of data collection	• Post disaster – recovery phase assessments. The data can be regularly monitored over a 12 month period after the disaster event.
Time input for data collection and analysis	• The time input for FGDs and KIIs is 60-90 minutes. • Time input for obtaining enrolment/drop out data would be time taken to do school visits or to access government data. • The survey module will take 5 minutes.
Financial input for data collection and analysis	• The financial resources depend on the scale of the survey, sample size and duration of the interview. The main costs would be logistics costs of field teams, and coordination with government education authorities at the administration level required for data (i.e. district, province, etc).
Project/program personnel typically responsible for collecting and analysing the data	• The data can be gathered by project field staff. • If a survey is administered at household level, to measure attendance, a third party firm can be hired. Data collection team should have basic enumerator skills and the data analysis should have advanced proficiency in statistical software.

& level of skill/training required.	• The project MEAL staff can carry out the data aggregation and analysis. They should be proficient in statistical analysis software such as STATA, SPSS and/or Microsoft Excel. • The project field staff can conduct focus groups. They should be familiar with basic focus group techniques.
Level of resource intensity	• Medium
Known Data Limitations and Significance (if any)	• Unavailability of reliable school records after a disaster.

Click here to return to the indicator menu

Indicator name: I3. Children engaged in harmful work	
Reference to analytical framework	Breakthrough: Be protected • P1.1b Reduced need for households to rely on children migrating unaccompanied for work. • P3.1a. Reduced need for households to rely on children's involvement in work that is harmful

Definition	• Percentage of children engaged in harmful work.
	• Harmful work defined by the ILO Convention includes the following categories of harmful work: [8]
	  ○ All forms of slavery or practices similar to slavery, such as the sale and trafficking of children, debt bondage and serfdom and forced or compulsory labour, including forced or compulsory recruitment of children for use in armed conflict;
	  ○ The use, procuring or offering of a child for prostitution, for the production of pornography or for pornographic performances;
	  ○ The use, procuring or offering of a child for illicit activities, in particular for the production and trafficking of drugs as defined in the relevant international treaties;
	  ○ Work which, by its nature or the circumstances in which it is carried out, is likely to harm the health, safety or morals of children.
	• Hazardous work is also further defined by ILO as: [9]
	  ○ work that exposes children to physical, emotional or sexual abuse;
	  ○ work underground, under water, at dangerous heights or in confined spaces;
	  ○ work with dangerous machinery, equipment and tools, or that involves the manual handling or transport of heavy loads;
	  ○ work in an unhealthy environment, which may, for example, expose children to hazardous substances, agents or processes or to temperatures, noise levels, or vibrations damaging to their health;
	  ○ work under particularly difficult conditions such as work for long hours or during the night or work that does not allow for the possibility of returning home each day.
	• Save the Children recognizes that not all forms of work is harmful. While some forms of work violate the rights of children, other forms of work do not, such as light work that can be combined with schooling or work where young people are not exposed to hazards that impact on their wellbeing.
	• Opportunity cost of children in work can also be explored through this indicator by looking it at whether school attendance is compromised due to their engagement in work.
	• Children in work can be estimated using children engaged in excessive work. UNICEF definition of excessive work hours by age range:
	6–11 years: one hour or more of economic work or 28 hours of domestic work per week.
	12–14 years: 14 hours or more of economic work or 28 hours of domestic work per week.
	15-18 years: 43 hours or more of economic or domestic work per week.

Rationale	The indicator assumes the following causality: • Improved household economic status reduces the need to engage children in harmful work. • Perception of time varies by culture, gender, and age. For example, in many societies, girls tend to engage in home-based, non-economic chores, while boys engage in economic labour away from home. Economic labour is often more highly

[8] ILO. 2011. Children in Hazardous Work. http://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/---publ/documents/publication/wcms_155428.pdf.
[9] ILO. 2011. Children in Hazardous Work. http://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/---publ/documents/publication/wcms_155428.pdf.

	valued than home-based labour, profoundly affecting how girls and boys perceive themselves and their value and place within the household. [10]
Unit of Measure	• Individual (children)
Expected Change Direction	• Decrease
Required variables	• Household and child demographic profile. • Household income and livelihood profile. • Children's time use in the past 7 days – the main time use variables are paid work outside the household, unpaid work outside the household, working for family business, economic activity for at least one hour (age group 5-11), economic activity for 14 hours or more (age group 12-14), economic activity less than 14 hours, household chores for less than 28 hours and household chores for 28 hours or more. • Children in work, attending school and or children who missed school to attend other work. • Types of work in which children engage - Type of occupation, time spent working, work environment and conditions.
Calculation	• Expressed as a percentage. • Numerator: Total number of children engaged in harmful work estimated using the time use variables. This can be calculated using number of children aged 6-11 years who work excessive hours for their age and the type of work children engage in. • Denominator: Total number of children surveyed.
Possible disaggregation	• The level of disaggregation depends on type of intervention and project context. Recommended levels of disaggregation are: [11] • Children attending school; • Single orphan, double orphan, not an orphan; • Child headed households • Children affected by conflict/disaster; • Gender: Male/female headed households; male/female children • Geographic - region/ urban or rural; • Poverty; this can be based on income poverty (defined according to national or regional poverty lines) or it can be based on household categorization of food insecurity or other similar poverty dimensions that are most relevant to your project intervention. Household income/wealth index quintiles – poorest, second, middle, fourth, richest can also be applied. • Type of work; type of occupation, time spent working, work environment and conditions. • Households and children who belong to linguistic, religious and or ethnic minority. • Household with a Person with Disability or children with disability. • Households and children who have refugee/migrant status, etc.
Data collection method	• The main data collection method is a household-based survey of children with parents and/or caregivers.[12] • UNICEF MICS4 questionnaire for children aged 5-17 has a specific section on child time use that can be used for collecting data for the time use variable and for the variable on children engaged in harmful work and attending school. • The Child Protection Module (Child labour section) from World Vision's Caregiver Survey toolkit can also be used and modified to estimate children who missed school to attend other work. • The Starter Module and Economic Development Module in the World Vision's Caregiver Survey toolkit can be used and modified to develop the questionnaire for demographic profile, household income and asset profile and household ability to afford basic needs. • The survey can be complemented with qualitative research (focus group discussion

[10] USAID & FHI360. STRIVE. Learning Series. Technical Primer N°1. Accessible at: http://www.seepnetwork.org/filebin/krissy/cyes_library/STRIVE_Child_Time_Use.pdf.
[11] Save the Children. 2014. Child Protection Outcome Indicators.
[12] Save the Children. 2014. Child Protection Outcome Indicators.

	with household members and children) to better understand whether children engaged in work are in fact, engaged in harmful work. The qualitative research can also help to establish the causality between decisions to engage or remove children from harmful work and economic strengthening interventions. For a list of key topical questions regarding children and work environment, please refer to ILO's online tool. • Participatory assessment with children can also be conducted using PRA Guide and Toolkit. [13]
Where to find tools and resources?	• World Vision: Caregiver Survey • UNICEF: MICS6 questionnaire for children Age 5-17 • ILO – Development of Indicators on Child Labour • USAID & FHI360 – Time Use PRA Guide and Toolkit
Level of data collection	• Sample of households benefiting from economic strengthening interventions/poverty alleviation programs.
Frequency and timing of data collection	• The frequency and timing of data collection can be aligned to the projects monitoring and evaluation activities. It is recommended that data be collected through the project baseline and end-line surveys.
Time input for data collection and analysis	• This questionnaire with modules on the stated variables, is estimated to take 30 minutes during the interview.
Financial input for data collection and analysis	• The financial resources depend on the scale of the survey, sample size and duration of the interview. For this type of household survey, it is recommended that a third-party survey firm is recruited. • As the survey has to be administered annually, the cost of the survey will vary from US$ 30,000 to 50,000.
Project/program personnel typically responsible for collecting and analysing the data & level of skill/training required.	• Data collection should have basic enumerator skills. • Data aggregation and analysis: Proficient in statistical analysis software such as STATA, SPSS and or Microsoft Excel.
Level of resource intensity	• High
Known Data Limitations and Significance (if any)	

[13] USAID & FHI360. STRIVE. Learning Series. Technical Primer N°1. Accessible at: http://www.seepnetwork.org/filebin/krissy/cyes_library/STRIVE_Child_Time_Use.pdf.

Click here to return to the indicator menu

Indicator name: I4. Children left without appropriate care	
Reference to analytical framework	Breakthrough: Be protected a. P1.1a. Reduction in the likelihood of non-family based/ alternative care (e.g. orphanages, koranic schools) due to parents migrating for work or parents not being able to afford covering costs for their basic needs.
Definition	• Percentage of children left without appropriate care due to economic reasons. • Appropriate care: the child's care is seen as appropriate when there is at least an identified adult (parent or guardian) who provides the child with a stable, nurturing, and emotionally secure environment. [14] • The relationship between the child and the caregiver should provide physical and psychological security for the child. This factor captures how committed the caregiver is to the child and to his/her involvement with the child. [15] • Economic reasons for disregarding child care include for instance: parental migration/work, extended working hours by parents, sending children to institutional care because parents cannot afford appropriate care. • One important aspect of childhood is the physical safety and psychological security provided by the adult(s) involved in the child's life. [16] The lack of loving care is associated with negative child outcomes, including learning problems, mood disorders (such as depression), and behaviour disorders (such as disobedience and delinquency). [17] Children become especially vulnerable when their mothers and/or fathers or other guardians die or are so sick they cannot provide consistent care. [18] • This indicator can be useful during a humanitarian response context.
Rationale	The indicator assumes the following causality: • Improved household income/livelihood security reduces the economic reasons for children to be left without appropriate care. • If a child is in non-family based alternative care, measurement explores the reasons for this occurring. The module refers to lack of economic means at the household level. In some, we can determine whether economic means, specifically lack thereof, drive children into non-family/alternative care, which can be considered as a risk.
Unit of Measure	• Individual (children)
Expected Change Direction	• Decrease
Required variables	• HH and child demographic profile. • Caregiver profile. • Reasons stated for alternative care /not providing appropriate care.
Calculation	• Expressed as a percentage. • Numerator: number of children identified as left without appropriate care. • Denominator: total number of children surveyed.
Possible disaggregation	• The level of disaggregation depends on type of intervention and project context. Recommended levels of disaggregation are: [19] • Single orphan, double orphan, not an orphan; • Child headed households • Children affected by conflict/disaster; • Gender: Male/female headed households; male/female children • Geographic - region/ urban or rural; • Poverty; this can be based on income poverty (defined according to national or regional poverty lines) or it can be based on household categorization of food insecurity or other similar poverty dimensions that are most relevant to your

[14] USAID & Measure Evaluation. 2014. Child Status Index. Page 17.
[15] USAID & Measure Evaluation. 2014. Child Status Index. Page 17.
[16] USAID & Measure Evaluation. 2014. Child Status Index. Page 17.
[17] USAID & Measure Evaluation. 2014. Child Status Index. Page 17.
[18] USAID & Measure Evaluation. 2014. Child Status Index. Page 17.
[19] Save the Children. 2014. Child Protection Outcome Indicators.

	project intervention. Household income/wealth index quintiles – poorest, second, middle, fourth, richest can also be applied. • Households and children who belong to linguistic, religious and or ethnic minority. • Household with a Person with Disability or children with disability. • Households and children who have refugee/migrant status, etc.
Data collection method	• The data is collected through a household-based survey of children with parents and/or caregivers.[20] • USAID Child status measurement index can be adapted for determining the caregiver profile and the reasons stated for their responses. • During data collection it is important to observe the adult caregiver's interactions with the child. Does the adult seem to know the child well? Does the adult speak of the child in positive ways? Does this adult or someone else feel responsible for this child? Does the child seem to feel happy and safe around the caregiver? Is this child on his/her own, without adult care? [21] • The economic reasons for lack of appropriate care can be researched in-depth through qualitative data collection (focus group discussions with parents/caregivers).
Where to find tools and resources?	• USAID & Measure Evaluation: Child Status Index
Level of data collection	• A sample of households with project interventions can be drawn.
Frequency and timing of data collection	• The frequency and timing of data collection can be aligned to the projects monitoring and evaluation activities. It is recommended that data be collected through the project baseline and end-line surveys.
Time input for data collection and analysis	• This questionnaire with modules on the stated variables, is estimated to take 30 minutes during the interview.
Financial input for data collection and analysis	• The financial resources depend on the scale of the survey, sample size and duration of the interview. For this type of household survey, it is recommended that a third-party survey firm is recruited. • As the survey has to be administered annually, the cost of the survey will vary from US$ 30,000 to 50,000.
Project/program personnel typically responsible for collecting and analysing the data & level of skill/training required.	• Data collection: Survey team should have basic enumerator skills. • Data aggregation and analysis: Research team and project MEAL staff • The qualitative researcher should be familiar with basic focus group techniques.
Level of resource intensity	• Medium
Known Data Limitations and Significance (if any)	• In most countries around the world, the majority of children not living with their own parents are being cared for by extended family members, relatives or others through informal arrangements. A much smaller number of children live outside all forms of care, on the streets or in situations of economic exploitation.[22] These more complex situations are difficult to assess and include under this indicator.

[20] Save the Children. 2014. Child Protection Outcome Indicators.
[21] USAID & Measure Evaluation. 2014. Child Status Index. Page 18.
[22] UNICEF. 2009. Manual for the Measurement of Indicators for Children in formal Care. Page 3. Available at: https://www.unicef.org/protection/Formal_Care20Guide20FINAL.pdf.

Click here to return to the indicator menu

Indicator name: I5. Household with children embarking in unsafe migration	
Reference to analytical framework	Breakthrough: Be protected • P1.1b Reduced need for households to rely on children migrating unaccompanied for work. • P3.1a Reduced need for households to rely on children's involvement in work that is harmful.
Definition	• Percentage of households with children embarking in unsafe migration. • Unsafe migration: refers to voluntary and or involuntary migration that exposes children to exploitation, abuse, neglect, violence and discrimination at transit and destination. Part of the reasons for unsafe migration of the family including children is related to the limited guarantee of job offers at destination for the migrating parents/caregiver. Children of migrants face challenges in adapting to host societies: greater risk of dropping out of school, teenage pregnancy and juvenile crime, incomplete citizenship rights, difficult access to social services, danger of social exclusion. [23] • This indicator can be useful during a humanitarian response context.
Rationale	The indicator assumes the following causality: • Access to a reliable income source/revenue from economic strengthening/poverty alleviation programs, lessens the likelihood of families migrating for work or to meet family's economic needs, thus providing better foundations for the development and safety of their children.
Unit of Measure	• Household
Expected Change Direction	• Decrease
Required variables	• Household demographic profile. • Household migration involving children and reasons for migration.
Calculation	• Expressed as a percentage. • Numerator: Number of households with children embarking in unsafe migration in the past 12 months (or duration of program). • Denominator: Total number of households surveyed.
Possible disaggregation	• The level of disaggregation depends on type of intervention and project context. Recommended levels of disaggregation are: • Gender; Male/female headed households or male/female children. • Child headed households. • Single orphan, double orphan, not an orphan. • Children affected by conflict/disaster. • Geographic; region/ urban or rural. • Poverty; this can be based on income poverty (defined according to national or regional poverty lines) or it can be based on household categorization of food insecurity or other similar poverty dimensions that are most relevant to your project intervention. Household income/wealth index quintiles – poorest, second, middle, fourth, richest can also be applied. • Households and children who belong to linguistic, religious and or ethnic minority. • Household with a Person with Disability or children with disability. • Households and children who have refugee/migrant status, etc.
Data collection method	• The main data collection method is household-based survey. • Survey respondents can be the head of household or adult household member. • A questionnaire will have to be developed for the variable – household migration to determine whether children were engaged in migration and what the reasons were for the household to engage in migration. • The Starter Module and Economic Development Module in the World Vision's Caregiver Survey toolkit can be used and modified to develop the questionnaire for

[23] UNICEF. Children and migration. Available here for download.

	demographic profile, household income and asset profile and household ability to afford basic needs. • The survey can be complemented with qualitative research (focus group discussion with household members and children) to better understand the causality between unsafe migration and economic strengthening/poverty alleviation interventions.
Where to find tools and resources?	• World Vision – Caregiver survey
Level of data collection	• Sample of households with project interventions.
Frequency and timing of data collection	• The data collection can be aligned to the project monitoring and evaluation activities. The proposed survey can be integrated to the project baseline and end-line surveys.
Time input for data collection and analysis	• This questionnaire with modules on the stated variables, is estimated to take 45-60 minutes during the interview.
Financial input for data collection and analysis	• The financial resources depend on the scale of the survey, sample size and duration of the interview. For this type of household survey, it is recommended that a third-party survey firm is recruited. • As the survey has to be administered annually, the cost of the survey will vary from US$ 30,000 to 50,000.
Project/program personnel typically responsible for collecting and analysing the data & level of skill/training required.	• Data collection should have basic enumerator skills and FGD facilitation skills. • Data aggregation and analysis: Proficient in statistical analysis software such as STATA, SPSS and or Microsoft Excel.
Level of resource intensity	• High
Known Data Limitations and Significance (if any)	

Click here to return to the indicator menu

Indicator name: I6 Individual child dietary diversity score	
Reference to analytical framework	Breakthrough: Learn • L1.1 c and 2.1c Improved nutritional status from ability to afford/access sufficient quantity and quality food Breakthrough: Children survive • S2.1a. Continued access to nutritious food year round for all children and PLW in the household, including during times of stress. Continued access to nutritious food year round for all children and PLW in the household, including during times of stress; • S2.1.b Increased expenditure on and consumption of nutritious food.
Definition	• Individual child dietary diversity score can be measured here. • The dietary diversity is a quantitative 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. • This indicator can be useful during a humanitarian response context.
Rationale	The indicator assumes the following causality: • Improved livelihood/income status of household leads to improved nutrient adequacy of the child's diet.
Unit of Measure	• Score
Expected Change Direction	• Increase

Required variables	• Household demographic profile.
	• Food groups such as presented below:[24]
	  ○ Cereals
	  ○ Vitamin rich vegetables and tubers
	  ○ White tubers and roots
	  ○ Dark green leafy vegetables
	  ○ Other vegetables
	  ○ Vitamin A rich fruits
	  ○ Other fruits
	  ○ Organ meat (iron rich)
	  ○ Flesh meat
	  ○ Eggs
	  ○ Fish
	  ○ Legumes nuts and seeds
	  ○ Milk and milk products
	  ○ Oil and fats
	  ○ Red palm products
	  ○ Sweets
	  ○ Spices, condiments, beverages.

Calculation	• Dietary diversity scores are calculated by summing the number of food groups consumed by the individual respondent over the 24-hour recall period. The following steps are included in creating the DDS: • 1. Create new food group variables for those food groups that need to be aggregated. The exact definition of aggregate food groups will depend on the target beneficiaries and the overall aims and design of the project. The FANTA guidance uses 8 aggregate groups. The WHO standard indicators for children 6 to 23 months as used globally for measuring dietary diversity of complimentary feeding which is based off 7 food groups. • An example of aggregating food groups is "Starchy staples", a combination of "Cereals" and "White roots and tubers". A new variable termed "Starchy staples" should be created by combining the answers to "Cereals" and "White roots and tubers". This can be done using the following type of logical syntax:

[24] FAO. 2013. Guidelines for Measuring Household and Individual Dietary Diversity.

<table>
<tr><td></td><td>

Starchy staples = 1 if q1 (Cereals) =1 or q2 (White roots and tubers) = 1
Starchy staples = 0 if q1 (Cereals) = 0 and q2 (White roots and tubers)=0
As a check, run a “frequencies” test on all newly created variables and make sure that all values are either 0 or 1. There should be no values > 1 for the newly created variable.
2. Create a new variable termed DDS.
3. Compute values for the dietary diversity variable by summing all food groups included in the DDS.
As a check on the creation of the variables, all scores should be within the food group range (example 0-7 or 0-8).

</td></tr>
<tr><td>Possible disaggregation</td><td>

The types of food groups eaten;
The frequency of consumption of food items of the same group (in number of days over the past seven days);
The main sources of food (either the main source or the two main sources);
Age (IDDS is often looked at for under 2 year olds, the analysis can be broken down for 0-5 months and 6 - 23 months).
Gender; Female/male children
Poverty; this can be based on income poverty (defined according to national or regional poverty lines) or it can be based on household categorization of food insecurity or other similar poverty dimensions that are most relevant to your project intervention. Household income/wealth index quintiles – poorest, second, middle, fourth, richest can also be applied.
Households and children who belong to linguistic, religious and or ethnic minority.
Household with a Person with Disability or children with disability.
Households and children who have refugee/migrant status, etc.

</td></tr>
<tr><td>Data collection method</td><td>

The main data collection method is a household survey.
The relevant modules on dietary diversity can be adapted from FAO and USAID guidelines.
The approach for collecting information on dietary diversity described in these guidelines is a qualitative 24-hour recall of all the foods and drinks consumed by the respondent (individual level).
The rationale for FAO questionnaire guidelines is to provide a standardized questionnaire of universal applicability from which various dietary diversity scores can be calculated. As such it is not culture, population, or location specific and therefore, prior to using it in the field, it will be necessary to adapt it to the local context.

</td></tr>
<tr><td>Where to find tools and resources?</td><td>

FAO. 2013. Guidelines for Measuring Household and Individual Dietary Diversity
USAID. 2006. Household Dietary Diversity Score (HDDS) for Measurement of household Food Access: Indicator Guide. Version 2
WHO IYCF indicator guidelines

</td></tr>
<tr><td>Level of data collection</td><td>

Children in random sample of project supported households.

</td></tr>
<tr><td>Frequency and timing of data collection</td><td>

The optimal time of year to measure dietary diversity of households or individuals depends on the objective of the survey or monitoring activity. The following table describes several scenarios to assist potential users in planning surveys.

<table>
<tr><th>Objective</th><th colspan="2">Timing</th></tr>
<tr><td rowspan="2">Assessment of the typical diet of households/ individuals</td><td>In rural, agriculture-based communities</td><td>In non agriculture-based communities</td></tr>
<tr><td>When food supplies are still adequate[3] (may be up to 4-5 months after the main harvest).
▶ Looking at dietary diversity at different points in the agricultural cycle is one way of investigating seasonality of food security[4].
In many areas there are important seasonal differences in dietary patterns. For a more complete assessment of usual diet, dietary diversity should be measured during different seasons</td><td>Any time of the year (if seasonality is not an issue)</td></tr>
</table>
</td></tr>
</table>

Time input for data collection and analysis	• This module is estimated to take 45 minutes during the interview
Financial input for data collection and analysis	• The financial resources depend on the scale of the survey, sample size and duration of the interview. For this type of household survey, it is recommended that a third-party survey firm is recruited. • As the survey has to be administered annually, the cost of the survey will vary from US$ 30,000 to 50,000.
Project/program personnel typically responsible for collecting and analysing the data & level of skill/training required.	• Data collection should have basic enumerator skills. • Data aggregation and analysis: Proficient in statistical analysis software such as STATA, SPSS and or Microsoft Excel. • Requires a high level of technical skill both in data collection and analysis.
Level of resource intensity	• Medium
Known Data Limitations and Significance (if any)	• Obtaining detailed data on household food access or individual dietary intake can be time consuming and expensive.

Click here to return to the indicator menu

Indicator name: I7. Maternal dietary diversity score	
Reference to analytical framework	Breakthrough: Children survive • S2.1a. Continued access to nutritious food year round for all children and PLW in the household, including during times of stress. Continued access to nutritious food year round for all children and PLW in the household, including during times of stress.
Definition	• Maternal dietary diversity score. • The dietary diversity is a quantitative 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. • IDDS is often used as a proxy measure of the nutritional quality of an individual's diet. This use is different from the use described in this guide – HDDS as a proxy measure of household access to food. While the questions used to collect data on dietary diversity for both uses are similar, there are some important differences that are reflective of the different objectives. For example, "sugar/honey" is included as a food group for HDDS. As an indicator of socio-economic change, the inclusion of sugar or honey in a household's diet tells us something about their ability to access/purchase food. In contrast, sugar and honey are not included as a food group in the list of food groups included in an IDDS indicator for children, because this food group is not an important contributor to the nutritional quality of a child's diet.[25]
Rationale	The indicator assumes the following causality: • Improved livelihood/income status of household leads to improved nutrient adequacy of the mother's diet.
Unit of Measure	• Number
Expected Change Direction	• Increase

Required variables	• Household demographic profile.
	• Household income and asset profile.
	• Food groups such as presented below:[26]
	  ○ Cereals
	  ○ Vitamin rich vegetables and tubers
	  ○ White tubers and roots
	  ○ Dark green leafy vegetables
	  ○ Other vegetables
	  ○ Vitamin A rich fruits
	  ○ Other fruits
	  ○ Organ meat (iron rich)
	  ○ Flesh meat
	  ○ Eggs
	  ○ Fish
	  ○ Legumes nuts and seeds
	  ○ Milk and milk products
	  ○ Oil and fats
	  ○ Red palm products
	  ○ Sweets
	• Spices, condiments, beverages.

Calculation	• Dietary diversity scores are calculated by summing the number of food groups consumed by the individual respondent over the 24-hour recall period. The following steps are included in creating the DDS: • 1. Create new food group variables for those food groups that need to be aggregated. For example in the DDS the food group "Starchy staples" is a combination of "Cereals" and "White roots and tubers". A new variable termed

[25] USAID. 2006. Household Dietary Diversity Score (HDDS) for Measurement of household Food Access: Indicator Guide. Version 2. Accessible at: https://www.fantaproject.org/sites/default/files/resources/HDDS_v2_Sep06_0.pdf
[26] FAO. 2013. Guidelines for Measuring Household and Individual Dietary Diversity.

<table>
<tr><td></td><td>"Starchy staples" should be created by combining the answers to "Cereals" and "White roots and tubers". This can be done using the following type of logical syntax:
• Starchy staples = 1 if q1 (Cereals) =1 or q2 (White roots and tubers) = 1
• Starchy staples = 0 if q1 (Cereals) = 0 and q2 (White roots and tubers)=0
• As a check, run a "frequencies" test on all newly created variables and make sure that all values are either 0 or 1. There should be no values > 1 for the newly created variable.
• 2. Create a new variable termed DDS.
• 3. Compute values for the dietary diversity variable by summing all food groups included in the DDS (nine for women or children).
• For women aged 16-49, IDDS scores can be between 0-9.</td></tr>
<tr><td>Possible disaggregation</td><td>• The types of food groups eaten;
• The frequency of consumption of food items of the same group (in number of days over the past seven days);
• The main sources of food (either the main source or the two main sources);
• Poverty; this can be based on income poverty (defined according to national or regional poverty lines) or it can be based on household categorization of food insecurity or other similar poverty dimensions that are most relevant to your project intervention. Household income/wealth index quintiles – poorest, second, middle, fourth, richest can also be applied.
• Households and children who belong to linguistic, religious and or ethnic minority.
• Household with a Person with Disability or children with disability.
• Households and children who have refugee/migrant status, etc.</td></tr>
<tr><td>Data collection method</td><td>• The main data collection method is a household survey.
• The relevant modules on dietary diversity can be adapted from FAO and USAID guidelines.
• The approach for collecting information on dietary diversity described in these guidelines is a qualitative 24-hour recall of all the foods and drinks consumed by the respondent (individual level).
• The rationale for FAO questionnaire guidelines is to provide a standardized questionnaire of universal applicability from which various dietary diversity scores can be calculated. As such it is not culture, population, or location specific and therefore, prior to using it in the field, it will be necessary to adapt it to the local context.</td></tr>
<tr><td>Where to find tools and resources?</td><td>• FAO. 2013. Guidelines for Measuring Household and Individual Dietary Diversity
• USAID. 2006. Household Dietary Diversity Score (HDDS) for Measurement of household Food Access: Indicator Guide. Version 2
• WHO IYCF indicator guidelines</td></tr>
<tr><td>Level of data collection</td><td>• Random sample of project supported households.</td></tr>
<tr><td>Frequency and timing of data collection</td><td>• The optimal time of year to measure dietary diversity of households or individuals depends on the objective of the survey or monitoring activity. The following table describes several scenarios to assist potential users in planning surveys.
<table>
<tr><th>Objective</th><th colspan="2">Timing</th></tr>
<tr><td rowspan="2">Assessment of the typical diet of households/ individuals</td><td>In rural, agriculture-based communities</td><td>In non agriculture-based communities</td></tr>
<tr><td>When food supplies are still adequate[3] (may be up to 4-5 months after the main harvest).
▶ Looking at dietary diversity at different points in the agricultural cycle is one way of investigating seasonality of food security[4].
In many areas there are important seasonal differences in dietary patterns. For a more complete assessment of usual diet, dietary diversity should be measured during different seasons</td><td>Any time of the year (if seasonality is not an issue)</td></tr>
</table></td></tr>
</table>

Time input for data collection and analysis	• This module is estimated to take 45 minutes during the interview.
Financial input for data collection and analysis	• The financial resources depend on the scale of the survey, sample size and duration of the interview. For this type of household survey, it is recommended that a third-party survey firm is recruited. • As the survey has to be administered annually, the cost of the survey will vary from US$ 30,000 to 50,000.
Project/program personnel typically responsible for collecting and analysing the data & level of skill/training required.	• Data collection should have basic enumerator skills. • Data aggregation and analysis: Proficient in statistical analysis software such as STATA, SPSS and or Microsoft Excel. • Requires a high level of technical skill both in data collection and analysis.
Level of resource intensity	• Medium
Known Data Limitations and Significance (if any)	• Obtaining detailed data on household food access or individual dietary intake can be time consuming and expensive. • Dietary diversity scores have been validated for several age/sex groups as proxy measures for macro and/ or micronutrient adequacy of the diet. Scores have been positively correlated with adequate micronutrient density of complementary foods for infants and young children (FANTA, 2006), and macronutrient and micronutrient adequacy of the diet for non-breast-fed children (Hatloy et al., 1998; Ruel et al., 2004; Steyn et al., 2006; Kennedy et al., 2007), adolescents (Mirmiran et al., 2004) and adults (Ogle et al., 2001; Foote et al., 2004; Arimond et al., 2010). Some of these validation studies refer to only one country while others have attempted to validate dietary diversity scores for several countries. Nevertheless, research is ongoing and there is currently no international consensus on which food groups to include in the scores at the individual level for different age/sex groups. [27]

[27] FAO. 2013. Guidelines for Measuring Household and Individual Dietary Diversity.

Click here to return to the indicator menu

Indicator name: I8. Minimum meals per day by children	
Reference to analytical framework	Breakthrough: Children survive • S2.1a. Continued access to nutritious food year round for all children and PLW in the household, including during times of stress. Continued access to nutritious food year round for all children and PLW in the household, including during times of stress; • S2.1b Increased expenditure on and consumption of nutritious food.
Definition	• It is the proportion children, who receive solid, semi-solid, or soft foods the minimum number of times or more. • The number of meals that an infant or young child needs in a day depends on how much energy the child needs (and, if the child is breastfed, the amount of energy needs not met by breast milk), the amount that a child can eat at each meal, and the energy density of the food offered. When energy density of the meals is between 0.8–1 kcal/g, breastfed infants 6–8 months old need 2–3 meals per day, while breastfed children 9–23 months needs 3–4 meals per day, with 1–2 additional snacks as desired (15). Children who are not breastfed should be given 1–2 cups of milk1 and 1–2 extra meals per day (23).[28] • This indicator can be useful during a humanitarian response context.
Rationale	The indicator assumes the following causality: • Improved household income status through economic strengthening/poverty alleviation interventions lead to investments in nutrition and improved nutrition of the household and child.
Unit of Measure	• Number of meals
Expected Change Direction	• Increase
Required variables	• Household demographic profile. • Breastfeeding status (for children under 2 years). • Number of meals received in last 24 hours.
Calculation	• Expressed as percentage. • Numerator: number of children who received the minimum of times or more meals during the previous day. • Denominator: total number of children surveyed. • Minimum number of times depends on age of child and breastfeeding status.
Possible disaggregation:	• The types of foods eaten; • The frequency of consumption of food items of the same group (in number of days over the past seven days); • The main sources of food (either the main source or the two main sources); • Gender; Female/male households or male/female children • Poverty; this can be based on income poverty (defined according to national or regional poverty lines) or it can be based on household categorization of food insecurity or other similar poverty dimensions that are most relevant to your project intervention. Household income/wealth index quintiles – poorest, second, middle, fourth, richest can also be applied. • Households and children who belong to linguistic, religious and or ethnic minority. • Household with a Person with Disability or children with disability. • Households and children who have refugee/migrant status, etc.
Data collection method	• The main data collection method is a household survey. For the household demographic profile – the starter module in World Vision Caregiver survey can be used. • For the meals variable – USAID/UNICEF resources can be adapted.
Where to find tools and resources?	• USAID & UNICEF. 2010. Indicators for assessing infant and young child feeding practices. Part 3: Country profiles

[28] USAID & UNICEF. 2010. Indicators for assessing infant and young child feeding practices. Part 3: Country profiles. Accessible at: https://www.unicef.org/nutrition/files/IYCF_Indicators_part_III_country_profiles.pdf .

	• WHO IYCF indicator guidelines
Level of data collection	• Random sample of project supported households.
Frequency and timing of data collection	• Annual.
Time input for data collection and analysis	• This module will take 15-20 minutes during an interview.
Financial input for data collection and analysis	• The financial resources depend on the scale of the survey, sample size and duration of the interview. For this type of household survey, it is recommended that a third-party survey firm is recruited. • As the survey has to be administered annually, the cost of the survey will vary from US$ 30,000 to 50,000.
Project/program personnel typically responsible for collecting and analysing the data & level of skill/training required.	• Data collection should have basic enumerator skills. • Data aggregation and analysis: Proficient in statistical analysis software such as STATA, SPSS and or Microsoft Excel.
Level of resource intensity	• High
Known Data Limitations and Significance (if any)	

Click here to return to the indicator menu	
Indicator name: I9. Time between birth and mother returns to work/livelihood activities outside the home	
Reference to analytical framework	Breakthrough: Children survive • S2.1c Mothers delay return to work after delivery.
Definition	• Time (in months) between birth of child and when mother returns to work/livelihood activities outside the home.
Rationale	The indicator assumes the following causality: • Increased household income/livelihood security contributes to women /mothers being able to take time to rest and be available for exclusive breastfeeding for six months.
Unit of Measure	• Months
Expected Change Direction	• Increase
Required variables	• Time in months. • Livelihoods engaged outside the home after pregnancy. • HH demographic profile.
Calculation	• Mean of time (in months) can be calculated as the average time elapsed between delivery and mother's return to lucrative activity. • Numerator – sum of months provided as answers by respondents. • Denominator – total number of answer (corresponding to the number of respondents). • Reasons for returning to engage livelihood activities outside the house. This could be supplemented by hours worked and location (distance from home) to assess the feasibility of still caring for children/breastfeeding? • We can also calculate the percentage of mothers who are able to stay at home for 6 months post-partum.
Possible disaggregation	The level of disaggregation depends on type of intervention and project context. Recommended levels of disaggregation are: [29] • Gender: Male/female headed households; • Geographic - region/ urban or rural; • Poverty; this can be based on income poverty (defined according to national or regional poverty lines) or it can be based on household categorization of food insecurity or other similar poverty dimensions that are most relevant to your project intervention. Household income/wealth index quintiles – poorest, second, middle, fourth, richest can also be applied. • Households and children who belong to linguistic, religious and or ethnic minority. • Household with a Person with Disability or children with disability. • Households and children who have refugee/migrant status, etc.
Data collection method	• The Starter Module and Economic Development Module in the World Vision's Caregiver Survey toolkit can be used and modified to develop the questionnaire for demographic profile. • The time variable and mothers engagement in livelihood activity can be adapted from World Vision; Caregiver Survey – Health Module: women. Alternatively – according to feedback from Save the Children, a tested question for this indicator is to ask 'How long after birth of [child name] did you return to livelihoods work outside the home?'. • Reasons for returning to livelihood activities can be studied in-depth through focus group discussions with mothers.
Where to find tools and resources?	• World Vision: Caregiver Survey
Level of data collection	• Random sample of mothers in project supported households.

[29] Save the Children. 2014. Child Protection Outcome Indicators.

Frequency and timing of data collection	• One time per year • As part of routine project monitoring activities.
Time input for data collection and analysis	• This module is estimated to take 20 minutes during the interview.
Financial input for data collection and analysis	• The financial resources depend on the scale of the survey, sample size and duration of the interview. For this type of household survey, it is recommended that a third-party survey firm is recruited. • As the survey has to be administered annually, the cost of the survey will vary from US$ 30,000 to 50,000.
Project/program personnel typically responsible for collecting and analysing the data & level of skill/training required.	• Data collection should have basic enumerator skills. • Data aggregation and analysis: Proficient in statistical analysis software such as STATA, SPSS and or Microsoft Excel. • The qualitative researcher should be familiar with basic focus group techniques.
Level of resource intensity	• Medium to High
Known Data Limitations and Significance (if any)	

Click here to return to the indicator menu

Indicator name: I10. Mothers who took increase day time rest during last pregnancy	
Reference to analytical framework	Breakthrough: Children survive • S1.1c. Increased ability to allow time for children's (including adolescents) and mother's preventive and curative care as well as for receiving education on SRH/health behaviours.
Definition	• Percentage of mothers who took increase day time rest during last pregnancy. • Increased day time rest: physical and emotional stress experienced during the pregnancy can cause sleep problems and keep mother-to-be awake at night. This problem can affect both the quantity of sleep a woman gets as well as the quality of it. Thus increased daytime rest is prescribed to avoid daytime sleepiness and to measure whether there is a shift in physically intensive work/labour such as carry water, agriculture etc. to other household members. • The data collection can be targeted to mothers of children under 5 or under 2 as mothers as mothers of older children may have difficulty recalling their pregnancy behaviours.
Rationale	The indicator assumes the following causality: • Increased household income/livelihood security contributes to women /mothers being able to take time to rest during and after pregnancy.
Unit of Measure	• Individual (mothers)
Expected Change Direction	• Increase
Required variables	• HH demographic profile. • HH income and asset profile. • Time allocated for rest in the last pregnancy. • Reasons for mothers allocating time for rest.
Calculation	• Expressed as a percentage. • Numerator – number of mothers who took an increased number of day time rest during their last pregnancy. • Denominator – Number of respondents covered in the survey.
Possible disaggregation	The level of disaggregation depends on type of intervention and project context. Recommended levels of disaggregation are: [30] • Gender: Male/female headed households; • Geographic - region/ urban or rural; • Poverty; this can be based on income poverty (defined according to national or regional poverty lines) or it can be based on household categorization of food insecurity or other similar poverty dimensions that are most relevant to your project intervention. Household income/wealth index quintiles – poorest, second, middle, fourth, richest can also be applied. • Households and children who belong to linguistic, religious and or ethnic minority. • Household with a Person with Disability or children with disability. • Households and children who have refugee/migrant status, etc.
Data collection method	• Household-based survey with mothers. • The Starter Module and Economic Development Module in the World Vision's Caregiver Survey toolkit can be used and modified to develop the questionnaire for demographic profile, household income and asset profile and household ability to afford basic needs. • The details are taken from World Vision; Caregiver Survey – Health Module: women. Although the module does not contain specific questions regarding day time rest during last pregnancy the module contains a set of questions on antenatal care. • Reasons for allocating or not allocating time can be assessed in-depth through focus group discussions with selected mothers.

[30] Save the Children. 2014. Child Protection Outcome Indicators.

Where to find tools and resources?	• World Vision: Caregiver Survey
Level of data collection	• Random sample of mothers in project supported households.
Frequency and timing of data collection	• The frequency and timing of data collection can be aligned to the projects monitoring and evaluation activities. It is recommended that data be collected through the project baseline and end-line surveys.
Time input for data collection and analysis	• This module is estimated to take 45 minutes during the interview.
Financial input for data collection and analysis	• The financial resources depend on the scale of the survey, sample size and duration of the interview. For this type of household survey, it is recommended that a third-party survey firm is recruited. • As the survey has to be administered annually, the cost of the survey will vary from US$ 30,000 to 50,000.
Project/program personnel typically responsible for collecting and analysing the data & level of skill/training required.	• Data collection should have basic enumerator skills. • Data aggregation and analysis: Proficient in statistical analysis software such as STATA, SPSS and or Microsoft Excel. • The qualitative researcher should be familiar with basic focus group techniques.
Level of resource intensity	• High
Known Data Limitations and Significance (if any)	

Click here to return to the indicator menu

Indicator name: I11. Indirect and direct costs as a barrier to attend school	
Reference to analytical framework	Breakthrough: Children learn • L1.1a and 2.1a Improved year round school participation/completion, including during times of stress; • L.1.2a. and L2.2a. Improved ability to meet child's school expenses and nutrition/food needs; • L3.2a Continued ability to meet child's school expenses and nutrition/food needs after a disaster or shock.
Definition	• Percentage of households/parents/caregivers citing direct and indirect costs as a barrier to access school by child. • Descriptions of direct costs include e.g. costs of textbooks, teaching materials, uniforms, compulsory parental contributions (in money or by providing services). • Descriptions of indirect costs include other payments necessary to effectively access education (e.g. payment for water, transportation, school lunch). • Although not measured in the indicator, it is also important to keep in mind the opportunity cost of sending children to school i.e, reduced contributions, in terms of productive and non-productive work by children. • In a humanitarian context, frequency of data collection can be aligned with the recovery period from disaster.
Rationale	The indicator assumes the following causality: • Improved household income status results in reduced financial barriers for children to attend and participate in school. • Improved household income reduces the likelihood of children's education and school expenses being compromised during times of shock or stress, as a coping strategy.
Unit of Measure	• Households, individuals (parents, caregivers)
Expected Change Direction	• Decrease
Required variables	• Household demographic profile. • Household income/livelihood profile. • Direct and indirect costs cited as a barrier to schooling. • Disaster impacts at household level on incomes and livelihood. • Coping strategies adapted after a disaster.
Calculation	• Numerator: Total number of households citing direct and indirect costs as a barrier to schooling. • Denominator: Total number of household surveyed.
Possible disaggregation	• The households can be disaggregated by: • Gender – female headed households; male/female children • Geographic - region/ urban or rural; • Poverty; this can be based on income poverty (defined according to national or regional poverty lines) or it can be based on household categorization of food insecurity or other similar poverty dimensions that are most relevant to your project intervention. Household income/wealth index quintiles – poorest, second, middle, fourth, richest can also be applied. • Households and children who belong to linguistic, religious and or ethnic minority. • Household with a Person with Disability or children with disability. • Households and children who have refugee/migrant status, etc.
Data collection method	• The main data collection method is household-based survey. • Survey respondents can be the head of household or adult household member or caregiver. • The survey questionnaire will include questions based on the variables indicated above – demographic module, income profile, schooling costs – direct and indirect as a barrier to schooling. • The Starter Module and Economic Development Module in the World Vision's Caregiver Survey toolkit can be used and modified to develop the questionnaire for demographic profile, household income and asset profile and household ability to

	afford basic needs. • Qualitative data collection (focus group with parents/caregivers) recommended to fully understand type of direct and indirect costs.
Where to find tools and resources?	• World Vision Caregiver Survey • The ActionAid/Right to Education indicators and form for section 1: right to free and compulsory education covers direct and indirect costs of school • Bond Meal - Assessing effectiveness in education
Level of data collection	• Sample of households benefiting from economic strengthening or poverty alleviation interventions.
Frequency and timing of data collection	• The frequency and timing of data collection can be aligned to the projects monitoring and evaluation activities. It is recommended that data be collected through the project baseline and end-line surveys. • If assessing continued education affordability after a disaster – the questionnaire can be administered during the disaster recovery period as part of routine monitoring or rapid assessment activities.
Time input for data collection and analysis	• This module is estimated to take 30 minutes during the interview.
Financial input for data collection and analysis	• The financial resources depend on the scale of the survey, sample size and duration of the interview. For this type of household survey, it is recommended that a third party survey firm is recruited. • The cost of small scale survey will vary between US$ 30,000-50,000.
Project/program personnel typically responsible for collecting and analysing the data & level of skill/training required.	• Data collection should have basic enumerator skills. • Data aggregation and analysis: Proficient in statistical analysis software such as STATA, SPSS and or Microsoft Excel. • The qualitative researcher should be familiar with basic focus group techniques.
Level of resource intensity	• Medium
Known Data Limitations and Significance (if any):	• During the survey make sure that direct and indirect costs are defined and understood by the respondents.

Click here to return to the indicator menu

Indicator name: I12. Home environment - Books and toys for child development	
Reference to analytical framework	Breakthrough: Children learn • L 1.2c, L2.2 c, L3.2c Increased ability to allow time for children's learning at home; • L1.2 d, L2.2d L3.2d. Improved ability to provide home learning support (books, toys, interactions).
Definition	• Percentage of households with a minimum number of books and toys available for children in the home context. Minimum number of books can be 3 books and minimum of toys could be two play things. • Books can include books or other literacy materials (magazine articles, comic books, school newspaper, etc.) that are either owned or borrowed from a school or community library. • Toys include child play things such as homemade toys, manufactured toys, household objects/objects found outside.
Rationale	The indicator assumes the following causality: • Increased household income/livelihood security increases household economic ability and affordability to support child development and to provide a nurturing environment at home.
Unit of Measure	• Number of books and toys.
Expected Change Direction	• Increase
Required variables	• HH demographic profile. • HH income profile. • Types of books and toys present in the household.
Calculation	• The indicator can be estimated as a mean. Average number of books/toys is calculated by adding all toys/books counted across every household and then dividing by the total number of households, with children, surveyed.
Possible disaggregation	• Item characteristic (toy or book); • Geographic - region/ urban or rural; • Religion/race/linguistic minority/ethnic minority; • Gender; Female/male headed households; male/female children • Poverty; this can be based on income poverty (defined according to national or regional poverty lines) or it can be based on household categorization of food insecurity or other similar poverty dimensions that are most relevant to your project intervention. Household income/wealth index quintiles – poorest, second, middle, fourth, richest can also be applied. • Households and children who belong to linguistic, religious and or ethnic minority. • Household with a Person with Disability or children with disability. • Households and children who have refugee/migrant status, etc.
Data collection method	• This is a survey administered to families or caregivers in households. • The Education and ECCD Module from World Vision Caregiver Survey toolkit can be used, see questions DCD01 and DCD02. The same question can be adapted to ask about the number of toys within the household. UNICEF MICS survey – Child development module also describes types of books and toys. • Save the Children's International Development Early Learning Assessment (IDELA) tool can also be applied to collect data on home environment.
Where to find tools and resources?	• Save the Children. 2015. IDELA - Working Paper • World Vision Caregiver Survey • UNICEF MICS 4 Survey tool – Child Development (CD 3)
Level of data collection	• Sample of households benefiting from economic strengthening or poverty alleviation program interventions.
Frequency and timing of data collection	• The frequency and timing of data collection can be aligned to the projects monitoring and evaluation activities. It is recommended that data be collected through the project baseline and end-line surveys. • This indicator can be tracked as part of routine and/or annual project monitoring by project staff.

Time input for data collection and analysis	• This module is estimated to take 25 minutes during the interview.
Financial input for data collection and analysis	• The financial resources depend on the scale of the survey, sample size and duration of the interview. For this type of household survey, it is recommended that a third party survey firm is recruited. • The cost of small scale survey will vary between US$ 30,000-50,000.
Project/program personnel typically responsible for collecting and analysing the data & level of skill/training required.	• Data collection should have basic enumerator skills. • Data aggregation: By number of children in the household (i.e. average number of books/toys per child). • Analysis: Proficient in statistical analysis software such as STATA, SPSS and or Microsoft Excel.
Level of resource intensity	• Medium
Known Data Limitations and Significance (if any)	

Click here to return to the indicator menu

Indicator name: I13. Household ability to pay for their children's health costs at all times	
Reference to analytical framework	Breakthrough: Children survive • S2.1a. Continued access to essential healthcare year round for all children in the household, including during times of stress;
Definition	• Proportion of parents or caregivers who are able to pay for their children's health costs without negative coping strategies; • To measure parents or caregivers ability to pay for health costs during shocks and stresses, throughout the year, the frequency of data collection can be aligned to the lead period to the stress (if predictable), during and after the recovery period of the stress or shock; • This indicator can be useful during a humanitarian response context.
Rationale	The indicator assumes the following causality: • Improved household income or reduced poverty status leads to improved investments in children's health and; • Improved household income reduces the likelihood of children's health expenses being compromised during times of shock or stress, as a coping strategy.
Unit of Measure	• Children
Expected Change Direction	• Increase
Required variables	• Children's health costs and household ability to pay. • HH and child demographic profile. • Income/expenditure module and the coping strategies module. • Types of stresses (if predicted) and information of shocks/disaster impacts.
Calculation	• Expressed as a percentage. • Numerator: Number of households able to pay for their health costs at all times. • Denominator: Total number of households surveyed.
Possible disaggregation	• The level of disaggregation depends on type of intervention and project context. Recommended levels of disaggregation are: [31] • Gender; Male/female headed households; male/female children. • Geographic - region/ urban or rural/ level of shocks/disaster impact; • Poverty; this can be based on income poverty (defined according to national or regional poverty lines) or it can be based on household categorization of food insecurity or other similar poverty dimensions that are most relevant to your project intervention. Household income/wealth index quintiles – poorest, second, middle, fourth, richest can also be applied. • Households and children who belong to linguistic, religious and or ethnic minority. • Household with a Person with Disability or children with disability. • Households and children who have refugee/migrant status, etc.
Data collection method	• The main data collection method is household-based survey with parents and/or caregivers.[32] • The Starter Module and Economic Development Module in the World Vision's Caregiver Survey toolkit can be used and modified to develop the questionnaire for demographic profile, household income and asset profile and household coping strategies. • Qualitative data collection recommended to fully understand affordability throughout the year. The focus group discussion with household respondents can be guided by a topical outline.
Where to find tools and resources?	• World Vision: Caregiver Survey • Cost Barriers Toolkit[33]
Level of data collection	• A sample of households benefiting from economic strengthening interventions/poverty alleviation programs.

[31] Save the Children. 2014. Child Protection Outcome Indicators.
[32] Save the Children. 2014. Child Protection Outcome Indicators.
[33] A "cost Barriers Toolkit" is under development and will be hyperlinked as soon as available.

Frequency and timing of data collection	• One time per year for regular monitoring purposes. • To measure coping strategies during and after stress/shock the frequency of data collection should be aligned to the lead period before the stress, during and after the recovery period of the stress/shock.
Time input for data collection and analysis	• This module is estimated to take 45 minutes during the interview.
Financial input for data collection and analysis	• The financial resources depend on the scale of the survey, sample size and duration of the interview. For this type of household survey, it is recommended that a third-party survey firm is recruited. • As the survey has to be administered annually, the cost of the survey will vary from US$ 30,000 to 50,000.
Project/program personnel typically responsible for collecting and analysing the data & level of skill/training required.	• Data collection should have basic enumerator skills. • Data aggregation and analysis: Proficient in statistical analysis software such as STATA, SPSS and or Microsoft Excel. • Qualitative researchers should be familiar with basic focus group techniques.
Level of resource intensity	• High
Known Data Limitations and Significance (if any)	• Time consuming and costly

Click here to return to the indicator menu

Indicator name: CC1. Household ability to provide sufficient nutritious food	
Reference to analytical framework	Breakthrough: Children learn • L 1.1c and L 2.1 c Improved nutrition from ability to afford/access nutrition; • L3.1d Continued nutrition intake from ability to afford/access; • L1.2a and L2.2a Improved ability to meet child's school expenses and nutrition/food needs; • L3.2a Continued ability to meet child's school expenses and nutrition/food needs / following disaster; Breakthrough: Be protected • P1.2a, P2.2a and P3.2a Families are empowered and supported to create a safe and nurturing home that is economically secure. Breakthrough: Children survive • S2.2b Improved ability to cover cost/allow time for accessing nutrition services; • S3.2 b Continued ability to allow time for accessing health and nutrition services.
Definition	• Percent of households with year-round ability to provide sufficient nutritious food for the family's needs. • Affordability is measured by the gap between current income and the amount of money needed to meet the needs of a household (measured by the cheapest diet that meets the nutritional requirements of families using just the foods available locally). Affordability of nutrition food can be assessed through the Cost of Diet tool. The Cost of the Diet (CotD) is an innovative method and bespoke software developed by Save the Children in 2006 to understand the extent to which poverty affects the ability of individuals and households to meet their needs for energy and nutrients. The tool is used to determine how many people can afford a nutritious diet based on national level data on income and expenditure and how costs can be factored for individual target groups (e.g. children on complementary feeding age and pregnant women.). • Sufficient nutrition can be determined by a diet meeting minimum requirements of macro and micronutrients which is further detailed in the CotD tool. • The frequency of measurement can be changed to assess impacts on nutrition affordability after a stress (for example, lean /non lean season) or shock/disaster period. • If interested, this indicator can be further complemented with modules to explore household food security.
Rationale	The indicator assumes the following causality: • Improved household income or reduced poverty status leads to improved ability to invest in children's nutrition and; • Improved household income reduces the likelihood of children's nutrition being compromised during times of shock or stress, as a coping strategy.
Unit of Measure	• Households
Expected Change Direction	• Increase
Required variables	• HH demographic profile. • Cost of diet tool • HH income levels which can be estimated using the Household Economy Approach (HEA) assessments. • Food security (optional) - HH ability to meet food needs over 12 months using Months of Adequate Food Provisioning, HH and child nutritional status (this can be assessed through dietary diversity and hunger scale modules, income/expenditure module and the coping strategies module). • Types of stresses (if predicted) and information of shocks/disaster impacts.
Calculation	• Numerator: Number of households able to afford the cheapest diet. *This is based on the Cost of Diet tool detailed below which also looks at nutrition sufficiency within the diet.* • Denominator: Total number of households.

Possible disaggregation	The level of disaggregation depends on type of intervention and project context. Recommended levels of disaggregation are : • Gender; Male/female headed households; male/female children. • Geographic; region/ urban or rural/ level of shocks/disaster impact; • Seasons; which affect food availability. • Poverty; this can be based on income poverty (defined according to national or regional poverty lines) or it can be based on household categorization of food insecurity or other similar poverty dimensions that are most relevant to your project intervention. Household income/wealth index quintiles – poorest, second, middle, fourth, richest can also be applied. • Households and children who belong to linguistic, religious and or ethnic minority. • Household with a Person with Disability or children with disability. • Households and children who have refugee/migrant status, etc
Data collection method	• The main data collection method is household-based survey. • Survey respondents can be the head of household or adult household member. • The survey questionnaire will include questions based on the variables indicated above – demographic module, food supply, nutrition status and affordability. • The Food Security, Starter and Economic Development Modules in the World Vision's Caregiver Survey toolkit can be used and modified to develop the questionnaire for demographic profile, household income and asset profile and household ability to afford basic needs. • Questionnaire design can also be informed using the Food and Nutrition Technical Assistance (FANTA) project tools such as the Months of Adequate Household Food Provisioning (MAHFP) and the Household Dietary Diversity Score (HDDS) can be used. • Qualitative data collection recommended to fully understand affordability. The focus group discussion with household respondents can be guided by a topical outline. • For monitoring purpose: FANTA tool can be used for monitoring consumption and DDS. The USAID Income Generation Activities Manual can be used for income monitoring. [34]
Where to find tools and resources?	• Save the Children. Cost of Diet Tool. Version 2. • World Vision – Caregiver survey • FANTA Months of Adequate Household Food Provisioning (MAHFP) • FANTA Household Dietary Diversity Score (HDDS) • USAID Income Generation Activities Manual
Level of data collection	• Sample of households benefiting from economic strengthening interventions/poverty alleviation programs.
Frequency and timing of data collection	• One time per year. • If measuring impact after a stress or disaster – the data can be collected before and after the stress recovery period.
Time input for data collection and analysis	• This questionnaire with modules on the stated variables, is estimated to take 45 minutes during the interview.
Financial input for data collection and analysis	• The financial resources depend on the scale of the survey, sample size and duration of the interview. For this type of household survey, it is recommended that a third-party survey firm is recruited. • As the survey has to be administered annually, the cost of the survey will vary from US$ 30,000 to 50,000.
Project/program personnel typically responsible for collecting and analysing the data & level of	• Data collection should have basic enumerator skills. • Data aggregation and analysis: Proficient in statistical analysis software such as STATA, SPSS and or Microsoft Excel. • Qualitative researchers should be familiar with basic focus group techniques.

[34] USAID. 2007. https://www.microlinks.org/sites/microlinks/files/resource/files/ML5545_iga_manual_eng_final.pdf.

skill/training required.	
Level of resource intensity	• High
Known Data Limitations and Significance (if any)	• Household's ability to afford nutritious food should be clearly defined prior to the survey in order to distinguish household that relies or not to coping strategies to afford nutritious food. • Coping strategies such as loan for food does not qualify households with the ability to afford nutritious food for the family members' needs. • Care should be taken in analysis to ensure seasonality is explained, to correctly interpret the findings.
Click here to return to the indicator menu	
Indicator name: CC2. Household ability to cover costs of children's education and healthcare	
Reference to analytical framework	Breakthrough: Learn • L.1.2a and 2.2a Improved ability to meet child's school expenses and nutrition/food needs. Breakthrough: Be protected • P1.2a. and P2.2a. At-risk Families are empowered and supported to create a safe and nurturing home that is economically secure. • P3.2a. Improved income opportunities for adult and child headed households that creates an economically secure environment. Breakthrough: Survive: • S1.2a Improved ability to meet child's healthcare expenses (all costs, including opportunity costs).
Definition	• Percentage of parents or caregivers who were able to cover the costs of their children's education and healthcare through their own financial means. • Adequate health care is defined as a child's access to basic health care services that are age-appropriate, including immunizations (for children under five), bed nets, health education (e.g., HIV prevention for youth), other preventive measures, and appropriate medical care and medicines when sick. • This indicator can be useful during a humanitarian response context. It can be measured through tracking of cash transfer assistance after a disaster.
Rationale	The indicator assumes the following causality: • Improved household incomes and livelihood security increases parent/caregivers' ability to cover costs of education and healthcare.
Unit of Measure Direction	• Parents, caregivers (can utilize household level information to reduce data collection costs).
Expected Change	• Increased
Required variables	• Health and education costs and ability to pay (including price information). • HH and child demographic profile. • Household income and asset profile. • External support in the last 13 months. If the purpose is to assess whether economic strengthening program/poverty alleviation interventions by Save the Children impact household affordability of education and health costs – this variable can have two sections – one that look at Save the Children support and one that look at external assistance in general including government social protection schemes.
Calculation	• Expressed as a percentage. • Numerator: Number of parents/caregivers (households) stating that they are able to support children's education and healthcare costs. • Denominator: Total number of individuals (households) surveyed.
Possible disaggregation	• The level of disaggregation depends on type of intervention and project context. Recommended levels of disaggregation are: [35]

[35] Save the Children. 2014. Child Protection Outcome Indicators.

	• Gender: Male/female headed households; male/female children. • Geographic - region/ urban or rural; • Households by type of livelihood interventions • Poverty; this can be based on income poverty (defined according to national or regional poverty lines) or it can be based on household categorization of food insecurity or other similar poverty dimensions that are most relevant to your project intervention. Household income/wealth index quintiles – poorest, second, middle, fourth, richest can also be applied. • Households and children who belong to linguistic, religious and or ethnic minority. • Household with a Person with Disability or children with disability. • Households and children who have refugee/migrant status, etc.
Data collection method	• The main data collection method a household-based survey of parents and/or caregivers.[36] • The Starter Module and Economic Development Module in the World Vision's Caregiver Survey toolkit can be used and modified to develop the questionnaire for demographic profile, household income and asset profile and household ability to afford basic needs. • UNICEF MICS6 Questionnaire for household can be used and modified. See Education and Early Childhood Development (ECD) section of the questionnaire. • The survey can be complemented with qualitative research (focus group discussion with household members) to better understand the causality between households ability to finance child expenses and economic strengthening interventions.
Where to find tools and resources?	• World Vision: Caregiver Survey • UNICEF: MICS6 Household questionnaire
Level of data collection	• Sample of households benefiting from economic strengthening or poverty alleviation interventions.
Frequency and timing of data collection	• The frequency and timing of data collection can be aligned to the projects monitoring and evaluation activities. It is recommended that data be collected through the project baseline and end-line surveys.
Time input for data collection and analysis	• The estimated time to cover modules for the indicator variables is 45 minutes.
Financial input for data collection and analysis	• The financial resources depend on the scale of the survey, sample size and duration of the interview. For this type of household survey, it is recommended that a third-party survey firm is recruited. • As the survey has to be administered annually, the cost of the survey will vary from US$ 30,000 to 50,000.
Project/program personnel typically responsible for collecting and analysing the data & level of skill/training required.	• Data collection should have basic enumerator skills. • Data aggregation and analysis: Proficient in statistical analysis software such as STATA, SPSS and or Microsoft Excel. • The qualitative researcher should be familiar with basic focus group techniques.
Level of resource intensity	• High
Known Data Limitations and Significance (if any)	

[36] Save the Children. 2014. Child Protection Outcome Indicators.

Click here to return to the indicator menu

Indicator name: CC3. Household expenditure spent on child well-being	
Reference to analytical framework	Breakthrough: Learn • L1.2a and L2.2aImproved ability to meet child's school expenses and nutrition/food needs. • L3.2a Continued ability to meet child's school expenses and nutrition/food needs / following disaster. Breakthrough: Be protected • P1.2a. and P2.2a. At-risk Families are empowered and supported to create a safe and nurturing home that is economically secure. • P3.2a. Improved income opportunities for adult and child headed households that creates an economically secure environment. Breakthrough: Children survive • S2.1b. Increased expenditure on and consumption of nutritious food; • S2.2a Improved ability (cost/decision making power) of mother to make informed decisions- about nutrition; • S2.2b Improved ability to cover cost/allow time for accessing nutrition services.
Definition	• Percentage of household expenditure spent on child well-being • This includes household's expenditure on domains relevant to influencing the child's development and well-being such as: food, health, WASH, education, transportation, and clothing. [37] • Welfare or well-being children is defined here in a broad sense and measured by the response of household demand for food, child clothing, healthcare and education to changes in household demographic composition. • Child-rearing expenses vary considerably by household income level. • This indicator can be useful during a humanitarian response context.
Rationale	The indicator assumes the following causality: • Improved household income status through economic strengthening/poverty alleviation interventions lead to investments child-wellbeing measured by nutrition, health, education, WASH etc.
Unit of Measure	• Monetary currency
Expected Change Direction	• Increase
Required variables	• Household demographic profile. • Household income and asset profile. • Number of domains relevant to child well-being covered by household expenditures such as clothing, education, healthcare, entertainment, and others such as presents, treats, jewellery, transport costs. These domains can be selected based on context.
Calculation	• The household-level measure of this indicator is the percentage of each household's total expenditures devoted to the variables described in the "Required variable" section. • To calculate the measure, each household's daily expenditures on the aforementioned domains must be matched at the household level with their total expenditures. The formula for calculating this percentage is:[38] • Numerator: expenditure on the total sum of relevant variables. • Denominator: total household expenditure.
Possible disaggregation	• By domain of expenditure (variables); • Gender: Male/female headed households; male/female children • Child headed households

[37] USAID & Measure Evaluation. 2014. Child Status Index. Available at: https://www.measureevaluation.org/resources/publications/ms-08-31a
[38] International Food Policy Research Institute. 2010. Measuring Food Security using Household Expenditure Survey. Accessible at: https://core.ac.uk/download/pdf/6388467.pdf.

	• Geographic - region/ urban or rural; • Poverty; this can be based on income poverty (defined according to national or regional poverty lines) or it can be based on household categorization of food insecurity or other similar poverty dimensions that are most relevant to your project intervention. Household income/wealth index quintiles – poorest, second, middle, fourth, richest can also be applied. • Households and children who belong to linguistic, religious and or ethnic minority. • Household with a Person with Disability or children with disability. • Households and children who have refugee/migrant status, etc.
Data collection method	• Household survey data. • Household survey questionnaire. • Section 4 "Food and non-food consumption and expenditure" section of the Young Lives survey questionnaire can be used. The "Household and child expenditure on the last 12 days/months" sub-section is particularly relevant for the assessment of this indicator. However, the questionnaires developed by Young Lives are age specific, thus is it recommended to visit http://younglives.org.uk/content/household-and-child-survey for selecting the questionnaire that best match with the respondent's age. • The Economic Development Module from World Vision's Caregiver Survey toolkit can be used and modified to develop the questionnaire.
Where to find tools and resources?	• Young Lives – Household Questionnaire Younger Cohort • List of Young Lives Household questionnaires • Technical note and guidance from Young Lives for interview processes • International Food Policy Research Institute. 2010. Measuring Food Security using Household Expenditure Survey • USAID & Measure Evaluation: Child Status Index • World Vision [39]
Level of data collection	• Sample of households benefiting from economic strengthening interventions/poverty alleviation programs.
Frequency and timing of data collection	• The frequency and timing of data collection can be aligned to the projects monitoring and evaluation activities. It is recommended that data be collected through the project baseline and end-line surveys.
Time input for data collection and analysis	• This module will take 15-20 minutes during an interview.
Financial input for data collection and analysis	• The financial resources depend on the scale of the survey, sample size and duration of the interview. For this type of household survey, it is recommended that a third-party survey firm is recruited. • As the survey has to be administered annually, the cost of the survey will vary from US$ 30,000 to 50,000.
Project/program personnel typically responsible for collecting and analysing the data & level of skill/training required.	• Data collection team should have basic enumerator skills. • Data aggregation and analysis: Proficient in statistical analysis software such as STATA, SPSS and or Microsoft Excel.
Level of resource intensity	• High
Known Data Limitations and Significance (if any)	• This process can be time consuming, expensive, with capacity constraints. • Data quality associated with expenditure and income is prone to response bias and high level of error. • Although it is well established that income is a strong indicator of children's well-

[39] The child Poverty Theme will add a link to instruments used by Save the Children Country Offices to collect this indicator.

	being, little attention has been paid to possible differences in the allocation of economic resources, especially by family type. Few studies have focused directly on expenditures on children. Because each household makes numerous decisions on how to allocate its financial resources, not only income, but also the allocation of economic resources, needs to be thoroughly examined to fully understand children's wellbeing in single- and two-parent families. [40]

[40] Megumi O. 2010. Household expenditures on children, 2007-08. Accessible at: https://www.bls.gov/opub/mlr/2010/09/art1full.pdf.

Click here to return to the indicator menu

Indicator name: CC4. Households with children that are adequately supported	
Reference to analytical framework	Breakthrough: Be protected • P1.2a. and P2.2a. At-risk Families are empowered and supported to create a safe and nurturing home that is economically secure. • P3.2a. Improved income opportunities for adult and child headed households that creates an economically secure environment.
Definition	• Percentage of households with children that are adequately fed, clothed and cared for at follow-up (e.g. 18 months later) • Adequate nutrition is reached when the child has sufficient and nutritious food at all times of the year to grow well and to have an active and healthy life. [41] • Adequate clothing include two sets of clothes and a pair of shoes for all children (5-18 years) and a blanket for sleeping for all children (5-18 years). • The child's care is seen as good when there is an identified adult (parent or guardian) who provides the child with a stable, nurturing, and emotionally secure environment.[42]
Rationale	The indicator assumes the following causality: • Improved household income/livelihood security increases household ability and investments to ensure that children are adequately fed, clothed and cared for.
Unit of Measure	• Households
Expected Change Direction	• Increase
Required variables	• Adequate care/support (feeding, clothing and care). • Household demographic profile. • Household income and asset profile.
Calculation	• Expressed as a percentage: • Numerator: total number of households with children that are adequately fed, clothed, and/or cared for. • Denominator: Total number of households surveyed.
Possible disaggregation	• The level of disaggregation depends on type of intervention and project context. Recommended levels of disaggregation are: • Gender: Male/female headed households; • Geographic - region/ urban or rural; • Poverty; this can be based on income poverty (defined according to national or regional poverty lines) or it can be based on household categorization of food insecurity or other similar poverty dimensions that are most relevant to your project intervention. Household income/wealth index quintiles – poorest, second, middle, fourth, richest can also be applied. • Households and children who belong to linguistic, religious and or ethnic minority. • Household with a Person with Disability or children with disability. • Households and children who have refugee/migrant status, etc.
Data collection method	• The main data collection method is the household-based survey of children with parents and/or caregivers.[43] • For the adequate care variable, the Starter Module (basic needs section) from World Vision's Caregiver Survey toolkit can be used and modified to develop the questionnaire. USAID Child Status Index toolkit can be used to design questionnaire on adequate feeding, clothing and care. See especially section 2.1 Domain 1 – Food and Nutrition, Domain 2 – Shelter and care; Factor 2B Care. [44] • The Starter Module and Economic Development Module in the World Vision's Caregiver Survey toolkit can be used and modified to develop the questionnaire for demographic profile, household income and asset profile and household ability to

[41] USAID & Measure Evaluation. 2014. Child Status Index. Pages 11-12.
[42] USAID & Measure Evaluation. 2014. Child Status Index. Pages 17
[43] Save the Children. 2014. Child Protection Outcome Indicators.
[44] USAID & Measure Evaluation. 2014. Child Status Index. Pages 11-21.

	afford basic needs. • Qualitative data collection (focus group discussion) recommended to fully understand to what extent children are cared for and looked after by their family/caregiver and the causality between ability of household to provide adequate care for children and economic strengthening/poverty alleviation interventions.
Where to find tools and resources?	• World Vision: Caregiver Survey • USAID & Measure Evaluation: Child Status Index
Level of data collection	• Sample of households benefiting economic strengthening or poverty alleviation program interventions.
Frequency and timing of data collection	• The frequency and timing of data collection can be aligned to the projects monitoring and evaluation activities. It is recommended that data be collected through the project baseline and end-line surveys.
Time input for data collection and analysis	• This questionnaire with modules on the stated variables, is estimated to take 45 minutes during the interview.
Financial input for data collection and analysis	• The financial resources depend on the scale of the survey, sample size and duration of the interview. For this type of household survey, it is recommended that a third-party survey firm is recruited. • As the survey has to be administered annually, the cost of the survey will vary from US$ 30,000 to 50,000.
Project/program personnel typically responsible for collecting and analysing the data & level of skill/training required.	• Data collection team should have basic enumerator skills. • Data aggregation and analysis team should be proficient in statistical analysis software such as STATA, SPSS and or Microsoft Excel. • Qualitative researcher should be familiar with basic focus group techniques.
Level of resource intensity	• High
Known Data Limitations and Significance (if any)	

Click here to return to the indicator menu

Indicator name: CC5. Households with children who have three minimum basic material needs	
Reference to analytical framework	Breakthrough: Survive • S2.2b Improved ability to cover cost/allow time for accessing nutrition services. Breakthrough: Be protected • P1.2a. and P2.2a. At-risk Families are empowered and supported to create a safe and nurturing home that is economically secure. • P3.2a. Improved income opportunities for adult and child headed households that creates an economically secure environment.
Definition	• Percentage of households with children who have three minimum basic material needs • The CRC, Article 27, states that it is the right of children to have access to basic material needs such as nutrition (food), clothing, housing (shelter). Article 24 recognized the right for children to enjoy the highest attainable standard of health and that it is the duty of the state parties to ensure that no child is deprived of his right of access to health care services.[45]
Rationale	The indicator assumes the following causality: • Improved household incomes and livelihood security increases the number of households with children whose basic needs are met.
Unit of Measure	• Households
Expected Change Direction	• Increase
Required variables	• Children with minimum basic material needs. • HH and child demographic profile. • Total child population, obtained from the most recent census data.
Calculation	• Expressed as a percentage: • Numerator: Number of households where all children have three minimum basic material needs met. • Denominator: Total number of households with children surveyed.
Possible disaggregation	• The level of disaggregation depends on type of intervention and project context. Recommended levels of disaggregation are: • Gender: Male/female headed households; male/female children • Geographic - region/ urban or rural. • Poverty; this can be based on income poverty (defined according to national or regional poverty lines) or it can be based on household categorization of food insecurity or other similar poverty dimensions that are most relevant to your project intervention. Household income/wealth index quintiles – poorest, second, middle, fourth, richest can also be applied. • Households and children who belong to linguistic, religious and or ethnic minority. • Household with a Person with Disability or children with disability. • Households and children who have refugee/migrant status, etc.
Data collection method	• The main data collection method is a household-based survey of parents and/or caregivers.[46] • The Starter Module and Economic Development Module in the World Vision's Caregiver Survey toolkit can be used and modified to develop the questionnaire for demographic profile, household income and asset profile and household ability to afford basic needs. • For the variable children meeting basic needs, UNICEF MICS6 Questionnaire for household can be adapted. • The survey can be complemented with qualitative research (focus group discussion with family members and children) to better understand the causality between households ability to fulfil basic needs of children and economic strengthening/poverty

[45] United Nations. 1989. Convention on the Rights of the Child. Available at: http://www.ohchr.org/EN/ProfessionalInterest/Pages/CRC.aspx.
[46] Save the Children. 2014. Child Protection Outcome Indicators.

	alleviation interventions.
Where to find tools and resources?	• World Vision: Caregiver Survey • UNICEF: MICS6 Household questionnaire
Level of data collection	• Sample of households benefiting from economic strengthening or poverty alleviation program interventions.
Frequency and timing of data collection	• The frequency and timing of data collection can be aligned to the projects monitoring and evaluation activities. It is recommended that data be collected through the project baseline and end-line surveys.
Time input for data collection and analysis	• This questionnaire with modules on the stated variables, is estimated to take 45 minutes during the interview. • Indicator specific questions can be included in routine and/or annual monitoring activities.
Financial input for data collection and analysis	• The financial resources depend on the scale of the survey, sample size and duration of the interview. For this type of household survey, it is recommended that a third-party survey firm is recruited. • As the survey has to be administered annually, the cost of the survey will vary from US$ 30,000 to 50,000.
Project/program personnel typically responsible for collecting and analysing the data & level of skill/training required.	• Data collection should have basic enumerator skills. • Data aggregation and analysis: Proficient in statistical analysis software such as STATA, SPSS and or Microsoft Excel.
Level of resource intensity	• Moderate to High
Known Data Limitations and Significance (if any)	

Click here to return to the indicator menu

Indicator name: CC6. Households impacted by shocks and stresses that resorted to negative coping strategies that affect children	
Reference to analytical framework	Breakthrough: Children learn • L3.2a. Continued ability to meet child's school expenses and nutrition/food needs / following disaster; Breakthrough: Be protected • P1.2b., P2.2b and P3.2b Income stabilized for HH affected by disaster/emergency; Breakthrough: Children survive • S1.2c and S2.2c Increased ability to access & afford WASH services and inputs; • S2.2b. Improved ability to cover cost/allow time for accessing nutrition services; • S3.2a. Continued ability to meet the costs of accessing health and nutrition services; • S3.2b. Continued ability to allow time for accessing health and nutrition services.
Definition	• Proportion of households impacted by disasters that adopt negative coping strategies. • Negative coping strategies are measures which are adopted by the households to survive the situation that are detrimental to human well-being. • Negative coping strategies become more frequent when few other options are available. Some households for instance are forced to sell off vital assets such as domestic items or clothes. Some household member find themselves obliged to resort to crime, violence, loans that they are not able to repay, or to reduce the intake of food and selling of food rations in order to cover the need of non-food items not extended in the assistance package. Other negative coping strategies range from illegal collection of natural resources such as firewood, theft of crops, cattle and other assets, to selling sexual services as a means of making a living.[47] • This indicator can be useful during a humanitarian response context.
Rationale	The indicator assumes the following causality: • Improved household income status through economic strengthening/poverty alleviation interventions lead to reduced risk of negative coping strategies that affect children.
Unit of Measure	• Households
Expected Change Direction	• Decrease
Required variables	• Households adopting negative coping strategies. • HH and child demographic profile.
Calculation	• Expressed as a percentage. • Numerator: Number of households using negative coping strategies • Denominator: Total number of households surveyed.
Possible disaggregation	• The level of disaggregation depends on type of intervention and project context. Recommended levels of disaggregation are: [48] • Gender: Male/female headed households; male/female children • Types of disaster/emergency • Geographic - region/ urban or rural; • Poverty; this can be based on income poverty (defined according to national or regional poverty lines) or it can be based on household categorization of food insecurity or other similar poverty dimensions that are most relevant to your project intervention. Household income/wealth index quintiles – poorest, second, middle, fourth, richest can also be applied. • Households and children who belong to linguistic, religious and or ethnic minority. • Household with a Person with Disability or children with disability. • Households and children who have refugee/migrant status, etc.

[47] UNHCR. 2006. Refugee livelihoods. A review of evidence. Accessible at: http://www.unhcr.org/4423fe5d2.pdf.
[48] Save the Children. 2014. Child Protection Outcome Indicators.

Data collection method	• Household-based survey with parents and/or caregivers.[49] • The Economic Module from World Vision's Caregiver Survey toolkit can be used and modified to develop the questionnaire. • Qualitative data collection through focus group discussions with children applying age appropriate participatory methods are recommended to better understand children's perspectives on the household coping strategies.
Where to find tools and resources?	• World Vision: Caregiver Survey • How to develop a list of negative coping strategies
Level of data collection	• Sample of households benefiting from economic strengthening interventions/poverty alleviation programs.
Frequency and timing of data collection	• One time per year
Time input for data collection and analysis	• This module is estimated to take 15-20 minutes during the interview.
Financial input for data collection and analysis	• The financial resources depend on the scale of the survey, sample size and duration of the interview. For this type of household survey, it is recommended that a third-party survey firm is recruited. • As the survey has to be administered annually, the cost of the survey will vary from US$ 30,000 to 50,000.
Project/program personnel typically responsible for collecting and analysing the data & level of skill/training required.	• Data collection should have basic enumerator skills. • Data aggregation and analysis: Proficient in statistical analysis software such as STATA, SPSS and or Microsoft Excel.
Level of resource intensity	• High
Known Data Limitations and Significance (if any)	

[49] Save the Children. 2014. Child Protection Outcome Indicators.

Click here to return to the indicator menu

Indicator name: CC7. Women decision-making power over household resource allocation	
Reference to analytical framework	Breakthrough: Learn • L1.2and and L2.2a. Improved ability to meet child's school expenses and nutrition/food needs. Breakthrough: Be protected • P1.2a. and P2.2a. At-risk Families are empowered and supported to create a safe and nurturing home that is economically secure. • P3.2a. Improved income opportunities for adult and child headed households that creates an economically secure environment. Breakthrough: Children survive • S1.2a. Improved ability to meet child's healthcare expenses (all costs, including opportunity costs). • S2.2a. Improved ability (cost/decision making power) of mother to make informed decisions- about nutrition. • S2.2b. Improved ability to cover cost/allow time for accessing nutrition services.
Definition	• Women decision-making power over household income and resources allocation. • Decision-making over household resources is defined as the ownership, access to, and decision making power over productive resources such as land, livestock, agricultural equipment, consumer durables, and credit. [50] • Women empowerment and decision-making is reached when a woman participates in a given decision when she alone or jointly with someone else makes the decision. This is also defined as the number of decisions a woman participates in.[51] • Women decision-making over household resources is a domain relevant to one of the five domains of empowerment according to the Women's Empowerment in Agriculture Index (WEAI). • The indicator can be used when considering any other indicator that relates to household expenditures and spending on children.
Rationale	The indicator assumes the following causality: • Increased income/livelihood security leads to increase investments in children and this is enhanced by intra-household decision making powers. Evidence show that households do not necessarily act in a unitary manner when allocating resources; women and men often have different preferences for allocating food and non-food resources and may therefore distribute these resources differently, based on their bargaining power within a household. Research also show positive associations between increases in women's empowerment and improved nutrition outcomes and, conversely, that actions leading to women's disempowerment can result in adverse nutritional impacts for women themselves as well as for their children. [52]
Unit of Measure	• Mean - Index
Expected Change Direction	• Increase
Required variables[53]	• Education, ethnicity, age group, and other individual characteristics. • Primary agricultural activity, poverty status, income quintile, and other household characteristics. • Strata, region, climate and other location characteristics.
Calculation	• Calculation based on WEAI toolkit. IFPRI's resource centre on WEAI calculation can be consulted at: http://www.ifpri.org/weai-training-materials

[50] USAID, IFPRI & OPHI. 2012. Women's Empowerment in Agriculture. Accessible at: http://www.ophi.org.uk/wp-content/uploads/2012_WEAI_Brochure.pdf.
[51] Measure Evaluation. Accessible at: https://www.measureevaluation.org/prh/rh_indicators/crosscutting/wgse/participation-of-women-in-household-decision.
[52] IFPRI. 2013. Women's Empowerment and Nutrition. Accessible at: http://www.fsnnetwork.org/sites/default/files/ifpridp01294.pdf.
[53] Extracted from: Alkire S. 2013. Instructional Guide on the Women's Empowerment in Agriculture Index. Accessible at: https://www.ifpri.org/sites/default/files/Basic%20Page/weai_instructionalguide_1.pdf.

<table>
<tr><td></td><td>

- Measure Evaluation proposes the following calculation for measuring the participation of women in determining health care, household purchase and visiting family: "It is calculated by giving a score of 1 to each decision a woman participates (and 0 otherwise) in alone or jointly with someone else and then taking the sum. The index value will thus range from 0 (participates in none of the three decisions) to 3 (participates in all three decisions)".[54]

</td></tr>
<tr><td>Possible disaggregation</td><td>

- Gender: Male/female headed households; male/female children.
- Geographic - region/ urban or rural;
- Poverty; this can be based on income poverty (defined according to national or regional poverty lines) or it can be based on household categorization of food insecurity or other similar poverty dimensions that are most relevant to your project intervention. Household income/wealth index quintiles – poorest, second, middle, fourth, richest can also be applied.
- Households and children who belong to linguistic, religious and or ethnic minority.
- Household with a Person with Disability or children with disability.
- Households and children who have refugee/migrant status, etc.

</td></tr>
<tr><td>Data collection method</td><td>

- Household survey questionnaire, following WEAI procedure.
- The WEAI is a tool composed of two sub-indexes: one measures the five domains of empowerment for women, and the other measures gender parity in empowerment within the household. It is an aggregate index reported at the country or regional level that is based on individual-level data on men and women within the same households.
- The Questionnaire modules for the Women's Empowerment in Agriculture Index can be used for this purpose. See especially Module G: Decision Making:

<table>
<tr><td colspan="2">ENUMERATOR: Ask G01 for all categories of activities before asking G02.

If household does not engage in that particular activity, enter code for "Decision not made" and proceed to next activity.</td><td>When decisions are made regarding the following aspects of household life, who is it that normally takes the decision?
If 1 and respondent is male OR
If 2 and respondent is female (>> next domain)
Otherwise >>G02

CODE 1↓</td><td>To what extent do you feel you can make your own personal decisions regarding these aspects of household life if you want(ed) to?

CODE 2↓</td></tr>
<tr><td></td><td></td><td>G01</td><td>G02</td></tr>
<tr><td>A</td><td>Agricultural production?</td><td></td><td></td></tr>
<tr><td>B</td><td>What inputs to buy for agricultural production?</td><td></td><td></td></tr>
<tr><td>C</td><td>What types of crops to grow for agricultural</td><td></td><td></td></tr>
<tr><td>D</td><td>When or who would take crops to the market?</td><td></td><td></td></tr>
<tr><td>E</td><td>Livestock raising?</td><td></td><td></td></tr>
<tr><td>F</td><td>Non-farm business activity?</td><td></td><td></td></tr>
<tr><td>G</td><td>Your own (singular) wage or salary employment?</td><td></td><td></td></tr>
<tr><td>H1</td><td>Major household expenditures? (such as a</td><td></td><td></td></tr>
<tr><td>H2</td><td>Minor household expenditures? (such food</td><td></td><td></td></tr>
<tr><td>M</td><td>Whether or not to use family planning to space or</td><td></td><td></td></tr>
</table>

</td></tr>
</table>

[54] Measure Evaluation. Accessible at : https://www.measureevaluation.org/prh/rh_indicators/crosscutting/wgse/participation-of-women-in-household-decision

CODE 1: (G01) Decision making	CODE 2: (G02) Extent of participation in decision making
Main male or husband.....1 Main female or wife.....2 Husband and wife jointly.....3 Someone else in the household.....4 Jointly with someone else inside the household....5 Jointly with someone else outside the household.6 Someone outside the household/other.....7 Decision not made.....98	Not at all .....1 Small extent.....2 Medium extent.....3 To a high extent.....4

ENUMERATOR: This set of questions is very important. I am going to give you some reasons why you act as you do in the activities I just mentioned. You might have several reasons for doing what you do and there is no right or wrong answer. Please tell me how true it would be to say: If household does not engage in that particular activity, enter code for "Decision not made" and proceed to next activity.		My actions in [DOMAIN] are determined by the situation. I don't really have an option. [READ OPTIONS] **CODE 1↓**	My actions in [DOMAIN] are partly because I will get in trouble with someone if I act differently. [READ OPTIONS] **CODE 1↓**	Regarding [DOMAIN] I do what I do so others don't think poorly of me. [READ OPTIONS] **CODE 1↓**	Regarding [DOMAIN] I do what I do because I personally think it is the right thing to do. . [READ OPTIONS] **CODE 1↓**
		G03A	**G03**	**G04**	**G05**
A	Agricultural production				
B	Getting inputs for agricultural production				
C	The types of crops to grow for agricultural				
D	Taking crops to the market (or not)				
E	Livestock raising				
F	Nonfarm business activity				
G	Your own (singular) wage or salary				
H1	Major household expenditures (such as a				
H2	Minor household expenditures (such food				
I	What to do if you have a serious health				
J	How to protect yourself from violence?				
K	Whether and how to express religious faith?				
L	What kind of tasks you will do on a particular				
M	Whether or not to use family planning to space				

CODE 1: Motivation for activity
Never true.....1 Not very true.....2 Somewhat true.....3 Always true.....4 Decision not made.....98

Where to find tools and resources?	• International Food Policy Research Institute – WEAI • Measure Evaluation – Participation if women in household decision-making index

Level of data collection	• Sample of households benefiting from economic strengthening interventions/poverty alleviation programs.
Frequency and timing of data collection	• Annual
Time input for data collection and analysis	• This module will take 45 minutes during an interview.
Financial input for data collection and analysis	• The financial resources depend on the scale of the survey, sample size and duration of the interview. For this type of household survey, it is recommended that a third-party survey firm is recruited. • As the survey has to be administered annually, the cost of the survey will vary from US$ 30,000 to 50,000.
Project/program personnel typically responsible for collecting and analysing the data & level of skill/training required.	• Data collection should have basic enumerator skills. • Familiarity and skills with WEAI survey questionnaire. • Data aggregation and analysis: Proficient in statistical analysis software such as STATA or SPSS.
Level of resource intensity	• High
Known Data Limitations and Significance (if any)	• The data collection process for the indicator is costly. • The indicator has mainly been used in the context of food security.

Click here to return to the indicator menu

Indicator name: CC8. Home environment – Parental/adult interactions with child	
Reference to analytical framework	Breakthrough: Children learn • L1.2c and L2.2c. Increased ability to allow time for children's learning at home; • L1.2d and L2.2c Improved ability to provide home learning support (books, toys, interactions).
Definition	• Percentage of children with whom an adult household member engaged in activities that promote learning and school readiness. • Interaction or engaging with children include play, sing, draw, and tell stories with the child for early child hood development. For children in grades 1-5 – assisting with homework could be considered.
Rationale	The indicator assumes the following causality: • Improved income and livelihood security of the household allows more or less time for parents/caregivers to provide a nurturing environment for child development. The measurement specifically focuses on measuring whether parents have enough time outside of livelihoods, to spend with children. • A review of early childhood development interventions across multiple sections such as education, health, nutrition, protection etc. concludes that to make interventions successful, smart, and sustainable, they need to be implemented as multi-sectoral intervention packages anchored in nurturing care.[55]
Unit of Measure	• Children
Expected Change Direction	• Increase
Required variables	• Household demographic profile. • Time use in livelihood activity. • Children with whom adult household members engaged in four or more activities (The activities include: (A) Reading books to or looking at picture books with the child, (B) Telling stories to the child, (C) Singing songs to or with the child, including lullabies, (D) Taking the child outside the home, compound yard or enclosure, (E) Playing with the child, and (F) Naming, counting or drawing things to or with the child). Adult member of the household has to be over 16 years of age.
Calculation	• Numerator – Children with whom an adult household member engaged in four or more activities (time bound i.e. last 4 weeks). • Denominator – number of children in the sample.
Possible disaggregation	The households can be disaggregated by: • Level of education of the mother and or parents/caregivers; • Gender – female headed households; male/female children. • Geographic - region/ urban or rural. • Poverty; this can be based on income poverty (defined according to national or regional poverty lines) or it can be based on household categorization of food insecurity or other similar poverty dimensions that are most relevant to your project intervention. Household income/wealth index quintiles – poorest, second, middle, fourth, richest can also be applied. • Households and children who belong to linguistic, religious and or ethnic minority. • Household with a Person with Disability or children with disability. • Households and children who have refugee/migrant status, etc.
Data collection method	• The main data collection method is household-based survey. • Survey respondents can be the head of household or adult household member. • The survey questionnaire will include questions based on the variables indicated above – demographic module, income profile, schooling costs – direct and indirect as a barrier to schooling. • UNICEF MICS survey – Child development module can be adapted for data

[55] http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(16)31390-3/abstract

	collection. The Education and ECCD Module from World Vision Caregiver Survey toolkit can be used. • The Starter Module and Economic Development Module in the World Vision's Caregiver Survey toolkit can be used and modified to develop the questionnaire for demographic profile, household income and asset profile and household ability to afford basic needs. • For livelihood time use, standard FSL tools can be used.
Where to find tools and resources?	• World Vision Caregiver Survey • UNICEF MICS 4 Survey tool – Child Development (CD 3) • Other reading: PRIDI - Regional Project on Child Indicators. 2015. Urgency and Possibility - First Initiative of Comparative Data on Child Development in Latin America. Inter-American Development Bank.
Level of data collection	• Sample of children in households with poverty alleviation or economic strengthening interventions.
Frequency and timing of data collection	• The frequency and timing of data collection can be aligned to the projects monitoring and evaluation activities. It is recommended that data be collected through the project baseline and end-line surveys.
Time input for data collection and analysis	• This module is estimated to take 30 minutes during the interview.
Financial input for data collection and analysis	• The financial resources depend on the scale of the survey, sample size and duration of the interview. For this type of household survey, it is recommended that a third party survey firm is recruited. • The cost of small scale survey will vary between US$ 30,000-50,000.
Project/program personnel typically responsible for collecting and analysing the data & level of skill/training required.	• Data collection should have basic enumerator skills. • Data aggregation and analysis: Proficient in statistical analysis software such as STATA, SPSS and or Microsoft Excel.
Level of resource intensity	• Medium
Known Data Limitations and Significance (if any)	

SECTION C

STANDARD FSL INDICATORS AND TOOLS

This section provides a list of common FSL indicators that are typically measured at household level with links for further reading on indicator measurement and/or tools. These indicators complement the indicators listed in Section B of this manual; one set of indicators does not replace the other set, they are meant to be used together.

FSL Indicator	Tool
1. % of children living in households who report increase or diversification of targeted assets	• **World Vision Caregiver Survey** The Starter Module and Economic Development Module have relevant sections that can be adapted for the measurement of this indicator. Download tool: Click here • **Demographic and Health Surveys (DHS)** Demographic and Health Surveys (DHS) are nationally-representative household surveys that provide data for a wide range of monitoring and impact evaluation indicators in the areas of population, health, and nutrition. Download tool: Click here
2. % of children living in households where one or more adults are earning stable income for the past year	• **World Vision Caregiver Survey** The Starter Module and Economic Development Module have relevant sections that can be adapted for the measurement of this indicator. Download tool: Click here • **Demographic and Health Surveys (DHS)** Demographic and Health Surveys (DHS) are nationally-representative household surveys that provide data for a wide range of monitoring and impact evaluation indicators in the areas of population, health, and nutrition. Download tool: Click here
3. % of children living in households who faced a disaster in the past 12 months, but were able to recover and now have the same (or better) standard of living as they did before.	• **Household Economy Approach (HEA)** Widely used tool (within and outside SC) originally developed in the 1990s by Save the Children as a systems-based approach for assessing household food security. The HEA model has been used for a range of purposes across a range of sectors including: Disaster response; Early recovery; Development planning; Early warning & scenario analysis; Disaster risk reduction and Monitoring & evaluation. Download tool: Link #1: Link to tool Link #2: Practitioner's guide to HEA (Save UK)
4. Severity of Household Food Insecurity measured by Household Food Insecurity Access Scale (HFIAS)	• **Household Food Insecurity Access Scale (HFIAS)** The Household Food Insecurity Access Scale (HFIAS) provides a simple and user-friendly approach for measuring the impacts of development food aid programs on the *access* component of household food insecurity. Download tool: Click here
5. Food consumption score	• **WFP Food Consumption Score Analysis (2008)** Download tool: Click here.
6. Dietary diversity of household	• **Household Dietary Diversity Score (HDDS)** Household dietary diversity Score (HDDS) is a quantitative measure of food consumption that reflects household access to a variety of foods. HDDS is not meant to be used in accessing dietary diversity at individual level. Download tool: Click here

7. Percentage of households receiving livelihood assistance (assets, training) by Save the Children	• **Multiple Indicator Cluster Survey 6 (MICS6)** The Household Questionnaire has a specific section "Social Transfers" that enquiries about assistance received and awareness or participation to training by external agencies. Download tool: Click here • **World Vision Caregiver Survey** The Starter Module has a question that enquiries about the form of economic support perceived by the household (question HHE13). Download tool: Click here
8. Percentage of households receiving waiver/cash-transfer/scholarships for child's schooling.	• The Economic Development Module from World Vision Caregiver Survey toolkit can be used and adapted to include a question to parents/caregivers whether the household has accessed any kind of financial support for children to attend school. Download tool: Click here
9. Percentage of households receiving social protection/cash assistance by Save the Children	• **World Vision Caregiver Survey** The Starter Module has a question that enquiries about the form of economic support perceived by the household The Starter Module and Economic Development Module in the World Vision's Caregiver Survey toolkit can be used and modified to develop the questionnaire for demographic profile, household income and asset profile. Download tool: Click here • **Household Economy Approach (HEA)** HEA analysis investigates how access to food is linked to households' broader livelihoods – how they produce food and generate cash income, expenditure for survival, and how these livelihoods are connected to larger economic systems. This is valuable as it can be used to determine whether groups of households are able to get the food & cash they need in order to survive and to protect their livelihoods. Download tool: Link #1: Link to tool Link #2: Practitioner's guide to HEA (Save UK)
10. Percentage of households receiving support on financial literacy/expenditure management	• **Multiple Indicator Cluster Survey 6 (MICS6)** The Household Questionnaire has a specific section "Social Transfers" that enquiries about assistance received and awareness or participation to training by external agencies. Download tool: Click here
11. Coping Strategies Index	• **Coping Strategy Index (CSI)** Developed by WFP, the CSI is widely used as a proxy indicator for access to food. It is a weighted score to measures frequency and severity of coping strategies. Data is collected on the number of days (in the last thirty) a household used a specific coping strategy due to a shortage of food and/or income. Download tool: Click here
12. Percentage of households with appropriate WASH facilities	• **World Vision Caregiver Survey** The WASH module of the Caregiver Survey can be used and adapted to measure this indicator. Download tool: Click here • **Demographic and Health Surveys (DHS)**

	Demographic and Health Surveys (DHS) are nationally-representative household surveys that provide data for a wide range of monitoring and impact evaluation indicators in the areas of population, health, and nutrition. Download tool: Click here
13. Survival threshold	• **Household Economy Approach (HEA)** HEA analysis investigates how access to food is linked to households' broader livelihoods – how they produce food and generate cash income, expenditure for survival, and how these livelihoods are connected to larger economic systems. This is valuable as it can be used to determine whether groups of households are able to get the food & cash they need in order to survive and to protect their livelihoods. Download tool: Link #1: Link to tool Link #2: Practitioner's guide to HEA (Save UK)
14. Livelihood protection threshold	• **Household Economy Approach (HEA)** HEA analysis investigates how access to food is linked to households' broader livelihoods – how they produce food and generate cash income, expenditure for survival, and how these livelihoods are connected to larger economic systems. This is valuable as it can be used to determine whether groups of households are able to get the food & cash they need in order to survive and to protect their livelihoods. Download tool: Link #1: Link to tool Link #2: Practitioner's guide to HEA (Save UK)
15. Share of high household food expenditure	• **Household Economy Approach (HEA)** HEA analysis investigates how access to food is linked to households' broader livelihoods – how they produce food and generate cash income, expenditure for survival, and how these livelihoods are connected to larger economic systems. This is valuable as it can be used to determine whether groups of households are able to get the food & cash they need in order to survive and to protect their livelihoods. Download tool: Link #1: Link to tool Link #2: Practitioner's guide to HEA (Save UK)
16. Household Hunger Index	• **Household Hunger Scale (HHS)** The HHS is most appropriate in areas of substantial food insecurity. It can be used for a variety of objectives, including to: ○ Monitor the prevalence of hunger over time across countries or regions to assess progress toward meeting international development commitments. ○ Assess the food security situation in a country or region to provide evidence for the development and implementation of policies and programs that address food insecurity and hunger. ○ Provide information for early warning or nutrition and food-security surveillance. ○ Inform standardized food security/humanitarian phase classifications. Download tool: Link #1: Indicator definition & measurement tool (FANTA III) Link #2: Tool printable version (SPRING) Link #3: Technical note - HHS cross-cultural use (FANTA II)
17. Household income/expenditure	• **World Vision Caregiver Survey** The Economic Development module of the Caregiver Survey can be used and adapted to measure this indicator. Download tool: Click here

	• **Household Economy Approach (HEA)** HEA analysis investigates how access to food is linked to households' broader livelihoods – how they produce food and generate cash income, expenditure for survival, and how these livelihoods are connected to larger economic systems. The HEA includes a household survey form developed in Malawi that has relevant section on household expenditure on non-food items and on income. These section can be adapted to measure this outcome (see link #3). The HEA includes as well a specific survey form used in Tanzania to survey household expenditures. Download tool: Link #1: Link to tool Link #2: Practitioner's guide to HEA (Save UK) Link #3: Malawi Second Integrated household survey, 2004 Link #4: Tanzania, household expenditure survey, 2001
18. Household asset register	• **World Vision Caregiver Survey** The Starter module of the Caregiver Survey can be used and adapted to measure this indicator. Download tool: Click here
19. Household savings and debts	• **World Vision Caregiver Survey** The Starter module of the Caregiver Survey can be used and adapted to measure this indicator. Download tool: Click here • **Household Economy Approach (HEA)** The HEA includes a household survey form developed in Malawi that has relevant section on household expenditure on non-food items and on income. These section can be adapted to measure this outcome (see link #3). Download tool: Link #1: Link to tool Link #2: Practitioner's guide to HEA (Save UK) Link #3: Malawi Second Integrated household survey, 2004
20. Food security	• **Integrated Phase Classification (IPC):** The IPC is a set of protocols (tools and procedures) to classify the severity of food insecurity and provide actionable knowledge for decision support. The IPC consolidates wide-ranging evidence on food-insecure people to provide core answers to the following questions: How severe is the situation? Where are areas that are food insecure? How many people are food insecure? Who are the food-insecure people in terms of socioeconomic characteristics? Why are the people food insecure? Download tool: Link #1: IPC Technical Manual Version 2.0 (2012) Link #2: IPC online homepage Link #3: IPC manual version 1.1 (2008) - older version

APPENDIX

INDICATOR REFERENCE SHEET TEMPLATE

Click here to return to the indicator menu	
Indicator name: Indicator name as it appears in the Part A. Section III. Summary indicator menu	
Reference to analytical framework	• This section provides reference to the relevant breakthrough(s) and results in the analytical frameworks in Part A. Section II.
Definition	• This section provides the complete indicator name formulated as a measure. • The indicator definitions explain all terms and elements of the indicator to ensure consistent interpretation and that intended measurements are reliably collected. • The definition section provides contextual considerations for measuring the indicator such as in a humanitarian context or to factor seasonality.
Rationale	• This section describes the causality explored through the indicator. It aims to show why the indicator is relevant to economic strengthening/poverty alleviation programming.
Unit of Measure	• Unit of measure is either a number, a percentage or score.
Expected Change Direction	• This is either positive or negative.
Required variables	• This section lists the type of variables relevant to measuring the indicator. Household profiles are listed across most indicators but the user can decide whether the household profile would be relevant or note.
Calculation	• If expressed as a percentage, the numerator and denominator are stated here. If the indicator is an index or composite indicator, the procedure or formula for construction of the score is provided here.
Possible disaggregation	• This section indicates different ways of disaggregating the data. The relevant types of disaggregation highlighted in the indicator sheets were identified through feedback from Save the Children staff who reviewed the manual.
Data collection method	• This section describes the types of data collection required to measure the indicator. This includes quantitative and qualitative data collection as well as secondary versus primary data collection options. The section also describes relevant tools that can be used for collecting data around a specific variable.
Where to find tools and resources?	• This section provides online reference links to the tools and other resource materials relevant to the indicator.
Level of data collection	• This section discusses coverage and sampling relevant to data collection.
Frequency and timing of data collection	• This section recommends how and when the data must be collected. The user can align the data collection frequency to the needs of the project.
Time input for data collection and analysis	• This section indicates the time (in minutes or hours) required to complete any recommended data collection activity described in the data collection methods. This includes for example, the time required to do secondary data review, to complete a survey instrument around the variables relevant, with one respondent and or time required to complete an FGD/KII.
Financial input for data collection and analysis	• This section estimates financial input required for data collection and analysis. The user should note that the numbers stated in this section are estimates and will vary due to coverage and place of data collection. For survey components, a standard estimate is provided.

Project/program personnel typically responsible for collecting and analysing the data & level of skill/training required.	• This section describes the types of personnel and skills required for data collection and data analysis. It discusses which activities are recommended to be done in-house by Save the Children MEAL staff and which activities can be outsourced to a third party.
Level of resource intensity	• This refers to an overall assessment of time/financial/human resource investments required for the indicator and is labelled as either high, medium or low.
Known Data Limitations and Significance (if any)	• Limitations around indicator and data validity, reliability, timeliness, precision, and cost effectiveness are stated here.