

Going Beyond M&E

MERLA (Monitoring, Evaluation, Research, Learning, and Adapting)



RTI International's International Development Group employs a dynamic MERLA cycle (at right) to guide and improve performance management through collaborative engagement with program staff members, donors, government personnel, and other stakeholders.



MERLA (Monitoring, Evaluation, Research, Learning, and Adapting)

MERLA is the intentional application of results-focused monitoring, evaluation, and research to inform continuous learning and adaptation for improving program effectiveness and policy decision making. MERLA improves program operations when

- Data collected through M&E systems are timely and high quality, and are analyzed and used to evaluate program performance;
- M&E data are complemented and strengthened by filling gaps in evidence through operations research (OR);
- Key results and evidence from M&E and research are synthesized into learning; and
- Learning is continuously incorporated into program design for improving implementation, communicating results, documenting lessons and best practices, and informing policy decisions.

RTI has a proven track record in implementing international development and research projects. We have implemented more than 12,000 of these client-funded projects in more than 70 countries. We have successfully applied MERLA in more than 28 countries across technical sectors, including the following:

- Energy and environmental sciences
- Food security and agriculture
- Global health

- Governance and economic development
- International education

RTI is a leader in expanding the use and utility of cutting-edge information and communication technology (ICT) applications to ensure implementation of high-quality MERLA. We provide technical assistance to donors, governments, and civil society organizations to establish national information systems governed by relevant policies, supported by skilled human capacity, enabled by appropriate ICT, and aimed at achieving positive local and national impact.

RTI has helped governments and other stakeholders accomplish the following:

- Use cloud-based systems to help smallholder farmers and local farmer associations access data they can turn into action.
- Develop sustainable, scalable information system technological solutions within existing national frameworks, while using open standards and open-source technology.
- Strengthen human capacity to implement, support, and use information systems for collecting, analyzing, disseminating, and using data and information.
- Value the use of information for transparency and accountability.
- Quantify the positive impact of efficient, timely, complete, and high-quality data on health point-of-care services, disease surveillance, and reporting.
- Invest in continuous capacity building by establishing and institutionalizing training programs in health informatics and related fields.



RTI works with **District Health Information Software 2 (DHIS 2)** as part of national health information system

strengthening efforts in Tanzania, Guinea, Philippines, Zimbabwe, Nepal, and Uganda. We have helped countries deploy DHIS 2 nationally as part of a comprehensive eHealth strategy. RTI continues to partner with the U.S. Agency for International Development (USAID), Centers for Disease Control and Prevention, Department of Defense, national malaria control programs, and various ministries of health to strengthen their capacities to use DHIS 2 effectively to improve data use, health care implementation, management, and policy at all levels. RTI has additionally piloted DHIS 2 as a project-based M&E data management system on several international education projects.



The **LuzonHealth** project in the Philippines designed and implemented school-based peer education

sessions to promote adolescent health and provide information on teen pregnancy prevention. An operations research study found that students exposed to peer education demonstrated greater knowledge and awareness of pregnancy and sexual health, and more intention for safe behaviors, than those not exposed. This evidence opens a channel for policy engagement to grow the program with the Department of Education in collaboration with the Department of Health, USAID, and other stakeholders. Furthermore, the findings will be used to directly inform improvements to the program.

More Information

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