How do you know what's good for me?

A guide for planning and measuring promising practices in programming for adolescent wellbeing in Indonesia.

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Oxford Policy Management

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Table of contents

The framework for planning and measuring promising practice in programming for adolescent wellbeing is a low-cost qualitative methodology that has been tested extensively in Indonesia. The principles of the framework are considered universal and can be adapted for use in any programme context.

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Section I

1. Why was this guide developed?

Adolescent programming is a critical intervention area for UNICEF. However, there is not enough robust evidence on what works and what does not. The lack of documentary evidence makes identifying interventions that are effectively addressing these issues particularly difficult. Using an evidence-based methodology is a useful mechanism to understand if and how programming for adolescent wellbeing works.

The framework for planning and measuring promising practice in programming for adolescent wellbeing is a low-cost qualitative methodology that has been tested extensively in Indonesia, and can help you to monitor the implementation of a programme and to clearly demonstrate why the chosen intervention is a promising practice. This guide will help you to use the framework to establish the credibility of a programme.

Credibility with stakeholders is a critical asset for successful programming activity. It means that you can assure the people who are involved in and who directly benefit from programme interventions that their

investments, of both time and resources, will achieve results, because you are using a tried and tested design. Stakeholders include clients, beneficiaries, or recipients of an intervention. Other stakeholders can include your managers and colleagues, donors, government and non-government organisations[1] and private sector partners.

This guide was developed to help you design and deliver credible programmes for adolescents. It provides a framework for you to plan effective strategies and interventions to make best use of limited resources in contexts of inequality and huge need and can contribute to the design of your monitoring and evaluation plan.

If your programme is already in the implementation phase, you can use this framework as a benchmarking tool. It can help you to see if your programme is on-track to be considered a promising practice, and if necessary to alter course.

This framework was developed and tested in Indonesia to review adolescent programmes[2]. However, the principles of the framework are

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[1] Includes faith-based organisations
[2] Sammon, E.M., Jagmag, M., Martinez, M. and Wahyudi, R. (2017) How do you know what's good for us? Final Report of the Overview of Promising Practices of Adolescent Programming in Indonesia. UNICEF: Jakarta

considered universal and can be adapted for use in any programme context.

2. Who are adolescents and why do they need special attention?

This guide uses the United Nations definition of adolescence as the period from 10 to 19 years of age, acknowledging that characteristics of this stage may extend up to age 24, and that adolescent well-being is also determined by early child development before age 10[3].

The age range 10-14 years old is considered of critical importance because this is the onset of physical, emotional, cognitive and social changes - a rapid and rich learning period and associated risk factors.

Most people agree that adolescence is the period when a person undergoes significant physical and cognitive growth and development, acquires their individual identity and learns how to become independent[4]. It is a social rather than biological paradigm which is applied to define that period of transition from childhood to adulthood. As such, the definitions can vary according to culture and context.

For the most part adolescents are healthy but as they develop they become exposed to new risks at many levels. This can jeopardise their own health and the health of their future children.

UNICEF note that, "adolescence is a defining time in the development of a child…young people are figuring out who they want to be…negative experiences during this time can be amplified and lead to negative outcomes"[5].

The message from the World Health Organisation is clear, "promoting healthy behaviours during adolescence, and taking steps to better protect young people…are critical…for countries' future health and ability to develop and thrive"[6].

3. What is a promising practice?

A promising practice is defined as, "A programme or intervention which meets a specific set of criteria, which describes what works to improve the lives of individuals and which is sustainable or replicable in a specific context".

Box 1

PROMISING PRACTICE THAT WORKS

Promising practice belongs to a continuum of practices that "represents the ongoing application of knowledge about what is working to improve desired outcomes in each context". (*Spencer and others 2013*)

Promising practice is "evidence-based, [and demonstrates] equity, values orientation, innovativeness and youth involvement", but where, "no evaluation of outcomes has been conducted and thus there is no evidence of effectiveness". *UNICEF MENARO (2015) Analytical Report on the Good Practices in Adolescent and Youth Programming, UNICEF MENARO, on behalf of the UNIATTTYP, RUNDG Arab States/MENA*

Promising practice is, "evidence-based information about what works to improve the lives of children, youth, and families" *Promising Practices Network http://www.promisingpractices.net (archived)*

This definition is derived from the combined experience of the Promising Practices Network, the Centers for Disease Control (CDC) and UNICEF MENARO 2015, Box 1.

To make a distinction between those practices which are definitively a promising practice and those which with additional forthcoming evidence or with a course correct could in the future be considered a promising practice, a ranking is provided to describe the continuum from good idea to promising practice,

- Promising Practice – meets most of the criteria for promising practice
- Emerging Practice – meets many of the criteria but there is insufficient information to determine if it currently meets most of the essential criteria
- Undetermined Practice – does not yet meet promising or emerging practice criteria or there is insufficient information to assess if it will meet promising or emerging practice criteria.

Programmes are considered on this continuum towards promising practice, which allows for variable results to be reported.

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[3] UNICEF (2011) The State of the World's Children. Adolescence – An Age of Opportunity. UNICEF: New York

[4] Schmied, V. and Tully, L. (2009) Effective strategies and interventions for adolescents in a child protection context. Centre for Parenting and Research: New South Wales, and WHO (2014) Health for the Worlds Adolescents. A second chance in the second decade. WHO: Geneva. Retrieved 23rd June 2017 from http://apps.who.int/adolescent/second-decade/section1

[5]UNICEF (2017) Working with and for Adolescents. UNICEF Programme Guidance for the Second Decade of a Child's Life. UNICEF: New York

[6] http://www.who.int/mediacentre/factsheets/fs345/en/

4. How was the framework developed?

The 11 evidence-based criteria were derived from a review of literature related to promising practice in human development (Box 3). These were refined with technical inputs from key stakeholders in Indonesia, including adolescents, to describe what works to improve the wellbeing of adolescents and to determine if a specific programme is scalable or replicable in each context. The criteria were cross-referenced with the 5 domains of the UNICEF adolescent development framework – health and wellbeing, education and learning, protection, transition to work and participation and engagement (Box 2). The framework was field-tested using a case study approach in two locations, one urban located close to the capital Jakarta, and one remote rural in Western Indonesia. It was complemented using a virtual platform to engage young people through a poll developed by youth networks.

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Box 2

UNICEF ADOLESCENT DEVELOPMENT FRAMEWORK AS USED IN INCEPTION REPORT

ADOLESCENT COUNTRY TRACKER (ACT)
5x5 PLUS5

	Health and Wellbeing	Education and Learning	Protection	Transition to Work	Participation and Engagement	PLUS 5
5X5	All cause mortality rate	Proficiency in reading and mathematics*	Child marriage (by 15 and 18)*	Time spent on economic activities	Indicators in this domain are under development	Adolescent population
	Suicide mortality rate*	Youth literacy rate*	Homicide mortality rate*	Time spent on unpaid household services*		Adolescents living below the international poverty line*
	Adolescent birth rate*	Completion rate for primary education	Intimate partner violence*	Information and communication technology (ICT) skills*		Use of improved drinking water source and sanitation facility*
	Prevalence of underweight and overweight	Completion rate for lower and upper secondary education	Violent discipline*	Adolescents not in education, employment or training*		Gini (inequality) index
	Substance use	Out-of-school rate	Experience of bullying	Unemployment rate*		Social institutions and gender index
Country Specific Indicators						

* SDG indicator   Box 2

1. The promising practice criteria

The 11 criteria for review of a programme as a promising practice in programming for adolescent wellbeing are described in Box 3. They include those that,

1. Have a solid evidence-based design
2. Have developed a theory of change on how outcomes will be achieved
3. Have sufficient and necessary documentation to be evaluated
4. Are considered by stakeholders as appropriate for adolescents
5. Have a monitoring and evaluation system in place
6. Address cultural and gender specific issues
7. Have developed mechanisms to identify and reach the most vulnerable populations
8. Have generated evidence of positive impact for beneficiaries, and
9. Have the potential for replication and scaling up
10. Have involved and empowered adolescent in its plan and delivery
11. Are considered innovative and flexible

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Box 3 — Promising Practice Criteria – Programming for Adolescent Wellbeing - Analysis Matrix

No.	Promising Practice Criteria	Area of Inquiry	Five domains of the UNICEF adolescent development frameworkv				
			1 Health and Well-being	2 Education and Learning	3 Protection	4 Transition to Work	5 Participation and Engagement
			Source: programme documents; KII; FGD; other				
1	Evidence-based programme design	How does programme design comply with international and national obligations and commitments on human rights and gender equality; how is the programme design evidence based?					
2	A theory of change	How does the programme specify intended outcomes and describe the activities that are related to those outcomes?					
3	Documentation	Is there a book, manual, or other available writings and training materials that specify the components of the programme and describe how to administer it?					
4	Accepted practice	How do stakeholders demonstrate general acceptance of the programme as appropriate for use with children?					
5	Monitoring and evaluation	Is there an effective monitoring and evaluation plan and evidence of its execution?					
6	Cultural competency and partner-ships	How does the programme consider the specific requirements of and involve adolescent boys and girls, adolescents of different religions or ethnic groups, adolescents with disabilities including intellectual disabilities?					

Box 3 — Promising Practice Criteria – Programming for Adolescent Wellbeing - Analysis Matrix

No.	Promising Practice Criteria	Area of Inquiry	Five domains of the UNICEF adolescent development frameworkv				
			1 Health and Well-being	**2** Education and Learning	**3** Protection	**4** Transition to Work	**5** Participation and Engagement
			Source: programme documents; KII; FGD; other				
7	Reaches most vulnerable and marginalised	How does the programme identify and reach the poorest adolescents, adolescent girls, adolescents with disabilities, adolescents affected by HIV; adolescents affected by violence; other marginalised populations?					
8	Evidence of positive outcomes and/or impact	Has the programme been subject to an external independent study demonstrating positive outcomes? Is the evaluation available for review? How do programme participants perceive the benefits of the programme?					
9	Sustainable and replicable	How did the programme put in place plans for the project to be sustainable after the initial phase was complete? This includes finance, policy and delivery structures					
10	Involved and empowered adolescent	How did the programme create a safe space for adolescent to actively participate and contribute to the programme's plan and delivery?					
11	Innovative	Was the programme design flexible when required to change and adapt to new information and challenges?					

To score a programme for each criterion you will need to consider your key research questions, (Box 4)

Box 4

Key research questions against each promising practice criteria and area of enquiry

	Promising Practice Criteria	Area of Enquiry	Sub-questions	Relevant for (see also Box 6)
1	Evidence-based programme design	How does programme design comply with international and national obligations and commitments on human rights and gender equality; how is the programme design evidence based?	• How does programme meet international commitments? • Was the programme designed based on a researched/ documented need? How was it designed to address this need? • Did the programme have a pilot to test the design before scaling up? On what way evidence from the pilot inform project design? • Is this document publicly available?	Programme staff Government staff
2	A theory of change or clear results chain	How does the programme specify intended outcomes and describe the activities that are related to those outcomes?	• Did the programme have a well-defined theory of change or other documented method to plan outcomes, outputs and activities and measure changes in the programme? • Is this document publicly available? • How was the theory of change incorporated into programme design, implementation and evaluation?	Programme staff Government staff
3	Documentation	Is there a book, manual, or other available writings and training materials that specify the components of the programme and describe how to administer it?	• Does the programme have an implementation plan? • Is it available to the public? • Is it clear, detailed and easy for non-programmatic staff to read?" • Was the plan followed? To what degree? Was implementation and deviation in implementation documented? Is this documentation available?	Programme staff Government staff Community members
4	Accepted practice	How do stakeholders demonstrate general acceptance of the programme as appropriate for use with adolescents?	• Does the programme have buy in from the government? How did it foster acceptance? • Does the programme have buy in from the community and parents? How did it foster acceptance? • Does the programme have buy in from civil society and other organisations working with adolescents? How did it foster acceptance?	Programme staff Government staff Parents and guardians Community members Adolescents
5	Monitoring and evaluation	Is there a monitoring and evaluation plan and evidence of its execution?	• Was M&E planned? To what degree was it executed? • Did the programme use the M&E data to change and improve their strategy? How did they do so? • Does the programme have an external and independent assessment (formative, summative, impact and/or process evaluation?)	Programme staff Government staff Adolescents

Key research questions against each promising practice criteria and area of enquiry

	Promising Practice Criteria	Area of Enquiry	Sub-questions	Relevant for (see also Box 6)
6	Cultural competency and partnerships	How does the programme consider the specific requirements of and involve adolescent boys and girls, of adolescents of different religions or ethnic groups, adolescents with disabilities including intellectual disabilities?	• How did the programme create an environment where adolescents could participate? Did the programme identify specific requirements of adolescents who might have different needs? • How does the programme include these requirement in its planned activity? • How does the programme ensure inclusive involvement of adolescents? • Was the programme designed to involve the community? • Where adequate skills were not present in the community, did the programme invest in capacity building, how did it do so? • How was the community involved in practice?	Programme staff Community members Adolescents
7	Reaches most vulnerable and marginalized	How does the programme identify and reach the poorest, girls, adolescents with disabilities, adolescents affected by HIV; adolescents affected by violence; other marginalized populations?	• Was the programme designed to involve the most vulnerable and marginalised? • How did the programme identify and involve the most vulnerable and marginalised? • How were they involved in practice? • How did the programme create an environment where adolescents could participate?	Programme staff Parents and guardians Community members Adolescents
8	Evidence of positive outcomes and/ or impact	Has the programme been subject to an external independent study demonstrating positive outcomes? How do programme participants perceive the benefits of the programme?	• What are the programme's desired outcomes? • To what degree has programme practice achieved it desired outcomes? • To what degree have these outcomes been documented and verified? • What is the level of confidence in / robustness of the data? • Is the assessment done independently? • Are evaluation reports available publicly? • Are there any adverse outcomes of the programme?	Programme staff Government staff Parents and guardians Community members Adolescents

Box 4

Key research questions against each promising practice criteria and area of enquiry

	Promising Practice Criteria	Area of Enquiry	Sub-questions	Relevant for (see also Box 6)
9	Sustainable and replicable	Did the programme put in place plans for the project to be sustainable after the initial phase was complete: this includes finance, policy and delivery structures?	**Sustainability** • Did the programme integrate with existing government or non-government or private institutional structures? How did it do so? • How is the programme designed to integrate with networks and key stake holders in the community? • What measures did the programme undertake to ensure sustainability? Have these measures been adequate? • What level of resources are required for the programme to be sustained? Are these resources available when the programme withdraws support? • What are the long-term effects (observable after the programme ends) achieved by the programme? **Replicability** • How have programmatic practice been replicated? • How have programmatic practice been adapted? • Has the programme proved to be effective in different contexts (geography, society, etc.?)	Programme staff Government staff Parents and guardians Community members Adolescents Other civil society organisations Donors
10	Involved and empowered adolescents	Did the programme create a safe space for adolescents to actively participate and contribute to the programme's plan and delivery?	• Was the programme designed to involve adolescents? • Where adolescents required additional skills to participate, did the programme invest in capacity building, and how did it do so? • How were adolescents involved in practice? • How did the programme create an environment where adolescents could participate?	Programme staff Adolescents
11	Innovative	Was the programme design flexible when required to change and adapt to new information and challenges?	• How did the programme recognise and solve challenges? • Did the programme use the M&E data to change and improve their strategy? How did they do so? • In what way did the programme demonstrate flexibility?	Programme staff

Section III

1. How to measure a promising practice

1.1. Define common minimum criteria
Defining minimum criteria against which a programme will be reviewed allows for a transparent and efficient way to determine if the programme merits further review as promising practice. For this purpose, a set of essential criteria that a programme must fulfil to be pre-selected for consideration as a promising practice should be defined. For example, the pre-selection essential criteria

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Box 5

PROMISING PRACTICE PRE-SELECTION ESSENTIAL CRITERIA

#1. Evidence based programme design: How does programme design comply with international and national obligations and commitments on human rights and gender equality; how is the programme design evidence based?

#5. Monitoring and evaluation: Is there a monitoring and evaluation plan and evidence of its execution?

#9. Sustainable and replicable: Did the programme put in place plans for the project to be sustainable after the initial phase was complete: this includes finance, policy and delivery structures?

#10. Involved and empowered adolescents and youth: Did the programme create a safe space for adolescents to actively and meaningfully participate and contribute to the programme's plan and delivery?

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for the review of programming for adolescent wellbeing in Indonesia) were determined after an in-depth literature review and following discussion with stakeholders (Box 5.) For other programmes, another set of criteria may be identified. The selected common minimum criteria should reflect the literature on best and promising practice in programming in the sector or sub-sector that is being reviewed. If the programme under review fails to meet the common minimum criteria, it does not stand the test of a promising practice.

1.2. Decide if you are reviewing a single programme or intervention or multiple programmes.
When more than one programme or intervention is being considered you may want to conduct a pre-

selection, in addition to application of the 'essential criteria'. These can be determined through an initial desk review.
An initial screening for pre-selection applies a score of 1 for 'YES meets criterion', and 0 for 'NO does not meet criterion'. Programmes are required to achieve a score of 6 (roughly 50%) to move to further review. Where documentary evidence has not been provided in response to follow-up requests, or is not available a zero score should be applied.

1.3. Conduct a desk review to gather as much information about the programme as possible.
This can include,
- Research which contributed to the programme design – this can be global, regional or in-country; It can include qualitative and quantitative information
- Programme documents which describe why the intervention was selected, the intended impact and/or outcome and the proposed activities, the programme monitoring and evaluation plan and the programme budget

Hints and Tips
Decide at the start how you want to curate your documents to make it easier to reference them; perhaps the documents can be divided into policy, legislation, global and regional commitments, peer reviewed, grey literature, programme documents and other. Depending on context you might set up a spreadsheet to do this.

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1.4 Hold a meeting with key stakeholders and explain the process. This helps to make sure that stakeholders who participate in the planning, design, implementation or policy development in the sector are aware of the matrix and can verify the validity of the document. Sharing plans of the review early not only strengthen the review process but also encourage full cooperation. During this meeting, you can ask for additional or missing documentation, which you did not find during the document review.

Where possible the inclusion of adolescent representatives is encouraged. You can consider holding a preparatory meeting with the adolescents to get ready for the interaction with the other stakeholders.

Hints and Tips

When asking for documents it is important to be specific – ask for information which is relevant and useful to your enquiry, for example, the narrative description of the programme and its accompanying log frame and budget, or the baseline and end line surveys. A Terms of Reference for a programme evaluation which has not yet been contracted does not substitute for the evaluation itself. Protect yourself from having to sift through too much information.

1.5 Final selection of programme or programmes for in-depth case study. Following the desk review and meeting with stakeholders you will know if you have enough information to select programmes for in-depth case study. Reviewing what you already know against the 11 criteria will help you to make this decision. For example, you will have some idea if there is a robust evidence base supporting the programme design; you will also know if the programme has specified its intended outcomes and the activities in place to achieve them. If, through your research you find that this information is not available, you may decide not to take any further action.

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Promising Practice Review Flow Chart (Box 6)

Single programme review → In-depth case study/ies

Multiple programme review → Pre-selection screening → In-depth case study/ies

In-depth case study/ies

| 1. Desk review | 2. Ethical protocol | 3. Data collection |

→ **Data Analysis and Reporting**
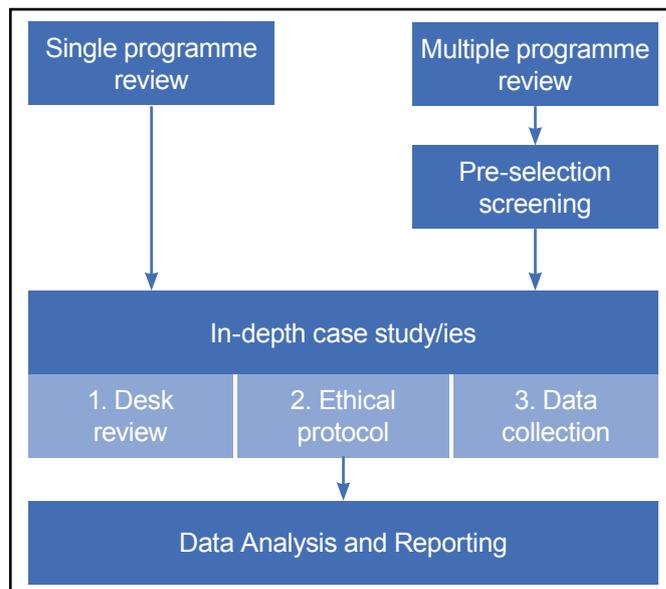
1.6 Data collection. During this phase, you are trying to understand how the programme was designed, implemented and scaled up and whether respondents perceive programme practices to be promising. You will need to conduct participatory activities and discussions as well as in-depth interviews with key stakeholders (Box 8). These stakeholders can include,

• The Head Of The Programme And Key Programme Staff,
• Government Staff Responsible For Planning, Implementing And Monitoring,
• Adolescents Who Have Been Or Who Are Involved In The Programme,
• Teachers, Health Workers Or Other Professionals,
• Parents And Family Members,
• Community Leaders And Community Members.

You can design a review plan for each programme which identifies how many key informant interviews and focus group discussions to hold, Box 7. It is feasible that a full list of stakeholders will not be developed from the initial literature review. However early interviews with key informants may enable the researchers to identify other respondents using a snowball sampling process.

Hints and Tips

Following the document review and stakeholder meeting you can choose the data collection tools and instruments to best fit the context. For example, during the testing the researchers used Programme Performance Score Cards and Timeline Trend Analysis exercises in focus group discussions.

Box 7 Level	Key Informant Interviews	Focus Group Discussion
Provincial level	1-2	N/A
District level	1-2	N/A
Programme lead	1	N/A
Programme team	N/A	1
Adolescents	If required	2
Teacher / Health worker	1	N/A
Parents	1-2	
Community level	1-2	1-2
Total	6-9	4-5

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1.7 Selecting who to speak to. You can then begin to put names to the potential list of people you would like to speak to, Box 8.

Potential list of respondents (Box 8)

Level	List of respondents
Programme staff	Programme director, chief of programme at national and/or provincial level involved in planning
Programme implementers at provincial and village level	1-2
Programme M&E staff (if available)	1
Programme volunteers	N/A
Government staff	Government representative district level
Any other government staff involved in planning, implementation or scale-up of the programme	1
Adolescent beneficiaries (and non-beneficiaries)	Respondents will be selected based on the programme, but will include boys and girls, vulnerable youth, such as adolescents who are not in educational institutions, respondents with disabilities.
The team will especially attempt to interview adolescents who may not have participated in the intervention, to ensure a balanced review	
Community members	Community leaders including religious leaders and community elders
Community health workers, teachers	
Other community members or volunteers that may have participated in the programme's planning and implementation	
Parents and guardians	Parents and guardians of adolescents involved in the programme

Box 9

TYPES OF INFORMATION CONTAINED IN THE COMPREHENSIVE NOTES

1. **Quotes –** These are the well-said sentences or phrases that illustrate an important point of view because they are enlightening or eloquently expressed. Place name or initials and gender of speaker next to quote as you may not be able to write the quote in its entirety.

2. **Non-verbal cues from participants –** Head nodding, laughter, discomfort, pauses. Make note of non-verbal cues but don't make assumptions about what they mean.

3. **Wording and timing of probes –** Note language that the lead facilitator uses as well. At what point in the questioning did the facilitator ask a probe? This helps to determine unaided responses and possible differences in how a question was asked.

4. **Key points and themes for each question –** These will likely be identified by several different participants. Or sometimes they are said only once, but in such a manner that deserves attention.

5. **Follow-up questions that could be asked –** The facilitator is busy directing the discussion and may miss the importance of a follow-up.

6. **Big ideas, hunches or thoughts of the note-taker –** Occasionally you may identify new concepts that will be helpful in later analysis. Jotting these down increases the likelihood they will be remembered during the analysis phase.

7. **Balancing views -** Please remember to note if the same participant states an opinion multiple times to avoid over-emphasizing the view during analysis

1.8 Data capture and analysis. During the interviews and focus group discussions you should keep comprehensive notes of the discussion, noting any other observations or views separately (Box9). It is useful to have someone with you to help capture these notes so that you can concentrate on the discussion.

1.9. Final promising practice case study. After an FGD or interview is finished, you should take time to make sure you have an accurate picture or record of any visual outputs (e.g. from any participatory tools used etc.). You should also check the notes taken are an accurate record of the discussion, capture any important quotes, and comment on important features of the respondent/participants. You should confer with your note taker on the highlights of the interview/ discussion in relation to thematic areas and major points and issues raised. This allows you to synthesise the interviews with different respondents into a final case study debrief, Box 10.

Scoring process

Scores are based on a triangulation of responses – ranging from programme staff responses as well as adolescents who were beneficiaries or intended beneficiaries of the programme. To ensure findings are robust, programme literature should be juxtaposed against the views of key stakeholders such as government and community leaders, and key researchers in the sector.

Scores must be explained and justified through a narrative process in the headline and detailed findings. Scores are not used as an evaluation of the programme's efficacy or impact. Rather, they enable the reviewer and the reader to determine the degree to which a programme's processes are promising and highlight those that are not.

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Box 10. Template for promising practices case study

Name of the programme					
UNICEF Adolescent Country Tracker (ACT)	Health and Wellbeing	Education and Learning	Protection	Transition to Work	Participation and Engagement
Principle domain of ACT which applies					
Subsidiary domains of ACT which apply					
Short description of the programme					
	*indicates the four essential criteria agreed with stakeholders that a project must fulfil to be considered as a promising practice ** applies a score of 1 for YES meets criterion, and 0 for NO does not meet criterion; programmes are required to achieve a score of 6 to be considered a promising practice (Sammon and others 2017 pg. 31)				

Undetermined Practice does not yet meet emerging or promising practice criteria or there is insufficient information to determine if it will meet emerging or promising practice criteria	Emerging Practice meets most of the criteria but there is insufficient information to determine if it currently meets promising practice criteria	Promising Practice meets all the criteria for promising practice

Promising Practices Criteria	
*Evidence-based programme design: How does programme design comply with international and national obligations and commitments on human rights and gender equality; how is the programme design evidence based?	Score 0/1
Headline: One or two lines summing up the detailed findings	
Detailed findings: What you learned about the programme from the desk review, from key informant interviews and focus group discussions	
A theory of change: How does the programme specify intended outcomes and describe the activities that are related to those outcomes?	Score 0/1
Headline:	
Detailed findings:	
Programme documentation: Is there a book, manual, or other available writings and training materials that specify the components of the programme and describe how to administer it?	Score 0/1
Headline:	
Detailed findings:	

Box 10. Template for promising practices case study

Accepted practice: How do stakeholders demonstrate general acceptance of the programme as appropriate for use with adolescents?	Score 0/1
Headline:	
Detailed findings:	
*Monitoring and evaluation: Is there a monitoring and evaluation plan and evidence of its execution?	Score 0/1
Headline:	
Detailed findings:	
Cultural competency and partnerships: How does the programme consider the specific requirements of and involve adolescent boys and girls, adolescents of different religions or ethnic groups, adolescents with disabilities including intellectual disabilities?	Score 0/1
Headline:	
Detailed findings:	
Reaches most vulnerable and marginalised: How does the programme identify and reach the poorest, girls, adolescents with disabilities, adolescents affected by HIV; adolescents affected by violence; other marginalized populations?	Score 0/1
Headline:	
Detailed findings:	
Evidence of positive outcomes and/or impact: Has the programme been subject to an external independent study demonstrating positive outcomes? how do programme participants perceive the benefits of the programme?	Score 0/1
Headline:	
Detailed findings:	
*Sustainable and replicable: Did the programme put in place plans for the project to be sustainable after the initial phase was complete: this includes finance, policy and delivery structures?	Score 0/1
Headline:	
Detailed findings:	
*Involved and empowered adolescents: Did the programme create a safe space for adolescents to actively participate and contribute to the programme's plan and delivery?	Score 0/1
Headline:	
Detailed findings:	
Innovative: Was the programme design flexible when required to change and adapt to new information and challenges?	Score 0/1
Headline:	
Detailed findings:	

# and details of KII and FGD conducted:						
FGD/KII	#participants		Discription	M	F	
Reference documents:						
Comments and recommendations:						

Section IV.

Using the framework during design and implementation

The Promising Practices Matrix can be used flexibly, for example, as a checklist during the programme design phase. Programmers can work together in groups to interrogate programme design against each of the criteria. Where a specific criterion cannot be measured because implementation has not yet begun, it can be considered a trigger question to help you think about how this can be measured in the future. For example, criterion # 8 evidence of positive outcomes/impact can prompt you to think about the design of the M&E framework for your programme. This may involve a mid-term evaluation using the promising practice methodology to make sure you are on-track and to offer an opportunity to course correct. You can also use the framework as a checklist and questionnaire during steering/advisory group meetings and regular quarterly monitoring processes.

Ethical considerations. Conducting qualitative field work requires high ethical standards to ensure that expectations are not raised, confidentiality is maintained, and respondents are not forced to participate or encouraged to speak about subjects that may be difficult or traumatising for them. You will therefore need to develop an ethical protocol which details

- How you will obtain consent (and assent from adolescents under the age of 18 years)
- How you will maintain the privacy and confidentiality of respondents
- What to do in the case of disclosure, including how to end data collection if the discussion becomes distressing for individuals, and how to make an appropriate referral for follow-up support

You will also consider if local Ethical Review Board approval is required and if so obtain this approval before data collection commences.

For more information on UNICEF procedures for Ethical Standards in Research, Evaluation, Data Collection and Analysis see https://www.unicef.org/supply/files/ATTACHMENT_IV-UNICEF_Procedure_for_Ethical_Standards.PDF

Details on the Ethical Research Involving Children Project (ERIC) can be found at http://childethics.com Final words. The framework for reviewing Promising Practice in Programming for Adolescent Wellbeing presented here is a standalone methodology which can be applied at any stage of the programme cycle. The matrix presented in Box 3 can serve as an early aid during programme planning and decision making, before a programme is implemented. It is a useful tool against which individuals and teams can benchmark the design process. Or it can serve as a monitoring tool to review an operational programme to make sure it can be considered a future promising practice.

A quick review of the criteria and areas of enquiry against a programme can be done at any time, whilst an in-depth case study review of the programme to collect the evidence will require planning and some resource allocation.

Systematically collecting promising practice data can ensure that mistakes are not replicated, that programmes designed to improve outcomes for adolescents have the intended impact and that those that do work can be described and shared as proven, replicable methodologies.

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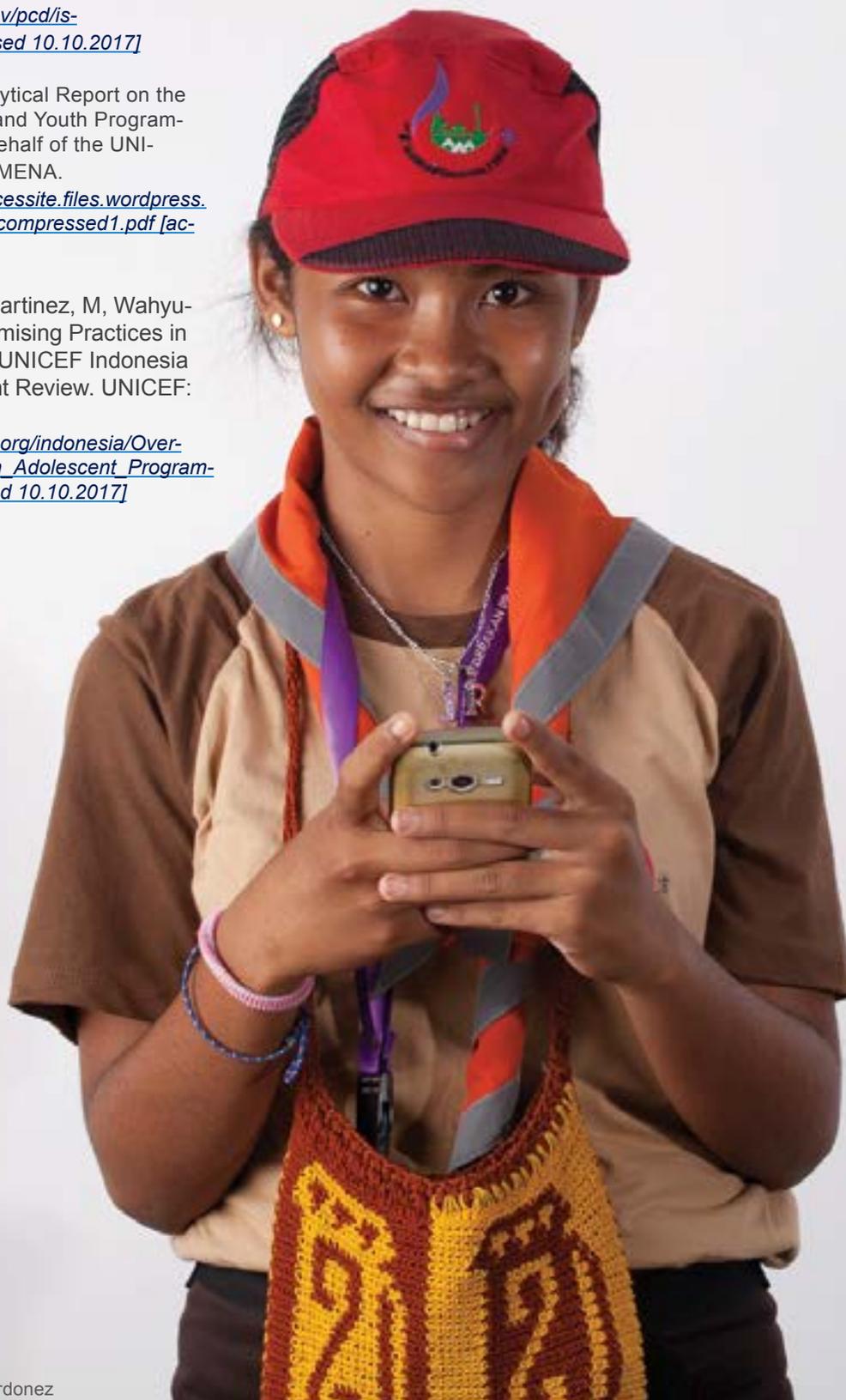
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